

2025 Ambetter Health Open Enrollment

TENNESSEE



Sales Learning
& Development

The Reach of Ambetter Health



Ambetter Health plans are certified as Qualified Health Plans (QHP) on the Health Insurance Marketplace or the state-based Exchanges (SBE).

America's #1
Marketplace Health
Insurance

1 in 7

ACA shoppers choose Ambetter Health

4.3 Million +

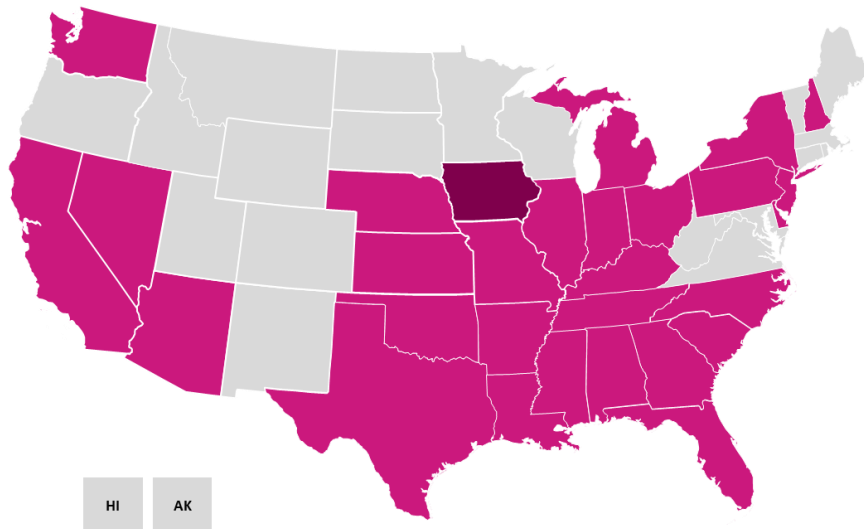
members

29 states

Plans are designed to deliver **high-quality,
locally based healthcare**
to members

Est. 2013

Ambetter Health plans have been offered
since the Marketplace opened.



Statistical claims and the #1 Marketplace Insurance statement are in reference to national on-exchange marketplace membership and based on national Ambetter Health data in conjunction with findings from Issuer Level Enrollment Data from CMS, State-Level Public Use File from CMS, Covered California Active Member Profile data, state insurance regulatory filings, and public financial filings.

100



We will be
statewide once
again in 2025!

What's New for 2025



- Bronze | Silver | Gold (Core) Network is now the **Premier** Network. Plans will continue to be grouped in metal tiers.
- Condition specific plans for members with diabetes through the Premier network.
- Newly released Ambetter Health App was launched in July 2024 for members.
- Ambetter Select plans are no longer available.

Renewal Letters



To: Members with active policies (subscribers/heads of household).



Timing: **September** for discontinued plans, **October** for continuing plans.

Key Information:

- Notice of changes or discontinuance to plan.
- Notification if current plan will no longer be available and the **best similar** plan they will be enrolled in for renewal.
- Opportunity to remain on existing plan or change plans.
- Request for renewal by 12/15 for an effective date of 1/1 to ensure **continuity of coverage**.
- Instructions for member to act.

Renew Today
Scan this QR code:



[Health Plan URL]

or call
[Phone Number]
[or contact your broker, [broker name] at] [broker phone number]

P.O. Box 25408
Little Rock, AR 72221

USPS IMb BAR CODE

[Member First Name] [Member Last Name]
[Address 1]
[Address 2]
[City], [State] [Zip Code]

Stay Covered in 2025.
[DATE]
Hi [Member First Name],
Thank you for being a member of our [network name] network. We are excited to invite you to renew your current coverage for 2025 and continue your access to great benefits.

As an Ambetter Health Member, you have access to:

 A Trusted Provider Network Access to a range of providers, medical facilities, and hospitals.	 Prescription Benefits Brand and generic drugs, delivered to your door.
 Virtual 24/7 Care Talk to a doctor online or over the phone. Get the care you need anytime, anywhere.*	 Up to \$500 with My Health Pays* Use it to help pay for utilities, childcare, transportation and more. Access My Health Pays* through your Online Member Account.**
 Ambetter Member Perks Save on health products and services with our discount program.	 Vision & Dental Options A variety of plans to meet your needs and budget for vision and dental services.

Get Started:

Open Enrollment Kicks Off November 1.

- 1 Review this packet to make sure your plan meets your needs.
- 2 Go to [Health Plan URL] to learn more about keeping your coverage and read answers to Frequently Asked Questions.
- 3 Contact us at [Phone Number] [or contact your broker, [broker name] at] [broker phone number] to activate your 2025 coverage.

Information in renewal letters will vary based on the state and the Ambetter Health plan.

