2025 Small Group Plans

St Luke's [™]		BRONZE			
+ H	ealth Plan	In-network	Out-of- network		
Daduatible	Individual	\$7,000	\$14,000		
Deductible	Family	\$14,000	\$28,000		
Annual out-			\$18,400		
of-pocket maximum	Family	\$18,400	\$36,800		
Prev	ventive care services	\$0	60% after deductible		
Prin	nary care physicians	\$0			
Profess	ional maternity services	\$0			
Outpatient	professional mental health	\$0			
M	ledical eye exams	\$0			
Pro	ofessional oncology	\$140			
	s On-Demand virtual care her telehealth services	\$0	Out-of-network services not available		
	Urgent care	\$140	60% after deductible		
Е	mergency rooms	50% after deductible			
Ar	mbulatory services	50% after deductible			
	Hospital services	50% after deductible			
Sp	ecialist office visit	\$140			
Diagnos	tic X-ray and lab services	\$150	60% after deductible		
Physical, spe	ech and occupational therapy	\$40			
(Chiropractic care	\$40			
Prescription drugs (30-day supply)	Affordable Care Act (ACA) preventive drugs	\$0 per drug			
	Tier1 (preferred generic)	\$30 per drug			
	Tier 2 (non-preferred generic)	\$40 p	er drug		
	Tier 3 (preferred brand)	35% after	deductible		
	Tier 4 (non-preferred brand)	50% after deductible			
	Tier 5 (preferred specialty)	40% after	deductible		

SILVER 3300		SILVER 5700		SILVER HDHP		SILVER 5000/500RX		
In-network	Out-of- network	In-network	Out-of- network	In-network	Out-of- network	In-network	Out-of- network	
\$3,300	\$6,600	\$5,700	\$11,400	\$4,000	\$8,000	\$5,000 Medical/ \$500 Rx	\$10,000	
\$6,600	\$13,200	\$11,400	\$22,800	\$8,000	\$16,000	\$10,000 Medical/ \$1,000 Rx	\$20,000	
\$9,200	\$18,400	\$9,200	\$18,400	\$6,500	\$13,000	\$9,200	\$18,400	
\$18,400	\$36,800	\$18,400	\$36,800	\$13,000	\$26,000	\$18,400	\$36,800	
\$0		\$0		\$0	60% after deductible	\$0	60% after deductible	
\$0		\$0		\$0 after deductible		\$0		
\$0	60% after deductible	\$0	60% after	\$0 after deductible		\$0		
\$0		\$0	deductible	\$0 after deductible		\$0		
\$0		\$0		\$0 after deductible		\$0		
\$0		\$0		\$0 after deductible		\$0		
\$0	Out-of-network services not available	\$0	Out-of-network services not available	\$0 after deductible	Out-of-network services not available	\$0	Out-of-network services not available	
\$40	60% after deductible	\$40	60% after deductible	\$0 after deductible	60% after deductible	\$40	60% after deductible	
40% after	40% after deductible		40% after deductible		40% after deductible		40% after deductible	
40% after	deductible	40% after deductible		40% after deductible		40% after deductible		
40% after deductible	60% after deductible	40% after deductible		40% after deductible	60% after deductible	40% after deductible	60% after deductible	
\$40		\$40	60% after deductible	\$0 after deductible		\$40		
\$60		\$80		\$0 after deductible		\$80		
\$30		\$30		\$0 after deductible		\$30		
\$40		\$40		40% after deductible		\$40		
\$0 pe	\$0 per drug		\$0 per drug		\$0 per drug		\$0 per drug	
\$20 per drug		\$0 per drug		\$0 after deductible		\$30 per drug		
\$30 per drug		\$10 per drug		\$10 after deductible		\$45 per drug		
35% after deductible		35% after deductible		35% after deductible		35% after Rx deductible		
50% after deductible		50% after deductible		50% after deductible		50% after Rx deductible		
40% after deductible		40% after deductible		40% after deductible		40% after Rx deductible		

GC	OLD	GOLD 1000/200RX		
In-network	Out-of- network	In-network	Out-of- network	
\$1,800	\$3,600	\$1,000 Medical/ \$200 Rx	\$2,000	
\$3,600	\$7,200	\$2,000 Medical/ \$400 Rx	\$4,000	
\$7,750	\$15,500	\$8,500	\$17,000	
\$15,500	\$31,000	\$17,000	\$34,000	
\$0		\$0		
\$0		\$0	60% after deductible	
\$0	60% after	\$0		
\$0	deductible	\$0		
\$0		\$0		
\$0		\$0		
\$0	Out-of-network services not available	\$0	Out-of-network services not available	
\$30	60% after deductible	\$30	60% after deductible	
10% after	deductible	10% after deductible		
10% after	deductible	10% after deductible		
10% after deductible		10% after deductible		
\$30		\$30		
\$40	60% after deductible	\$40	60% after deductible	
\$25		\$25		
\$40		\$40		
\$0 pe	er drug	\$0 per drug		
\$0 pe	r drug	\$20 per drug		
\$10 pe	er drug	\$35 per drug		
35% after	deductible	\$50 after Rx deductible		
50% after	deductible	\$150 after Rx deductible		
40% after	deductible	\$100 after Rx deductible		