



“With L.A. Care, I have options.”

ATTENTION:
SALES AND MARKETING

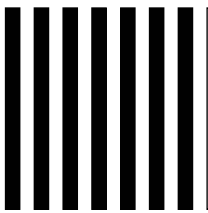
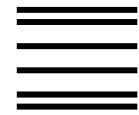
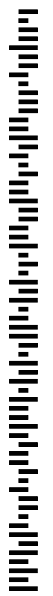


“Now I have peace of mind because I can finally afford health insurance.”

BUSINESS REPLY MAIL
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L.A. CARE HEALTH PLAN
1055 W 7TH ST FL 10
LOS ANGELES, CA 90017-9662



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About L.A. Care Health Plan

Established in 1997, L.A. Care is the nation's largest public health plan. We are accountable to LA's diverse communities and dedicated to helping Los Angeles residents obtain affordable health care. We listen to, embrace and respect the cultural diversity of our communities. As a proud partner of Covered California,™ L.A. Care Covered offers many plan choices.

Our plans help individuals and families benefit through our commitment to the delivery of affordable health coverage choices in Los Angeles. We invite you to learn more about the variety of health plans now available for you and your family. Let us provide you with personalized support in making the best possible choice for you and those you love.

To learn more about plans or enrollment, visit www.lacarecovered.org or call 1-855-222-4239 (TTY/TDD 1-855-825-3166).

To learn about our privacy practices, visit www.lacarecovered.org/privacy.

RR-Q2



L.A. Care Health Plan is proud to be a partner of Covered California™

LA0887 12/14



Enroll in the health plan for all of LA.

**Open Enrollment:
Nov. 15, 2014 – Feb. 15, 2015**

Making quality health care accessible and affordable.

Thanks to Covered California™ and the Affordable Care Act, quality health care is within reach for the diverse residents of LA County. Covered California is the marketplace that connects Angelenos like you to a wide range of health plans, including L.A. Care Covered.™ We offer many plan choices for you and your family. And we're here to support you with free, confidential, one-on-one enrollment assistance in your language.



Questions about plans or enrollment? We can help with both. Call today: 1-855-222-4239.



“Now we’ve got access to hospitals and doctors that are closer to our neighborhood.”



Enroll in the plan that keeps you and your loved ones healthy.

L.A. Care offers a wide network of respected doctors, specialists, hospitals and pharmacies in the communities where you live, work and play. All L.A. Care Covered plans include:

- No-cost preventive and wellness care
- Hospital and doctor visits
- Prescription medications
- Emergency services
- Maternity and newborn care
- Lab work and X-rays
- Pediatric vision and dental checkups
- Mental health and substance use services
- Free access to our Family Resource Centers

We are here for you and committed to helping you stay healthy.

LA County is L.A. Care’s home. We are familiar with your community and the health care providers that serve it. We are committed to helping you navigate your health coverage options, so you can choose the best plan for you and your family.



Open enrollment is happening now—so don’t wait!

Call today for free, one-on-one assistance.

1-855-222-4239 (TTY/TDD 1-855-825-3166)

Or visit www.lacarecovered.org.

CLEARANCE .75 - Paste Space

YES! Help me with my choices.

Contact us today to find the right plan and learn more about enrollment.

- Call **1-855-222-4239** (TTY/TDD 1-855-825-3166)
- Log on to **www.lacarecovered.org**
- **Request** information now

Name _____
 Address _____
 City _____ State _____ ZIP _____

Please contact me by:

Email _____
 Phone _____
 Both _____

Please moisten glue strip. Fold and seal before mailing.

Questions? Contact me today for free, confidential assistance.

I want information in:

English Spanish

Do you have health insurance?

Yes No

If yes, please check one:

Employer Medicare Medi-Cal

I need coverage for:

Individual Family



CLEARANCE .5 - GLUE



Inscríbese hoy en el plan de salud para todo L.A.

Para la mayoría de los residentes de L.A., una atención de salud accesible y de bajo costo está a su alcance a través de L.A. Care Covered™.

Use esta tabla para evaluar el seguro de salud al que puede calificar en el 2015.