Member Information Packet



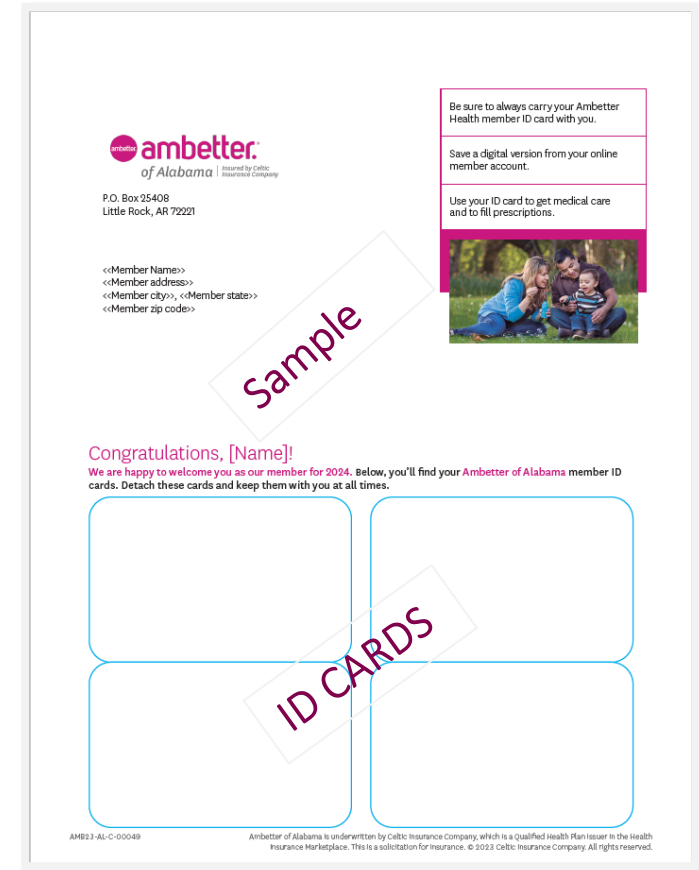
To: New and renewing members whose binder or premium has been paid.



Timing: Within approximately seven days of receipt of payment.

Key Information:

- Welcome letter with ID cards.
- Call to actions, account set up, bill pay and choosing a PCP.
- In-network providers, prescriptions information.
- Applicable rewards and discounts.
- Dependents
- Referrals



Information will vary based on the state and the Ambetter Health plan.

2025 Provider Network Highlights



Chattanooga

- Erlanger Hospitals
- CHI Memorial Hospital
- Bradley Medical Center formerly known as Tennova-Cleveland

Knoxville

- Blount Memorial Hospital
- Covenant Health
- Community Health Systems Inc

Memphis

- Baptist Memorial Hospital System
- St Francis Hospital System
- Regional One Medical Center
- Lauderdale Community Hospital

Middle Tennessee

- Vanderbilt University Hospital
- HCA/TriStar Health
- Tennova Healthcare System
- Ascension Saint Thomas Health
- Trousdale Medical Center
- Summer Regional Medical Center

Additional Counties

- Ballad Health System Inc
- Cookeville Regional Health System
- Maury Regional Health System
- West Tennessee Healthcare



*This is only a partial provider list, refer to the Ambetter Guide for a list of contracted providers.

Premier Portfolio Highlights



Effective for Plan Year 2025, the Bronze | Silver | Gold portfolio, also referred to as Core, will now be the **Premier** Portfolio.

- Ambetter Health's broadest provider network.
- Available in all Ambetter Health counties.
- Condition specific plan designs (diabetes) will be offered in Tennessee.
- Members can visit any in-network provider, no referrals needed.
- When searching the Ambetter Guide, choose Premier to locate in-network providers.
- Adult vision and adult dental buy-ups are available on many plans.

Members with Diabetes

Premier plans in Tennessee will offer condition specific plans for members with diabetes. The plans may cover medications, supplies and expert support to effectively and affordably manage their health.

- \$0 copays for certain tiers of preferred insulin and select medications to manage:
 - Diabetes
 - High blood pressure
 - High cholesterol
 - Mental health
 - \$0 copays on certain diabetic supplies, e.g., glucose strips, lancets

As with all plans, members will refer to formulary guide for medications and supplies. The \$0 copays are for any day supply.



Tennessee Portfolio (Premier)

Bronze	Silver	Gold
Elite Bronze	Clear Silver	Elite Gold
Everyday Bronze	Enhanced Diabetes Care Silver with \$0 Drug Options	Everyday Gold
Standard Expanded Bronze	Focused Silver	Standard Gold
	Standard Silver	

Clear Silver plan does not have vision and dental offering.

Premier formerly known as Bronze | Silver | Gold portfolio (Core).

2025 Plan Grid



Elite Bronze

\$0 deductible.

Plan Highlights	Price
Deductible	\$0
Max out-of-pocket	\$9,200
Coinsurance	50%
Virtual 24/7 Care*	\$0
PCP Visit	\$50
Specialist Visit	\$115
Lab	\$60
Preferred Generic/Generic RX	\$3/\$35
Preferred RX	\$195
Urgent Care	\$60

INT = Integrated Medical and Rx Deductible | AD = After Deductible | NCAD = No Charge After Deductible

*Virtual care may vary by market.

2025 Plan Grid



Focused Silver

\$0 deductible. Lower copays starting at the 87% AV with \$0 PCP visits and \$0 lab at 94% AV.

	Base	73%AV	87% AV	94% AV
Deductible	\$6,300	\$4,950	\$0	\$0
Max out-of-pocket	\$8,000	\$6,200	\$3,050	\$1,350
Coinsurance	50%	50%	50%	30%
Virtual 24/7 Care*	\$0	\$0	\$0	\$0
PCP Visits	\$40	\$35	\$15	\$0
Specialist Visits	\$85	\$85	\$30	\$15
Lab	\$50	\$40	\$20	\$0
Preferred Generic/Generic Rx	\$3/\$15	\$3/\$15	\$3/\$10	\$0/\$0
Preferred Rx	\$75	\$70	\$40	\$25
Urgent Care	\$60	\$50	\$10	\$10

INT = Integrated Medical and Rx Deductible | AD = After Deductible | NCAD = No Charge After Deductible

*Virtual care may vary by market.

