



## Consumer Driven Health Plan Preferred Provider Organization (PPO) Nationwide

The CDHP is a PEBP administered Preferred Provider Organization (PPO) high deductible health plan which provides in-network and out-of-network benefits. As a member, you receive coverage for many medically necessary services and supplies, subject to any Benefit Limitations and Explanations and Exclusions. This is an open access PPO Plan and does not require a referral to see a specialist. The CDHP provides a Health Savings Account (HSA) for eligible employees and a Health Reimbursement Arrangement (HRA) for active employees as well as retirees who are ineligible for the HSA.



## Low Deductible Preferred Provider Organization (PPO) Nationwide

The Low Deductible Plan is a PEBP administered Preferred Provider Organization (PPO) low deductible health plan which provides both in-network and out-of-network benefits. As a member, you receive coverage for many medically necessary services and supplies, subject to any Plan Benefit Limitations and Exclusions. This is an open access PPO Plan and does not require a referral to see a specialist.



## PEBP Premier Plan Exclusive Provider Organization (EPO) Northern Nevada

The Exclusive Provider Organization (EPO) Plan is a PEBP administered plan which provides in-network benefits. As a member, you receive coverage for many medically necessary services and supplies, subject to any Benefit Limitations and Exclusions. However, apart from exceptional circumstances, such as emergent care and urgent care, this Plan only covers services when accessing Exclusive Provider Organization Plan providers within the network.



## Health Plan of Nevada Health Maintenance Organization (HMO) Southern Nevada

Health Plan of Nevada is a Health Maintenance Organization (HMO) that offers fixed co-payments for primary care, specialty, and urgent care visits. On this plan, members are required to select a primary care provider (PCP) at initial enrollment. If a PCP is not selected, one will be assigned to the member by HPN. Eligible dependents enrolled in an accredited college, university or vocational school anywhere in the United States can access a plan contracted network provider for needed PCP or urgent/emergent services. With the exception of urgent/emergent services, Prior Authorization is required for covered services outside of the service area.



## Via Benefits Medicare Exchange Retirees (HRA) Nationwide

The Exchange with Via Benefits is available to eligible retirees and their dependents who are enrolled in Medicare Parts A and B. The Public Employees' Benefits Program provides a Health Reimbursement Arrangement (HRA) for the purpose of allowing eligible retirees to obtain reimbursement of qualified medical expenses incurred by such retirees and their eligible dependents.

