# Choose Oscar. Here's why.

Oscar Plan Brochure 2021 Individual and Family Plans



oscar



### Hi, we're Oscar.

Personalized health care that meets your needs. Learn how we've built a better experience for people just like you.

**OUR UNIQUE APPROACH TO HEALTH CARE - VIRTUALLY.** 



### Welcome to Virtual Primary Care

Schedule appointments by phone or video chat with your team of high-quality providers. Visits are unlimited and always \$0.\* Best of all, many prescriptions, labs, and imaging orders will also cost you \$0, if prescribed by a provider through Oscar Virtual Primary Care.\*\*



### 24/7 Virtual Urgent Care for \$0 a visit

Feeling sick or need a last-minute prescription refill? Connect with a doctor at no cost—and you may be able to get a diagnosis or a prescription—in as little as 15 minutes. It's unlimited and available 24/7.\*\*\* That's one less trip to an Urgent Care and one less copay!



### Your Care Team is all about you

Enjoy a team of care guides and a licensed nurse, always there to help. They'll get to know you, and your health history, over time, and they can help find a doctor that's right for you.

GETTING ACCESS TO HIGH-QUALITY HEALTH CARE SHOULD BE SIMPLE.



### \$0 prescriptions

We've cut the cost of many common prescriptions to \$0\*\* when prescribed by a doctor through Oscar Virtual Urgent Care.



### Finding a trusted doctor is easy

Get access to top-rated hospitals and doctors in your neighborhood.



### No referrals needed to see a specialist-ever

See a specialist when you need to, without having to get a referral.

#### **GET PAID TO WALK.**



Track steps from Google Fit and Apple Health. Earn \$1 toward an Amazon® Gift Card for every day you hit your step goal, up to \$100 per year.\*\*\*\*

- \* Oscar's Virtual Primary Care offerings vary by market and may not be available in your service area. Oscar's Virtual Primary Care offerings are only available for members ages 18 and over.
- \*\* \$0 follow-up services vary by market and may not be available in your service area. If you have an HSA-compatible high-deductible health plan or a Secure plan, you won't be eligible for \$0 follow-up services. Prescriptions, visits and services may be limited per provider discretion. Oscar's Virtual Urgent Care offerings are not available in US territories or internationally.
- \*\*\* Oscar's Virtual Urgent Care offerings are not available in US territories or internationally.
- \*\*\*\* If you think you might be unable to participate in this program, you might

qualify for an opportunity to earn the same reward in a different way. Contact Your Customer Service team at 1-855-672-2788 and we will work with you (and, if you'd like, with your doctor) to find a wellness program with the same reward that is right for you in light of your health status.

Note: If you live in California, you can also track and earn rewards for every day you hit your sleep goal.



#### **BY THE NUMBERS**

#### **TRUST**

36

Net Promoter Score compared to an average score of -19 across the ACA.\*

4.5/5

average customer service satisfaction rating by members for 2019.

### **FINDING CARE**

30%

of all members have used Oscar Virtual Urgent Care.

40%

of members' first visit were guided by their Care Team in 2019.

### **ENGAGEMENT**

90%

of members have an online account.

83%

have contacted their Care Team.

52%

of members downloaded our mobile app in 2019, nearly 5x the industry average.\*\*



### 420,000+

Total members across 18 states.



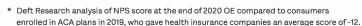
### 3 business lines

in Individual and Family Plans, Medicare Advantage, and Small Group. In Small Group, we offer Oscar for small businesses.



### 1,400+

employees across four offices working on improving access to affordable health care.



<sup>\*\*</sup> Based on iOS + Android downloads in 2019 compared to membership numbers at the end of 2018 for Aetna, United, Molina, Cigna, Humana, Anthem, and Centene.





### Health Insurance Plan Basics

Before you can decide which plan to choose, it's important to understand a few basic elements. Insurance plans are built around a few types of cost components that directly impact your health care spending.

#### HERE ARE SOME KEY TERMS TO KNOW

#### **Premium**

The fixed monthly fee you'll pay for your health insurance plan. Depending on your household income, you may qualify for an advance premium tax credit to help pay for your monthly premium costs.

### Copay

A fixed dollar amount you're responsible for paying for a covered service, each time you seek that service—such as an urgent care center visit or a primary care visit.



#### **Deductible**

This is the amount you'll spend on certain covered services before your plan starts paying for care.

### Out-of-pocket

These expenses include any money you'll pay toward covered health care expenses, such as copays and coinsurance.

### Maximum out-of-pocket (MOOP)

This is the maximum amount you'll pay for health care during the year. After you meet this amount, your plan will pay for all covered medical expenses.

### Understand How Your Plan Works

With an EPO (Exclusive Provider Organization) such as Oscar, your health insurance is activated only when you see a doctor in the network. If you get care with doctors outside the network, the visit won't be covered except in emergencies (or if there are no in-network options).

The good news is, you won't need a referral from your primary care doctor to see a specialist. That means one less copay, and one less trip to the doctor's office.

#### **HOW DOES AN EPO WORK?**

Let's say you want to see a dermatologist about a mole on your arm.



With an EPO, such as Oscar, you can make an appointment to see an in-network dermatologist directly. Since no referral is needed, you can get that mole checked out ASAP.



If you have an HMO, you'll need to see your primary care doctor for a referral before you can schedule an appointment with a dermatologist.

