



	Platinum \$0 Option 1	Platinum \$0 Option 2	Gold \$0	Gold \$1,000	Gold \$1,250	Gold \$2,000
<b>Premium (Q1 Circle)</b>						
Individual	\$954.59	\$984.57	\$846.08	\$806.12	\$766.16	\$768.58
Individual + Spouse	\$1,909.18	\$1,969.14	\$1,692.15	\$1,612.24	\$1,532.32	\$1,537.16
Individual + Child(ren)	\$1,622.80	\$1,673.77	\$1,438.33	\$1,370.40	\$1,302.47	\$1,306.59
Family	\$2,720.58	\$2,806.02	\$2,411.32	\$2,297.44	\$2,183.56	\$2,190.45
<b>Premium (Q1 Circle Plus)</b>						
Individual	\$1,067.32	\$1,094.44	\$955.45	\$911.53	\$872.83	\$875.50
Individual + Spouse	\$2,134.63	\$2,188.89	\$1,910.89	\$1,823.05	\$1,745.66	\$1,750.99
Individual + Child(ren)	\$1,814.44	\$1,860.55	\$1,624.26	\$1,549.59	\$1,483.81	\$1,488.34
Family	\$3,041.85	\$3,119.17	\$2,723.02	\$2,597.85	\$2,487.57	\$2,495.16
<b>The Basics</b>						
Deductible (Individual / Family)	\$0 / \$0	\$0 / \$0	\$0 / \$0	\$1,000 / \$2,000	\$1,250 / \$2,500	\$2,000 / \$4,000
Out-of-Pocket Max (Individual / Family)	\$2,400 / \$4,800	\$2,000 / \$4,000	\$8,150 / \$16,300	\$4,000 / \$8,000	\$5,000 / \$10,000	\$5,000 / \$10,000
RX Drug Deductible	N/A	N/A	\$100 / \$200	\$100 / \$200	\$100 / \$200	\$150 / \$300
HSA compatible?	No	No	No	No	No	No
24/7 Doctor on Call	Free	Free	Free	Free	Free	Free
Up to \$100/year in step tracking rewards	✓	✓	✓	✓	✓	✓
Free preventive care	✓	✓	✓	✓	✓	✓
Dedicated Concierge	✓	✓	✓	✓	✓	✓
<b>Prices for Benefits</b>						
Oscar Center	Free	Free	Free	Free	Free	Free
Primary Care / OBGYN visits	\$10	\$5	\$20	\$25	\$40	\$25
Specialist visits	\$25	\$20	\$40	\$50	\$70	\$50
Mental health office visits	\$10	\$5	\$20	\$25	\$40	\$25
Labs	\$15	\$20	\$40	\$50	\$70	\$50
Emergency Room	\$500	\$250	\$650	10% after ded	20% after ded	\$250
Urgent Care	\$75	\$25	\$75	\$75	\$90	\$75
MRIs & Advanced Imaging	\$100	\$50	\$140	\$200	\$200	\$200
Xrays & Diagnostic Imaging	\$50	\$20	\$40	\$100	\$100	\$100
Outpatient Facility / Inpatient Facility	\$100 / \$500	\$100 / \$500	\$250 / \$500 (5 day max)	\$500 after ded / 10% after ded	\$500 after ded / 20% after ded	\$500 after ded / 20% after ded
Prescription drugs (Tier 1 / 2 / 3 )	\$10 / \$30 / \$75	\$3 / \$10 / \$50	\$10 / \$35 after ded / \$100 after ded	\$15 / \$50 after ded / \$100 after ded	\$10 / \$50 after ded / \$100 after ded	\$10 / \$50 after ded / \$100 after ded

<sup>1</sup> This is a contracted rate and is subject to change. Once the deductible is met, Doctor on Call services will be covered in full



