



**NORTHERN NEVADA**  
Effective January 1, 2020  
In-Network Benefits

	<b>Gold 500 CO</b> 25-CO 1600 A D0500X2	<b>Gold 1000 CO</b> 30-CO 2000 A D1000X2	<b>Gold 2000 CO</b> 35-CO 2500 A D2000X2	<b>Gold 3000 CO</b> 45-CO 3000 A D3000X2	<b>Silver 4000 CO</b> 50-CO 3200 A D4000X2	<b>Silver 4500 CO</b> 50-70 CINS P D4500X2	<b>Silver 5500 CO</b> 50-70 CINS P D5500X2	<b>Silver 1400 HSA</b> 25-70 CINS U D1400X2 HSA	<b>Bronze 8150 CO</b> 60-NA 0000 P D8150X2	<b>Silver 3500 HSA</b> 25-70 CINS E D3500X2 HSA	<b>Bronze 1400 HSA</b> 60-00 CINS U D1400X2 HSA	<b>Bronze 6900 HSA</b> 00-NA 0000 E D6900X2 HSA	<b>Bronze 8150</b> 00-NA 0000 P D8150X2
<b>CALENDAR YEAR DEDUCTIBLES (CYD) AND OOPMax</b>													
<b>Individual Medical Deductible</b>	\$500	\$1,000	\$2,000	\$3,000	\$4,000	\$4,500	\$5,500	\$1,400	\$8,150	\$3,500	\$1,400	\$6,900	\$8,150
<b>Family Medical Deductible</b>	\$1,000	\$2,000	\$4,000	\$6,000	\$8,000	\$9,000	\$11,000	\$2,800	\$16,300	\$7,000	\$2,800	\$13,800	\$16,300
<b>Individual Pharmacy Deductible</b>	\$0	\$0	\$0	\$0	\$0	\$0	\$0	Combined	Combined	Combined	Combined	Combined	Combined
<b>Family Pharmacy Deductible</b>	\$0	\$0	\$0	\$0	\$0	\$0	\$0	Combined	Combined	Combined	Combined	Combined	Combined
<b>Individual Out of Pocket Max</b>	\$4,500	\$5,000	\$5,500	\$6,400	\$8,150	\$8,150	\$8,150	\$6,900	\$8,150	\$6,900	\$6,900	\$6,900	\$8,150
<b>Family Out of Pocket Max</b>	\$9,000	\$10,000	\$11,000	\$12,800	\$16,300	\$16,300	\$16,300	\$13,800	\$16,300	\$13,800	\$13,800	\$13,800	\$16,300
<b>PHYSICIAN OFFICE VISITS</b>													
<b>PCP Office Visits*</b>	\$25*	\$30*	\$35*	\$45*	\$50*	\$50*	\$50*	CYD, \$25	\$60*	CYD, \$25	CYD, \$60	CYD, \$0	CYD, \$0
<b>Specialist Office Visits</b>	\$50	\$60	\$70	\$90	\$100	\$100	\$100	CYD, \$50	\$120	CYD, \$50	CYD, \$120	CYD, \$0	CYD, \$0
<b>Preventive (ACA Covered) Screenings</b>	No Cost	No Cost	No Cost	No Cost	No Cost	No Cost	No Cost	No Cost	No Cost	No Cost	No Cost	No Cost	No Cost
<b>LAB, IMAGING AND DIAGNOSTICS</b>													
<b>Routine Lab Services</b>	\$25	\$30	\$40	\$50	\$50	\$50	\$50	CYD, \$50	\$60	CYD, \$50	CYD, \$60	CYD, \$0	CYD, \$0
<b>Diagnostic and X-Ray</b>	\$60	\$60	\$70	\$70	\$110	\$110	\$110	CYD, \$70	\$120	CYD, \$70	CYD, \$120	CYD, \$0	CYD, \$0
<b>Imaging (CT/PET/MRI)</b>	\$225	\$300	\$350	\$400	\$450	\$450	CYD, \$450	CYD, \$400	CYD, \$0	CYD, \$400	CYD, 100% <sup>§</sup>	CYD, \$0	CYD, \$0
<b>FACILITY/SURGICAL</b>													
<b>Inpatient Hospital</b>	\$1,600	\$2,000	\$2,500	\$3,000	\$3,200	CYD, 30%	CYD, 30%	CYD, 30%	CYD, \$0	CYD, 30%	CYD, 100% <sup>§</sup>	CYD, \$0	CYD, \$0
<b>Outpatient Surgical Services</b>	\$800	\$900	\$950	\$1,000	\$1,000	\$1,000	\$1,000	CYD, \$1,000	CYD, \$0	CYD, \$1,000	CYD, 100% <sup>§</sup>	CYD, \$0	CYD, \$0
<b>EMERGENCY AND URGENT CARE</b>													
<b>Urgent Care Center Services</b>	\$70	\$80	\$80	\$90	\$100	\$100	\$100	CYD, \$75	\$120	CYD, \$75	CYD, \$120	CYD, \$0	CYD, \$0
<b>Emergency Room Services</b>	\$900	\$1,000	\$1,100	\$1,200	\$1,300	CYD, 30%	CYD, 30%	CYD, 30%	CYD, \$0	CYD, 30%	CYD, 100% <sup>§</sup>	CYD, \$0	CYD, \$0
<b>Ambulance Services (ground/air/water)</b>	CYD, 20%	CYD, 20%	CYD, 20%	CYD, 20%	CYD, 30%	CYD, 30%	CYD, 30%	CYD, 30%	CYD, \$0	CYD, 30%	CYD, 100% <sup>§</sup>	CYD, \$0	CYD, \$0
<b>PRESCRIPTION DRUGS AND DIABETIC SUPPLIES</b>													
<b>Rx - Generic Drugs</b>	\$7	\$7	\$10	\$10	\$20	\$20	\$20	CYD, \$10	\$30	CYD, \$10	CYD, \$35	CYD, \$0	CYD, \$0
<b>Rx - Preferred Brand Drugs</b>	\$50	\$55	\$60	\$65	\$70	\$70	\$70	CYD, \$65	\$95	CYD, \$65	CYD, \$100	CYD, \$0	CYD, \$0
<b>Rx - Non-Preferred Brand Drugs</b>	\$100	\$110	\$120	\$130	\$140	\$140	\$140	CYD, \$130	CYD, \$0	CYD, \$130	CYD, 40%	CYD, \$0	CYD, \$0
<b>Diabetic Supplies - Preferred</b>	\$50	\$55	\$60	\$65	\$70	\$70	\$70	CYD, \$65	\$95	CYD, \$65	CYD, \$100	CYD, \$0	CYD, \$0
<b>Diabetic Supplies - Non-Preferred</b>	\$100	\$110	\$120	\$130	\$140	\$140	\$140	CYD, \$130	CYD, \$0	CYD, \$130	CYD, 40%	CYD, \$0	CYD, \$0
<b>Special Pharmaceuticals</b>	20%	20%	20%	20%	30%	30%	30%	CYD, 30%	CYD, \$0	CYD, 30%	CYD, 40%	CYD, \$0	CYD, \$0

