

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

	Simple			Classic			Saver	
	Secure	Bronze	Silver	Bronze	Silver	Gold	Bronze HSA	Silver HSA
<b>The Basics</b>								
Deductible (Individual / Family)	\$7,900 / \$15,800	\$7,900 / \$15,800	\$7,900 / \$15,800	\$4,500 / \$9,000	\$4,400 / \$8,800	\$1,500 / \$3,000	\$5,500 / \$11,000	\$3,000 / \$6,000
Out-of-pocket max (Individual / Family)	\$7,900 / \$15,800	\$7,900 / \$15,800	\$7,900 / \$15,800	\$7,900 / \$15,800	\$7,900 / \$15,800	\$7,900 / \$15,800	\$6,650 / \$13,300	\$6,650 / \$13,300
HSA-compatible?	No	No	No	No	No	No	Yes	Yes
24/7 Doctor-on-Call (telemedicine visits)	Free	Free	Free	Free	Free	Free	Free	Free
Up to \$100/year in step tracking rewards	✓	✓	✓	✓	✓	✓	✓	✓
Free preventive care	✓	✓	✓	✓	✓	✓	✓	✓
Dedicated Concierge	✓	✓	✓	✓	✓	✓	✓	✓
<b>Prices before you meet your deductible</b>								
Primary care / OB-GYN visits	First 3 at \$0 <sup>3</sup>	Negotiated rate <sup>1</sup>	\$25	Negotiated rate <sup>1</sup>	\$50	\$25	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>
Specialist visits	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	\$50	Negotiated rate <sup>1</sup>	\$75	\$50	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>
Mental health office visits	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	\$25	Negotiated rate <sup>1</sup>	\$50	\$25	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>
Urgent care	Negotiated rate <sup>1</sup>	\$75	\$75	\$75	\$100	\$75	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>
Labs	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	\$50	Negotiated rate <sup>1</sup>	\$75	\$50	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>
X-rays & Diagnostic Imaging	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>
MRIs & Advanced Imaging	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>
Emergency room	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>
Outpatient facility / Inpatient facility	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>
Prescription drugs: Retail (Tier 1 / 2 / 3 )	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	\$15 / \$75 / Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	\$15 / Negotiated rate <sup>1</sup> (Tier 2 & 3)	\$15 / \$50 / Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>
<b>Prices after you meet your deductible</b>								
Primary care / OB-GYN visits	<p><b>Why aren't there copays or coinsurance amounts here?</b></p> <p>With our Simple plans, you pay for covered services up to your deductible.</p> <p>After that, Oscar pays for all covered services.</p>			50% <sup>2</sup>	\$50	\$25	50% <sup>2</sup>	40% <sup>2</sup>
Specialist visits				50% <sup>2</sup>	\$75	\$50	50% <sup>2</sup>	40% <sup>2</sup>
Mental health office visits				50% <sup>2</sup>	\$50	\$25	50% <sup>2</sup>	40% <sup>2</sup>
Urgent care				\$75	\$100	\$75	50% <sup>2</sup>	40% <sup>2</sup>
Labs				50% <sup>2</sup>	\$75	\$50	50% <sup>2</sup>	40% <sup>2</sup>
X-rays & Diagnostic Imaging				50% <sup>2</sup>	50% <sup>2</sup>	20% <sup>2</sup>	50% <sup>2</sup>	40% <sup>2</sup>
MRIs & Advanced Imaging				50% <sup>2</sup>	50% <sup>2</sup>	20% <sup>2</sup>	50% <sup>2</sup>	40% <sup>2</sup>
Emergency room				50% <sup>2</sup>	50% <sup>2</sup>	20% <sup>2</sup>	50% <sup>2</sup>	40% <sup>2</sup>
Outpatient facility / Inpatient facility				50% <sup>2</sup>	50% <sup>2</sup>	20% <sup>2</sup>	50% <sup>2</sup>	40% <sup>2</sup>
Prescription drugs: Retail (Tier 1 / 2 / 3 )				50% <sup>2</sup> for all tiers	\$15 / 50% <sup>2</sup> / 50% <sup>2</sup>	\$15 / \$50 / 20% <sup>2</sup>	50% <sup>2</sup>	40% <sup>2</sup>

<sup>1</sup> Negotiated rate: We've negotiated lower rates with in-network providers. Member pays Oscar's preferred rate with in-network providers until reaching the plan's deductible.

