



NORTHERN NEVADA
Effective January 1, 2020
In-Network Benefits

Individual, Family and Small Group Plans at a Glance

	Gold 500 CO 25-CO 1600 A D0500X2	Gold 1000 CO 30-CO 2000 A D1000X2	Gold 2000 CO 35-CO 2500 A D2000X2	Gold 3000 CO 45-CO 3000 A D3000X2	Silver 4000 CO 50-CO 3200 A D4000X2	Silver 4500 CO 50-70 CINS P D4500X2	Silver 5500 CO 50-70 CINS P D5500X2	Silver 1400 HSA 25-70 CINS U D1400X2 HSA	Bronze 8150 CO 60-NA 0000 P D8150X2	Silver 3500 HSA 25-70 CINS E D3500X2 HSA	Bronze 1400 HSA 60-00 CINS U D1400X2 HSA	Bronze 6900 HSA 00-NA 0000 E D6900X2 HSA	Bronze 8150 00-NA 0000 P D8150X2	CATASTROPHIC 8150 65-NA 0000 P D8150X2
CALENDAR YEAR DEDUCTIBLES (CYD) AND OOPMax														
Individual Medical Deductible	\$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	\$8,150
Family Medical Deductible	\$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	\$16,300
Individual Pharmacy Deductible	\$0	\$0	\$0	\$0	\$0	\$0	\$0	Combined	Combined	Combined	Combined	Combined	Combined	Combined
Family Pharmacy Deductible	\$0	\$0	\$0	\$0	\$0	\$0	\$0	Combined	Combined	Combined	Combined	Combined	Combined	Combined
Individual Out of Pocket Max	\$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	\$8,150
Family Out of Pocket Max	\$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	\$16,300
PHYSICIAN OFFICE VISITS														
PCP Office Visits*	\$25*	\$30*	\$35*	\$45*	\$50*	\$50*	\$50*	CYD, \$25	\$60*	CYD, \$25	CYD, \$60	CYD, \$0	CYD, \$0	\$65, CYD
Specialist Office Visits	\$50	\$60	\$70	\$90	\$100	\$100	\$100	CYD, \$50	\$120	CYD, \$50	CYD, \$120	CYD, \$0	CYD, \$0	CYD, \$0
Preventive (ACA Covered) Screenings	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	No Cost
LAB, IMAGING AND DIAGNOSTICS														
Routine Lab Services	\$25	\$30	\$40	\$50	\$50	\$50	\$50	CYD, \$50	\$60	CYD, \$50	CYD, \$60	CYD, \$0	CYD, \$0	CYD, \$0
Diagnostic and X-Ray	\$60	\$60	\$70	\$70	\$110	\$110	\$110	CYD, \$70	\$120	CYD, \$70	CYD, \$120	CYD, \$0	CYD, \$0	CYD, \$0
Imaging (CT/PET/MRI)	\$225	\$300	\$350	\$400	\$450	\$450	CYD, \$450	CYD, \$400	CYD, \$0	CYD, \$400	CYD, 100%	CYD, \$0	CYD, \$0	CYD, \$0
FACILITY/SURGICAL														
Inpatient Hospital	\$1,600	\$2,000	\$2,500	\$3,000	\$3,200	CYD, 30%	CYD, 30%	CYD, 30%	CYD, \$0	CYD, 30%	CYD, 100%	CYD, \$0	CYD, \$0	CYD, \$0
Outpatient Surgical Services	\$800	\$900	\$950	\$1,000	\$1,000	\$1,000	\$1,000	CYD, \$1,000	CYD, \$0	CYD, \$1,000	CYD, 100%	CYD, \$0	CYD, \$0	CYD, \$0
EMERGENCY AND URGENT CARE														
Urgent Care Center Services	\$70	\$80	\$80	\$90	\$100	\$100	\$100	CYD, \$75	\$120	CYD, \$75	CYD, \$120	CYD, \$0	CYD, \$0	CYD, \$0
Emergency Room Services	\$900	\$1,000	\$1,100	\$1,200	\$1,300	CYD, 30%	CYD, 30%	CYD, 30%	CYD, \$0	CYD, 30%	CYD, 100%	CYD, \$0	CYD, \$0	CYD, \$0
Ambulance Services (ground/air/water)	CYD, 20%	CYD, 20%	CYD, 20%	CYD, 20%	CYD, 30%	CYD, 30%	CYD, 30%	CYD, 30%	CYD, \$0	CYD, 30%	CYD, 100%	CYD, \$0	CYD, \$0	CYD, \$0
PRESCRIPTION DRUGS AND DIABETIC SUPPLIES														
Rx - Generic Drugs	\$7	\$7	\$10	\$10	\$20	\$20	\$20	CYD, \$10	\$30	CYD, \$10	CYD, \$35	CYD, \$0	CYD, \$0	CYD, \$0
Rx - Preferred Brand Drugs	\$50	\$55	\$60	\$65	\$70	\$70	\$70	CYD, \$65	\$95	CYD, \$65	CYD, \$100	CYD, \$0	CYD, \$0	CYD, \$0
Rx - Non-Preferred Brand Drugs	\$100	\$110	\$120	\$130	\$140	\$140	\$140	CYD, \$130	CYD, \$0	CYD, \$130	CYD, 40%	CYD, \$0	CYD, \$0	CYD, \$0
Diabetic Supplies - Preferred	\$50	\$55	\$60	\$65	\$70	\$70	\$70	CYD, \$65	\$95	CYD, \$65	CYD, \$100	CYD, \$0	CYD, \$0	CYD, \$0
Diabetic Supplies - Non-Preferred	\$100	\$110	\$120	\$130	\$140	\$140	\$140	CYD, \$130	CYD, \$0	CYD, \$130	CYD, 40%	CYD, \$0	CYD, \$0	CYD, \$0
Special Pharmaceuticals	20%	20%	20%	20%	30%	30%	30%	CYD, 30%	CYD, \$0	CYD, 30%	CYD, 40%	CYD, \$0	CYD, \$0	CYD, \$0
PEDIATRIC COVERAGE														
Pediatric Vision	\$0	\$0	\$0	\$0	\$0	\$0	\$0	CYD, \$0	\$0	CYD, \$0	CYD, \$0	CYD, \$0	\$0	CYD, \$0
Healthy Tracks Wellness Program / Gym Benefit**	Included	Included	Included	Included	Included	Included	Included	Included	Included	Included	Included	Included	Included	Included
DIFFERENCE IN COST FROM GOLD 2000 CO	3.6%	1.6%	0%	-2.7%	-7.5%	-11.9%	-12.9%	-15.6%	-17.4%	-18.8%	-24.3%	-25.1%	-28.5%	-32.1%