Association Health Plans at a Glance

For a free copy of benefits, visit [hometownhealth.com](http://hometownhealth.com) or call **775-982-3232** or **888-775-7003**.  
National network available only for Small Group PPO members who live and work outside Nevada.

HMO plans only available in select northern Nevada counties; out-of-network benefits not available for HMO plans. You may be charged (balance billed) for billed charges greater than the allowable rate paid by Hometown Health. CYD indicates that you must meet the Calendar Year Deductible before benefits will be paid by Hometown Health.

\* Plans that include two (2) free PCP visits are indicated with an asterisk  
† Gold 500 and Gold 1000 not available to individuals in southern Nevada  
§ 100% paid by member after CYD met

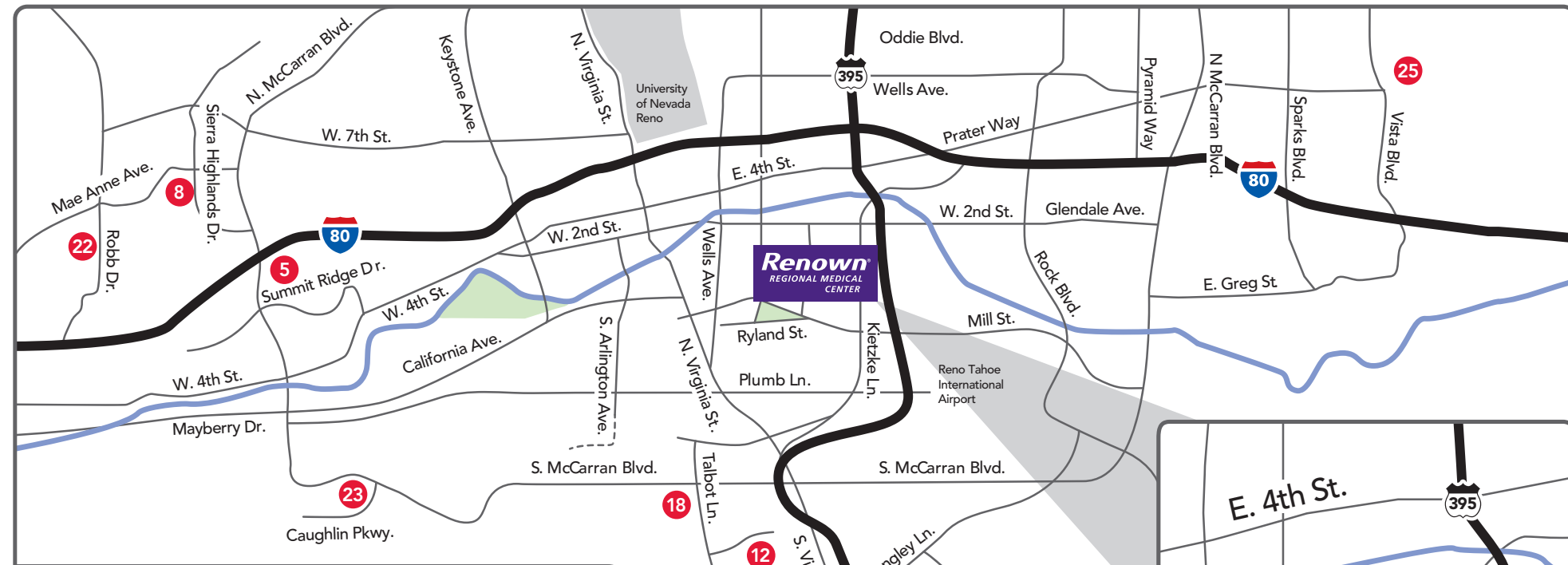
# Renown Health Service Map Northern Nevada