<sup>2</sup> Member pays coinsurance percentage (of negotiated rate) until deductible and out-of-pocket max is reached. Plan pays 100% thereafter.

<sup>3</sup> The first 3 non-preventative visits across these categories are subject to the copay, pre-deductible. Subsequent visits are charged at 100% of negotiated rate until member meets the plan's deductible.

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](https://hioscar.com/brokers)



# Texas 2019 | Individual & Family Silver Cost Share Reduction (CSR) Plans | Avail. On-Exchange Only

With the variant Silver level plan designs below, qualifying on-exchange Oscar members can receive lower cost shares than on our standard Silver plans.

	Simple			Classic			Saver		
	CSR 250	CSR 200	CSR 150	CSR 250	CSR 200	CSR 150	CSR 250	CSR 200	CSR 150
<b>The Basics</b>									
Deductible (Individual / Family)	\$6,300 / \$12,600	\$2,200 / \$4,400	\$800 / \$1,600	\$3,550 / \$7,100	\$950 / \$1,900	\$250 / \$500	\$2,200 / \$4,400	\$750 / \$1,500	\$200 / \$400
Out-of-pocket max (Individual / Family)	\$6,300 / \$12,600	\$2,200 / \$4,400	\$800 / \$1,600	\$6,300 / \$12,600	\$2,600 / \$5,200	\$1,450 / \$2,900	\$6,100 / \$12,200	\$2,600 / \$5,200	\$1,300 / \$2,600
HSA-compatible?	No	No	No	No	No	No	No	No	No
24/7 Doctor-on-Call (telemedicine visits)	Free	Free	Free	Free	Free	Free	Free	Free	Free
Up to \$100/year in step tracking rewards	✓	✓	✓	✓	✓	✓	✓	✓	✓
Free preventive care	✓	✓	✓	✓	✓	✓	✓	✓	✓
Dedicated Concierge	✓	✓	✓	✓	✓	✓	✓	✓	✓
<b>Prices before you meet your deductible</b>									
Primary care / OB-GYN visits	\$10	\$5	\$5	\$20	\$10	\$5	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>
Specialist visits	\$50	\$15	\$15	\$50	\$20	\$10	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>
Mental health office visits	\$10	\$5	\$5	\$20	\$10	\$5	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>
Urgent care	\$75	\$50	\$25	\$75	\$50	\$25	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>
Labs	\$50	\$15	\$15	\$50	\$20	\$10	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>
X-rays & Diagnostic Imaging	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>
MRIs & Advanced Imaging	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>
Emergency room	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>
Outpatient facility / Inpatient facility	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>
Prescription drugs: Retail (Tier 1 / 2 / 3)	\$10 / \$50 / Negotiated rate <sup>1</sup>	\$5 / \$15 / Negotiated rate <sup>1</sup>	\$5 / \$15 / Negotiated rate <sup>1</sup>	\$10 / Negotiated rate <sup>1</sup> (Tier 2 & 3)	\$5 / Negotiated rate <sup>1</sup> (Tier 2 & 3)	\$5 / Negotiated rate <sup>1</sup> (Tier 2 & 3)	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>	Negotiated rate <sup>1</sup>
<b>Prices after you meet your deductible</b>									
Primary care / OB-GYN visits	<p><b>Why aren't there copays or coinsurance amounts here?</b></p> <p>With our Simple plans, you pay for covered services up to your deductible.</p> <p>After that, Oscar pays for all covered services.</p>			\$20	\$10	\$5	20% <sup>2</sup>	10% <sup>2</sup>	10% <sup>2</sup>
Specialist visits				\$50	\$20	\$10	20% <sup>2</sup>	10% <sup>2</sup>	10% <sup>2</sup>
Mental health office visits				\$20	\$10	\$5	20% <sup>2</sup>	10% <sup>2</sup>	10% <sup>2</sup>
Urgent care				\$75	\$50	\$25	20% <sup>2</sup>	10% <sup>2</sup>	10% <sup>2</sup>
Labs				\$50	\$20	\$10	20% <sup>2</sup>	10% <sup>2</sup>	10% <sup>2</sup>
X-rays & Diagnostic Imaging				30% <sup>2</sup>	20% <sup>2</sup>	10% <sup>2</sup>	20% <sup>2</sup>	10% <sup>2</sup>	10% <sup>2</sup>
MRIs & Advanced Imaging				30% <sup>2</sup>	20% <sup>2</sup>	10% <sup>2</sup>	20% <sup>2</sup>	10% <sup>2</sup>	10% <sup>2</sup>
Emergency room				30% <sup>2</sup>	20% <sup>2</sup>	10% <sup>2</sup>	20% <sup>2</sup>	10% <sup>2</sup>	10% <sup>2</sup>
Outpatient facility / Inpatient facility				30% <sup>2</sup>	20% <sup>2</sup>	10% <sup>2</sup>	20% <sup>2</sup>	10% <sup>2</sup>	10% <sup>2</sup>
Prescription drugs: Retail (Tier 1 / 2 / 3)				\$10 / 30% <sup>2</sup> / 30% <sup>2</sup>	\$5 / 20% <sup>2</sup> / 20% <sup>2</sup>	\$5 / 10% <sup>2</sup> / 10% <sup>2</sup>	20% <sup>2</sup>	10% <sup>2</sup>	10% <sup>2</sup>

