

# Cleveland Clinic + Oscar 2018 Individual Plans Available On & Off Exchange

Ready to sign up? Talk with your broker to get a quote.

|                                               | Classic    |            |            | Simple     |            |            | Saver      |            |
|-----------------------------------------------|------------|------------|------------|------------|------------|------------|------------|------------|
|                                               | Bronze     | Silver     | Gold       | Secure     | Bronze     | Silver     | Bronze     | Silver     |
| The Basics                                    |            |            |            |            |            |            |            |            |
| Free 24/7 calls with doctors                  | ✓          | ✓          | ✓          | ✓          | ✓          | ✓          | ✓          | ✓          |
| Up to \$100/year in step tracking rewards     | ✓          | ✓          | ✓          | ✓          | ✓          | ✓          | ✓          | ✓          |
| Free preventive care                          | ✓          | ✓          | ✓          | ✓          | ✓          | ✓          | ✓          | ✓          |
| Dedicated Concierge                           | ✓          | ✓          | ✓          | ✓          | ✓          | ✓          | ✓          | ✓          |
| Individual Deductible*                        | \$3,500    | \$4,500    | \$1,500    | \$7,350    | \$7,350    | \$7,000    | \$6,500    | \$5,000    |
| Individual Out-of-Pocket Max*                 | \$7,350    | \$7,350    | \$7,350    | \$7,350    | \$7,350    | \$7,000    | \$6,500    | \$5,000    |
| HSA-Compatible?                               | No         | No         | No         | No         | No         | No         | Yes        | Yes        |
| Prices before you meet your deductible        |            |            |            |            |            |            |            |            |
| Primary Care / OBGYN visits                   | Full Price | \$50       | \$25       | 3 for \$0  | Full Price | \$25       | Full Price | Full Price |
| Specialist visits                             | Full Price | \$75       | \$50       | Full Price | Full Price | \$50       | Full Price | Full Price |
| Mental health office visits                   | Full Price | \$75       | \$50       | 3 for \$0  | Full Price | \$50       | Full Price | Full Price |
| Physical, Occupational, and Speech Therapy    | Full Price | \$75       | \$50       | Full Price | Full Price | \$50       | Full Price | Full Price |
| Urgent Care                                   | \$100      | \$100      | \$100      | Full Price | \$100      | \$100      | Full Price | Full Price |
| Labs                                          | Full Price | Full Price | \$25       | Full Price | Full Price | \$50       | Full Price | Full Price |
| Generic Drugs                                 | Full Price | \$15       | \$10       | Full Price | Full Price | \$20       | Full Price | Full Price |
| Preferred Brand Drugs                         | Full Price | \$100      | \$50       | Full Price | Full Price | \$100      | Full Price | Full Price |
| Non-Preferred Brand Drugs                     | Full Price | Full Price | Full Price | Full Price | Full Price | Full Price | Full Price | Full Price |
| Specialty Drugs                               | Full Price | Full Price | Full Price | Full Price | Full Price | Full Price | Full Price | Full Price |
| Prices after you meet your deductible         |            |            |            |            |            |            |            |            |
| Primary Care / OBGYN visits                   | 50%        | \$50       | \$25       | \$0        | \$0        | \$0        | \$0        | \$0        |
| Specialist visits                             | 50%        | \$75       | \$50       | \$0        | \$0        | \$0        | \$0        | \$0        |
| Mental health office visits                   | 50%        | \$75       | \$50       | \$0        | \$0        | \$0        | \$0        | \$0        |
| Physical, Occupational, and Speech Therapy    | 50%        | \$75       | \$50       | \$0        | \$0        | \$0        | \$0        | \$0        |
| Urgent Care                                   | \$100      | \$100      | \$100      | \$0        | \$0        | \$0        | \$0        | \$0        |
| Labs                                          | 50%        | 50%        | \$25       | \$0        | \$0        | \$0        | \$0        | \$0        |
| Xrays & Diagnostic Imaging                    | 50%        | 50%        | 20%        | \$0        | \$0        | \$0        | \$0        | \$0        |
| MRIs & Advanced Imaging                       | 50%        | 50%        | 20%        | \$0        | \$0        | \$0        | \$0        | \$0        |
| Emergency Room                                | 50%        | 50%        | 20%        | \$0        | \$0        | \$0        | \$0        | \$0        |
| Inpatient Hospital & Skilled Nursing Facility | 50%        | 50%        | 20%        | \$0        | \$0        | \$0        | \$0        | \$0        |
| Outpatient Facility                           | 50%        | 50%        | 20%        | \$0        | \$0        | \$0        | \$0        | \$0        |
| Outpatient Professional                       | 50%        | 50%        | 20%        | \$0        | \$0        | \$0        | \$0        | \$0        |
| Generic Drugs                                 | 50%        | \$15       | \$10       | \$0        | \$0        | \$0        | \$0        | \$0        |
| Preferred Brand Drugs                         | 50%        | \$100      | \$50       | \$0        | \$0        | \$0        | \$0        | \$0        |
| Non-Preferred Brand Drugs                     | 50%        | 50%        | 20%        | \$0        | \$0        | \$0        | \$0        | \$0        |
| Specialty Drugs                               | 50%        | 50%        | 20%        | \$0        | \$0        | \$0        | \$0        | \$0        |

