

6 plans



SILVER +



Capital Health Plan HMO Silver 2303 (Wellness Program \$\$\$) - HMO

Monthly premium
\$0.00
was \$442.33

Deductible (Health + Rx)
\$0

Drug deductible
Your estimated all-in
Out-of-pocket max
Doctor visits
Generic drugs

N/A
\$280
\$2,000
No charge
No charge

Tallahassee Orthopedic Clinic lii PI Clinic/Center Medical Specialty

Tallahassee Orthopedic Clinic lii PI Prosthetic/Orthotic Supplier

Doesn't take this plan

Doesn't take this plan



EXPANDED BRONZE

Capital Health Plan HMO Bronze 1000 (Wellness Program \$\$\$) - HMO

Monthly premium
\$0.00
was \$374.00

Deductible (Health + Rx)
\$7,500

Drug deductible
Your estimated all-in
Out-of-pocket max
Doctor visits
Generic drugs

N/A
\$1,220
\$9,200
\$50
\$25

Tallahassee Orthopedic Clinic lii PI Clinic/Center Medical Specialty

Tallahassee Orthopedic Clinic lii PI Prosthetic/Orthotic Supplier

Doesn't take this plan

Doesn't take this plan



SILVER +



Capital Health Plan HMO Silver 2103 (Wellness Program \$\$\$) - HMO

Monthly premium
\$8.36
was \$451.36

Deductible (Health + Rx)
\$0

Drug deductible
Your estimated all-in
Out-of-pocket max
Doctor visits
Generic drugs

N/A
\$111
\$1,400
\$5
\$3

Tallahassee Orthopedic Clinic lii PI Clinic/Center Medical Specialty

Tallahassee Orthopedic Clinic lii PI Prosthetic/Orthotic Supplier

Doesn't take this plan

Doesn't take this plan



GOLD

Capital Health Plan HMO Gold 3100 (Wellness Program \$\$\$) - HMO



Monthly premium

\$40.44

was \$483.44

Deductible (Health + Rx)

\$1,500

Drug deductible

Your estimated all-in

N/A

\$1,665

Out-of-pocket max

\$7,800

Doctor visits

\$30

Generic drugs

\$15

Tallahassee Orthopedic Clinic lii PI 

Clinic/Center

Medical Specialty

Tallahassee Orthopedic Clinic lii PI 

Prosthetic/Orthotic Supplier

Doesn't take this plan



GOLD

Capital Health Plan HMO Gold 3000 (Wellness Program \$\$\$) - HMO

Monthly premium

\$80.92

was \$523.92

Deductible (Health + Rx)

\$0

Drug deductible

N/A

Your estimated all-in

\$1,026

Out-of-pocket max

\$7,900

Doctor visits

\$25

Generic drugs

\$15

Tallahassee Orthopedic Clinic lii PI 

Clinic/Center

Medical Specialty

Tallahassee Orthopedic Clinic lii PI 

Prosthetic/Orthotic Supplier

Doesn't take this plan



PLATINUM

Capital Health Plan HMO Platinum 4000 (Wellness Program \$\$\$) - HMO

Monthly premium

\$261.75

was \$704.75

Deductible (Health + Rx)

\$0

Drug deductible

N/A

Your estimated all-in

\$3,191

Out-of-pocket max

\$4,300

Doctor visits

\$10

Generic drugs

\$5

Tallahassee Orthopedic Clinic lii PI 

Clinic/Center

Medical Specialty

Tallahassee Orthopedic Clinic lii PI 

Prosthetic/Orthotic Supplier

Doesn't take this plan