### HMO VS. EPO VS. PPO: PROS AND CONS

#### **EPO**

- Full access to network
- No out-of-network benefits
- No referral required
- Cost-effective premiums

#### нмо

- Limited access to network
- No out-of-network benefits
- Referral required

#### **PPO**

- Full access to network
- No out-of-network benefits
- No referral required
- Higher premiums



### Understand How Your Plan Works

#### **OUR OFFERINGS**



### Bronze plan

Low premium, high deductible 60% of covered health costs paid by Oscar, 40% paid by you.



### Silver plan

Moderate premium, moderate deductible 70% of covered health costs paid by Oscar, 30% paid by you.



### Gold plan

Higher premium, lower deductible 80% of covered health costs paid Oscar, 20% paid by you.



### Platinum plan

Highest premium, lowest deductible 90% of covered health costs paid by Oscar, 10% paid by you.

### What is a Health Savings Account (HSA) plan?

An HSA is a savings account you can set up to pay for health care expenses with pre-tax contributions. HSAs can be used only with specific HSA-compatible insurance plans that typically have high annual deductibles and lower monthly premiums. These plans can help you save on premium contributions for your health coverage.

Because an HSA works alongside an insurance plan, you'll need to purchase an HSA-eligible plan to use one. You can contribute pre- or post-tax to your HSA, and use that money to pay for qualified medical expenses throughout the year. Note that if you take money out for non-qualified medical expenses before you turn 65, you'll pay a tax penalty.

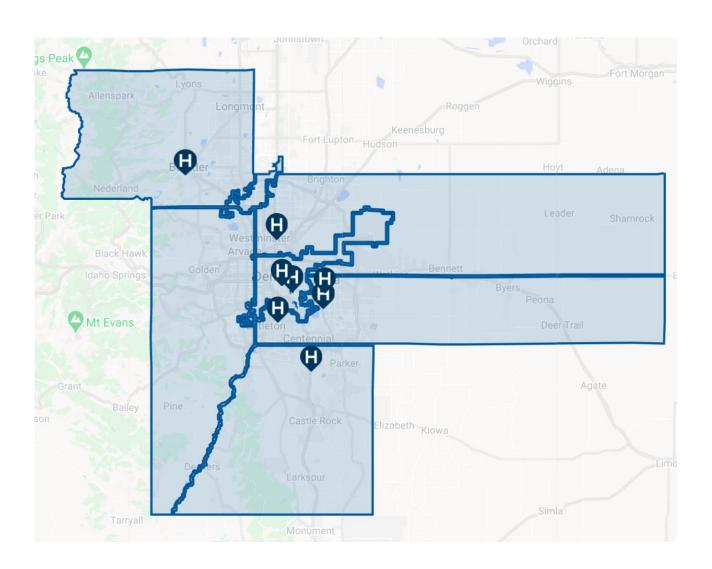
<sup>\*</sup>Metal tier structure varies and is subject to plan deductibles, copayments, and coinsurance



### Know Your Network

We provide high-quality care in Colorado, with partners like HealthOne and Boulder Community.

Oscar's Colorado service area includes Adams, Arapahoe, Boulder, Broomfield, Denver, Douglas, and Jefferson counties.





