## 2023 OptimaFit **Direct Plans** | **ON** & **OFF Exchange**

ON Exchange Plan Name OFF Exchange Plan Name	OptimaFit Gold 1300 20% Direct M OptimaFit Gold 1300 20% Direct	OptimaFit Gold 2200 20% Direct M OptimaFit Gold 2200 20% Direct	OptimaFit Silver 3800 25% Direct M OptimaFit Silver 3800 25% Direct	OptimaFit Silver 6600 30% Direct M OptimaFit Silver 6600 30% Direct	OptimaFit Bronze 6250 20% HSA Direct M OptimaFit Bronze 6250 20% HSA Direct	OptimaFit Bronze 7200 40% Direct M OptimaFit Bronze 7200 40% Direct
n-Network Out-of-Pocket Max: Individual   Family	\$8,900   \$17,800	\$6,000   \$12,000	\$9,100   \$18,200	\$8,700 \$17,400	\$7,050   \$14,100	\$9,100   \$18,200
Coinsurance	20%	20%	25%	30%	20%	40%
Preventive Care	No charge	No charge	No charge	No charge	No charge	No charge
Physician Services						
rimary Care Physician (PCP) Office Visit (Tier 1   Tier 2 physician)	\$35   \$70	\$25   \$50	\$40   \$80	\$25   \$50	20% AD   50% AD	\$45   \$90
pecialist Office Visit (Tier 1   Tier 2 physician)	\$65   \$130	\$50   \$100	\$75   \$150	\$75 \$150	20% AD   50% AD	\$90 \$180
/irtual Consult	\$0	\$0	\$0	\$0	0% AD	\$0
mergency & Urgent Care Services						
Irgent Care	\$50	\$50	\$50	\$50	20% AD	\$50
mergency Room Care (In and Out-of-Network)	40% AD	40% AD	45% AD	50% AD	40% AD	50% AD
npatient Services						
npatient Hospital Services (Tier 1   Tier 2 facilities)	20% AD   50% AD	20% AD   50% AD	25% AD   50% AD	30% AD   50% AD	20% AD   50% AD	40% AD   50% AD
Outpatient Services						
Dutpatient Diagnostic Tests: X-ray, Ultrasound, EKG, etc. (Tier 1   Tier 2 facilities)	20% AD   50% AD	20% AD   50% AD	25% AD   50% AD	30% AD   50% AD	20% AD   50% AD	40% AD   50% AD
utpatient Advanced Diagnostic Tests: MRI, CT Scan, etc. Tier1   Tier 2 physician & facilities)	20% AD   50% AD	20% AD   50% AD	25% AD   50% AD	30% AD   50% AD	20% AD   50% AD	40% AD   50% AD
Outpatient Surgery (Tier 1   Tier 2 facilities)	20% AD   50% AD	20% AD   50% AD	25% AD   50% AD	30% AD   50% AD	20% AD   50% AD	40% AD   50% AD
Aental/Behavioral Health & Substance Use Disorder Services						
Outpatient Office Visits (PCP, Specialist, or Virtual Consults)	\$45	\$35	\$50	\$35	20% AD	\$50
npatient Services	20% AD	20% AD	25% AD	30% AD	20% AD	40% AD
Other Covered Services						
Aaternity Care (Tier 1   Tier 2 physician)	20% AD   50% AD	20% AD   50% AD	25% AD   50% AD	30% AD   50% AD	20% AD   50% AD	40% AD   50% AD
hiropractic Care (Spinal Manipulation)	20% AD	20% AD	25% AD	30% AD	20% AD	40% AD
hysical and Occupational Therapy (Tier 1   Tier 2 physician & facilities)	20% AD   50% AD	20% AD   50% AD	25% AD   50% AD	30% AD   50% AD	20% AD   50% AD	40% AD   50% AD
harmacy						
etail Prescription Drug Coverage ier 1   Tier 2   Tier 3   Tier 4	Medical deductible applies \$15   \$40   35% AD   35% AD	Medical deductible applies \$15   \$40   30% AD   30% AD	Medical deductible applies \$15   \$50   40% AD   40% AD	Medical deductible applies \$20   \$50   40% AD   40% AD	Medical deductible applies 20% AD   20% AD   35% AD   35% AD	Medical deductible applies \$20   40% AD   45% AD   45% A
Aail-Order Prescription Drug Coverage 'ier 1   Tier 2   Tier 3   Tier 4	Medical deductible applies \$45   \$120   35% AD   35% AD	Medical deductible applies \$45   \$120   30% AD   30% AD	Medical deductible applies \$45   \$150   40% AD   40% AD	Medical deductible applies \$60   \$150   40% AD   40% AD	Medical deductible applies 20% AD   20% AD   35% AD   35% AD	Medical deductible applies \$60   40% AD   45% AD   45% A

## **Optima Health. Better Rates. Better Benefits.**

Talk to an OptimaFit Plan Advisor today at 1-855-434-3269. Document also available in Spanish and Vietnamese.

This summary is for comparison purposes only. For complete details, please refer to the Benefit Summarys at optimahealth.com/brokers/summary-of-benefits

Optima Health is the trade name of Optima Health Plan, Optima Health Insurance Company, and Sentara Health Plans, Inc. OptimaFit Individual and Family Plans are issued and underwritten by Optima Health Plan. All Optima Health plans have benefit exclusions and limitations and terms under which the policy may be continued in force or discontinued.



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