**Standard POS Non-HSA Plans**

<table>
<thead>
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</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Single</td>
<td>Family</td>
<td>Single</td>
<td>Family</td>
<td>What Participants Pay</td>
<td>Single</td>
<td>Family</td>
<td>Single</td>
<td>Family</td>
<td>PCP</td>
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<tr>
<td>P500 COCHOICE_20</td>
<td>$500</td>
<td>$1,000</td>
<td>$1,000</td>
<td>20%</td>
<td>$2,500</td>
<td>$5,000</td>
<td>$5,000</td>
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<td>$6,000</td>
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<td>P2500 COCHOICE_20</td>
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<td>20%</td>
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<td>20%</td>
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<td>P4000 COCHOICE_20</td>
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<td>20%</td>
<td>$6,000</td>
<td>$12,000</td>
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<td>P5000 COCHOICE_20</td>
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<td>20%</td>
<td>$7,000</td>
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These summaries are intended to highlight and give a general description of the benefits available. For a complete description of benefits, please refer to the Summary of Participant Responsibility Tables.

**Pharmacy Benefits**

<table>
<thead>
<tr>
<th></th>
<th>In-Network</th>
<th>Out-of-Network</th>
</tr>
</thead>
<tbody>
<tr>
<td>SmartChoice (adherence generic drugs)</td>
<td>$0 per prescription or refill</td>
<td>Not Covered</td>
</tr>
<tr>
<td>Generic drugs</td>
<td>$25 per prescription or refill</td>
<td>Not Covered</td>
</tr>
<tr>
<td>Brand drugs</td>
<td>$45 per prescription or refill</td>
<td>Not Covered</td>
</tr>
<tr>
<td>Non-preferred drugs</td>
<td>$80 per prescription or refill</td>
<td>Not Covered</td>
</tr>
<tr>
<td>Preferred specialty drugs</td>
<td>25% after deductible</td>
<td>Not Covered</td>
</tr>
<tr>
<td>Non-preferred specialty drugs</td>
<td>40% after deductible</td>
<td>Not Covered</td>
</tr>
</tbody>
</table>

**Emergency/Urgent Care**

<table>
<thead>
<tr>
<th></th>
<th>In-Network</th>
<th>Out-of-Network</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emergency Room</td>
<td>$400 per visit</td>
<td>$400 per visit</td>
</tr>
<tr>
<td>Urgent Care</td>
<td>$150 per visit</td>
<td>40% after deductible</td>
</tr>
</tbody>
</table>

**MDLIVE® Virtual Visits**

$0 per visit for all Value POS Non-HSA Plans. Benefits are only available through the Network Health virtual visit provider network.