

# Clear answers about your costs, your coverage, your options.



## GENERAL PLAN DETAILS

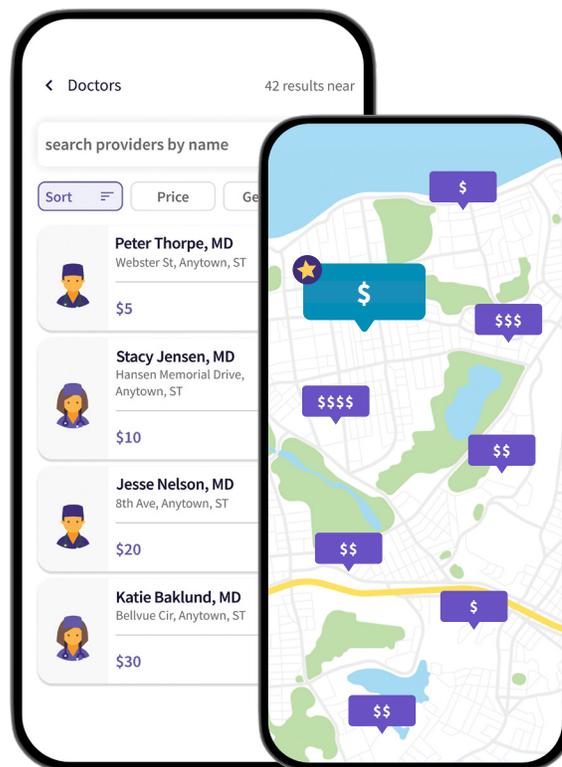
<b>Deductible</b>	\$0
<b>Out-of-pocket limit</b>	
Employee	\$6,250
Family	\$12,500
<b>Prescription drugs – 30-day</b>	
Preventive drugs	\$0
Tier 1	\$10
Tier 2	\$90
Tier 3	\$120

## YOUR COPAYS

<b>Preventive visit</b>	\$0
<b>Office visit</b>	\$15 – \$100
<b>Virtual visit (primary &amp; urgent)</b>	\$0
<b>Virtual visit (specialty)</b>	\$15 – \$75
<b>Mental health office visit</b>	\$15
<b>Urgent care visit</b>	\$80
<b>Emergency room visit</b>	\$750
<b>Basic diagnostic lab tests, X-rays and ultrasounds</b>	\$0
<b>Physical therapy*</b>	\$20 – \$90
<b>Maternity labor and delivery</b>	\$1,300 – \$2,750

“Everything is just **easy and affordable.** I feel in control of my health plan for the first time.”

Jaime A., Surest member



Providers, locations, and prices are fictional. Prices are representative of member copays, no deductible.



See how powerful simple can be.

To check prices or see if your doctor is in-network:

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\*See plan for visit limit details. In-network costs only. For out-of-network costs, exclusions and limitations, see website. Administrative services provided by Bind Benefits, Inc. d/b/a Surest, its affiliate United HealthCare Services, Inc., or by Bind Benefits, Inc. d/b/a Surest Administrators Services, in CA. © Bind Benefits, Inc., d/b/a Surest. All rights reserved. B2C\_23-AI-591074\_0923