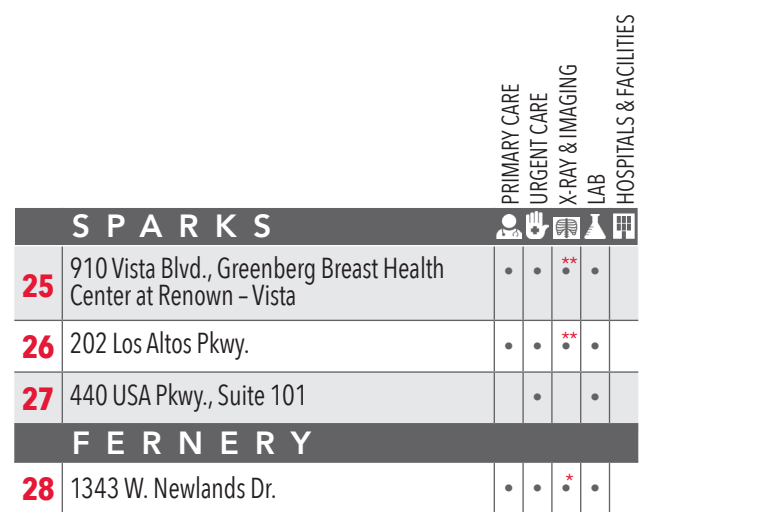
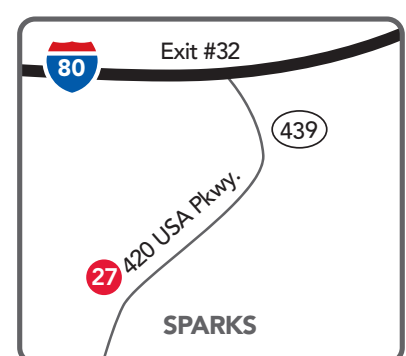
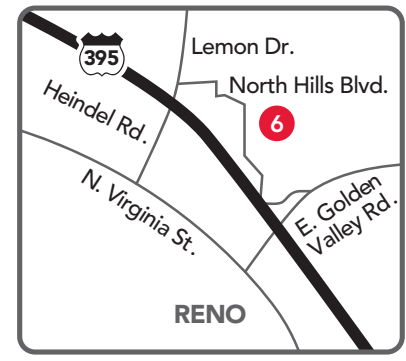
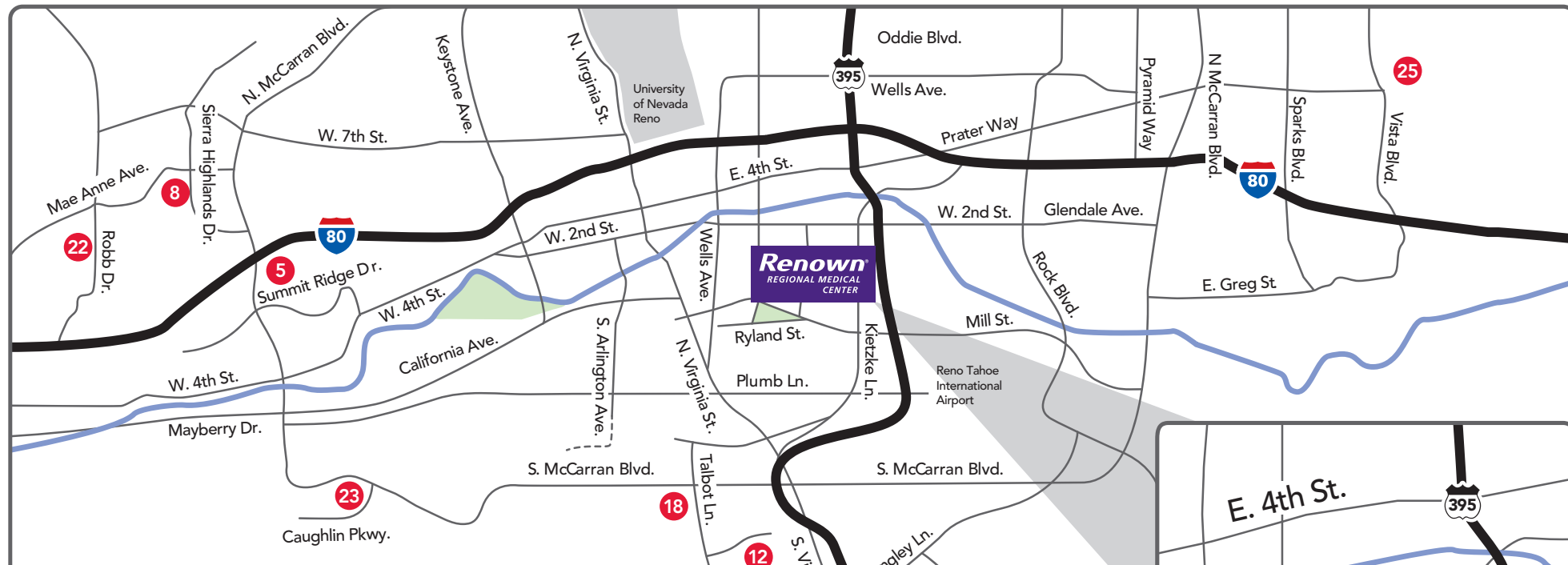
For a free copy of benefits, visit hometownhealth.com or call 775-982-3232 or 888-775-7003.
National network available only for Small Group PPO members who live and work outside Nevada.

