

## FRIDAY Gold: Unlimited \$0 Primary Care Visits, \$0 Preferred Generic Rx, \$0 Mental Health Counseling, \$0 Vision Exam - HMO



### Plan costs

Click the down arrow to learn more about each of these.

Monthly premium	\$0.97 per month <del>was \$743.30</del>	▼
Deductible (Health + Rx)	\$2,300 per person	▼
Out-of-pocket max	\$8,250 per person	▼
Network type	HMO	▼
Metal tier	Gold	▼
Overall rating	Not Rated	▼
Official documents	<a href="#">Summary of benefits and coverages (PDF)</a> <a href="#">Drug formulary</a> <a href="#">Provider list</a> <a href="#">Plan brochure</a>	



### Doctor visits

This applies to doctor visits when you have a condition or symptom. For preventive care visits, such as annual checkups, visits are free.

#### Tier Selector

In network ▼

	Before deductible is met	After deductible is met
Primary care visit	No charge	No charge
Specialist visit	Full price	20%
Preventive care visit	No charge	No charge



## Prescription drugs

Prescription coverage is based on which category a drug falls into. To see how this plan categorizes prescriptions, browse its [drug formulary](#). Note that prior authorization may be required for some prescriptions. Some plans may have a separate Rx deductible. Please confirm details in the [Summary of Benefits and Coverages](#).

### Tier Selector

In network



	Before deductible is met	After deductible is met
Generic	No charge	No charge
Brand	Full price	20%
Non-preferred Brand	Full price	50%
Specialty	Full price	50%



## Labs & imaging

These are tests your doctor may run when diagnosing a condition.

### Tier Selector

In network



	Before deductible is met	After deductible is met
X-rays	Full price	20%
Imaging (CT/PET/MRI)	Full price	20%
Blood work	Full price	20%



## Hospital & emergency

To see which hospitals, ERs, and Urgent Care centers are part of this plan's network, browse the [provider list](#).

### Tier Selector

In network



	Before deductible is met	After deductible is met
Urgent care	\$75	\$75

Emergency room	Full price	50%
Ambulance	Full price	20%
Hospital stay (facility)	Full price	20%
Hospital stay (physician)	Full price	20%
Outpatient procedure (facility)	Full price	20%
Outpatient procedure (physician)	Full price	20%
Physical rehabilitation	Full price	20%



## Mental health & substance abuse

All plans cover behavioral health treatment (such as psychotherapy or counseling), mental and behavioral health inpatient services, and substance use treatment.

### Tier Selector

In network



	Before deductible is met	After deductible is met
Outpatient services	No charge	No charge
Psychiatric hospital stay	Full price	20%



## Pregnancy & birth

Every plan covers services provided before and after your child is born.

### Tier Selector

In network



	Before deductible is met	After deductible is met
Well baby care	No charge	No charge



## Free preventive care

Every plan includes over 74 preventive care services that are completely free on day one. These services keep you healthy before you become sick, including routine check-ups, counseling, screenings, and immunizations.

Adults

Women

Children

Abdominal aortic aneurysm one-time screening



Alcohol misuse screening and counseling



Aspirin use



Blood pressure screening



Cholesterol screening



Colorectal cancer screening



Depression screening



Diabetes screening



Diet counseling



Falls prevention



Hepatitis B screening



Hepatitis C screening



HIV screening



Immunization vaccines



Lung cancer screening



Obesity screening and counseling



Sexually transmitted infection (STI) prevention counseling



Statin preventive medication



Syphilis screening



Tobacco Use counseling



Tuberculosis screening



## Estimated all-in costs

We estimate that your total annual out-of-pocket costs will be \$2,412, based on:

- This plan's monthly premium costs x 12 months
- Your healthcare usage estimate of **Medium** applied to this plan's deductible and copayments.



This plan has the **2nd lowest** annual out-of-pocket estimate of all 50 plans available to you.

Estimate breakdown

This **does not limit** what you can use — it's just an estimate of what you might use.

12	Monthly premiums	\$12
2	<a href="#">Doctor visits</a>	\$206
2	<a href="#">Labs or tests</a>	\$2,053
18	Prescriptions	\$142
Annual estimate		\$2,412
Monthly estimate (on average)		\$201 per month