Ohio PY25 Individual Exchange Plan Designs

Plan Name	Metal Level	Annual D (Individu	eductible al/Family)		of Pocket al/Family)	PCP Visit	Mental Health Office Visit	Specialist Visit	Virtual Urgent Care	Inpatient Hospital Care	Outpatient Surgery	Office Based Labs
UHC Bronze Value (\$5 Tier 2 Rx, No Referrals)	Bronze	\$8,250	\$16,500	\$9,200	\$18,400	\$40	√ 40%	√ 40%	\$0	√ 40%	√ 40%	✓ \$20
UHC Bronze Value+ (\$5 Tier 2 Rx, Dental + Vision, No Referrals)	Bronze	\$8,250	\$16,500	\$9,200	\$18,400	\$40	√ 40%	√ 40%	\$0	√ 40%	✓ 40%	√ \$20
UHC Bronze Copay Focus \$0 Indiv Med Ded (\$0 Virtual Urgent Care, No Referrals)	Bronze	\$0	\$0	\$9,200	\$18,400	\$50	\$100	\$150	\$0	\$3,000 (3-day max)	\$450	\$35
UHC Bronze Copay Focus+ \$0 Indiv Med Ded (\$0 Virtual Urgent Care, Dental + Vision, No Referrals)	Bronze	\$0	\$0	\$9,200	\$18,400	\$50	\$100	\$150	\$0	\$3,000 (3-day max)	\$450	\$35
UHC Bronze Standard (No Referrals)	Bronze	\$7,500	\$15,000	\$9,200	\$18,400	\$50	\$50	\$100	\$75	√ 50%	√ 50%	✓ 50%
UHC Bronze Standard+ (Dental + Vision, No Referrals)	Bronze	\$7,500	\$15,000	\$9,200	\$18,400	\$50	\$50	\$100	\$75	√ 50%	✓ 50%	✓ 50%
UHC Bronze-X Essential (Off-Exchange Only)	Bronze	\$6,350	\$12,700	\$9,200	\$18,400	√ \$40	✓ \$40	√ \$75	\$0	✓ 50%	√ 50%	✓ 50%
UHC Bronze-X Value HSA (No Referrals) (Off-Exchange Only)	Bronze	\$8,250	\$16,500	\$8,300	\$16,600	√ \$35	√ 40%	√ 40%	√ \$75	√ 40%	√ 40%	√ \$20
UHC Silver Copay Focus \$0 Indiv Med Ded* (\$0 Virtual Urgent Care, No Referrals)	Silver	\$0	\$0	\$9,200	\$18,400	\$40	\$40	\$125	\$0	\$2,500 (3-day max)	\$375	\$25
UHC Silver Copay Focus+ \$0 Indiv Med Ded (\$0 Virtual Urgent Care, Dental + Vision, No Referrals)	Silver	\$0	\$0	\$9,200	\$18,400	\$40	\$40	\$125	\$0	\$2,500 (3-day max)	\$375	\$25
UHC Silver Advantage* (\$0 Virtual Urgent Care, \$3 Tier 2 Rx, No Referrals)	Silver	\$2,500	\$5,000	\$9,200	\$18,400	\$15	√ \$35	\$100	\$0	√ 40%	\$375	√ \$15
UHC Silver Advantage+ (\$0 Virtual Urgent Care, \$3 Tier 2 Rx, Dental + Vision, No Referrals)	Silver	\$2,500	\$5,000	\$9,200	\$18,400	\$15	√ \$35	\$100	\$0	√ 40%	\$375	√ \$15
UHC Silver Standard* (No Referrals)	Silver	\$5,000	\$10,000	\$8,000	\$16,000	\$40	\$40	\$80	\$60	✓ 40%	√ 40%	✓ 40%
UHC Silver-X Value HSA (No Referrals) (Off-Exchange Only)	Silver	\$3,300	\$6,600	\$7,800	\$15,600	√ \$45	✓ \$45	√ \$150	√ \$100	√ 40%	√ 40%	√ \$15
UHC Gold Copay Focus \$0 Indiv Med Ded (\$0 Virtual Urgent Care, \$3 Tier 2 Rx, No Referrals)	Gold	\$0	\$10	\$7,000	\$14,000	\$10	\$35	\$75	\$0	\$1,500 (3-day max)	\$300	\$10
UHC Gold Copay Focus+ \$0 Indiv Med Ded (\$0 Virtual Urgent Care, \$3 Tier 2 Rx, Dental + Vision, No Referrals)	Gold	\$0	\$10	\$7,000	\$14,000	\$10	\$35	\$75	\$0	\$1,500 (3-day max)	\$300	\$10
UHC Gold Advantage (\$3 Tier 2 Rx, No Referrals)	Gold	\$500	\$1,000	\$7,000	\$14,000	\$10	√ \$10	\$75	\$0	✓ 45%	√ \$300	\$10
UHC Gold Advantage+ (\$3 Tier 2 Rx, Dental + Vision, No Referrals)	Gold	\$500	\$1,000	\$7,000	\$14,000	\$10	√ \$10	\$75	\$0	√ 45%	√ \$300	\$10
UHC Gold Standard (No Referrals)	Gold	\$1,500	\$3,000	\$7,800	\$15,600	\$30	\$30	\$60	\$45	✓ 25%	✓ 25%	✓ 25%
UHC Gold Standard+ (Dental + Vision, No Referrals)	Gold	\$1,500	\$3,000	\$7,800	\$15,600	\$30	\$30	\$60	\$45	✓ 25%	✓ 25%	✓ 25%
UHC Gold-X Value HSA (No Referrals) (Off-Exchange Only)	Gold	\$3,300	\$6,600	\$4,000	\$8,000	√ \$20	✓ 20%	✓ 20%	√ \$75	✓ 20%	√ 20%	✓ 20%

Check (\checkmark) indicates that this benefit is subject to the annual deductible.

