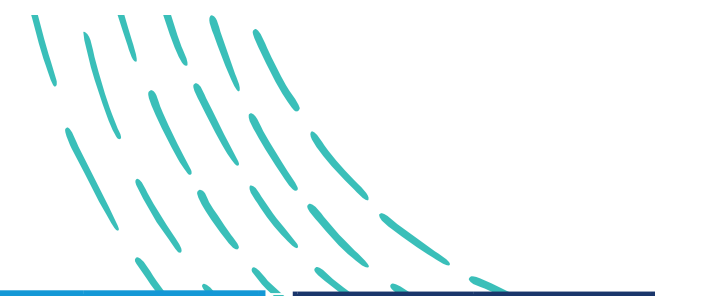


Individual Plans



		BRONZE		BRONZE HDHP		SILVER		SILVER - 5500*		SILVER - 1000*		SILVER - 250*		GOLD	
		In Network	Out of Network	In Network	Out of Network	In Network	Out of Network	In Network	Out of Network	In Network	Out of Network	In Network	Out of Network	In Network	Out of Network
Preventive care services		\$0		\$0		\$0		\$0		\$0		\$0		\$0	
Primary care physicians		\$0	60% after deductible	\$0 after deductible	60% after deductible	\$0	60% after deductible	\$0	60% after deductible	\$0	60% after deductible	\$0	60% after deductible	\$0	60% after deductible
Professional maternity services		\$0		\$0 after deductible		\$0		\$0		\$0		\$0		\$0	
Outpatient professional mental health		\$0		\$0 after deductible		\$0		\$0		\$0		\$0		\$0	
Deductible	Individual	\$7,750	\$18,900	\$7,200	\$18,900	\$5,700	\$18,900	\$5,500	\$18,900	\$1,000	\$18,900	\$250	\$18,900	\$1,800	\$18,900
	Family	\$15,500	\$37,800	\$14,400	\$37,800	\$11,400	\$37,800	\$11,000	\$37,800	\$2,000	\$37,800	\$500	\$37,800	\$3,600	\$37,800
Annual out-of-pocket maximum	Individual	\$9,450	\$94,500	\$7,200	\$94,500	\$9,450	\$94,500	\$7,550	\$47,250	\$3,150	\$47,250	\$900	\$47,250	\$7,750	\$94,500
	Family	\$18,900	\$189,000	\$14,400	\$189,000	\$18,900	\$189,000	\$15,100	\$94,500	\$6,300	\$94,500	\$1,800	\$94,500	\$15,500	\$189,000
Prescription drugs (30-day supply)		Affordable Care Act (ACA) preventive drugs		\$0		\$0		\$0		\$0		\$0		\$0	
		Tier 1 (Preferred Generic)		\$25 per drug		\$0 after deductible		\$0 per drug		\$0 per drug		\$0 per drug		\$0 per drug	
		Tier 2 (Non-Preferred Generic)		\$35 per drug		\$0 after deductible		\$10 per drug		\$10 per drug		\$10 per drug		\$10 per drug	
		Tier 3 (Preferred Brand)		35% after deductible		\$0 after deductible		35% after deductible		35% after deductible		25% after deductible		15% after deductible	
		Tier 4 (Non-Preferred Brand)		50% after deductible		\$0 after deductible		50% after deductible		50% after deductible		40% after deductible		30% after deductible	
		Tier 5 (Preferred Specialty)		40% after deductible		\$0 after deductible		40% after deductible		40% after deductible		30% after deductible		20% after deductible	
Emergency rooms		\$350 after deductible		\$0 after deductible		\$200 after deductible		\$200 after deductible		\$50 after deductible		\$50 after deductible		\$100 after deductible	
Urgent care		\$140	60% after deductible	\$0 after deductible	60% after deductible	\$40	60% after deductible	\$40	60% after deductible	\$20	60% after deductible	\$10	60% after deductible	\$30	60% after deductible
St. Luke's On-Demand virtual care		\$0	Out-of-network services not available	\$0	Out-of-network services not available	\$0	Out-of-network services not available	\$0	Out-of-network services not available	\$0	Out-of-network services not available	\$0	Out-of-network services not available	\$0	Out-of-network services not available
Hospital services		50% after deductible		\$0 after deductible		40% after deductible		40% after deductible		20% after deductible		10% after deductible		10% after deductible	
Diagnostic X-Ray and lab services		\$150		\$0 after deductible		\$80		\$80		\$30		\$20		\$40	
Specialists office visit		\$140	60% after deductible	\$0 after deductible	60% after deductible	\$40	60% after deductible	\$40	60% after deductible	\$20	60% after deductible	\$10	60% after deductible	\$30	60% after deductible
Physical, speech and occupational therapy		\$40		\$0 after deductible		\$30		\$30		\$20		\$10		\$25	
Chiropractic care		\$40		\$0 after deductible		\$40		\$40		\$40		\$40		\$40	

*Cost Share Reduction (CSR) plan. Not all individuals and families are eligible to purchase.