Virtual 24/7 Care



- All Ambetter Health members have access to virtual services through Teladoc Health.
- 24/7 help for non-emergency medical issues through Virtual 24/7 Care.
- Ability to connect with experts regardless of physical location.
- Easy way to get fast care when in outlying or rural areas.
- Avoid long wait times at in-person urgent care clinics or physician offices.



Adult Vision Plan Offerings

Service	In-network Providers Only
Exams and Eyewear	
Routine eye exam: 1 visit per year.	\$0 copay
Eyeglass frames	Covered up to \$130
Eyeglass lenses	
Single	Covered 100%
Bifocal	Covered 100%
Trifocal	Covered 100%
Lenticular	Covered 100%
Contact Lenses	
Contact lenses in lieu of glasses	Covered up to \$130
Contact lens fitting	Covered 100%
Specialty lens fitting	Covered up to \$50

- **No waiting period.**
- Available as an add-on for designated plans.
- Members 19 years of age and older.
- Glasses or contacts are covered, not both, per member.
- Coverage applies to in-network providers only.
- No coverage with out-of-network providers.



Adult Dental Plan Offerings

Service	In-network Providers
Routine Dental: preventative and diagnostic (Class 1)	
Routine oral exam	\$0 copay
Routine cleaning	\$0 copay
X-rays: bite-wings, full-mouth or panoramic	\$0 copay
Basic dental: minor restorative (Class 2)	
Minor restorative, metal and resin-based fillings.	50% coinsurance
Endodontic therapy	50% coinsurance
Periodontics, scaling and root planning, periodontal maintenance.	50% coinsurance
Simple extractions	50% coinsurance
Prosthodontics: relines, rebase, adjustments and repairs	50% coinsurance
Major dental: major restorative (Class 3)	
Crowns and bridges	50% coinsurance
Dentures	50% coinsurance
More complex extractions and surgical services	50% coinsurance

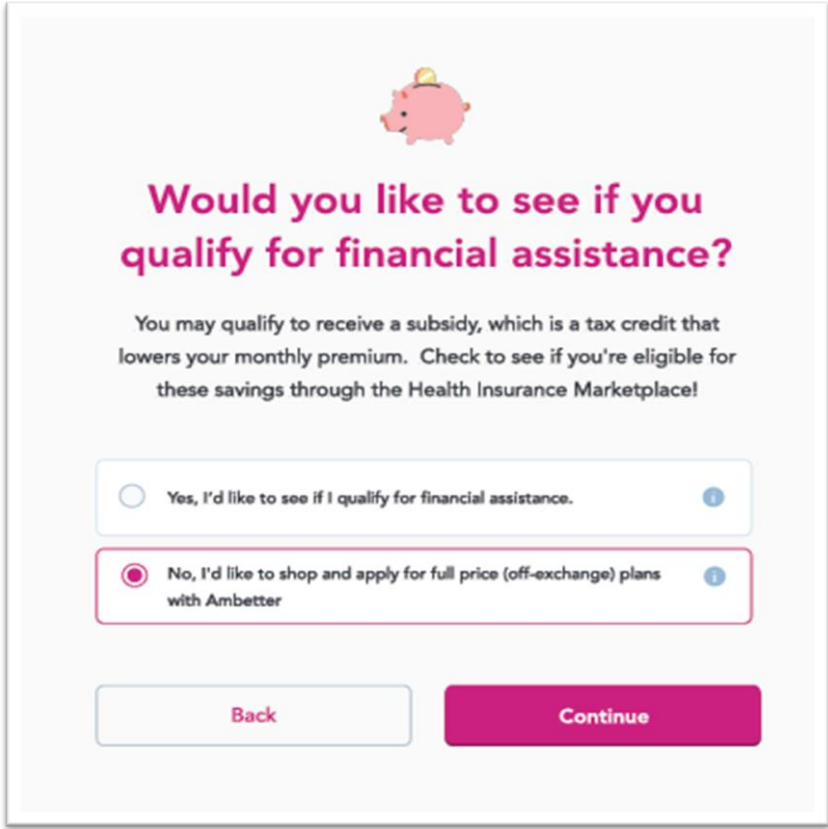
- **No waiting period**
- Available as an add-on for designated plans.
- Members 19 years of age and older.
- Maximum benefit: \$1000/calendar year.
- Dental out-of-pocket maximum does not apply toward any other maximums.
- Coverage applies to in-network providers only.
- No coverage with out-of-network providers.



Off-Exchange Product Offerings



- An alternative for those who do not qualify for subsidies.
- Large nationwide Premier network.*
- Members enrolled in off-exchange plan have reciprocity in all Ambetter Health states except NY and CA.
- Qualified plans with essential health benefits.
- Enroll through EDE powered by Health Sherpa at enroll.ambetterhealth.com.

A screenshot of a web form titled "Would you like to see if you qualify for financial assistance?". The form includes a piggy bank icon, explanatory text about subsidies, two radio button options, and "Back" and "Continue" buttons. The second option is selected.



Would you like to see if you qualify for financial assistance?

You may qualify to receive a subsidy, which is a tax credit that lowers your monthly premium. Check to see if you're eligible for these savings through the Health Insurance Marketplace!

☐ Yes, I'd like to see if I qualify for financial assistance. ⓘ

☒ No, I'd like to shop and apply for full price (off-exchange) plans with Ambetter ⓘ

[Back](#) [Continue](#)

Ambetter Guide

2025 Ambetter Health Open Enrollment

For agent use only. Not for distribution to prospects or members.



