

Advantage Plus (HMO) & Preferred Advantage (HMO) Plan Comparison Summary

BENEFIT	UNIT	ADVANTAGE PLUS (HMO)	PREFERRED ADVANTAGE (HMO)
Premium		\$34	\$96
PCP Visit	Per visit	\$10	\$10
Specialty Visit	Per Visit	\$40	\$25
Urgent Care	Per Visit	\$20	\$20
Telehealth	Per Visit	\$15	\$15
Preventive Services	Per Visit	\$O	\$0
Inpatient Hospital	Per Admission	\$250/day (Days 1-5) \$1,250 maximum	\$300/admission \$100/day (Days 6-10) \$800 maximum
Outpatient Procedures in a Hospital	Per Visit	\$300	\$300
Emergency Room Visit (waived if admitted)	Per Visit	\$120	\$120
Diagnostic Imaging including MRI, PET and CT Scan	Per Visit	\$100	\$100
Retail Pharmacy (Prior to reaching \$4,020 in total yearly drug costs)	Tier 1 Tier 2 Tier 3 Tier 4 Tier 5	\$3 \$7 \$45 \$95 30%	\$3 \$7 \$45 \$95 30%
Coverage Gap (After your yearly drug costs reach \$4,020)	Tier 1 Tier 2 Tier 3 Tier 4 Tier 5	\$3 \$7 25% 25% 25%	\$3 \$7 25% 25% 25%
Catastrophic Coverage (After your yearly out- of-pocket drug costs reach \$6,350)		\$3.60 or 5% Generic \$8.95 or 5% Brand	\$3.60 or 5% Generic \$8.95 or 5% Brand
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