

Note: All benefits are listed below as "member pays."

	<b>2020 Anthem HealthKeepers Bronze OAPOS 6200/0%/7850</b>	<b>2020 Anthem HealthKeepers Silver OAPOS 4000/20%/7350</b>	<b>2020 Anthem HealthKeepers Gold OAPOS 2000/20%/4000</b>
<b>In-network</b>			
Deductible and Out-of-Pocket Accumulation	Embedded	Embedded	Embedded
Deductible Individual	\$6,200	\$4,000	\$2,000
Deductible Family	\$12,400	\$8,000	\$4,000
Out-of-pocket maximum - individual	\$7,850	\$7,350	\$4,000
Out-of-pocket maximum - family	\$15,700	\$14,700	\$8,000
Coinsurance	0%	20%	20%
Office Visit (PCP) Copay	\$35 copay per visit for the first 3 visits, then deductible and 0%	\$40 copay	\$30 copay
Office Visit (specialist) Copay	\$35 copay per visit for the first 3 visits, then deductible and 0%	\$60 copay	\$50 copay
Enhanced Personal Health Care	N/A	\$35 copay	\$25 copay
Retail Health Clinic Copay	\$35 copay per visit for the first 3 visits, then deductible and 0%	\$40 copay	\$30 copay
Urgent Care Copay	Deductible, then 0% coinsurance	\$60 copay	\$50 copay
Emergency Room Copay - facility	Deductible, then \$300 copay	Deductible, then \$350 copay	Deductible, then \$300 copay
Inpatient - facility	Deductible, then 0% coinsurance	Deductible, then 20% coinsurance	Deductible, then 20% coinsurance
Outpatient surgery - facility	Deductible, then 0% coinsurance	Deductible, then 20% coinsurance	Deductible, then 20% coinsurance

<b>Out-of-network</b>			
Deductible (individual/family)	\$15,500 / \$31,000	\$10,000 / \$20,000	\$5,000 / \$10,000
Out-of-pocket maximum (individual/family)	\$19,625 / \$39,250	\$18,375 / \$36,750	\$10,000 / \$20,000
Coinsurance	30%	50%	50%
<b>Pharmacy</b>			
Deductible	Tier 1: No deductible Tiers 2, 3, 4: \$500 Combined	Tier 1: No deductible Tiers 2, 3, 4: \$250 Combined	Tiers 1, 2, 3, 4: No deductible
Tier 1 - Retail	\$15	\$15	\$10
Tier 2 - Retail	\$45	\$45	\$40
Tier 3 - Retail	25% coinsurance (up to \$200 per script)	25% coinsurance (up to \$200 per script)	25% coinsurance (up to \$200 per script)
Tier 4 - Retail	25% coinsurance (up to \$400 per script)	25% coinsurance (up to \$400 per script)	25% coinsurance (up to \$400 per script)
Tier 1 - Home Delivery	\$38	\$38	\$25
Tier 2 - Home Delivery	\$135	\$135	\$120
Tier 3 - Home Delivery	25% coinsurance (up to \$600 per script)	25% coinsurance (up to \$600 per script)	25% coinsurance (up to \$600 per script)
Tier 4 - Home Delivery	25% coinsurance (up to \$400 per script)	25% coinsurance (up to \$400 per script)	25% coinsurance (up to \$400 per script)