Member Access



- The Ambetter Guide, also known as the Find a Provider (FAP) tool, helps your clients to search for an in-network provider.
- Members can find an in-network provider through their member portal or go directly to guide.ambetterhealth.com.


More



Sign up

Log in

ENGLISH ▾

Ambetter Guide

Find nearby in-network care

Log in for the most accurate results

Logging in helps us find you the most accurate results for your plan.

Log in

Search without logging in

Choose one of these options:

Your home state

Ambetter member ID number

Last 6 digits of your SSN

Don't have a plan?

In the provider profile, members can further explore office and provider details.

State: Florida Network Year: 2024 Provider Network: VALUE

[← Back](#) [Print page](#)

Sorangel Diaz Arias, MD

Pediatrics
Pediatric Associates

Action required to see this provider ⓘ

☒ Part of Pediatric Associates PA (one of the available medical groups for FL Value members)

☒ Accepting new patients ☒ In network [Affiliated Networks](#)

[Search on Google](#) [Website unavailable](#) [Directions](#) [Save](#)

(407) 249-1234

☐ Virtual visits available

Office Details	Provider Details
6447 S Chickasaw Trl, Orlando, FL, 32829-8366 1.3 mi. away	Female
(407) 249-1234	Languages spoken: English, Spanish
Provider email unavailable	Pediatrics Board Certified View Details
Languages spoken: None	Hospital Affiliations: None
Open Weekends: No	Universidad Iberoamericana, Escuela De Medicina 2008 Lincoln Med & Mental Hlth Ctr (Bronx, NY) 2018
Wheelchair accessible	NPI: 1811373533
Age Limitations: 0 yr(s) - 18 yr(s)	
Office Hours: View hours	
Patient Centered Medical Home: No	

See a problem with this data? [Suggest an edit](#)

Formulary and Pharmacy

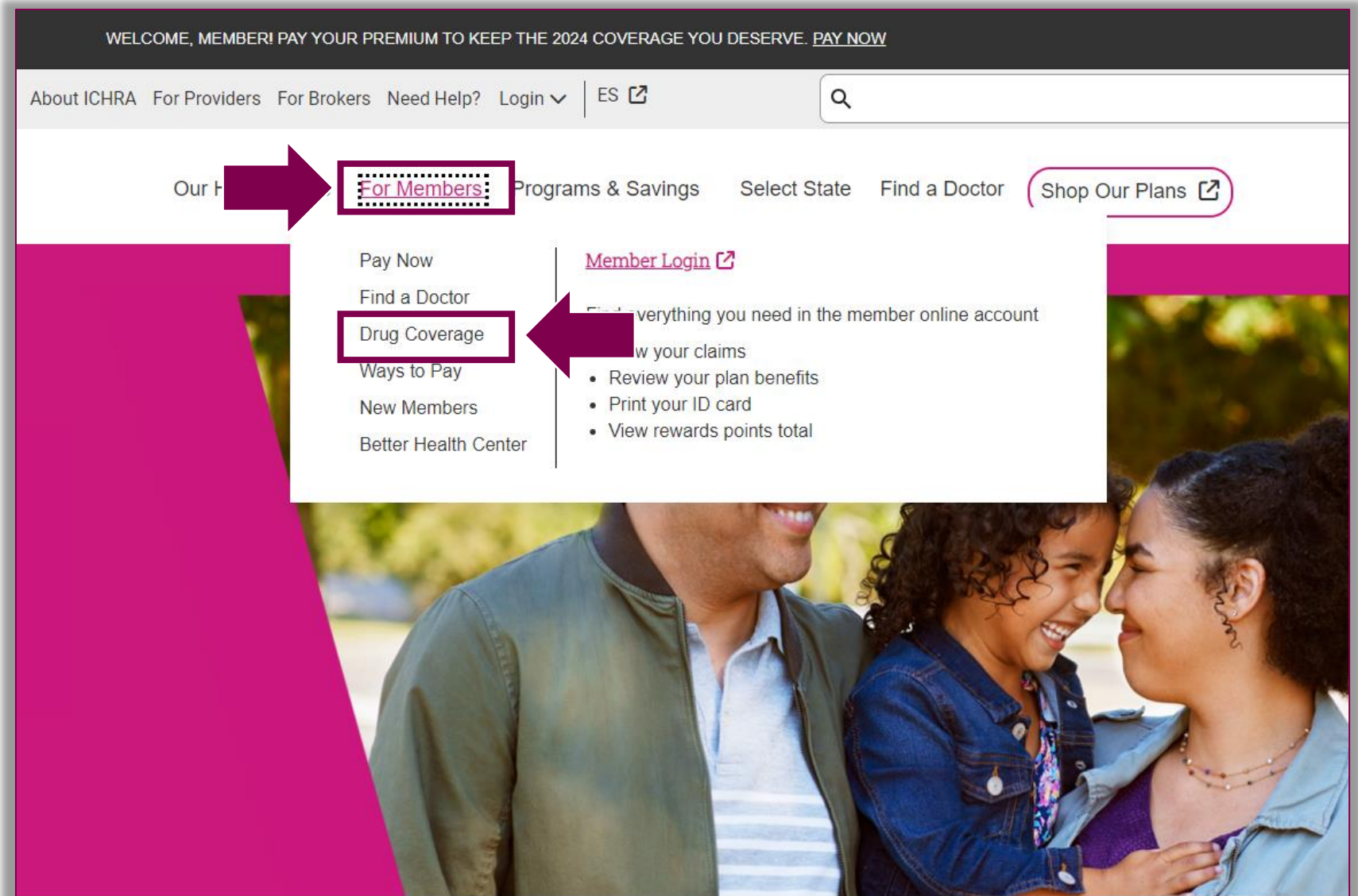
2025 Ambetter Health Open Enrollment



Formulary



To view the
formulary drug list
visit
AmbetterHealth.com
and click For
Members then Drug
Coverage.



