



Changes to your premium subsidy? You still have plan options designed to be affordable.

If your monthly premium subsidy is changing or you're no longer eligible for your current plan, another Blue Shield of California plan may better fit your budget and health care needs. Don't worry – we're here to help you stay covered.

Coverage alternatives for HMO

Region 17 - Inland Empire (San Bernardino and Riverside)

Metal tier	Plan name	Plan type	Monthly premium*	Calendar-year medical deductible	Calendar-year out-of-pocket maximum (includes deductible)	Estimated annual premium	Estimated annual premium savings
Silver	Blue Shield Silver 70 Trio HMO	HMO	\$491.69	\$5,200	\$9,800	\$5,900.28	-
Silver	Blue Shield Silver 70 Off-Exchange Trio HMO	HMO	\$464.97	\$5,200	\$9,800	\$5,579.64	\$320.64
Bronze	Blue Shield Bronze 7500 Trio HMO	HMO	\$426.08	\$7,500	\$9,800	\$5,112.96	\$787.32

If you visit healthcare providers frequently, a plan with no deductibles and lower copays might fit your needs better by helping keep your costs predictable and reduce out-of-pocket expenses.

Metal tier	Plan name	Plan type	Monthly premium*	In-network calendar-year medical deductible	In-network calendar-year out-of-pocket maximum (includes deductible)	Estimated annual premium
Gold	Blue Shield Gold 80 Trio HMO	HMO	\$547.11	\$0	\$9,200	\$6,565.32

No matter your budget or coverage needs, your broker can help you find a plan that works for you and your family. Reach out when you're ready to get started.

Agent name:
Agency name:
Phone number:

Email:
Website:
Personal URL:

This is not a contract. All benefit descriptions are an overview of plan benefits. For a detailed description of plan benefits and exclusions, refer to the Evidence of Coverage (EOC). You can also view our Summary of Benefits and Coverage (SBC) forms for easy-to-understand overviews of plan benefits and your financial responsibility when accessing services. Plan EOCs and SBCs are available at blueshieldca.com/policies or by calling us at (888) 256-3650.

*Rates assume a 40-year old in Region 17. Medical rates vary by plan, age, and region. The rates may not apply to you.

We also offer special plans for American Indians and Alaska Natives. Visit coveredca.com for more information.

Language Assistance Notice For assistance in English at no cost, call (866) 346-7198. Para obtener asistencia en español sin cargo, llame al (866) 346-7198. 如果需要 中文的免费帮助, 请拨打这个号码 (866) 346-7198.

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