### **Know Your Network**

### Our 2021 Participating Hospital List

Adams

North Suburban Medical Center

Arapahoe

Swedish Medical Center

The Medical Center of Aurora - North Campus

The Medical Center of Aurora - South Campus

Denver

Presbyterian St. Luke's Medical Center

Rocky Mountain Hospital for Children

Rose Medical Center

Douglas

Sky Ridge Medical Center

Boulder

**Boulder Community Hospital** 



### Colorado | 2021 | Individual & Family Plans | Available On & Off-Exchange

The Basics           Deductible (Individual / Family)         \$8,550 / \$17,100         \$8,550 / \$17,100         \$6,300 / \$12,600         \$0 / \$00           Pharmacy Deductible (Individual / Family)         N/A         N/A         N/A         N/A         \$5,500 / \$11,00         \$2,500 / \$11,00         \$8,550 / \$17,100         \$8,550 / \$17,100         \$8,550 / \$17,100         \$8,550 / \$17,100         \$8,550 / \$17,100         \$8,550 / \$17,100         \$8,550 / \$17,100         \$8,550 / \$17,100         \$8,550 / \$17,100         \$8,550 / \$17,100         \$8,550 / \$17,100         \$8,550 / \$17,100         \$8,550 / \$17,100         \$8,550 / \$17,100         \$8,550 / \$17,100         \$8,550 / \$17,100         \$8,550 / \$17,100         \$8,550 / \$17,100         \$8,550 / \$17,100         \$8,550 / \$17,100         \$8,550 / \$17,100         \$8,550 / \$17,100         \$8,550 / \$17,100         \$8,550 / \$17,100         \$8,550 / \$17,100         \$8,550 / \$17,100         \$8,550 / \$17,100         \$8,550 / \$17,100         \$8,550 / \$17,100         \$8,550 / \$17,100         \$8,550 / \$17,100         \$8,550 / \$17,100         \$8,550 / \$17,100         \$8,550 / \$17,100         \$8,550 / \$17,100         \$8,550 / \$17,100         \$8,550 / \$17,100         \$8,550 / \$17,100         \$8,550 / \$17,100         \$8,550 / \$17,100         \$8,550 / \$17,100         \$8,550 / \$17,100         \$8,550 / \$17,100         \$8,550 / \$17,100         \$8,550 / \$17,100         \$9,550 / \$17,100	\$6,000 / \$12,000 000 N/A	
Pharmacy Deductible (Individual / Family)  N/A  N/A  N/A  N/A  N/A  N/A  S5,500 / \$17,100  Qut-of-Pocket Max (Individual / Family)  S8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$9,50 / \$00  \$9,00 / \$00  \$9,00 / \$00  \$9,00 / \$00  \$9,00 / \$00  \$9,00 / \$00  \$9,00 / \$00  \$9,00 / \$00  \$9,00 / \$00  \$9,00 / \$00  \$9,00 / \$00  \$9,00 / \$00  \$9,00 / \$00  \$9,00 / \$00  \$9,00 / \$00  \$9,00 / \$00  \$9,00 / \$00  \$9,00 / \$00  \$9,00 / \$00  \$9,00 / \$00		
Out-of-Pocket Max (Individual / Family)  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$8,550 / \$17,100  \$0	000 N/A	\$5,200 / \$10,400
So Preventive care  Dedicated Care Team  No N		N/A
Dedicated Care Team  HSA-Compatible?  No  No  No  No  No  No  No  No  No  N	100 \$8,550 / \$17,100	\$7,000 / \$14,000
HSA-Compatible?  No N	$\checkmark$	$\checkmark$
Prices for Benefits       Virtual Urgent Care     \$0     \$0     \$0     \$0     \$0       Virtual Primary Care Visits¹     \$0     \$0     \$0     \$0       Primary Care Office Visits     \$0 after deductible (3 pre-deductible wisits at \$0)²     \$0 after deductible (2 pre-deductible visits at \$50)²     \$35       Specialist Office Visits     \$0 after deductible     \$0 after deductible     \$0 after deductible     \$100       Urgent Care     \$0 after deductible     \$100     \$75     \$75       Emergency Room     \$0 after deductible     \$0 after deductible     \$0% after deductible (2 pre-deductible visits at \$50)²     \$1,350       Mental Health Office Visits     \$0 after deductible (3 pre-deductible visits at \$0)²     \$0 after deductible (2 pre-deductible visits at \$50)²     \$35       Labs     \$0 after deductible (3 pre-deductible visits at \$0)²     \$0 after deductible (2 pre-deductible (2 pre-deductible visits at \$50)²     \$35       Labs     \$0 after deductible (3 pre-deductible visits at \$0)²     \$0 after deductible (2 pre-deductible (2 pre-deductible visits at \$50)²     \$35       MRIs & Diagnostic Imaging     \$0 after deductible (3 pre-deductible visits at \$0)²     \$0 after deductible (2 pre-deductible visits at \$50)²     \$0% after deductible (2 pre-deductible visits at \$50)²     \$35       MRIs & Advanced Imaging     \$0 after deductible (2 pre-deductible visits at \$0)²     \$0% after deductible (2 pre-deductible v	$\checkmark$	$\checkmark$
Virtual Urgent Care \$0 \$0 \$0 \$0 \$0 \$0  Virtual Primary Care Visits¹ \$0 \$0 \$0 \$0 \$0  Primary Care Office Visits \$0 \$0 after deductible (3 pre-deductible visits at \$50)³ \$0 after deductible \$0 after deductibl	No	Yes
Virtual Primary Care Visits¹  \$0 \$0 \$0 \$0 \$0  Primary Care Office Visits \$\frac{\$0 \text{after deductible}}{\$visits at \$50}\$^3 \$0 \$1 \$0 \$0 \$0  Primary Care Office Visits \$\frac{\$0 \text{after deductible}}{\$visits at \$50}\$^3 \$0 \text{after deductible} \$\frac{\$0 \text{after deductible}}{\$visits at \$50}\$^3 \$0 \$35  Specialist Office Visits \$\frac{\$0 \text{after deductible}}{\$0 \text{after deductible}} \$0 \text{after deductible} \$0 after deductible		
Primary Care Office Visits \$0 after deductible (3 pre-deductible visits at \$0)3 \$0 after deductible \$100 \$100 \$100 \$100 \$100 \$100 \$100 \$10	\$0	\$0
Specialist Office Visits \$0 after deductible \$0 after deductible \$0 after deductible \$100  Urgent Care \$0 after deductible \$100 \$75 \$75  Emergency Room \$0 after deductible \$0 after deductible \$0 after deductible \$1,350  Mental Health Office Visits \$0 after deductible \$0 after deductible \$0 after deductible \$1,350  Mental Health Office Visits \$0 after deductible \$0	\$0	\$0
Urgent Care \$0 after deductible \$100 \$75 \$75  Emergency Room \$0 after deductible \$0 after deductible 50% after deductible \$1,350  Mental Health Office Visits \$0 after deductible (3 pre-deductible visits at \$0)^3 \$35  Labs \$0 after deductible \$0 a	\$50	\$50 after deductible
Emergency Room  \$0 after deductible \$0 after d	\$90 after deductible	\$90 after deductible
Mental Health Office Visits  \$0 after deductible (3 pre-deductible visits at \$50)^3  \$35  Labs  \$0 after deductible	\$75	\$75 after deductible
Visits at \$0)3 So after deductible visits at \$50)3 So after deductible visits at \$50)3 So after deductible \$50 after deductible \$1,000 after ded	50% after deductible	50% after deductible
X-rays & Diagnostic Imaging \$0 after deductible \$0 after deductible <sup>2</sup> 50% after deductible <sup>2</sup> \$95 <sup>2</sup> MRIs & Advanced Imaging \$0 after deductible \$0 after deductible 50% after deductible \$350  Inpatient Facility Fee \$0 after deductible \$0 after deductible 50% after deductible \$3,000/day (copay apmaximum of 2 days productible \$0 after deductible \$0 after deductible \$0 after deductible \$1,000	\$50	\$50 after deductible
MRIs & Advanced Imaging \$0 after deductible \$0 after deductible \$0.00 after deductible \$3.00 after deductible \$3.000 day (copay apmaximum of 2 days productible \$0.00 after deductible \$0.00 after deductible \$0.00 after deductible \$0.00 after deductible \$1.000 after deduc	50% after deductible <sup>2</sup>	\$50 after deductible
Inpatient Facility Fee \$0 after deductible \$0 after deductible \$0 after deductible \$0 after deductible \$1,000 feet	50% after deductible <sup>2</sup>	\$50 after deductible
Outpatient Facility Fee \$0 after deductible \$0 after deductible \$0 after deductible \$1,000	50% after deductible	e 50% after deductible
		e 50% after deductible
RX   Generics: Preferred (Tier 1a) \$0 after deductible \$32 \$32	50% after deductible	e 50% after deductible
	\$3²	\$3 after deductible
RX   Generics: Non-preferred (Tier 1b) \$0 after deductible \$25 <sup>2</sup> \$25 <sup>2</sup> \$30 <sup>2</sup>	70	\$25 after deductible
RX   Brand: Preferred (Tier 2) \$0 after deductible \$300 50% after deductible \$200	\$252	e \$200 after deductible
RX   Brand: Non-preferred (Tier 3) \$0 after deductible \$500 50% after deductible 50% after deductible		e 50% after deductible
RX   Brand: Specialty (Tier 4) \$0 after deductible \$700 50% after deductible 50% after deductible	\$25° 50% after deductible	