# Cleveland Clinic + Oscar 2018 Individual Cost Share Reduction (CSR) Plans

With the variant silver level plan designs below, qualifying on-exchange members can enjoy lower cost shares than on standard Silver plans

|                                               | Classic Silver |            |            | Simple Silver |            |            | Saver Silver |            |            |
|-----------------------------------------------|----------------|------------|------------|---------------|------------|------------|--------------|------------|------------|
|                                               | CSR 250        | CSR 200    | CSR 150    | CSR 250       | CSR 200    | CSR 150    | CSR 250      | CSR 200    | CSR 150    |
| The Basics                                    |                |            |            |               |            |            |              |            |            |
| Free 24/7 calls with doctors                  | ✓              | ✓          | ✓          | ✓             | ✓          | ✓          | ✓            | ✓          | ✓          |
| Up to \$100/year in step tracking rewards     | ✓              | ✓          | ✓          | ✓             | ✓          | ✓          | ✓            | ✓          | ✓          |
| Free preventive care                          | ✓              | ✓          | ✓          | ✓             | ✓          | ✓          | ✓            | ✓          | ✓          |
| Dedicated Concierge                           | ✓              | ✓          | ✓          | ✓             | ✓          | ✓          | ✓            | ✓          | ✓          |
| Individual Deductible*                        | \$3,000        | \$750      | \$250      | \$5,000       | \$1,800    | \$750      | \$2,000      | \$550      | \$100      |
| Individual Out-of-Pocket Max*                 | \$5,850        | \$2,250    | \$1,000    | \$5,000       | \$1,800    | \$750      | \$5,000      | \$2,450    | \$1,000    |
| HSA-Compatible?                               | No             | No         | No         | No            | No         | No         | No           | No         | No         |
| Prices before you meet your deductible        |                |            |            |               |            |            |              |            |            |
| Primary Care / OBGYN visits                   | \$10           | \$0        | \$0        | \$10          | \$0        | \$0        | Full Price   | Full Price | Full Price |
| Specialist visits                             | \$50           | \$25       | \$25       | \$50          | \$25       | \$25       | Full Price   | Full Price | Full Price |
| Mental health office visits                   | \$50           | \$25       | \$25       | \$50          | \$25       | \$25       | Full Price   | Full Price | Full Price |
| Physical, Occupational, and Speech Therapy    | \$50           | \$25       | \$25       | \$50          | \$25       | \$25       | Full Price   | Full Price | Full Price |
| Urgent Care                                   | \$100          | \$50       | \$25       | \$100         | \$50       | \$25       | Full Price   | Full Price | Full Price |
| Labs                                          | Full Price     | Full Price | Full Price | \$25          | \$0        | \$0        | Full Price   | Full Price | Full Price |
| Generic Drugs                                 | \$10           | \$0        | \$0        | \$10          | \$0        | \$0        | Full Price   | Full Price | Full Price |
| Preferred Brand Drugs                         | \$50           | \$25       | \$25       | \$50          | \$25       | \$25       | Full Price   | Full Price | Full Price |
| Non-Preferred Brand Drugs                     | Full Price     | Full Price | Full Price | Full Price    | Full Price | Full Price | Full Price   | Full Price | Full Price |
| Specialty Drugs                               | Full Price     | Full Price | Full Price | Full Price    | Full Price | Full Price | Full Price   | Full Price | Full Price |
| Prices after you meet your deductible         |                |            |            |               |            |            |              |            |            |
| Primary Care / OBGYN visits                   | \$10           | \$0        | \$0        | \$0           | \$0        | \$0        | 20%          | 10%        | 10%        |
| Specialist visits                             | \$50           | \$25       | \$25       | \$0           | \$0        | \$0        | 20%          | 10%        | 10%        |
| Mental health office visits                   | \$50           | \$25       | \$25       | \$0           | \$0        | \$0        | 20%          | 10%        | 10%        |
| Physical, Occupational, and Speech Therapy    | \$50           | \$25       | \$25       | \$0           | \$0        | \$0        | 20%          | 10%        | 10%        |
| Urgent Care                                   | \$100          | \$50       | \$25       | \$0           | \$0        | \$0        | 20%          | 10%        | 10%        |
| Labs                                          | 30%            | 20%        | 10%        | \$0           | \$0        | \$0        | 20%          | 10%        | 10%        |
| Xrays & Diagnostic Imaging                    | 30%            | 20%        | 10%        | \$0           | \$0        | \$0        | 20%          | 10%        | 10%        |
| MRIs & Advanced Imaging                       | 30%            | 20%        | 10%        | \$0           | \$0        | \$0        | 20%          | 10%        | 10%        |
| Emergency Room                                | 30%            | 20%        | 10%        | \$0           | \$0        | \$0        | 20%          | 10%        | 10%        |
| Inpatient Hospital & Skilled Nursing Facility | 30%            | 20%        | 10%        | \$0           | \$0        | \$0        | 20%          | 10%        | 10%        |
| Outpatient Facility                           | 30%            | 20%        | 10%        | \$0           | \$0        | \$0        | 20%          | 10%        | 10%        |
| Outpatient Professional                       | 30%            | 20%        | 10%        | \$0           | \$0        | \$0        | 20%          | 10%        | 10%        |
| Generic Drugs                                 | \$10           | \$0        | \$0        | \$0           | \$0        | \$0        | 20%          | 10%        | 10%        |
| Preferred Brand Drugs                         | \$50           | \$25       | \$25       | \$0           | \$0        | \$0        | 20%          | 10%        | 10%        |
| Non-Preferred Brand Drugs                     | 30%            | 20%        | 10%        | \$0           | \$0        | \$0        | 20%          | 10%        | 10%        |
| Specialty Drugs                               | 30%            | 20%        | 10%        | \$0           | \$0        | \$0        | 20%          | 10%        | 10%        |

