

# blue of california

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Subscriber

**LEAH C KAKUUCHI**

ID# **XEK906052556**

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**Silver 1850 PPO**

Network Name **Exclusive**

**Copays**

Primary Care \$45 Specialist \$75

Urgent Care Center \$45 Teladoc \$5

Emergency Room 30%

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Group #

**X0001000**

Effective

**01/01/2019**

Coverage

**INDIVIDUAL**

Plan Type

**PPO**

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RX

**YES**

RxBIN

**600428**

RxPCN

**01910000**

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