Virtual Primary Care is only available for plans in Denver counties. Oscar's Virtual Primary Care offerings are only available for members ages 18 and over. Oscar Virtual Primary Care violated Primary Care of Socar's Virtual Primary Care of Socar's Virtu

See the plan's Schedule of Benefits & Coverage (SBC) for more on coverage details All this information and more can be found on our Broker Resources page:
hioscar.com/brokers

To learn more about our virtual offerings, visit our website: hioscar.com/virtual-primary-care



### Colorado | 2021 | Individual & Family Plans | Available On & Off-Exchange

	Silver Saver	Silver Classic Next	Silver Classic Copay RX Copay	Silver Saver 2	Silver Classic \$0 Ded	Gold Classic RX Copay
The Basics						
Deductible (Individual / Family)	\$3,500 / \$7,000	\$7,000 / \$14,000	\$7,000 / \$14,000	\$6,200 / \$12,400	\$0 / \$0	\$1,700 / \$3,400
Pharmacy Deductible (Individual / Family)	N/A	N/A	N/A	N/A	\$4,000 / \$8,000	N/A
Out-of-Pocket Max (Individual / Family)	\$7,000 / \$14,000	\$8,150 / \$16,300	\$8,200 / \$16,400	\$8,550 / \$17,100	\$8,550 / \$17,100	\$8,500 / \$17,000
\$0 Preventive care	$\checkmark$	$\checkmark$	$\checkmark$	ightharpoons	$\checkmark$	$\checkmark$
Dedicated Care Team	$\checkmark$	$\checkmark$	$\checkmark$	ightharpoons	$\checkmark$	ightharpoons
HSA-Compatible?	No	No	No	No	No	No
Prices for Benefits						
Virtual Urgent Care	\$0	\$0	\$0	\$0	\$0	\$0
Virtual Primary Care Visits <sup>1</sup>	\$0	\$0	\$0	\$0	\$0	\$0
Primary Care Office Visits	\$35	\$25	\$30	\$40	\$25	\$25
Specialist Office Visits	40% after deductible	\$75	\$75	\$40	\$80	\$50
Urgent Care	40%	\$100	\$50	\$75	\$50	\$75
Emergency Room	40% after deductible	40% after deductible	\$650 after deductible	50% after deductible	\$1,000	20% after deductible
Mental Health Office Visits	\$35	\$25	\$30	\$40	\$25	\$25
Labs	40% after deductible <sup>2</sup>	\$50²	\$30²	\$50 <sup>2</sup>	\$25²	\$50 <sup>2</sup>
X-rays & Diagnostic Imaging	40% after deductible <sup>2</sup>	40% after deductible <sup>2</sup>	\$75 after deductible <sup>2</sup>	50% after deductible <sup>2</sup>	\$80²	20% after deductible <sup>2</sup>
MRIs & Advanced Imaging	40% after deductible	40% after deductible	\$200 after deductible	50% after deductible	\$275	20% after deductible
Inpatient Facility Fee	40% after deductible	40% after deductible	\$500/day after deductible (copay applies for a maximum of 2 days per 1 stay)	50% after deductible	\$2,500/day (copay applies for a maximum of 2 days per 1 stay)	20% after deductible
Outpatient Facility Fee	40% after deductible	40% after deductible	\$350 after deductible	50% after deductible	\$1,000	20% after deductible
RX   Generics: Preferred (Tier 1a)	\$32	\$32	\$3²	\$3²	\$3 <sup>2</sup>	\$3 <sup>2</sup>
RX   Generics: Non-preferred (Tier 1b)	\$25²	\$25²	\$25²	\$252	\$25²	\$25²
RX   Brand: Preferred (Tier 2)	40% after deductible	\$75	\$75	\$75	\$100	\$50
RX   Brand: Non-preferred (Tier 3)	40% after deductible	40% after deductible	\$450	50% after deductible	50% after deductible	\$300
RX   Brand: Specialty (Tier 4)	40% after deductible	40% after deductible	\$590	50% after deductible	50% after deductible	\$670