\* Family deductibles and maxes are simply twice the individual amounts

"Full Price" - Member pays Oscar's negotiated rate until reaching the plan's deductible

# Cleveland Clinic + Oscar 2018 Off Exchange Only Individual Silver Plan

Ready to sign up? Talk with your broker to get a quote.

|                                               | Classic<br>Silver \$10 Generic Rx |
|-----------------------------------------------|-----------------------------------|
| The Basics                                    |                                   |
| Free 24/7 calls with doctors                  | ✓                                 |
| Up to \$100/year in step tracking rewards     | ✓                                 |
| Free preventive care                          | ✓                                 |
| Dedicated Concierge                           | ✓                                 |
| Individual Deductible*                        | \$4,500                           |
| Individual Out-of-Pocket Max*                 | \$7,350                           |
| HSA-Compatible?                               | No                                |
| Prices before you meet your deductible        |                                   |
| Primary Care visits                           | \$50                              |
| Specialist visits                             | \$75                              |
| Mental Health visits                          | \$75                              |
| Physical, Occupational, and Speech Therapy    | \$75                              |
| Urgent Care                                   | \$100                             |
| Labs                                          | Full Price                        |
| Generic Drugs                                 | \$10                              |
| Preferred Brand Drugs                         | \$100                             |
| Non-Preferred Brand Drugs                     | Full Price                        |
| Specialty Drugs                               | Full Price                        |
| Prices after you meet your deductible         |                                   |
| Primary Care visits                           | \$50                              |
| Specialist visits                             | \$75                              |
| Mental Health visits                          | \$75                              |
| Physical, Occupational, and Speech Therapy    | \$75                              |
| Urgent Care                                   | \$100                             |
| Labs                                          | 50%                               |
| Xrays & Diagnostic Imaging                    | 50%                               |
| MRIs & Advanced Imaging                       | 50%                               |
| Emergency Room                                | 50%                               |
| Inpatient Facility & Skilled Nursing Facility | 50%                               |
| Outpatient Facility                           | 50%                               |
| Outpatient Professional                       | 50%                               |
| Generic Drugs                                 | \$10                              |
| Preferred Brand Drugs                         | \$100                             |
| Non-Preferred Brand Drugs                     | 50%                               |
| Specialty Drugs                               | 50%                               |

- This silver tier plan is only available off-exchange
- It has lower premiums than other silver tier plans
- Only difference vs. Classic Silver plan is copay on generic drugs lowered to \$10
- Plan created in response to uncertainty around the federal government's funding of cost share reduction (CSR) subsidies. This uncertainty has driven up premiums on silver tier plans available on the government exchange

\* Family deductibles and maxes are simply twice the individual amounts

"Full Price" - Member pays Oscar's negotiated rate until reaching the plan's deductible