





<b>Benefit Comparison Chart</b>	<b>Ruby 20 HMO Platinum</b>	
<b>Covered Services</b>	<b>2022</b>	<b>2023</b>
Substance Use Disorder Inpatient Facility Services	\$150 copay/day (Up to the first 5 days)	\$150 copay/day (Up to the first 5 days)
Substance Use Disorder Inpatient Professional Fee	\$0 Copay	\$0 Copay
<b>Home Health Services</b>		
Home Health Care	\$0 copay	\$0 copay
Rehabilitation Services	\$20 Copay	\$20 Copay
Habilitation Services	\$20 Copay	\$20 Copay
Skilled Nursing Care	1st 10 days at no charge; then \$100 copay per day.	1st 10 days at no charge; then \$100 copay per day.
Hospice Services	\$0 copay	\$0 copay
<b>Pediatric Vision and Dental (Included in Plan)</b>		
<b>Pediatric Vision (Ages 0-18) Administered by VSP</b>		
Eye Exam Including Refraction and Dilation Per Year	\$0 Copay	\$0 Copay
1 Pair of Glasses Per Year (or Contact Lenses in Lieu of Glasses) Calendar Year	\$0 Copay	\$0 Copay
<b>Pediatric Dental (Ages 0-18) Administered by Delta Dental</b>		
Child Dental Diagnostic and Preventive Services	See Delta Dental EOC	No Charge

Pending DMHC Approval 2022.07.26