1/Virtual Primary Care is only available for plans in Denver counties. Oscar's Virtual Primary Care offerings are only available for members ages 18 and over. Oscar Virtual Primary Care of Scrar Virtual Primary Care of Denver Counties, by an an imaging orders may cost you \$0 if they're prescribed through Oscar Virtual Primary Care or Oscar Virtual Urgent Care. If you live outside of Denver counties, you may not be eligible for \$0 imaging orders.

\*Pre-deductible benefits are eligible for non-preventive visits across these categories and are subject to the copay, pre-deductible. Subsequent visits are charged at 100% of non-preventive visits across these categories and are subject to the copay, pre-deductible. Subsequent visits are charged at 100% of non-preventive visits across these categories and are subject to the copay, pre-deductible. Subsequent visits are charged at 100% of non-preventive visits across these categories and are subject to the copay, pre-deductible. Subsequent visits are charged at 100% of non-preventive visits across these categories and are subject to the copay, pre-deductible. Subsequent visits are charged at 100% of non-preventive visits across these categories and are subject to the copay, pre-deductible. Subsequent visits are charged at 100% of non-preventive visits across these categories and are subject to the copay, pre-deductible. Subsequent visits are charged at 100% of non-preventive visits across these categories and are subject to the copay, pre-deductible. Subsequent visits are charged at 100% of non-preventive visits across these categories and are subject to the copay, pre-deductible. Subsequent visits are charged at 100% of non-preventive visits across these categories and are subject to the copay, pre-deductible. Subsequent visits are charged at 100% of non-preventive visits across these categories and preventive visits are charged at 100% of non-preventive visits across these categories and preventive visits are charged at 100% of non-preventive visits across these catego

See the plan's Schedule of Benefits & Coverage (SBC) for more on coverage details
All this information and more can be found on our Broker Resources page:
hioscar.com/brokers
To learn more about our virtual offerings, visit our website
hioscar.com/virtual-primary-care



### Colorado | 2021 | Individual & Family Plans | On-Exchange Only | Silver CSR Plans

	Silver Saver CSR 250	Silver Saver CSR 200	Silver Saver CSR 150	Silver Classic Next CSP 250	Silver Classic Next CSR 200	Silver Classic Next CSP 150
	Onver Saver CSIC 230	Onver Saver CSIC 200	Onver Saver CSR 130	Oliver Glassic Next CSR 250	ONCE Classic Next CSR 200	Office Classic Next CSR 13
The Basics						
Deductible (Individual / Family)	\$2,200 / \$4,400	\$750 / \$1,500	\$0 / \$0	\$4,500 / \$9,000	\$0 / \$0	\$0 / \$0
Pharmacy Deductible (Individual / Family)	N/A	N/A	N/A	N/A	N/A	N/A
Out-of-Pocket Max (Individual / Family)	\$6,100 / \$12,200	\$2,700 / \$5,400	\$1,500 / \$3,000	\$6,500 / \$13,000	\$2,700 / \$5,400	\$1,750 / \$3,500
\$0 Preventive care	$\checkmark$		$\checkmark$	ightharpoons		
Dedicated Care Team	$\checkmark$					
HSA-Compatible?	No	No	No	No	No	No
Prices for Benefits						
Virtual Urgent Care	\$0	\$0	\$0	\$0	\$0	\$0
Virtual Primary Care Visits <sup>1</sup>	\$0	\$0	\$0	\$0	\$0	\$0
Primary Care Office Visits	\$25	\$15	\$8	\$20	\$5	\$0
Specialist Office Visits	30% after deductible	10% after deductible	10%	\$55	\$15	\$5
Urgent Care	30%	10%	10%	\$75	\$25	\$15
Emergency Room	30% after deductible	10% after deductible	10%	40% after deductible	40%	20%
Mental Health Office Visits	\$25	\$15	\$8	\$20	\$5	\$0
Labs	30% after deductible <sup>2</sup>	10% after deductible <sup>2</sup>	10% after deductible <sup>2</sup>	\$50 <sup>2</sup>	\$25²	\$5 <sup>2</sup>
X-rays & Diagnostic Imaging	30% after deductible <sup>2</sup>	10% after deductible <sup>2</sup>	10% after deductible <sup>2</sup>	40% after deductible <sup>2</sup>	40%²	20%²
MRIs & Advanced Imaging	30% after deductible	10% after deductible	10%	40% after deductible	40%	20%
Inpatient Facility Fee	30% after deductible	10% after deductible	10%	40% after deductible	40%	20%
Outpatient Facility Fee	30% after deductible	10% after deductible	10%	40% after deductible	40%	20%
RX   Generics: Preferred (Tier 1a)	\$3 <sup>2</sup>	\$32	\$3²	\$3²	\$3²	\$0 <sup>2</sup>
RX   Generics: Non-preferred (Tier 1b)	\$252	\$20 <sup>2</sup>	\$82	\$15 <sup>2</sup>	\$15 <sup>2</sup>	\$52
RX   Brand: Preferred (Tier 2)	30% after deductible	10% after deductible	10%	\$75	\$75	\$40
RX   Brand: Non-preferred (Tier 3)	30% after deductible	10% after deductible	10%	40% after deductible	40%	20%
RX   Brand: Specialty (Tier 4)	30% after deductible	10% after deductible	10%	40% after deductible	40%	20%

