

# COMMUNITY ULTRA SELECT SILVER PLAN 20

11718TX0140020

Higher Premiums

Low-to-Moderate Cost-Sharing

## DETAILS

- PCP, specialists, urgent care, and generic drugs are not subject to deductible.
- Telehealth services available.
- Referrals not required to see specialists.
- Preventive care is available at no cost.
- **Only available to Harris County residents.**
- Out-of-network services are not covered under this plan.
- Prior Authorization/Step Therapy requirements apply to some medical and pharmacy benefits.
- Ultra Select Plans offer a smaller network of high-quality Providers, which allows us to pass the savings to the consumer in the form of lower premiums and out-of-pocket costs. **Ultra Select Plan Members receive all their care from Providers in the HCA Hospitals, Harris Health, AD Hospital East, and Oakbend Hospital systems, as well as their affiliated physicians' groups.**

Benefits	Cost Sharing Levels
Deductible (individual/family)	\$5,000 / \$10,000
Maximum Out-of-Pocket Costs (individual/family)	\$8,000 / \$16,000
MEDICAL	
PCP Office Visit	*\$40
Specialist Office Visit	*\$80
Outpatient Facility	40%
Outpatient Surgery	40%
Urgent Care Services	*\$60
Ambulance Services	\$80
Emergency Room Services	40%
Inpatient Hospital Care	40%
Inpatient Skilled Nursing Facility	40%
Outpatient Mental/Behavioral Substance Abuse	*\$40
Inpatient Mental/Behavioral Substance Abuse	40%
Outpatient Rehabilitation	*\$40
Medical Imaging (CT/PET Scans, MRIs)	40%
Routine Lab/X-Ray/Diagnostic Imaging	40%
PRESCRIPTION DRUGS	
Prescription Drug Deductible (individual/family) (90-day mail order supply available at 2.5 times copay)	Combined with Medical Deductible
Generic	*\$20
Preferred Brand	*\$40
Non-Preferred Brand	\$80
Specialty High-Cost Drugs	\$350

\*Services are exempt from deductible where indicated (PCP/Urgent Care/Generic Rx).

For Deductible Plans: All coinsurance/copays apply after annual deductible has been met unless otherwise indicated.