

ZERO 80 2021

Average monthly premiums for a 30 year old	<u>Remote</u> Direct primary care <u>In-Person</u> Direct primary care	\$304.20 \$337.50
	IN-NETWORK	OUT-OF-NETWORK
Calendar year medical deductible	\$0 Individual \$0 Family	
Calendar year out of pocket maximum	\$7,000 Individual \$14,000 Family	N/A N/A
DUTPATIENT SERVICES		
Selected direct primary care type visit	\$0 copay	N/A
Non-direct primary care PCP	\$50 copay	Not covered
Specialist office visit	\$50 copay	Not covered
Laboratory/X-Ray services	\$50 copay	Not covered
CT/PET/MRI/MRA/Nuclear medicine	\$50 copay	Not covered
Preventative care / screening / immunization	\$0 copay	Not covered
Surgical procedures in physician's office	\$500 copay	Not covered
Outpatient facility (e.g. ambulatory surgery center)	\$1,000 copay	Not covered
Childbirth / delivery / professional / facility fees	\$1,000 copay	Not covered
Outpatient mental health treatment	\$50 copay	Not covered
Rehabilitation services, speech, occupational & physical therapy	\$50 copay	Not covered
NPATIENT SERVICES		
Hospital confinement	\$1,000 copay	Not covered
RESCRIPTION DRUGS (30-DAY SUPPLY)		
Generic	\$5 copay	Not covered
Preferred brand	\$25 copay	Not covered
Non-preferred brand	\$200 copay	Not covered
Specialty	50% after deductible	Not covered
Specialty pharmaceutical deductible	\$5,500 Individual \$11,000 Family	
MERGENCY CARE SERVICES		
Emergency room visit	\$500 copay	\$1,000 copay
Emergency medical transportation	\$1,000 copay	\$1,000 copay
Urgent care visit	\$100 copay	\$200 copay