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\*Many prescriptions, labs, and imaging orders may cost you \$0 if they're prescribed through Oscar Virtual Primary Care or Oscar Virtual Primary C

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### Colorado | 2021 | Individual & Family Plans | On-Exchange Only | Silver CSR Plans

	Silver Classic Copay RX Copay CSR 250	Silver Classic Copay RX Copay CSR 200	Silver Classic Copay RX Copay CSR 150	Silver Saver 2 CSR 250	Silver Saver 2 CSR 200	Silver Saver 2 CSR 150
The Basics	Copay CSR 250	Copay CSR 200	Copay CSK 130			
						45.45
Deductible (Individual / Family)	\$3,500 / \$7,000	\$0 / \$0	\$0 / \$0	\$3,300 / \$6,600	\$970 / \$1,940	\$0 / \$0
Pharmacy Deductible (Individual / Family)	N/A	N/A	N/A	N/A	N/A	N/A
Out-of-Pocket Max (Individual / Family)	\$6,400 / \$12,800	\$2,250 / \$4,500	\$800 / \$1,600	\$6,800 / \$13,600	\$2,800 / \$5,600	\$1,350 / \$2,700
\$0 Preventive care		ightharpoons	$\checkmark$	$\checkmark$	$\checkmark$	$\checkmark$
Dedicated Care Team	$\checkmark$	$\checkmark$		ightharpoons		$\checkmark$
HSA-Compatible?	No	No	No	No	No	No
Prices for Benefits						
Virtual Urgent Care	\$0	\$0	\$0	\$0	\$0	\$0
Virtual Primary Care Visits¹	\$0	\$0	\$0	\$0	\$0	\$0
Primary Care Office Visits	\$20	\$5	\$0	\$40	\$25	\$5
Specialist Office Visits	\$50	\$25	\$15	\$40	\$25	\$5
Urgent Care	\$50	\$15	\$15	\$60	\$45	\$30
Emergency Room	\$400 after deductible	\$200	\$200	40% after deductible	30% after deductible	30%
Mental Health Office Visits	\$20	\$5	\$0	\$40	\$25	\$5
Labs	\$20²	\$15²	\$15²	\$50²	\$30 <sup>2</sup>	\$0²
X-rays & Diagnostic Imaging	\$50 after deductible <sup>2</sup>	\$30²	\$30 <sup>2</sup>	40% after deductible <sup>2</sup>	30% after deductible <sup>2</sup>	30%²
MRIs & Advanced Imaging	\$125 after deductible	\$75	\$75	40% after deductible	30% after deductible	30%
Inpatient Facility Fee	\$450/day after deductible (copay applies for a maximum of 2 days per 1 stay)	\$250/day (copay applies for a maximum of 2 days per 1 stay)	\$250/day (copay applies for a maximum of 2 days per 1 stay)	40% after deductible	30% after deductible	30%
Outpatient Facility Fee	\$200 after deductible	\$200	\$200	40% after deductible	30% after deductible	30%
RX   Generics: Preferred (Tier 1a)	\$3 <sup>2</sup>	\$3²	\$3²	\$3²	\$3²	\$0 <sup>2</sup>
RX   Generics: Non-preferred (Tier 1b)	\$25²	\$252	\$10 <sup>2</sup>	\$20²	\$10 <sup>2</sup>	\$10²
RX   Brand: Preferred (Tier 2)	\$75	\$75	\$30	\$60	\$40	\$20
RX   Brand: Non-preferred (Tier 3)	\$450	\$350	\$225	50% after deductible	50% after deductible	50%
RX   Brand: Specialty (Tier 4)	\$590	\$500	\$300	50% after deductible	50% after deductible	50%

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\*Many prescriptions, labs, and imaging orders may cost you \$0 if they're prescribed through Oscar Virtual Primary Care or Oscar Virtual Urgent Care. If you live outside of Denver counties, you may not be eligible for not preventive visits across these categories and are subject to the copay, pre-deductible. Subsequent visits are charged at 10% of negotiated rate until member meets the plan's deductible. Note: Benefits may be subject to deductible. Oscar has specific rates with in-network providers, when the plan's deductible and out-of-pocket max is reached. Plan pays 100% thereafter.

