

Standard Silver - EPO

Because you qualify for a Cost Sharing Reduction (CSR), **Silver plans** like this one are an *especially* good value.

-  **Cheaper doctor visits**
-  **Cheaper hospital visits**
-  **Cheaper prescriptions**
-  **Lower deductibles**
-  **Lower out-of-pocket max**



Plan costs



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

Monthly premium	\$180.72 per month <small>was \$1,459.72</small>	
Deductible (Health + Rx)	\$3,000 per person	\$6,000 per family \$6,000 <small>per family</small>
Out-of-pocket max	\$6,400 per person	\$12,800 per family \$12,800 <small>per family</small>
Network type	EPO	
Metal tier	Silver	
Plan Type	 EASY PRICING	
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



Before deductible is met

After deductible is met

Primary care visit	\$40	\$40
Specialist visit	\$80	\$80
A specialist is a medical professional who specializes in a condition or area of the body.		
For example, a dermatologist (skin), cardiologist (heart), neurologist (brain), or oncologist (cancer).		

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	\$20	\$20
Cost sharing shown applies to Tier 1a-Preferred Generic Drugs only. See Summary of Benefits and the policy or service agreement for more information on an additional category, Tier 1b-Generic Drugs, which may apply a higher cost share. Up to a 30 day supply at any participating pharmacy or up to a 90 day supply at a 90 day retail pharmacy. Refer to the prescription drug list for more information.		
A generic drug is identical to the brand name drug in form, safety, strength, quality and intended use. Although identical, generic drugs are substantially cheaper than their brand name counterparts.		
Brand	\$40	\$40
Non-preferred Brand	Full price	\$80
Specialty	Full price	\$125
 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	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



	Before deductible is met	After deductible is met
Urgent care	\$60	\$60
<p>An urgent care center can be a convenient option if you have a non-life-threatening injury and your doctor is not available.</p> <p>Urgent care is usually less expensive than going to the Emergency Room, and will usually have shorter wait times for non-life-threatening injuries.</p>		
Emergency room	Full price	40%
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Ambulance	Full price	40%
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Hospital stay (facility)	Full price	40%
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Hospital stay (physician)	Full price	40%
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Outpatient procedure (facility)	Full price	40%
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Outpatient procedure (physician)	Full price	40%
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Physical rehabilitation	\$40	\$40
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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 \$40 \$40

Psychiatric hospital stay Full price 40%



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

Labor, delivery, hospital stay Full price 40%



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 \$3,609, 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 **16th lowest** annual out-of-pocket estimate of all 64 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	\$2,169
4	Doctor visits	\$160
1	Labs or tests	\$1,120
7	Prescriptions	\$160
Annual estimate		\$3,609
Monthly estimate (on average)		\$301 per month