



Wellpoint Essential Gold POS 700 (\$0 Virtual PCP + \$0 Select Drugs + Incentives) - POS



Plan costs

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

Monthly premium	\$0.00 per month was \$1,065.94	▼
Deductible (Health + Rx)	\$700 per person	▼
Out-of-pocket max	\$7,500 per person	▼
Network type	POS	▼
Metal tier	Gold	▼
Overall rating	Not Rated	▼
Official documents	Summary of benefits and coverages (PDF) Drug formulary Provider list Plan brochure	



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 1

▼

	Before deductible is met	After deductible is met
Primary care visit	\$20	\$20
Specialist visit	\$50	\$50
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 1



	Before deductible is met	After deductible is met
Generic	\$5	\$5
Brand	\$60	\$60
Non-preferred Brand	Full price	35%
Specialty	Full price	40%



Labs & imaging

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

Tier Selector

In network 1



	Before deductible is met	After deductible is met
X-rays	Full price	40%
Imaging (CT/PET/MRI)	Full price	40%
Blood work	Full price	40%



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 1



	Before deductible is met	After deductible is met
Urgent care	\$50	\$50

Emergency room	Full price	\$500 with 40%
Ambulance	Full price	40%
Hospital stay (facility)	Full price	\$500 per stay with 40%
Hospital stay (physician)	Full price	40%
Outpatient procedure (facility)	Full price	40%
Outpatient procedure (physician)	Full price	40%
Physical rehabilitation	Full price	40%



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 1

	Before deductible is met	After deductible is met
Outpatient services	Full price	40%
Psychiatric hospital stay	Full price	\$500 per stay with 40%




Pregnancy & birth

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

Tier Selector

In network 1

	Before deductible is met	After deductible is met
Well baby care	No charge	No charge
Labor, delivery, hospital stay	Full price	\$500 with 50%



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			



Estimated all-in costs

We estimate that your total annual out-of-pocket costs will be \$2,054, 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 **5th lowest** annual out-of-pocket estimate of all 118 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	\$0
5	<u>Doctor visits</u>	\$190
2	<u>Labs or tests</u>	\$1,079
2	<u>Hospital visits</u>	\$120
34	Prescriptions	\$665
Annual estimate		\$2,054
Monthly estimate (on average)		\$171 per month