Formulary



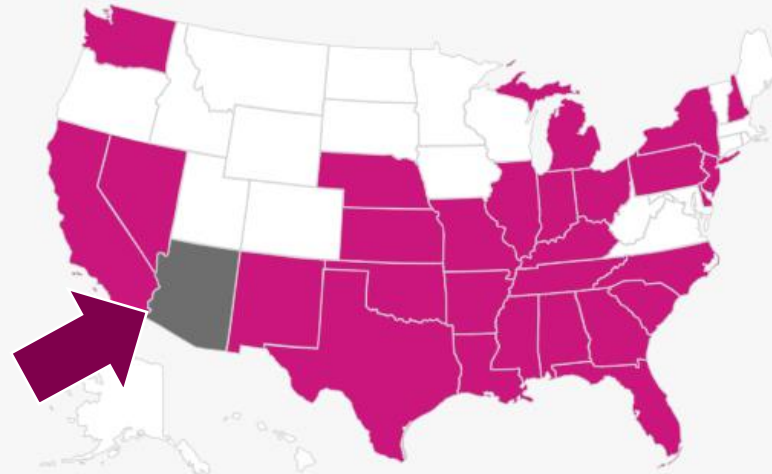
- Next, the member will select their state.
- It's important to remember that not all medications may be covered, and certain medications may require prior authorization.

Pharmacy Program

Ambetter Health's pharmacy program provides the appropriate, high quality, and cost effective drug therapy to all Ambetter Health members. Ambetter Health works with providers and pharmacists to ensure that medications used to treat a variety of conditions and diseases are covered. Ambetter Health covers prescription medications and certain over-the-counter medications when ordered by an Ambetter Health provider.

The Ambetter Health pharmacy program does not cover all medications. Some require Prior Authorization or have limitations on age, dosage, and maximum quantities.

You can view our Preferred Drug lists by selecting your state!



[Alabama](#) 
[Delaware](#) 
[Indiana](#) 
[Michigan](#) 
[Nevada](#) 
[New York](#) 
[Pennsylvania](#) 
[Washington](#) 

[Arkansas](#) 
[Florida](#) 
[Kansas](#) 
[Mississippi](#) 
[New Hampshire](#) 
[North Carolina](#) 
[South Carolina](#) 

[Arizona](#) 
[Georgia](#) 
[Kentucky](#) 
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[California](#) 
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[Nebraska](#) 
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[Oklahoma](#) 
[Texas](#) 

Formulary



- On this screen you will see the links to the Formulary list.
- Click on the appropriate Formulary/Prescription Drug List to initiate the download of the PDF.

[Our Health Plans](#) [Join Ambetter from AZ Complete Health](#) [For Members](#) [For Providers](#) [For Brokers](#)

Pharmacy Resources

We are committed to providing appropriate, high-quality, and cost-effective drug therapy to all Ambetter from Arizona Complete Health members.

- [2024 Formulary/Prescription Drug List - English/Spanish \(PDF\)](#)
- [2024 Formulary/Prescription Drug List - Simplified Chinese \(PDF\)](#)
- [2024 Formulary/Prescription Drug List - Traditional Chinese \(PDF\)](#)
- [2024 Formulary/Prescription Drug List - Vietnamese \(PDF\)](#)
- [2024 Formulary Changes \(PDF\)](#)
- [90-Day Extended Supply Medications \(PDF\)](#)
- [Extended Day Supply Pharmacies are now listed in our Find a Provider tool](#)

Forms

- [Prescription Claim Reimbursement Form - English \(PDF\)](#)
- [Prescription Claim Reimbursement Form - Spanish \(PDF\)](#)
- [Prescription Claim Reimbursement Form - Simplified Chinese \(PDF\)](#)
- [Prescription Claim Reimbursement Form - Traditional Chinese \(PDF\)](#)
- [Prescription Claim Reimbursement Form - Vietnamese \(PDF\)](#)

Save Money and Get Your Prescriptions Delivered to Your Door!

For the purpose of this training, Arizona, 2024 coverage year is chosen.

Formulary



- The drug list is a large PDF document.
- Simply pressing “Control + F” and entering the medication name quickly locates specific medication within the formulary list.

Ctrl + F

Medication name here



Formulary Introduction

FORMULARY

The Ambetter from Arizona Complete Health Formulary is approved by the Food and Drug Administration. The same active ingredients as their brand name counterparts are to be safe and work the same as brand name drugs to treat a condition. Preferred brand name drugs, safe, and cost-effective treatment options, if a generic is available.

Please note, the Formulary is not meant to be a complete list of forms or strengths of a drug may be covered. This document may be added or removed, or additional requirements may be added.

Specific prescription benefit plan designs may not be covered. Please check your benefits for coverage details.

Drug List Key:

Brand name drugs are listed in CAPS and generic drugs are listed in lowercase. Drugs are covered under different copay tiers depending on the drug.