<sup>1</sup> Negotiated rate: We've negotiated lower rates with in-network providers. Member pays Oscar's preferred rate with in-network providers until reaching the plan's deductible.

<sup>2</sup> Member pays coinsurance percentage (of negotiated rate) until deductible and out-of-pocket max is reached. Plan pays 100% thereafter.

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

	Classic Silver Off-Ex Only
<b>The Basics</b>	
Deductible (Individual / Family)	\$4,400 / \$8,800
Out-of-Pocket Max (Individual / Family)	\$7,900 / \$15,800
HSA compatible?	No
24/7 Doctor-on-Call (telemedicine visits)	Free
Up to \$100/year in step tracking rewards	✓
Free preventive care	✓
Dedicated Concierge	✓
<b>Prices before you meet your deductible</b>	
Primary Care / OBGYN visits	\$50
Specialist visits	\$75
Mental health office visits	\$50
Urgent Care	\$100
Labs	\$75
Xrays & Diagnostic Imaging	Negotiated rate <sup>1</sup>
MRIs & Advanced Imaging	Negotiated rate <sup>1</sup>
Emergency Room	Negotiated rate <sup>1</sup>
Outpatient Facility / Inpatient Facility	Negotiated rate <sup>1</sup>
Prescription drugs: Retail (Tier 1 / 2 / 3 )	\$10 / Negotiated rate <sup>1</sup> (Tier 2 & 3)
<b>Prices after you meet your deductible</b>	
Primary Care / OBGYN visits	\$50
Specialist visits	\$75
Mental health office visits	\$50
Urgent Care	\$100
Labs	\$75
Xrays & Diagnostic Imaging	50% <sup>2</sup>
MRIs & Advanced Imaging	50% <sup>2</sup>
Emergency Room	50% <sup>2</sup>
Outpatient Facility / Inpatient Facility	50% <sup>2</sup>
Prescription drugs: Retail (Tier 1 / 2 / 3 )	\$10 / 50% <sup>2</sup> / 50% <sup>2</sup>

## Why does Oscar offer this plan?

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 created an off-exchange Silver alternative: the Oscar Silver 70 Off-Exchange Only Plan.

## What should I know about this plan?

- It is only available off of the exchange.
- It has lower premiums than comparable Silver tier plans on the exchange.

## Is this plan right for me?

- If you will not qualify for subsidies on the government exchange at any point in 2019, and are seeking a Silver tier plan, this may be a good option for you.

<sup>1</sup> Negotiated rate: We've negotiated lower rates with in-network providers. Member pays Oscar's preferred rate with in-network providers until reaching the plan's deductible.

<sup>2</sup> Member pays coinsurance percentage (of negotiated rate) until deductible and out-of-pocket max is reached. Plan pays 100% thereafter.