See the plan's Schedule of Benefits & Coverage (SBC) for more on coverage details
All this information and more can be found on our Broker Resources page:
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To learn more about our virtual offerings, visit our website: hioscar.com/virtual-primary-care



### Colorado | 2021 | Individual & Family Plans | On-Exchange Only | Silver CSR Plans

	Silver Classic \$0 Ded CSR 250	Silver Classic \$0 Ded CSR 200	Silver Classic \$0 Ded CSR 150
The Basics			
Deductible (Individual / Family)	\$0 / \$0	\$0 / \$0	\$0 / \$0
Pharmacy Deductible (Individual / Family)	\$3,250 / \$6,500	\$600 / \$1,200	\$100 / \$200
Out-of-Pocket Max (Individual / Family)	\$6,500 / \$13,000	\$2,500 / \$5,000	\$1,000 / \$2,000
\$0 Preventive care			
Dedicated Care Team			
HSA-Compatible?	No	No	No
Prices for Benefits			
Virtual Urgent Care	\$0	\$0	\$0
Virtual Primary Care Visits <sup>1</sup>	\$0	\$0	\$0
Primary Care Office Visits	\$20	\$10	\$5
Specialist Office Visits	\$60	\$25	\$10
Urgent Care	\$50	\$15	\$15
Emergency Room	\$500	\$300	\$200
Mental Health Office Visits	\$20	\$10	\$5
Labs	\$15 <sup>2</sup>	\$10²	\$5 <sup>2</sup>
X-rays & Diagnostic Imaging	\$60 <sup>2</sup>	\$252	\$10²
MRIs & Advanced Imaging	\$125	\$75	\$40
Inpatient Facility Fee	\$650/day (copay applies for a maximum of 2 days per 1 stay)	\$300/day (copay applies for a maximum of 2 days per 1 stay)	\$200/day (copay applies for a maximum of 2 days per 1 stay)
Outpatient Facility Fee	\$500	\$200	\$100
RX   Generics: Preferred (Tier 1a)	\$3²	\$3²	\$0²
RX   Generics: Non-preferred (Tier 1b)	\$252	\$252	\$102
RX   Brand: Preferred (Tier 2)	\$100	\$60	\$50
RX   Brand: Non-preferred (Tier 3)	50% after deductible	50% after deductible	50% after deductible
RX   Brand: Specialty (Tier 4)	50% after deductible	50% after deductible	50% after deductible

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\*Many prescriptions, labs, and imaging orders may cost you \$0 if they're prescribed through Oscar Virtual Primary Care or Oscar Virtual Primary C





### Colorado | 2021 | Individual & Family Plans | Off-Exchange Only

	Silver Saver Off-Ex	Silver Classic Next Off-Ex	Silver Classic Copay RX Copay Off-Ex
The Basics			
Deductible (Individual / Family)	\$3,500 / \$7,000	\$7,000 / \$14,000	\$7,000 / \$14,000
Pharmacy Deductible (Individual / Family)	N/A	N/A	N/A
Out-of-Pocket Max (Individual / Family)	\$7,000 / \$14,000	\$8,150 / \$16,300	\$8,200 / \$16,400
\$0 Preventive care	$\checkmark$	$\checkmark$	$\checkmark$
Dedicated Care Team	$\checkmark$	ightharpoons	ightharpoons
HSA-Compatible?	No	No	No
Prices for Benefits			
Virtual Urgent Care	\$0	\$0	\$0
Virtual Primary Care Visits <sup>1</sup>	\$0	\$0	\$0
Primary Care Office Visits	\$35	\$25	\$30
Specialist Office Visits	40% after deductible	\$75	\$75
Urgent Care	40%	\$100	\$50
Emergency Room	40% after deductible	40% after deductible	\$650 after deductible
Mental Health Office Visits	\$35	\$25	\$30
Labs	40% after deductible <sup>2</sup>	\$50²	\$30²
X-rays & Diagnostic Imaging	40% after deductible <sup>2</sup>	40% after deductible <sup>2</sup>	\$75 after deductible <sup>2</sup>
MRIs & Advanced Imaging	40% after deductible	40% after deductible	\$200 after deductible
Inpatient Facility Fee	40% after deductible	40% after deductible	\$500/day after deductible (copay applies for a maximum of 2 days per 1 stay)
Outpatient Facility Fee	40% after deductible	40% after deductible	\$350 after deductible
RX   Generics: Preferred (Tier 1a)	\$3²	\$3²	\$32
RX   Generics: Non-preferred (Tier 1b)	\$25²	\$252	\$25²
RX   Brand: Preferred (Tier 2)	40% after deductible	\$75	\$75
RX   Brand: Non-preferred (Tier 3)	40% after deductible	40% after deductible	\$450
RX   Brand: Specialty (Tier 4)	40% after deductible	40% after deductible	\$590

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\*Pre-deductible benefits are eligible for non-preventive visits across these categories and are subject to the copay, pre-deductible. Subsequent visits are charged at 100% of negotiated rate until member meets the plan's deductible."

Note: Benefits may be subject to deductible. Oscar has specific rates with in-network providers. Member pays Oscar's rate with in-network providers until reaching the plan's deductible. For coinsurance, member pays coinsurance percentage of the rate until deductible and out-of-pocket max is reached. Plan pays 100% thereafter.

### Why does Oscar offer these plans?

Premiums of Silver tier plans on the government exchange have gone up, due to government defunding of cost-sharing reduction (CSR) subsidies.

