

Below is a list of plan names (with networks) for Blue Shield of California 2019 HMO and PPO products.

2019 Blue Shield HMO plans and networks

Blue Shield Large Group HMO plans Access+ HMO, Local Access+ HMO, SaveNet HMO, and Trio ACO HMO networks	
Access+ HMO® Zero Admit 10	Local Access+ HMO® Zero Admit 10
Access+ HMO® Zero Admit 20	Local Access+ HMO® Zero Admit 20
Access+ HMO® Zero Admit 30	Local Access+ HMO® Zero Admit 30
Access+ HMO® Per Admit 10-250	Local Access+ HMO® Per Admit 10-250
Access+ HMO® Per Admit 20-250	Local Access+ HMO® Per Admit 20-500
Access+ HMO® Per Admit 20-500	Local Access+ HMO® Per Admit 25-750
Access+ HMO® Per Admit 25-750	Local Access+ HMO® Per Admit 40-1000
Access+ HMO® Per Admit 40-1000	Local Access+ HMO® Facility Coinsurance 15-20%
Access+ HMO® Per Day 15-500	Local Access+ HMO® Facility Coinsurance 20-20%
Access+ HMO® Per Day 25-750	Local Access+ HMO® Facility Coinsurance 25-25%
Access+ HMO® Facility Coinsurance 15-20%	Local Access+ HMO® Facility Coinsurance 40-40%
Access+ HMO® Facility Coinsurance 20-20%	Local Access+ HMO® Facility Deductible 15-10%/1500
Access+ HMO® Facility Coinsurance 25-25%	Local Access+ HMO® Facility Deductible 20-25%/1500
Access+ HMO® Facility Coinsurance 40-40%	Local Access+ HMO® Facility Deductible 30-30%/2000
Access+ HMO® Facility Deductible 15-10%/1500	Local Access+ HMO® Facility Deductible 40-40%/2000
Access+ HMO® Facility Deductible 20-25%/1500	Local Access+ HMO® Facility Deductible 40-40%/5800
Access+ HMO® Facility Deductible 30-30%/2000	Trio HMO Zero Admit 10
Access+ HMO® Facility Deductible 40-40%/2000	Trio HMO Zero Admit 20
Access+ HMO® Facility Deductible 40-40%/5800	Trio HMO Zero Admit 30
Access+ HMO® SaveNet Zero Admit 10	Trio HMO Per Admit 10-250
Access+ HMO® SaveNet Zero Admit 20	Trio HMO Per Admit 20-500
Access+ HMO® SaveNet Zero Admit 30	Trio HMO Per Admit 25-750
Access+ HMO® SaveNet Per Admit 10-250	Trio HMO Per Admit 40-1000

Blue Shield Large Group HMO plans Access+ HMO, Local Access+ HMO, SaveNet HMO, and Trio ACO HMO networks	
Access+ HMO® SaveNet Per Admit 20-500	Trio HMO Facility Coinsurance 15-20%
Access+ HMO® SaveNet Per Admit 25-750	Trio HMO Facility Coinsurance 20-20%
Access+ HMO® SaveNet Per Admit 40-1000	Trio HMO Facility Coinsurance 25-25%
Access+ HMO® SaveNet Facility Coinsurance 15-20%	Trio HMO Facility Coinsurance 40-40%
Access+ HMO® SaveNet Facility Coinsurance 20-20%	Trio HMO Facility Deductible 15-10%/1500
Access+ HMO® SaveNet Facility Coinsurance 25-25%	Trio HMO Facility Deductible 20-25%/1500
Access+ HMO® SaveNet Facility Coinsurance 40-40%	Trio HMO Facility Deductible 30-30%/2000
Access+ HMO® SaveNet Facility Deductible 15-10%/1500	Trio HMO Facility Deductible 40-40%/2000
Access+ HMO® SaveNet Facility Deductible 20-25%/1500	Trio HMO Facility Deductible 40-40%/5800
Access+ HMO® SaveNet Facility Deductible 30-30%/2000	Access+ HMO® Zero Facility Deductible 30-20%
Access+ HMO® SaveNet Facility Deductible 40-40%/2000	Access+ HMO® Facility Deductible 30-10%/1500
Access+ HMO® SaveNet Facility Deductible 40-40%/5800	Trio HMO Per Day 15-500
Trio HMO Facility Deductible 30-10%/1500	Trio HMO Zero Facility Deductible 30-20%
Trio HMO Per Admit 20-250	Trio HMO Per Day 25-750

