

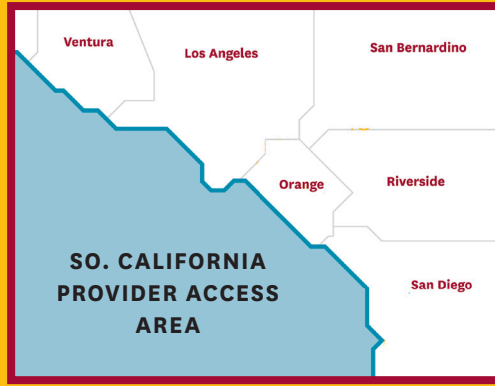
A high quality, affordable plan designed for employees residing in California who cover dependents that reside out of state or in Northern California.

The Plan offers access to Keck Medicine of USC and other selected Anthem providers within six counties of Southern California. Plus, dependents who reside out of state or in Northern California will also have access to select Anthem Prudent Buyer/BlueCard providers.

No out-of-network provider coverage (except for urgent care and emergencies).

You have access to Lyra Health for mental/emotional care and the Livongo diabetes program.

Learn more at employees.usc.edu/epoplus.



ELIGIBLE DEPENDENT PROVIDER ACCESS AREA

Participate in health assessment incentive and save \$480 annually on your medical plan premiums. Get started at employees.usc.edu/wellness-benefit.

EARN UP TO \$480 ANNUALLY



Complete online questionnaire



Complete in-person health screening

PLAN SERVICE PROVIDERS



anthem.com/ca
800.227.3771



hconline.healthcomp.com/uscprovidersearch.aspx
855-727-5267



livehealthonline.com
888.548.3432



Member Support
800.945.4355



lyrahealth.com
844.495.7094



COMING 1/1/21

OTHER BENEFITS AVAILABLE TO YOU



deltadentalins.com
888.335.8227



gympass.com
866.642.7917



ucci.com
800.937.6432



vsp.com
800.877.7195

2021 - MONTHLY EMPLOYEE CONTRIBUTION

EMPLOYEE	without incentive	with incentive
Salary \$53,000 or less	N/A	N/A
\$53,000.01-\$104,000	N/A	N/A
\$104,000.01-\$156,000	N/A	N/A
\$156,000.01-\$250,000	N/A	N/A
More than \$250,000	N/A	N/A

EMPLOYEE + ADULT*	without incentive	with incentive
Salary \$53,000 or less	\$462	\$422
\$53,000.01-\$104,000	\$465	\$425
\$104,000.01-\$156,000	\$475	\$435
\$156,000.01-\$250,000	\$482	\$442
More than \$250,000	\$489	\$449

EMPLOYEE + CHILD(REN)	without incentive	with incentive
Salary \$53,000 or less	\$369	\$329
\$53,000.01-\$104,000	\$372	\$332
\$104,000.01-\$156,000	\$380	\$340
\$156,000.01-\$250,000	\$385	\$345
More than \$250,000	\$390	\$350

EMPLOYEE + ADULT + CHILD(REN)*	without incentive	with incentive
Salary \$53,000 or less	\$603	\$563
\$53,000.01-\$104,000	\$607	\$567
\$104,000.01-\$156,000	\$620	\$580
\$156,000.01-\$250,000	\$629	\$589
More than \$250,000	\$638	\$598

*Spousal Surcharge may apply

MEDICAL COVERAGE

Primary care physician (PCP) required?	No, but you can save by designating one
Out-of-network coverage?	Urgent care and emergency only
Preventive care cost	\$0
Primary care visit cost	\$20 copay (\$10 copay with designated PCP)
Deductible (individual/family)	\$100/\$300
Out-of-pocket maximum (individual/family)	\$1,000/\$3,000

RETAIL PRESCRIPTION DRUG COVERAGE (30 DAY SUPPLY)

Generic	\$5 copay
Brand (no generic available)	\$25 copay
Brand (generic available)	\$70 copay
Specialty drug	\$125 copay

