

Dean Focus Silver \$0 Copay PCP Visits - 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	\$22.69 per month was \$368.69	▼
Deductible (Health + Rx)	\$0 per person	▼
Out-of-pocket max	\$2,250 per person	▼
Network type	EPO	▼
Metal tier	Silver	▼
Overall rating	4	▼

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 metAfter deductible is met

Primary care visit	No charge	No charge
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Specialist visit	\$25	\$25
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	\$10	\$10
Brand	\$40	\$40
Non-preferred Brand	\$75	\$75
Specialty	\$150	\$150



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	10%	10%
Imaging (CT/PET/MRI)	10%	10%
Blood work	10%	10%



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	No charge	No charge
Emergency room	10%	10%
Ambulance	10%	10%
Hospital stay (facility)	10%	10%
Hospital stay (physician)	10%	10%
Outpatient procedure (facility)	10%	10%
Outpatient procedure (physician)	10%	10%
Physical rehabilitation	10%	10%



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	10%	10%

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	10%	10%



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 \$282, 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 **25th 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	\$272
1	Doctor visits	\$0
1	Prescriptions	\$10
Annual estimate		\$282
Monthly estimate (on average)		\$24 per month