In response, Oscar has created off-exchange Silver alternatives.

#### What should I know about these plans?

They are only available off of the exchange.

They have lower premiums than comparable Silver tier plans on the exchange.

### Are these plans right for me?

If you do not qualify for subsidies on the government exchange at any point in 2021, and are seeking a Silver tier plan, these may be a good option for you.

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### Colorado | 2021 | Individual & Family Plans | Off-Exchange Only

	Silver Saver 2 Off-Ex	Silver Classic \$0 Ded Off-Ex	Silver HDHP	Silver \$1500 Ded
The Basics				
Deductible (Individual / Family)	\$6,200 / \$12,400	\$0 / \$0	\$2,600 / \$5,200	\$1,500 / \$3,000
Pharmacy Deductible (Individual / Family)	N/A	\$4,000 / \$8,000	N/A	N/A
Out-of-Pocket Max (Individual / Family)	\$8,550 / \$17,100	\$8,550 / \$17,100	\$7,000 / \$14,000	\$8,550 / \$17,100
\$0 Preventive care	$\checkmark$	$\checkmark$	$\checkmark$	$\checkmark$
Dedicated Care Team	$\checkmark$	$\checkmark$	$\checkmark$	$\checkmark$
HSA-Compatible?	No	No	Yes	No
Prices for Benefits				
Virtual Urgent Care	\$0	\$0	\$0	\$0
Virtual Primary Care Visits <sup>1</sup>	\$0	\$0	\$0	\$0
Primary Care Office Visits	\$40	\$25	\$30 after deductible	\$25
Specialist Office Visits	\$40	\$80	\$75 after deductible	\$75
Urgent Care	\$75	\$50	\$50 after deductible	\$50
Emergency Room	50% after deductible	\$1,000	35% after deductible	\$650
Mental Health Office Visits	\$40	\$25	\$30 after deductible	\$25
Labs	\$50²	\$25²	\$50 after deductible	\$50 <sup>2</sup>
X-rays & Diagnostic Imaging	50% after deductible <sup>2</sup>	\$80²	\$75 after deductible	\$75 after deductible <sup>2</sup>
MRIs & Advanced Imaging	50% after deductible	\$275	\$100 after deductible	\$100 after deductible
Inpatient Facility Fee	50% after deductible	\$2,500/day (copay applies for a maximum of 2 days per 1 stay)	35% after deductible	\$500/day after deductible (copay applies for a maximum of 5 days per 1 stay)
Outpatient Facility Fee	50% after deductible	\$1,000	35% after deductible	\$250 after deductible
RX   Generics: Preferred (Tier 1a)	\$32	\$3 <sup>2</sup>	\$3 after deductible	\$32
RX   Generics: Non-preferred (Tier 1b)	\$252	\$252	\$25 after deductible	\$25 <sup>2</sup>
RX   Brand: Preferred (Tier 2)	\$75	\$100	\$100 after deductible	\$100
RX   Brand: Non-preferred (Tier 3)	50% after deductible	50% after deductible	35% after deductible	50% after deductible
RX   Brand: Specialty (Tier 4)	50% after deductible	50% after deductible	35% after deductible	50% after deductible

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### Get the perks

Oscar's new Virtual Primary Care is a virtual doctor's office that comes to you. You'll see the same team every time, and they're with you for the long term. That way you can skip the waiting room and stay safe. And best of all, Oscar Virtual Primary Care visits are always \$0.



### Welcome to Virtual Primary Care.

With Oscar Virtual Primary Care, you can schedule a video or phone appointment at a time that works for you.



### Virtual doctor's visits cost \$0. And so does what comes after.

Oscar Virtual Primary Care visits come with some important follow up services—all at \$0\*:

- Drugs (tiers 1a and 1b)
- Labs
- · Durable medical equipment
- Some imaging (like x-rays and ultrasounds)
- Your first referred specialist office visit\*\*



### Health care doesn't end with the appointment.

It's a journey that requires a long-term partner. Your team includes experienced doctors, nurse practitioners, and medical coordinators. You'll talk to the same people every time, and they're here to support your unique health needs.



### It's always on.

Get access to Oscar Virtual Primary Care any time, anywhere. Book a phone or video chat session through the Oscar app or call your Care Team at 1-855-672-2755 to get help with an appointment.

### LEARN MORE AT HIOSCAR.COM/VIRTUAL-PRIMARY-CARE

Note: Oscar Virtual Primary Care is only available for plans in Denver counties. Oscar's Virtual Primary Care offerings are only available for members ages 18 and over.

\*\$0 follow-up services vary by market and may not be available in your service area. If you have an HSA-compatible high-deductible health plan or a Secure plan, you won't be eligible for \$0 follow-up services. Prescriptions, visits and services may be limited per provider discretion.

\*\*Varies per reason for visit. For follow-up visits for the same issue or condition, a copay will apply.





## Ready to sign up?

Health insurance that's helpful and easy to understand. For more information, visit our website at <a href="https://nicon.com/individuals.">hioscar.com/individuals</a>.

HAVE QUESTIONS, OR WANT TO APPLY?



Visit us at <a href="https://hioscar.com/individuals">hioscar.com/individuals</a>



Call your broker



Visit <u>healthcare.gov</u> or your state's health insurance marketplace