

# MyBlue Health Gold<sup>SM</sup> 403 - HMO



## Plan costs

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

Monthly premium	\$0.00 per month <del>was \$878.46</del>	▼
Deductible (Health + Rx)	\$500 per person	▼
Out-of-pocket max	\$8,500 per person	▼
Network type	HMO	▼
Metal tier	Gold	▼
Overall rating	3	▼

### 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	No charge	No charge
Specialist visit	Full price	30%
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	Full price	30%
Non-preferred Brand	Full price	35%
Specialty	Full price	45%



## 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	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 1

▼

	Before deductible is met	After deductible is met
Urgent care	\$30	\$30

Emergency room	Full price	\$950 with 30%
Ambulance	Full price	30%
Hospital stay (facility)	Full price	\$850 per stay with 30%
Hospital stay (physician)	Full price	30%
Outpatient procedure (facility)	Full price	\$300 with 20%
Outpatient procedure (physician)	Full price	30%
Physical rehabilitation	Full price	30%



### 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	30%
Psychiatric hospital stay	Full price	\$850 per stay with 30%



### Pregnancy & birth

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

In network 1

▼

	Before deductible is met	After deductible is met
Well baby care	No charge	No charge
Labor, delivery, hospital stay	Full price	\$850 with 30%



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 \$2,343, 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 **14th lowest** annual out-of-pocket estimate of all 128 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
7	Doctor visits	\$300
4	Labs or tests	\$1,296
2	Hospital visits	\$13
40	Prescriptions	\$734
Annual estimate		\$2,343
Monthly estimate (on average)		\$195 per month