RENO		PRIMARY CARE	URGENT CARE	X-RAY & IMAGING	LAB	HOSPITALS & FACILITIES
1	975 Ryland St.			*		
2	10085 Double R Blvd., Suites 120 & 220					
3	15 McCabe Dr., Suite 100 (Pediatrics)					
4	25 McCabe Dr.			**		
5	4791 Summit Ridge Dr.			*		
6	1075 North Hills Blvd., Suite 180			*		
7	197 Damonte Ranch Pkwy., Suite 8A			*		
8	5100 Mae Anne Ave., Suite 102					
9	75 Pringle Way Renown Regional Medical Center, Center for Advanced Medicine C			**		
10	75 Pringle Way (Pediatrics) Renown Regional Medical Center, Center for Advanced Medicine C, Suite 300					
11	75 Pringle Way Renown Regional Medical Center, Center for Advanced Medicine C, Suite 601					
12	630 Sierra Rose, Suite 230					
13	10101 Double R Blvd Renown South Meadows, Admitting Entrance					
14	75 Kirman Ave.			**		
15	901 E. 2nd St., Greenberg Breast Health Center at Renown - 2nd St. Center for Advanced Medicine F, Suite 103			**		
16	1500 E. 2nd St., Suite 302					
17	1155 Mill St., Renown Regional Medical Center			**		
18	6630 S. McCarran Blvd., Building C #27			**		
19	Renown South Meadows Medical Center 10101 Double R Blvd.					
20	10085 Double R Blvd., Suite 145			**		
21	Renown Rehabilitation Hospital 1495 Mill St.					
22	1595 Robb Dr.					
23	4796 Caughlin Pkwy., Suite 108					
24	13945 S. Virginia St., Suite 632					