Tier 0 - No copayment for those drugs that are covered under this tier. Contraceptives, vitamin D, folic acid for pregnancy, and products may be covered under this tier.

Tier 1a - Lowest copayment for select drugs that are covered under this tier. Select over-the-counter (OTC) drugs may be covered under this tier.

Tier 1b - Low copayment for those drugs that are covered under this tier. Select over-the-counter (OTC) drugs may be covered under this tier.

Tier 2 - Medium copayment covers brand name drugs to treat the same conditions.

Tier 3 - High copayment covers higher cost drugs that are not on the Prescription Drug List.

Tier 4 - Highest copayment is for "specialty" drugs that require special handling or storage or clinical management. Products that participate in Ambetter's "specialty" or "hemophilia" programs are covered under this tier.

Tier 6 - Coverage for this tier is for oncology drugs that are covered under this tier.

2024 Formulary

Effective January 1, 2024

Ambetter.AZcompletehealth.com

Drug Name	Drug Tier	Requirements/Limits
clonidine	3	QL(0.15 ea daily)
clonidine hcl TABS	1B	QL(8 ea daily)
doxazosin mesylate	1B	
guanfacine hcl	1B	
methyl dopa TABS	1B	QL(6 ea daily)
prazosin hcl CAPS	1B	QL(4 ea daily)
terazosin hcl	1B	
Antihypertensive Combinations		
amlodipine besylate-benazepril hcl	1B	
amlodipine besylate-olmesartan medoxomil	1B	ST
amlodipine besylate-valsartan	1B	QL(1 ea daily)
amlodipine-valsartan-hydrochlorothiazide	3	
atenolol & chlorthalidone	1B	
benazepril & hydrochlorothiazide 12.5 MG-20 MG, 6.25 MG-5 MG	1B	
benazepril & hydrochlorothiazide 12.5 MG-10 MG, 25 MG-20 MG	1B	QL(1 ea daily)
bisoprolol & hydrochlorothiazide	1B	QL(2 ea daily)
candesartan cilexetil-hydrochlorothiazide	1B	
enalapril maleate & hydrochlorothiazide 12.5 G-5 MG	1B	QL(2 ea daily)
enalapril maleate & hydrochlorothiazide 25 G-10 MG	1B	
losartan sodium & hydrochlorothiazide	1B	QL(1 ea daily)
losartan-hydrochlorothiazide	1B	
lisinopril & hydrochlorothiazide	1B	

Effective January 1, 2024

Member Experience

2025 Ambetter Health Open Enrollment

For agent use only. Not for distribution to prospects or members.



Member Support



Across the many Ambetter Health plans are programs and initiatives that promote the well-being of our members.

Start Smart for Your Baby®



24/7 Nurse Advice Line



Coronavirus Resource Center



Care Management



Health Management Programs



My Health Pays[®] and Member Discounts

2025 Ambetter Health Open Enrollment

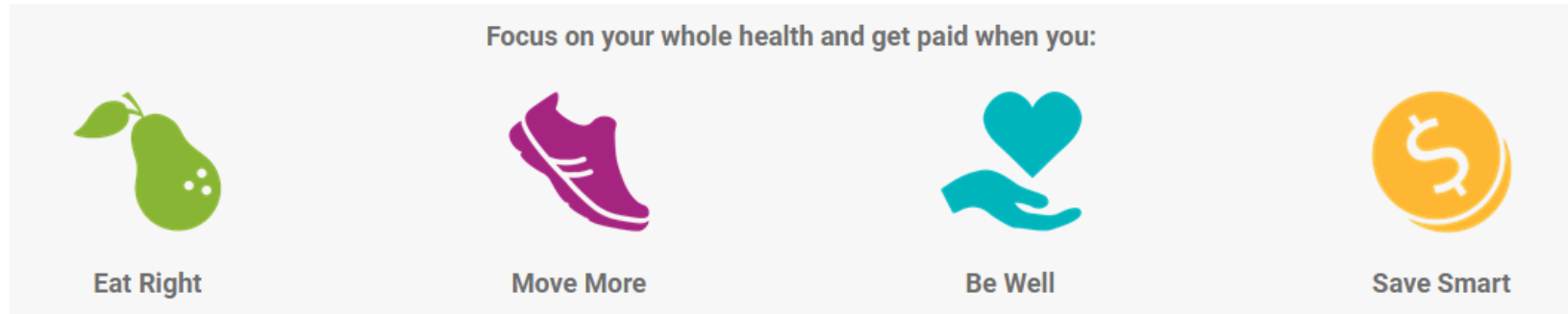


- Members can earn up to \$500 in rewards*!
- Earn points by completing specific health screenings.
 - Clinical Rewards include:
 - Onboarding and Well-being Survey
 - PCP Wellness Exam
 - Comprehensive Diabetes Screenings
 - Quality Measures:
 - Childhood Immunizations (*Children*)
 - Vision Screening (*Children*)
 - Cervical Cancer Screening (*Women*)
 - Breast Cancer Screening (*Women*)
 - Cholesterol Screening (*Men*)
 - Colorectal Cancer Screening (*Men*)
 - Blood Pressure Screening (*Adult*)