Blue Shield IFP HMO plans

Trio ACO HMO Network

Silver 70 Trio HMO (On-Exchange)	Gold 80 Trio HMO AI-AN (On-Exchange)
Silver 73 Trio HMO (On-Exchange)	Silver 70 Trio HMO AI-AN (On-Exchange)
Silver 87 Trio HMO (On-Exchange)	\$0 Cost Share Trio HMO AI-AN (On-Exchange)
Silver 94 Trio HMO (On-Exchange)	Silver 70 Trio HMO (Off-Exchange)
Gold 80 Trio HMO (On-Exchange)	Gold 80 Trio HMO (Mirrored)
Platinum 90 Trio HMO (On-Exchange)	Platinum 90 Trio HMO (Mirrored)
Platinum 90 Trio HMO AI-AN (On-Exchange)	

Blue Shield Small Business HMO plans

Access+® HMO, Local Access+ HMO, and Trio ACO HMO networks

All plans are available with the Access+®, Local Access+, and Trio HMO networks.

Silver HMO 1975/55 (Off-Exchange)	Platinum HMO 0/20 (Off-Exchange)
Gold HMO 0/30 (Off-Exchange)	Platinum HMO 0/25 (Off-Exchange)
Gold HMO 500/35 (Off-Exchange)	Platinum HMO 0/30 (Off-Exchange)
Gold HMO 1500/35 (Off-Exchange)	

Blue Shield Small Business HMO plans

Trio ACO HMO Network only

Trio Silver 70 HMO 2000/45 + Child Dental (On-Exchange/Mirrored)	Trio Gold 80 HMO 0/30 + Child Dental and INF (On-Exchange/Mirrored)
Trio Silver 70 HMO 2000/45 + Child Dental and INF (On-Exchange/Mirrored)	Trio Platinum 90 HMO 0/15 + Child Dental (On-Exchange/Mirrored)
Trio Gold 80 HMO 0/30 + Child Dental (On-Exchange/Mirrored)	Trio Platinum 90 HMO 0/15 + Child Dental and INF (On-Exchange/Mirrored)

2019 Blue Shield PPO plans and networks

Blue Shield IFP PPO plans Exclusive PPO Network	
Bronze 60 HDHP PPO (On-Exchange)	Platinum 90 PPO (On-Exchange)
Bronze 60 HDHP PPO AI-AN (On-Exchange)	Platinum 90 PPO AI-AN (On-Exchange)
Bronze 60 PPO (On-Exchange)	Minimum Coverage PPO (On-Exchange)
Bronze 60 PPO AI-AN (On-Exchange)	\$0 Cost Share PPO AI-AN
Silver 70 PPO (On-Exchange)	Bronze 60 HDHP PPO (Mirrored)
Silver 70 PPO AI-AN (On-Exchange)	Bronze 60 PPO (Mirrored)
Silver 73 PPO (On-Exchange)	Gold 80 PPO (Mirrored)
Silver 87 PPO (On-Exchange)	Platinum 90 PPO (Mirrored)
Silver 94 PPO (On-Exchange)	Minimum Coverage PPO (Mirrored)
Gold 80 PPO (On-Exchange)	Silver 70 PPO (Off-Exchange)
Gold 80 PPO AI-AN (On-Exchange)	Silver 1850 PPO (Off-Exchange)

Blue Shield Large Group PPO plans Active Choice PPO, Full PPO, and Tandem PPO networks	
Active Choice® Plan 500 80/50	Full PPO Split Deductible 35-1000 80/60
Active Choice® Plan 750 80/60	Full PPO Savings Two-Tier Embedded Deductible 1350/2700/2700
Active Choice® Plan 750 70/50	Full PPO Savings Two-Tier Embedded Deductible 1500/2700/3000
Active Choice® Plan 750 70/50 1000 Deductible	Full PPO Savings Two-Tier Embedded Deductible 1500/2700/3000 with Value-Based Tier Drug Benefit
Active Choice® Plan 500 80/50 1500 Deductible	Full PPO Savings Two-Tier Embedded Deductible 1800/2700/3600
Full PPO Combined Deductible 30-750 80/60	Full PPO Savings Two-Tier Embedded Deductible 2250/2700/4500
Full PPO No Network Deductible 10 100/50	Full PPO Savings Two-Tier Embedded Deductible 2250/2700/4500 with Value-Based Tier Drug Benefit
Full PPO No Network Deductible 20 100/50	Full PPO Savings Embedded Deductible 2700
Full PPO Combined Deductible 10-250 90/70	Full PPO Savings Embedded Deductible 3000
Full PPO Combined Deductible 15-250 90/70	Full PPO Savings Embedded Deductible 3500