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Ohio PY25 Individual Exchange Plan Designs

Plan Name	Rx Deductible (Individual/Family)	Tier 1 Zero Cost Share Preventive Drugs	Tier 2 Generic	Tier 3 Preferred Brand	Tier 4 Non- Preferred Brand	Tier 5 Specialty	Adult Dental & Vision	HSA
UHC Bronze Value (\$5 Tier 2 Rx, No Referrals)	Same As Medical	\$0	\$5	✓ 30%	✓ 40%	✓ 45%		
UHC Bronze Value+ (\$5 Tier 2 Rx, Dental + Vision, No Referrals)	Same As Medical	\$0	\$5	✓ 30%	✓ 40%	✓ 45%	•	
UHC Bronze Copay Focus \$0 Indiv Med Ded (\$0 Virtual Urgent Care, No Referrals)	\$4,500 \$9,000	\$0	\$15	√ 40%	√ 45%	√ 50%		
UHC Bronze Copay Focus+ \$0 Indiv Med Ded (\$0 Virtual Urgent Care, Dental + Vision, No Referrals)	\$4,500 \$9,000	\$0	\$15	√ 40%	√ 45%	✓ 50%	•	
UHC Bronze Standard (No Referrals)	Same As Medical	\$0	\$25	√ \$50	√ \$100	√ \$500		
UHC Bronze Standard+ (Dental + Vision, No Referrals)	Same As Medical	\$0	\$25	√ \$50	√ \$100	✓ \$500	•	
UHC Bronze-X Essential (Off-Exchange Only)	Same As Medical	\$0	\$10	✓ 40%	✓ 45%	√ 50%		
UHC Bronze-X Value HSA (No Referrals) (Off-Exchange Only)	Same As Medical	\$0	√ \$3	√ \$50	✓ 40%	✓ 45%		•
UHC Silver Copay Focus \$0 Indiv Med Ded* (\$0 Virtual Urgent Care, No Referrals)	\$2,500 \$5,000	\$0	\$20	\$30	√ 40%	√ 50%		
UHC Silver Copay Focus+ \$0 Indiv Med Ded (\$0 Virtual Urgent Care, Dental + Vision, No Referrals)	\$2,500 \$5,000	\$0	\$20	\$30	√ 40%	✓ 50%	•	
UHC Silver Advantage* (\$0 Virtual Urgent Care, \$3 Tier 2 Rx, No Referrals)	Same As Medical	\$0	\$3	√ \$85	√ 40%	√ 50%		
UHC Silver Advantage+ (\$0 Virtual Urgent Care, \$3 Tier 2 Rx, Dental + Vision, No Referrals)	Same As Medical	\$0	\$3	√ \$85	√ 40%	√ 50%	•	
UHC Silver Standard* (No Referrals)	Same As Medical	\$0	\$20	\$40	✓ \$80	√ \$350		
UHC Silver-X Value HSA (No Referrals) (Off-Exchange Only)	Same As Medical	\$0	√ \$3	√ \$75	✓ 40%	✓ 50%		•
UHC Gold Copay Focus \$0 Indiv Med Ded (\$0 Virtual Urgent Care, \$3 Tier 2 Rx, No Referrals)	\$500 \$1,000	\$0	\$3	\$30	√ 45%	√ 50%		
UHC Gold Copay Focus+ \$0 Indiv Med Ded (\$0 Virtual Urgent Care, \$3 Tier 2 Rx, Dental + Vision, No Referrals)	\$500 \$1,000	\$0	\$3	\$30	√ 45%	√ 50%	•	
UHC Gold Advantage (\$3 Tier 2 Rx, No Referrals)	Same As Medical	\$0	\$3	\$30	√ 30%	✓ 40%		
UHC Gold Advantage+ (\$3 Tier 2 Rx, Dental + Vision, No Referrals)	Same As Medical	\$0	\$3	\$30	√ 30%	√ 40%	•	
UHC Gold Standard (No Referrals)	Same As Medical	\$0	\$15	\$30	\$60	\$250		
UHC Gold Standard+ (Dental + Vision, No Referrals)	Same As Medical	\$0	\$15	\$30	\$60	\$250	•	
UHC Gold-X Value HSA (No Referrals) (Off-Exchange Only)	Same As Medical	\$0	√ \$3	✓ \$60	✓ 40%	√ 50%		•

Check (\checkmark) indicates that this benefit is subject to the annual deductible.

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