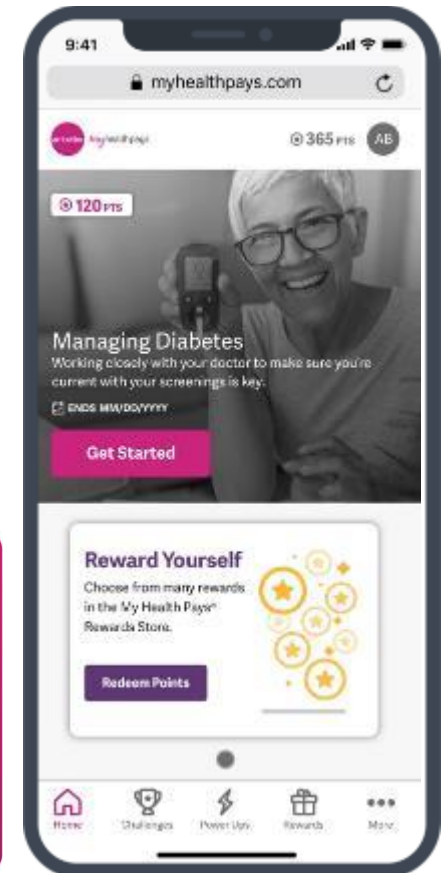


*Restrictions apply. Members must qualify for and complete all activities to receive \$500 or more. Visit Member.AmbetterHealth.com for more details. Funds expire immediately after termination of insurance coverage. Rewards program is subject to change.

- Earn points by participating in fun and easy activities.



- Use points to shop our online rewards store.
- Convert points into dollars to pay premiums and other healthcare-related costs.



My Health Pays® rewards cannot be used for pharmacy copays.
My Health Pays® rewards cannot be used to pay premiums in AZ, NV, and CA

This My Health Pays® Visa® Prepaid card is issued by The Bancorp Bank, N.A., Member FDIC, pursuant to a license from Visa U.S.A. Inc. Card cannot be used everywhere Visa debit cards are accepted. See Cardholder Agreement for complete usage restrictions.

HEALTHCARE-RELATED COSTS:



MONTHLY PREMIUM
PAYMENTS



DOCTOR COPAYS



DEDUCTIBLES



COINSURANCE

MONTHLY BILLS:



UTILITIES

(GAS, WATER AND ELECTRIC)



TELECOMMUNICATIONS

(CELL PHONE)



TRANSPORTATION



CHILDCARE



EDUCATION



RENT

My Health Pays[®] rewards cannot be used for pharmacy copays.
My Health Pays[®] rewards cannot be used to pay premiums in AZ, NV, and CA

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AL, AR, AZ, CA, FL, DE, GA, IA, IL, IN, KS, KY, LA, MI, MO, MS, NC, NE, NH, NJ, NV, OH, OK, PA, SC, TN, TX, WA		
REWARD ACTIVITIES:	POINTS	\$ VALUE
Onboarding	500	\$50
Annual Wellness Exam and Preventive Screenings	Up to 2,000	Up to \$200
Health Management (e.g., diabetes management)	Up to 1,000	Up to \$100
Online Activities	Up to 2,000	Up to \$200
REWARDS CAN BE USED FOR:		
Healthcare-related Costs: Monthly Premium Payments, Doctor Copays**, Deductibles, Coinsurance		
Monthly Bills: Utilities (gas, electric, water), Telecommunications (cell phone bill), Transportation***, Education, Rent, Childcare		
Merchandise		
Purchases at the My Health Pays Online Store		

*Restrictions apply. Members must qualify for and complete all activities to receive \$500 or more. Visit Member.AmbetterHealth.com for more details.

**My Health Pays rewards cannot be used for pharmacy copays.

***Members will only be able to purchase public transportation directly from the agency either in-person or online. Passes cannot be purchased through retail locations such as grocery or convenience stores.

Some restrictions apply depending on your age and will limit your ability to complete certain My Health Pays activities. Members must be 18 years of age or older to complete the online Wellbeing Survey. Members under the age of 18, must have a parent or legal guardian complete the Wellbeing Survey on their behalf. Please contact Member Services with any questions you have regarding completion of the Wellbeing Survey for members under the age of 18.

Funds expire immediately upon termination of insurance coverage. Rewards program is subject to change. My Health Pays rewards and qualifying activities vary by state. Ambetter is committed to helping members achieve their best health.

Rewards for participating in a wellness program are available to all members. If a member thinks they might be unable to meet a standard for a reward under this wellness program, they might qualify for an opportunity to earn the same reward by different means. Contact us and we will work with them (and, if they wish, with their doctor) to find a wellness program with the same reward that is right for them in light of their health status.

My Health Pays[®] Rewards Year-to-Date



- Nearly **500,000** Ambetter Health members have activated their My Health Pays[®] account.
- My Health Pays members have collectively earned over **\$52M** in rewards.
- Members who activate My Health Pays[®] are more likely to renew their coverage with Ambetter Health.

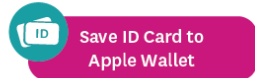
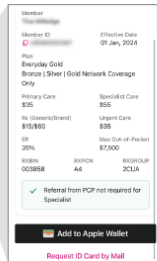
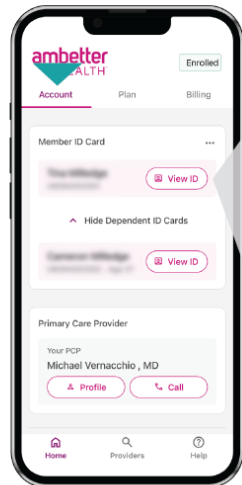


New Mobile App

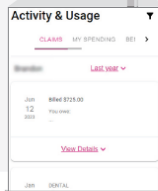
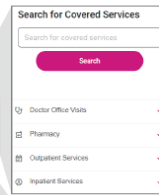
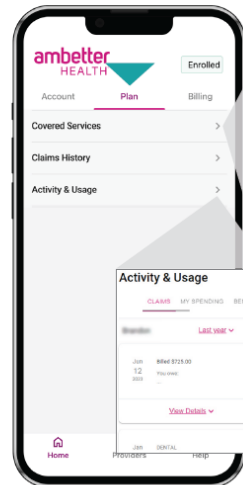


July 2024 Ambetter Health launched a **mobile app** for members! An **easy and secure** way for members to access their health plan information.

