# Oscar plan overview.

#### Every Oscar plan includes all these great benefits



Dedicated Concierge service for members and employers



24/7 Doctor on Call at the push of a button



Essential health

benefits

Step Rewards program to earn Amazon® Gift Cards



Easy-to-use admin tool

Free preventive care



No referrals needed for specialists



Curated network of hospitals and first-rate physicians

## Simple plans are our signature plans.



**Great for:** people with routine care needs who hate complexity or uncertain fees.

They have **lower premiums** and provide generous **predeductible copays** for routine care such as primary care visits, speciality visits, and labs. With Simple plans, the deductible equals the out-of-pocket max, which means there's no complicated cost sharing after members meet their deductible. Plus, all Simple plans have free access to the Oscar Center, our members-only facility in downtown Brooklyn.

- Great pre-deductible copays
- ✓ Free generic drugs
- Lower premiums
- Free visits to the Oscar Center

### Market plans mirror traditional plan design.

**Great for:** people who have ongoing care needs or require specific drug coverage.

They have **lower deductibles** and, while premiums are higher, they provide **better brand and specialty drug coverage**. Members pay for most services until they hit their deductible. Then, members just pay their cost share until they reach their out-of-pocket max.

- Traditional cost sharing
- ✓ Great Rx coverage
- ✓ Lower deductibles



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#### What members pay for certain benefits can get tricky. We've highlighted the most common scenarios below.

Check the plan's Summary of Benefits & Coverage (SBC) document for more details.

	Simple				Market			
	Bronze	Silver	Gold	Platinum	Bronze	Silver	Gold	Platinum
The Basics								
Free 24/7 calls with doctors	×	✓	<ul> <li>Image: A second s</li></ul>	<ul> <li>Image: A set of the set of the</li></ul>	✓	×	×	<ul> <li>Image: A set of the set of the</li></ul>
Up to \$240/year in step tracking rewards	×	×	×	×	×	×	×	×
Free preventive care	<ul> <li>Image: A second s</li></ul>	×	<ul> <li>Image: A second s</li></ul>	<ul> <li>Image: A second s</li></ul>	×	×	×	×
Individual Deductible*	\$7,150	\$7,150	\$3,000	\$1,500	\$4,000	\$2,000	\$600	\$0
Individual Out-of-Pocket Max*	\$7,150	\$7,150	\$3,000	\$1,500	\$7,150	\$6,750	\$4,000	\$2,000
Prices before you meet your deductible								
Primary Care visits	Negotiated Rate	\$10	\$10	\$10	Negotiated Rate	Negotiated Rate	Negotiated Rate	\$15
Specialist visits	Negotiated Rate	\$50	\$50	\$50	Negotiated Rate	Negotiated Rate	Negotiated Rate	\$35
Mental Health visits	Negotiated Rate	\$50	\$50	\$50	Negotiated Rate	Negotiated Rate	Negotiated Rate	\$15
Physical, Occupational, and Speech Therapy	Negotiated Rate	\$50	\$50	\$50	Negotiated Rate	Negotiated Rate	Negotiated Rate	\$25
Urgent Care	Negotiated Rate	\$100	\$100	\$100	Negotiated Rate	Negotiated Rate	Negotiated Rate	\$55
Labs	Negotiated Rate	\$25	\$25	\$25	Negotiated Rate	Negotiated Rate	Negotiated Rate	\$35
Generic Drugs	\$5	\$0	\$0	\$0	Negotiated Rate	\$10	\$10	\$10
Preferred Brand Drugs	Negotiated Rate	\$50	\$50	\$50	Negotiated Rate	\$35	\$35	\$30
Non-Preferred Brand Drugs	Negotiated Rate	Negotiated Rate	Negotiated Rate	Negotiated Rate	Negotiated Rate	\$70	\$70	\$60
Specialty Drugs	Negotiated Rate	Negotiated Rate	Negotiated Rate	Negotiated Rate	Negotiated Rate	\$70	\$70	\$60
Prices after you meet your deductible								
Primary Care visits					50%	\$30	\$25	\$15
Specialist visits					50%	\$50	\$40	\$35
Mental Health visits	Why a	vran't thara a	opaus or		50%	\$30	\$25	\$15
Physical, Occupational, and Speech Therapy	Why aren't there copays or coinsurance amounts here?				50%	\$30	\$30	\$25
Urgent Care					50%	\$70	\$60	\$55
Labs					50%	\$50	\$40	\$35
Xrays & Diagnostic Imaging	With	our Simple pl	lans, you pay		50%	\$50	\$40	\$35
MRIs & Advanced Imaging	for co	vered service	es up to vour		50%	\$50	\$40	\$35
Emergency Room		tible. After tl			50%	\$250	\$150	\$100
Inpatient Facility & Skilled Nursing Facility			nat, Oscal pa	lys	50%	\$1,500	\$1,000	\$500
Outpatient Facility	for ev	erything.			50%	\$100	\$100	\$100
Outpatient Professional					50%	\$100	\$100	\$100
Generic Drugs	No m	ore copays. N	lo coinsuran	ce.	\$10	\$10	\$10	\$10
Preferred Brand Drugs					\$35	\$35	\$35	\$30
Non-Preferred Brand Drugs					\$70	\$70	\$70	\$60
Specialty Drugs					\$70	\$70	\$70	\$60

ALL OF THIS INFORMATION AND MORE CAN BE FOUND ON OUR BROKER RESOURCES PAGE: HIOSCAR.COM/BUSINESS \* Family deductibles and maxes are simply twice the individual amounts Negotiated Rate - Member pays Oscar's negotiated rate until reaching the plan's deductible

	Simple	Simple				Market			
	Bronze	Silver	Gold	Platinum	Bronze	Silver	Gold	Platinum	
Individual	\$476.75	\$541.11	\$725.56	\$846.41	\$483.40	\$616.62	\$782.99	\$903.94	
Couple	\$953.51	\$1,082.22	\$1,451.12	\$1,692.81	\$966.79	\$1,233.24	\$1,565.98	\$1,807.87	
Individual + child(ren)	\$810.48	\$919.89	\$1,233.45	\$1,438.89	\$821.77	\$1,048.25	\$1,331.08	\$1,536.69	
Family	\$1,358.75	\$1,542.17	\$2,067.84	\$2,412.26	\$1,377.68	\$1,757.37	\$2,231.52	\$2,576.22	

The following riders are available on all of Oscar's plans: Dependent child coverage from age 26-29, No Coverage for Domestic Partners, No Contraceptive Coverage. For quotes on policies with these riders, please check your quoting platform or visit www.hioscar.com/business