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
** Gym Benefit requires completion of an online Health Risk Assessment each year.
† Gold 500 and Gold 1000 not available to individuals in southern Nevada
‡ Catastrophic Plan is only available to individuals.

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	•			•	



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	•			•	

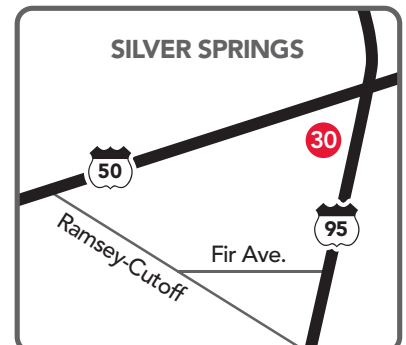
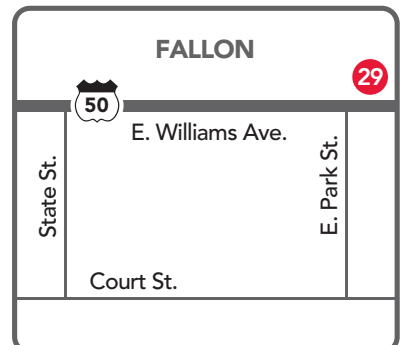
FERNERY		PRIMARY CARE	URGENT CARE	X-RAY & IMAGING	LAB	HOSPITALS & FACILITIES
28	1343 W. Newlands Dr.	•		*	•	

FALLON		PRIMARY CARE	URGENT CARE	X-RAY & IMAGING	LAB	HOSPITALS & FACILITIES
29	560 E. Williams Ave.	•			•	

SILVER SPRINGS		PRIMARY CARE	URGENT CARE	X-RAY & IMAGING	LAB	HOSPITALS & FACILITIES
30	3595 U.S. Highway 50	•			•	

CARSON CITY		PRIMARY CARE	URGENT CARE	X-RAY & IMAGING	LAB	HOSPITALS & FACILITIES
31	3641 Gs Richards Blvd.	•			•	
32	2814 N. Carson St., Suite 101	•			•	
33	2300 Carson St., Suite 1	•			•	

TONOPAH		PRIMARY CARE	URGENT CARE	X-RAY & IMAGING	LAB	HOSPITALS & FACILITIES
	825 S. Main St.	•			•	



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

Call 775-982-5000 to make an appointment.
Visit renown.org/FindaDoc for a detailed physician directory.

