

How does a POS plan work?

Your CAPE/Blue Shield of California POS plans combine the predictable out-of-pocket costs of an HMO plan with access to our extensive PPO network. You can choose an HMO, PPO, or out-of-network provider each time you access care. You do not need a referral from your HMO primary care physician (PCP) to access care under your PPO (Level II) or out-of-network (Level III) benefits.

YOUR CHOICE				
		HMO level of care	PPO level of care	Out-of-network level of care
Plan features		<ul style="list-style-type: none"> • Lowest out-of-pocket cost, fixed copayments. • Highest level of benefits. • No deductible, no claim forms. 	<ul style="list-style-type: none"> • Choose from our PPO provider network at a higher out-of-pocket cost. • Pay affordable copayments (calendar-year deductible may apply). 	<ul style="list-style-type: none"> • See any provider, pay for services, and submit claims to Blue Shield. • After you meet your calendar-year deductible, pay a portion of the costs and any costs over the allowable amount.
Choosing a doctor				
To find an HMO network or PPO network provider, please see the instructions on page 8 of the Enrollment Brochure.	Preventive care	No charge. See your PCP.	No charge. See any PPO network physician.	No charge. See any out-of-network physician.
	Primary care	Choose a PCP who will provide and coordinate your medical care.	Select a PPO network physician and make an appointment (calendar-year deductible may apply).	See any doctor, pay for services, and submit the claim to Blue Shield. After you meet your deductible, pay a portion of the costs and any costs over the allowable amount.
	Specialist care	Get a referral from your PCP and make an appointment with the specialist.	Select any PPO network specialist and make an appointment (calendar-year deductible may apply).	See any specialist, pay for services, and submit the claim to Blue Shield. After you meet your deductible, pay a portion of the costs and any costs over the allowable amount.

You can view the CAPE/Blue Shield of California Lite and Classic POS plan benefit summaries at blueshieldca.com/cape.

YOUR CHOICE

	HMO level of care	PPO level of care	Out-of-network level of care
Emergency care	Go to the nearest emergency room. There is no copayment if admitted to the hospital.	Go to the nearest emergency room. There is no copayment if admitted to the hospital.	Go to the nearest emergency room. There is no copayment if admitted to the hospital.
Urgent care	Call your PCP or your assigned medical group/IPA first for instructions if possible. Or, call the Member Services number on the back of your ID card for help. Urgent care centers are an alternative when your doctor is not available.	Call a PPO doctor or go to a network urgent care center. Go to the <i>Find a provider</i> section of blueshieldca.com/cape or call Blue Shield Member Services for help.	See any provider, pay for services, and submit the claim to Blue Shield. After you meet your deductible, pay a portion of the costs and any costs over the allowable amount.
Going to the hospital	Your PCP may admit you. Tell Blue Shield if you are admitted as soon as possible.	Go to a PPO hospital and pay less than at an out-of-network hospital. You or your doctor must call for preauthorization (calendar-year deductible may apply).	Go to an out-of-network hospital and submit your claim to Blue Shield. After you meet your deductible, pay a portion of the costs and any costs over the allowable amount.
Mental health care	Find a provider by calling the mental health service administrator (MHSA) at (877) 263-9952 or by going to the <i>Find a provider</i> section of blueshieldca.com/cape .	N/A	See any provider, pay for services, and submit your claim to Blue Shield. After you meet your deductible, pay a portion of the costs and any costs over the allowable amount.
Coverage outside California and abroad	Find an HMO BlueCard® provider within the U.S. or a Blue Shield Global® Core provider outside the U.S. only for urgent or emergency care by going to the <i>Find a provider</i> section of blueshieldca.com/cape .	Find a PPO BlueCard provider within the U.S. for covered services by going to the <i>Find a provider</i> section of blueshieldca.com/cape .	See any provider, pay for services, and submit your claim to Blue Shield. After you meet your deductible, pay a portion of the costs and any costs over the allowable amount.
Prescription drug coverage	<p>Retail pharmacies: Blue Shield's pharmacy network includes grocery, discount, and drug stores. Show your Blue Shield member ID card at a network pharmacy to receive up to a 30-day supply of covered medications. To find a pharmacy, visit blueshieldca.com/cape and select <i>Pharmacy benefits</i>, or call Blue Shield Member Services.</p> <p>Amazon Pharmacy home delivery: If you take covered maintenance drugs for long-term medical conditions or for chronic conditions such as diabetes, you can have a 90-day supply delivered through Amazon Pharmacy. To learn more, go to blueshieldca.com/cape and select <i>Pharmacy benefits</i>.</p> <p>Specialty drugs: Specialty drugs are only available up to a 30-day supply from a network specialty pharmacy. To be covered, specialty drugs require prior authorization by Blue Shield. For more information about specialty drugs, visit blueshieldca.com/cape and select <i>Pharmacy benefits</i>.</p>		

Amazon Pharmacy is independent of Blue Shield of California and is contracted with Blue Shield to provide Home Delivery Pharmacy Services to Blue Shield members for their prescription medications. Members are responsible for their share of costs, as stated in their benefit plan details. Information about specific prescription drug benefits and drug benefit exclusions can be found in the member's plan documents. Members may call the customer service number on their Blue Shield member ID card if they have questions about their Blue Shield prescription drug coverage. Amazon and all related marks are trademarks of Amazon.com, Inc. or its affiliates.