	Silver \$0	Silver \$3,000 Option 1	Silver \$4,500	Bronze \$4,500	Bronze \$8,150	Silver \$3,000 HSA Option 2	Bronze \$6,750 HSA
<b>Premium (Q1 Circle)</b>							
Individual	\$744.90	\$680.31	\$635.93	\$556.22	\$531.86	\$625.16	\$567.89
Individual + Spouse	\$1,489.80	\$1,360.62	\$1,271.86	\$1,112.44	\$1,063.71	\$1,250.33	\$1,135.79
Individual + Child(ren)	\$1,266.33	\$1,156.53	\$1,081.08	\$945.58	\$904.15	\$1,062.78	\$965.42
Family	\$2,122.97	\$1,938.89	\$1,812.40	\$1,585.23	\$1,515.79	\$1,781.72	\$1,618.50
<b>Premium (Q1 Circle Plus)</b>							
Individual	\$851.13	\$782.20	\$738.69	\$645.02	\$617.88	\$721.06	\$656.81
Individual + Spouse	\$1,702.26	\$1,564.40	\$1,477.38	\$1,290.04	\$1,235.76	\$1,442.12	\$1,313.63
Individual + Child(ren)	\$1,446.92	\$1,329.74	\$1,255.77	\$1,096.54	\$1,050.39	\$1,225.80	\$1,116.58
Family	\$2,425.72	\$2,229.27	\$2,105.26	\$1,838.31	\$1,760.95	\$2,055.01	\$1,871.92
<b>The Basics</b>							
Deductible (Individual / Family)	\$0 / \$0	\$3,000 / \$6,000	\$4,500 / \$9,000	\$4,500 / \$9,000	\$8,150 / \$16,300	\$3,000 / \$6,000	\$6,750 / \$13,500
Out-of-Pocket Max (Individual / Family)	\$8,150 / \$16,300	\$8,150 / \$16,300	\$8,150 / \$16,300	\$8,150 / \$16,300	\$8,150 / \$16,300	\$6,750 / \$13,500	\$6,750 / \$13,500
RX Drug Deductible	\$100 / \$200	\$100 / \$200	N/A	N/A	N/A	N/A	N/A
HSA compatible?	No	No	No	No	No	Yes	Yes
24/7 Doctor on Call	Free	Free	Free	Free	Free	\$15 <sup>1</sup>	\$15 <sup>1</sup>
Up to \$100/year in step tracking rewards	✓	✓	✓	✓	✓	✓	✓
Free preventive care	✓	✓	✓	✓	✓	✓	✓
Dedicated Concierge	✓	✓	✓	✓	✓	✓	✓
<b>Prices for Benefits</b>							
Oscar Center	Free	Free	Free	Free	Free	Free	Free
Primary Care / OBGYN visits	\$50	\$40	\$40	50% after ded	Free after ded	30% after ded	Free after ded
Specialist visits	\$80	\$75	\$75	50% after ded	Free after ded	30% after ded	Free after ded
Mental health office visits	\$50	\$40	\$40	50% after ded	Free after ded	30% after ded	Free after ded
Labs	\$80	\$75	\$75	50% after ded	Free after ded	30% after ded	Free after ded
Emergency Room	\$750	30% after ded	50% after ded	50% after ded	Free after ded	30% after ded	Free after ded
Urgent Care	\$90	\$85	\$90	\$75	Free after ded	30% after ded	Free after ded
MRIs & Advanced Imaging	\$180	\$200	\$200	50% after ded	Free after ded	30% after ded	Free after ded
Xrays & Diagnostic Imaging	\$80	\$100	\$100	50% after ded	Free after ded	30% after ded	Free after ded
Outpatient Facility / Inpatient Facility	\$500 / \$1,500	\$500 after ded / 30% after ded	\$500 after ded / 50% after ded	50% after ded	Free after ded	30% after ded	Free after ded
Prescription drugs (Tier 1 / 2 / 3)	\$20 / \$60 after ded / 50% after ded	\$20 / \$50 after ded / \$100 after ded	\$10 / 50% after ded / 50% after ded	\$20 after ded / \$50 after ded / \$100 after ded	Free after ded	30% after ded	Free after ded

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