Número de personas en su hogar	Puede ser elegible para Medi-Cal si los ingresos anuales de su hogar son menos de...	Puede ser elegible para recibir ayuda financiera a través de Covered California* si los ingresos anuales de su hogar son entre...
1	\$16,105	\$16,105 - \$46,680
2	\$21,707	\$21,707 - \$62,920
3	\$27,310	\$27,310 - \$79,160
4	\$32,913	\$32,913 - \$95,400
5	\$38,516	\$38,516 - \$111,640

*Si ya tiene seguro accesible de su empleador o programa gubernamental como Medicare o Medicaid, no será elegible para los planes de Covered California™.

Para calcular sus costos de seguro de salud para 2015 y la cantidad de asistencia financiera que podría recibir, use la calculadora en línea de lacarecovered.org. O comuníquese con un representante para recibir asistencia gratuita y personal con el cálculo de costos, la selección de un plan o el proceso de inscripción. También puede calificar para Medi-Cal, un programa gratuito.

1-855-222-4239 (TTY/TDD 1-855-825-3166)
lacarecovered.org/es



L.A. Care Health Plan es un orgulloso socio de California Covered.™

¿Tiene preguntas? Yo puedo ayudarle. Llámeme gratis hoy mismo para una consulta personal.

Inscríbese en el plan de salud para todo L.A.



L.A. Care Covered™ es un seguro de salud de calidad y accesible ofrecido por L.A. Care Health Plan a través de Covered California™. L.A. Care le ofrece acceso a una amplia red de respetados médicos, especialistas, hospitales y farmacias en las comunidades donde vive, trabaja y juega. Los planes de L.A. Care Covered™ incluyen:

- Atención preventiva y de bienestar sin costo
- Consultas con su médico y visitas al hospital
- Medicamentos recetados
- Servicios de emergencia
- Maternidad y cuidado del recién nacido
- Análisis clínicos y radiografías
- Atención pediátrica de la vista y dental
- Servicios de salud mental y para abuso de sustancias
- Acceso gratuito a nuestros Centros de Recursos Familiares

¿Tiene preguntas o está listo para inscribirse? L.A. Care tiene representantes que trabajan para el plan y le brindarán asistencia gratuita y personal. Llame al 1-855-222-4239 hoy. Cuando llame, tenga la siguiente información a la mano:

- Su fecha de nacimiento para cobertura individual y/o las fechas de nacimiento de cada miembro de la familia que necesita cobertura
- El número de seguro social de cada persona que se inscribirá
- El código postal de su residencia actual
- Sus declaraciones de impuestos más recientes, incluyendo la información fiscal de los dependientes y el estado de cabeza de familia (si la tiene)
- Información sobre ciudadanía o inmigración legal

La Inscripción Abierta es del 15 de noviembre de 2014 hasta el 15 de febrero de 2015.

Llámenos ahora para recibir asistencia gratuita y confidencial sobre la inscripción al 1-855-222-4239 (TTY/TDD 1-855-825-3166).

Nuestros representantes están disponibles de lunes a viernes de 8 a.m. a 8 p.m., y los sábados de 8 a.m. a 6 p.m.