Blue Shield Large Group PPO plans
Active Choice PPO, Full PPO, and Tandem PPO networks

Full PPO Combined Deductible 20-200 90/70	Full PPO Savings Embedded Deductible 4000
Full PPO Combined Deductible 20-250 80/60	Full PPO Savings Embedded Deductible 5500
Full PPO Combined Deductible 25-250 80/60	Full PPO Split Deductible 10-250 90/70
Full PPO Combined Deductible 25-250 90/60	Full PPO Split Deductible 15-500 90/60
Full PPO Combined Deductible 30-500 90/60	Full PPO Split Deductible 20-500 80/60
Full PPO Combined Deductible 35-500 80/60	Full PPO Split Deductible 25-750 80/60
Full PPO Combined Deductible Value 10-1000 90/70	Full PPO Split Deductible 30-2000 70/50
Full PPO Combined Deductible Value 15-1500 80/50	Full PPO Split Deductible 40-4000 70/50
Full PPO Combined Deductible Value 20-2000 80/50	Tandem PPO Combined Deductible 20-200 90/70
Full PPO Combined Deductible Value 25-2500 80/50	Tandem PPO Combined Deductible 20-250 80/60
Full PPO Combined Deductible Value 30-3000 80/50	Tandem PPO Combined Deductible 25-250 90/60
Full PPO Combined Deductible Value 40-4000 80/50	Tandem PPO No Network Deductible 10 100/50
Tandem PPO Split Deductible 25-750 80/60	Tandem PPO Combined Deductible Value 10-1000 90/70
Tandem PPO Split Deductible 35-1000 80/60	Tandem PPO Split Deductible 10-250 90/70
Tandem PPO Combined Deductible 10-250 90/70	Tandem PPO Split Deductible 20-500 80/60
Tandem PPO Combined Deductible 15-250 90/70	Tandem PPO Savings Embedded Deductible 3000
Tandem PPO Combined Deductible 25-250 80/60	

Blue Shield Small Business PPO plans

Full PPO Provider Network or Tandem PPO Network

**Plans marked with an asterisk are available with both the Full and Tandem PPO networks.*

Bronze PPO 4000/70 (Off-Exchange)	Platinum PPO 250/15 (Off-Exchange)
Bronze Full PPO 6000/65 (Off-Exchange)	Bronze 60 Full PPO 6300/75 + Child Dental (On-Exchange/Mirrored)
Bronze PPO 6550/50% (Off-Exchange)*	Silver 70 PPO 2000/45 + Child Dental (On-Exchange/Mirrored)
Silver PPO 1700/55 (Off-Exchange)*	Gold 80 Full PPO 0/30 + Child Dental (On-Exchange/Mirrored)
Silver PPO 2000/45 (Off-Exchange)*	Platinum 90 Full PPO 0/15 + Child Dental (On-Exchange/Mirrored)
Gold Full PPO 0/20 (Off-Exchange)	Bronze 60 Full PPO 6300/75 + Child Dental and INF (On-Exchange/Mirrored)
Gold Full PPO 500/30 (Off-Exchange)	Silver 70 PPO 2000/45 + Child Dental and INF (On-Exchange/Mirrored)
Gold PPO 750/30 (Off-Exchange)*	Gold 80 Full PPO 0/30 + Child Dental and INF (On-Exchange/Mirrored)
Gold Full PPO 1200/35 (Off-Exchange)	Platinum 90 Full PPO 0/15 + Child Dental and INF (On-Exchange/Mirrored)
Platinum PPO 0/10 (Off-Exchange)	

2019 Blue Shield POS plans and networks

Blue Shield Midsize and Large Group POS plans Full PPO Provider Network

Added Advantage POS SM 300-100/90/70	Added Advantage POS SM 500-100/80/60
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Blue Shield Small Business POS plans Full PPO Provider Network

Bronze Full PPO Savings 5300/40% (Off-Exchange)	Silver Full PPO Savings 2000/20% IND (Off-Exchange)
Bronze Full PPO Savings 6550 (Off-Exchange)	Silver Full PPO Savings 2000/20% FAM (Off-Exchange)

Blue Shield Small Business POS plans Tandem PPO Network

Silver Tandem PPO Savings 2000/20% IND (Off-Exchange)	Silver Tandem PPO Savings 2000/20% FAM (Off-Exchange)
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