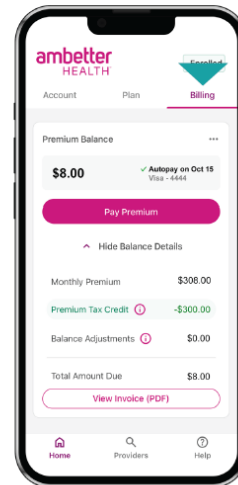
View account details
including their Member ID Card and Primary Care Provider (PCP).



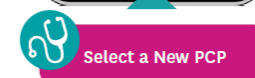
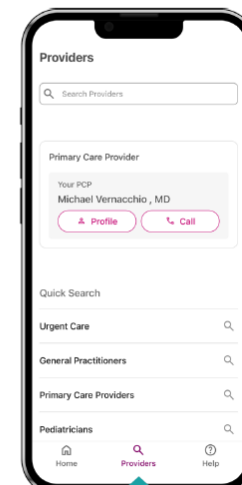
See their plan information
including covered services, claims history and Activity & Usage.



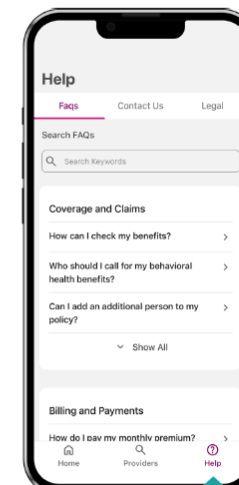
View billing information
including their Premium Balance and Premium Tax Credit.



View their current PCP and search for a specialist from the Quick Search options.



Get help from frequently asked questions and information on how to contact Ambetter Health.



Available for iPhone and Android





Thank you!

jegillespie@centene.com

2025 Plan Grid

Enhanced Diabetes Care Silver

\$0 deductible, lower maximum out of pocket and copays at the 94% AV.

	Base	73%AV	87% AV	94% AV
Deductible	\$5,000	\$4,000	\$750	\$0
Max out-of-pocket	\$8,550	\$7,000	\$3,000	\$1,250
Coinsurance	50%	50%	35%	30%
Virtual 24/7 Care*	\$0	\$0	\$0	\$0
PCP Visits	\$30	\$25	\$10	\$5
Specialist Visits	\$50	\$50	\$25	\$15
Lab	\$30	\$25	\$10	\$5
Preferred Generic/Generic Rx	\$3/\$20	\$3/\$15	\$3/\$10	\$3/\$5
Preferred Rx	\$60	\$60	\$30	\$20
Urgent Care	\$30	\$25	\$10	\$5

INT = Integrated Medical and Rx Deductible | AD = After Deductible | NCAD = No Charge After Deductible

*Virtual care may vary by market.

2025 Plan Grid

Standard Silver

\$0 deductible and \$0 PCP visits at the 94% AV.

	Base	73%AV	87% AV	94% AV
Deductible	\$5,000	\$3,000	\$500	\$0
Max out-of-pocket	\$8,000	\$6,400	\$3,000	\$2,000
Coinsurance	40%	40%	30%	25%
Virtual 24/7 Care*	\$40	\$40	\$20	\$0
PCP Visits	\$40	\$40	\$20	\$0
Specialist Visits	\$80	\$80	\$40	\$10
Lab	40% AD	40% AD	30% AD	25%
Preferred Generic/Generic Rx	\$20/\$20	\$20/\$20	\$10/\$10	\$0/\$0
Preferred Rx	\$40	\$40	\$20	\$15
Urgent Care	\$60	\$60	\$30	\$5

INT = Integrated Medical and Rx Deductible | AD = After Deductible | NCAD = No Charge After Deductible

*Virtual care may vary by market.

2025 Plan Grid

Elite Gold

\$0 deductible with low-cost PCP visit and generic prescriptions copays.

Plan Highlights	Price
Deductible	\$0
Max out-of-pocket	\$5,500
Coinsurance	30%
Virtual 24/7 Care*	\$0 Copay
PCP Visit	\$5 Copay
Specialist Visit	\$60 Copay
Lab	\$40
Preferred Generic/Generic RX	\$3/\$15 Copay
Preferred RX	\$50
Urgent Care	\$35

INT = Integrated Medical and Rx Deductible | AD = After Deductible | NCAD = No Charge After Deductible

*Virtual care may vary by market.

Everyday Gold

Plan copays.

Plan Highlights	Price
Deductible	\$750
Max out-of-pocket	\$7,000
Coinsurance	35%
Virtual 24/7 Care*	\$0 Copay
PCP Visit	\$35 Copay
Specialist Visit	\$55 Copay
Lab	\$35
Preferred Generic/Generic Rx	\$3/\$15 Copay
Preferred Rx	\$60
Urgent Care	\$35

INT = Integrated Medical and Rx Deductible | AD = After Deductible | NCAD = No Charge After Deductible

*Virtual care may vary by market.