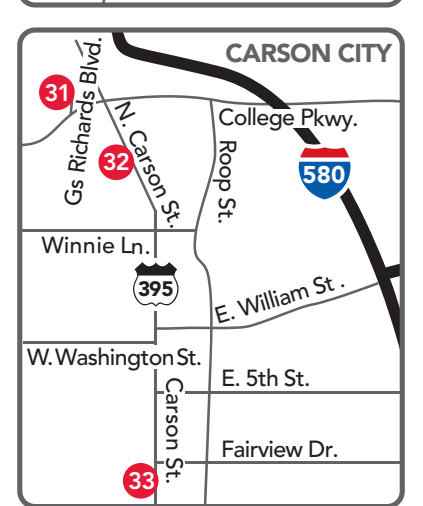
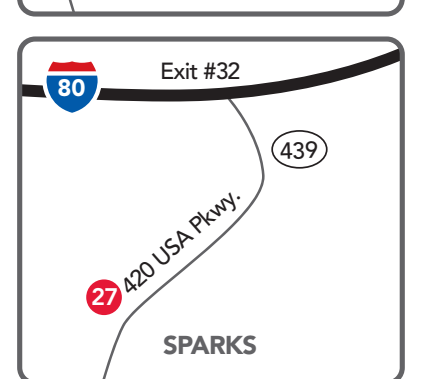
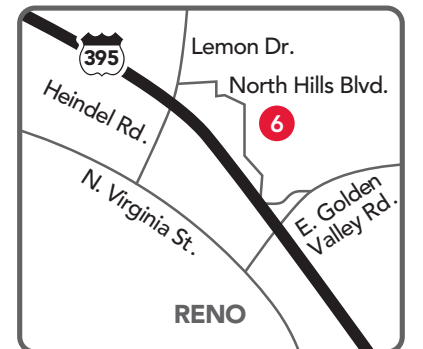
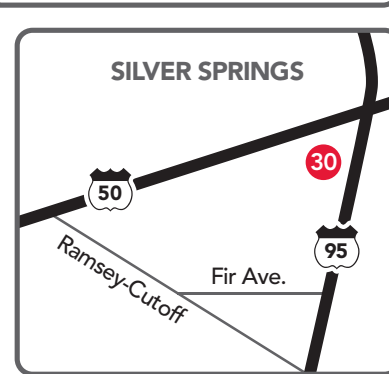
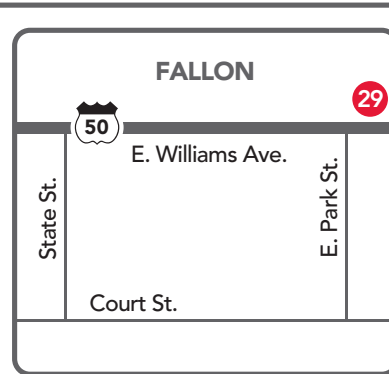
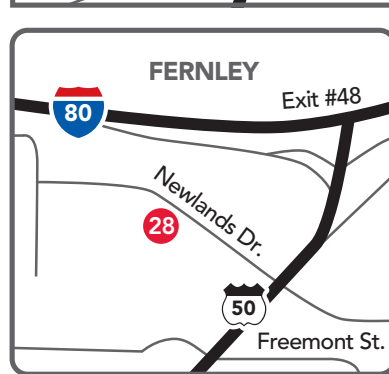
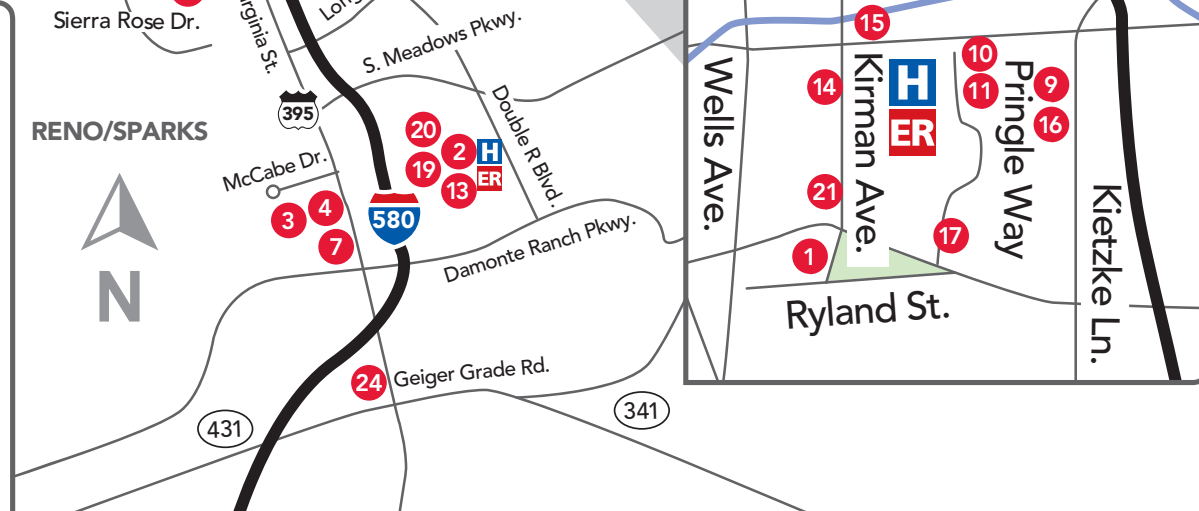
\* X-Ray only.  
\*\*X-Ray & Imaging operated by Renown Regional Medical Center.

Call **775-982-5000** to make an appointment.  
Visit [renown.org/FindaDoc](http://renown.org/FindaDoc) for a detailed physician directory.

LADD/1910-1092039



SPARKS		PRIMARY CARE	URGENT CARE	X-RAY & IMAGING	LAB	HOSPITALS & FACILITIES
25	910 Vista Blvd., Greenberg Breast Health Center at Renown - Vista			*		
26	202 Los Altos Pkwy.			**		
27	440 USA Pkwy., Suite 101					
<b>FERNLEY</b>						
28	1343 W. Newlands Dr.			*		
<b>FALLON</b>						
29	560 E. Williams Ave.					
<b>SILVER SPRINGS</b>						
30	3595 U.S. Highway 50					
<b>CARSON CITY</b>						
31	3641 Gs Richards Blvd.					
32	2814 N. Carson St., Suite 101					
33	2300 Carson St., Suite 1					
<b>TONOPA</b>						
	825 S. Main St.					



Hometown Health

Renown HEALTH