

# RETIREE HEALTH PLANS FOR PARTICIPANTS UNDER AGE 65

(THESE PLANS ARE NOT MEDICARE PRODUCTS. MEDICARE IS PRIMARY IF ENROLLEE IS ELIGIBLE)

PLAN YEAR <b>2026</b>	KERN LEGACY SHARE SELECT	KERN LEGACY NETWORK PLUS		KERN LEGACY MAX CHOICE	KERN LEGACY CLASSIC CHOICE	KAISER PERMANENTE	
<b>Monthly Premium:</b> ■ Single ■■ Two-party ■■■ Family	\$ 911.00 \$ 1,777.00 \$ 2,750.00	\$ 1,285.00 \$ 2,511.00 \$ 3,887.00	\$ 1,547.00 \$ 2,855.00 \$ 4,163.00	\$ 2,822.00 \$ 5,238.00 \$ 7,650.00	\$ 1,317.92 \$ 2,635.63 \$ 3,729.93		
<b>Call for Info:</b>	(855) 308-5547	(855) 308-5547		(855) 537-6767	(855) 537-6767	(800) 464-4000	
<b>Group No:</b>				280696 (M007/M008)	280696 (M003/M004)	114416 SCR/605629 NCR	
<b>Annual Deductible:</b>	\$ 2,000 Individual \$ 4,000 Family	<b>EPO TIER</b> \$ 0	<b>PLUS TIER</b> \$ 250/Member \$ 500/Family	\$250/Member \$500/Family	<b>IN-NETWORK</b> \$0	<b>OUT-OF-NETWORK</b> \$200/Member \$400/Family	\$ 0
<b>Office Visits:</b>	AFTER DEDUCTIBLE PCP: \$ 10 Specialist: \$ 20	PCP: \$ 10 Specialist: \$ 20	AFTER DEDUCTIBLE 20% Coinsurance	AFTER DEDUCTIBLE PCP: \$ 10 copay Specialist: 20% coinsurance	PCP: \$ 15 Specialist: \$ 25	AFTER DEDUCTIBLE 70% of R&C	\$ 15 office visit
<b>Inpatient Hospitalization:</b>	AFTER DEDUCTIBLE \$ 100 copay/day up to \$ 500/admission at Kern Medical & Adventist Health within Kern County	\$ 0 copay at Kern Medical & Adventist Health within Kern County \$ 100 copay/day up to \$ 500/admission 20% coinsurance Mercy SW for deliveries after deductible		AFTER DEDUCTIBLE \$ 100 copay/day at Kern Medical up to \$ 2500/admission 20% coinsurance at other hospitals	\$ 0 copay at Kern Medical \$ 150 copay/day - up to \$ 750	AFTER DEDUCTIBLE 70% of R&C	\$ 0
<b>Emergency Room:</b>	AFTER DEDUCTIBLE \$ 150 copay (waived if admitted)	\$ 150 copay (waived if admitted)		AFTER DEDUCTIBLE \$ 150 copay (waived if admitted)	\$ 75 copay (waived if admitted)		\$ 50 copay
<b>Prescription Coverage:</b>	ACA Preventive Drugs: \$0 (deductible waived) AFTER DEDUCTIBLE CVS, Kroger & Costco Pharmacies or CVS Mail Order (up to 90-day): Tier 1: \$0   Tier 2: \$25   Tier 3: \$50 Specialty Medications (up to 30-day): Tier 1: \$50   Tier 2: \$90   Tier 3: \$120 Other Retail Pharmacy (up to 30-day): Tier 1: \$5   Tier 2: \$50   Tier 3: \$90	CVS, Kroger & Costco Pharmacies or CVS Mail Order (up to 90-day): Tier 1: \$0   Tier 2: \$20   Tier 3: \$40  Other Retail Pharmacy (up to 30-day): Tier 1: \$5   Tier 2: \$45   Tier 3: \$65		AFTER \$100 PRESCRIPTION DEDUCTIBLE CVS, Kroger & Costco Pharmacies or CVS Mail Order (up to 90-day): Tier 1: \$0 / Tier 2: \$25 / Tier 3: \$50  Specialty Medications (up to 30-day): Tier 1: \$50   Tier 2: \$90   Tier 3: \$120  Other Retail Pharmacy (up to 30-day): Tier 1: \$5   Tier 2: \$50   Tier 3: \$90	CVS, Kroger & Costco Pharmacies or CVS Mail Order (up to 90-day): Tier 1: \$0   Tier 2: \$25   Tier 3: \$40+  Other Retail Pharmacy (up to 30-day): Tier 1: \$5   Tier 2: \$25   Tier 3: \$40+		\$ 10 Generic * \$ 20 Brand *  * Up to 100-day supply

This is a summary of the most frequently asked-about benefits. For additional information visit our website at [www.kerncountyhealthbenefits.com](http://www.kerncountyhealthbenefits.com). Your premium cost could be less if you are eligible for the County Stipend contribution of \$39.75 (single), \$53.69 (two-party), or \$61.50 (family), or the Retiree Health Premium Supplement.

## RETIREE DENTAL & VISION COVERAGE

### LIBERTY DENTAL - CA40R PLUS

<b>Monthly Premium</b> ■ Retiree only: \$ 24.00 ■■ Two-party: \$ 40.00 ■■■ Family: \$ 58.00	<b>DHMO Dental Plan</b> Annual Deductible: None   Annual Maximum: None Copays: Refer to Schedule of benefits Call for info: 1-888-273-3179 <a href="http://www.libertydentalplan.com/countyofkern">www.libertydentalplan.com/countyofkern</a>
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### VISION SERVICE PLAN (VSP)

<b>Monthly Premium</b> ■ Retiree only: \$ 11.28 ■■ Two-party: \$ 22.57 ■■■ Family: \$ 28.46	<b>Vision Plan – Group No. 00101371-0011</b> Vision exam every 12 months: \$ 20 copay Lenses/Frame every 24 months: \$ 20 copay Call for info: 1-800-877-7195   <a href="http://www.vsp.com">www.vsp.com</a>
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