

Oregon standardized health plans: Summary of Coverage

| These plans are for small employers and individuals who buy coverage on their own. Coverage starts Jan. 1, 2019. Standardized means all companies offer the same benefits. | Gold* Plan pays an estimated 81% of medical costs | Silver Plan pays estimated 72% of medical costs | Bronze Plan pays estimated 62% of medical costs |
|--|--|--|--|
| Annual deductibles and out-of-pocket limit on your expenses | | | |
| Yearly medical deductible – the amount you pay before the plan begins to pay | <ul style="list-style-type: none"> • \$1,000 single • \$2,000 family Doesn't apply to preventive care, office visits, or urgent care | <ul style="list-style-type: none"> • \$2,850 single • \$5,700 family Doesn't apply to preventive care, office visits, or urgent care | <ul style="list-style-type: none"> • \$6,550 single • \$13,100 family Doesn't apply to preventive care |
| Prescription drug deductible | None | None | Yes. Combined with medical deductible |
| Yearly out-of-pocket limit on what you must pay for services covered by your plan | \$6,850 single \$13,700 family | \$7,900 single \$15,800 family | \$6,550 single \$13,100 family |
| Medical service co-pays and coinsurance (your share of costs) | | | |
| Inpatient (usually means overnight stay in hospital, nursing facility, mental health or substance abuse facility, etc.). Includes maternity. | 20% | 30% | 0% after deductible |
| Outpatient (leave same day). Includes ambulatory service centers. | 20\$ | \$40 | 0% after deductible |
| Emergency room: Co-pay waived if admitted | 20% | 30% | 0% after deductible |
| Radiology (MRI, CT, PET) Lab (X-ray) | 20% | 30% | 0% after deductible |
| Preventive care | \$0 | \$0 | \$0 |
| Primary care physician office visit | \$20 | \$40 | 0% after deductible |
| Non-specialist visit (physical, speech, and occupational therapy) | \$20 | \$40 | 0% after deductible |
| Specialist visit | \$40 | \$80 | 0% after deductible |
| Urgent care | \$60 | \$70 | 0% after deductible |
| Ambulance | 30% | 30% | 0% after deductible |
| Prescription drugs (your share of costs) | | | |
| Generic | \$10 | \$15 | 0% after deductible |
| Preferred brands | \$30 | \$60 | 0% after deductible |
| Non-preferred brands | 50% | 50% | 0% after deductible |
| Specialty drugs | 50% with \$500 per script cap | 50% | 0% after deductible |

*Not required to be sold outside healthcare.gov

All costs assume you use in-network doctors, hospitals, etc.