	Platinum HMO	Gold HMO	Silver HMO	Silver 94 HMO	Silver 87 HMO	Silver 73 HMO	Bronze HMO ²	Minimum Coverage HMO ²
BENEFITS - SUMMARY OF PLAN COPAYS AND COINSURANCE								
Annual Deductible ¹ (individual/family)	\$0	\$0	\$2,000/ \$4,000	\$0	\$500/ \$1,000	\$1,600/ \$3,200	\$5,000/ \$10,000	\$6,600/ \$13,200
Annual Out of Pocket Maximum ¹ (individual/family)	\$4,000/ \$8,000	\$6,250/ \$12,500	\$6,250/ \$12,500	\$2,250/ \$4,500	\$2,250/ \$4,500	\$5,200/ \$10,400	\$6,250/ \$12,500	\$6,600/ \$13,200
Annual Brand Name Rx Deductible (individual/family)	\$0	\$0	\$250/\$500	\$0	\$50/\$100	\$250/\$500	N/A	N/A
OFFICE VISITS								
Preventive Care Services including: prenatal visits, well child care, family planning	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Primary Care Office Visits	\$20	\$30	\$45	\$3	\$15	\$40	\$60 (1st 3 visits) ⁶	\$0 (1st 3 visits) ⁶
Specialist Office Visits	\$40	\$50	\$65	\$5	\$20	\$50	\$70*	0%*
Mental Health/ Substance Abuse Visits	\$20	\$30	\$45	\$3	\$15	\$40	\$60 (1st 3 visits) ⁶	\$0 (1st 3 visits) ⁶
URGENT AND EMERGENCY CARE								
Urgent Care Visit	\$40	\$60	\$90	\$6	\$30	\$80	\$120 (1st 3 visits)	\$0 (1st 3 visits)
Emergency Room ³	\$150	\$250	\$250*	\$25	\$75*	\$250*	\$300*	0%*
INPATIENT SERVICES								
Inpatient Hospitalization	\$250/day ⁴	\$600/day ⁴	20%*	10%	\$15%*	20%*	30%*	0%*
Maternity	\$250/day ⁴	\$600/day ⁴	20%*	10%	\$15%*	20%*	30%*	0%*
OUTPATIENT SERVICES								
Outpatient Surgery	\$250	\$600	20%	10%	15%	20%	30%*	0%*
Lab Services	\$20	\$30	\$45	\$3	\$15	\$40	30%*	0%*
X-rays	\$40	\$50	\$65	\$5	\$20	\$50	30%*	0%*
Imaging (CT/PET Scans, MRIs)	\$150	\$250	\$250	\$50	\$100	\$250	30%*	0%*
PRESCRIPTION DRUGS								
Generic Rx	\$5	\$15	\$15	\$3	\$5	\$15	\$15*	0%*
Preferred Brand Rx	\$15	\$50	\$50**	\$5	\$15**	\$35**	\$50*	0%*
Non-Preferred Brand Rx	\$25	\$70	\$70**	\$10	\$25**	\$60**	\$75*	0%*
Specialty Rx	10%	20%	20%**	10%	15%**	20%**	30%**	0%**

Benefit information continues on backside

FOOTNOTES: 1 Annual deductible included in annual out of pocket maximum
2 Bronze and Minimum Coverage HMO have an integrated medical and rx deductible

3 Copay waived if member is admitted directly to the hospital
4 Copay is per day up to 5 days

5 Applies to dependent children up through age 18
6 First 3 visits combined prior to deductible

* Subject to annual deductible
** Subject to brand rx deductible

	Platinum HMO	Gold HMO	Silver HMO	Silver 94 HMO	Silver 87 HMO	Silver 73 HMO	Bronze HMO ²	Minimum Coverage HMO ²
PEDIATRIC VISION⁵								
Vision exam, Glasses, (1 pair per year or contacts in lieu of glasses)	No charge	No charge	No charge	No charge	No charge	No charge	No charge	No charge
PEDIATRIC DENTAL⁵								
Oral Exam, Preventive Cleaning, X-rays, Sealants per Tooth, Topical Fluoride Application and Space Maintainers (fixed)	No charge	No charge	No charge	No charge	No charge	No charge	No charge	No charge

This Plans at a Glance is intended to be a summary of benefits. Please review the L.A. Care Covered Evidence of Coverage for a detailed description of all benefits, limitations and exclusions.

L.A. Care Covered™ is the health plan that focuses exclusively on the health needs of all of L.A. County's diverse residents. Free confidential assistance is available **24** hours a day, **7** days a week by calling **1-855-222-4239 (TTY/TDD 1-855-576-1620)**. You may be eligible for financial assistance.

Did you know that L.A. Care Covered™ offers no cost Preventive Care and wellness services? Here are just a few of the services offered:

- Blood pressure and cholesterol screening
- Type 2 diabetes screening
- Vaccines, including the flu shot
- Depression screening
- Mammograms and Pap smears
- Tobacco and alcohol use (screening and counseling)
- Diet counseling
- Colorectal cancer screening
- Pre-natal and Well baby visits

lacarecovered.org | 1-855-222-4239

FOOTNOTES: ¹ Annual deductible included in annual out of pocket maximum
² Bronze and Minimum Coverage HMO have an integrated medical and rx deductible

³ Copay waived if member is admitted directly to the hospital
⁴ Copay is per day up to 5 days

⁵ Applies to dependent children up through age 18
⁶ First 3 visits combined prior to deductible

* Subject to annual deductible
** Subject to brand rx deductible