The Ambetter of Illinois insurance policy, underwritten by Celtic Insurance Company, is effective from January 1, 2025, to December 31, 2025, and is tailored for individuals and families enrolled in the Focused Silver + Vision + Adult Dental plan. The policy features an overall deductible of \$6,300 for individuals and \$12,600 for families, which must be satisfied before the plan covers most services. However, certain preventive care services, primary care visits, specialist visits, urgent care, and specific prescription drugs are available before the deductible is met, typically requiring a copayment or coinsurance. The out-of-pocket maximum is \$8,150 for individuals and \$16,300 for families, excluding premiums, penalties for failing to obtain preauthorization, and non-covered services. Utilizing network providers results in lower costs, while out-of-network services are not covered, and balance billing may apply. No referrals are necessary to consult specialists.

The plan specifies costs for common medical events: primary care visits incur a \$40 copayment, specialist visits cost \$85, and preventive services are provided at no charge. Diagnostic tests have a \$50 copayment, while imaging services and outpatient surgeries require 50% coinsurance. Emergency room care and urgent care visits involve a 50% coinsurance and a \$60 copayment, respectively. Mental health services follow a similar cost structure, with outpatient visits costing \$40 and inpatient services at 50% coinsurance. Maternity care includes various services with applicable copayments and coinsurance.

Excluded services encompass acupuncture, cosmetic surgery, long-term care, and non-emergency care outside the U.S. Other covered services, subject to limitations, include bariatric surgery, chiropractic care, and routine eye care. The policy grants rights to continue coverage and outlines grievance and appeals rights for denied claims. It also provides Minimum Essential Coverage, which may influence eligibility for premium tax credits. The plan does not meet Minimum Value Standards, potentially allowing for premium tax credit eligibility through the Marketplace. Language access services are available in multiple languages, including Spanish, Tagalog, Chinese, and Navajo, with assistance provided at no cost by calling 1-855-745-5507 (TTY 1-844-517-3431).

Coverage examples illustrate potential costs for various medical situations, such as prenatal care and hospital delivery totaling \$12,700, with the insured paying \$8,210 after deductibles, copayments, and coinsurance. For managing Type 2 diabetes, the total example cost is \$5,600, with the insured responsible for \$2,520. In the case of a simple fracture, the total cost is \$2,800, with the insured paying the full amount. While these examples provide insight into potential costs, they are not cost estimators, as actual expenses may vary based on the care received and provider charges. The document emphasizes the importance of understanding cost-sharing amounts and excluded services for effective comparison of health plans.

Ambetter of Illinois, as a Qualified Health Plan issuer in the Illinois Health Insurance Marketplace, ensures that individuals with limited English proficiency can receive assistance and information in their preferred language at no cost and in a timely manner. Additionally, those with auditory or visual impairments are entitled to receive auxiliary aids and services without charge. For translation or auxiliary services, members can contact Member Services at 1-855-745-5507 (TTY 1-844-517-3431). For further details regarding rights to non-discriminatory access to Ambetter of Illinois plans and assistance services, individuals are encouraged to visit AmbetterHealth.com.