

AN AFFORDABLE LOCAL PLAN FOR SOUTHEAST TEXAS

Community Health Choice's Marketplace coverage is leading the greater Houston and Beaumont areas with nine great plans.



CommunityHealthChoice.org

**COMMUNITY
HEALTH CHOICE**
COMMUNITY CARES.





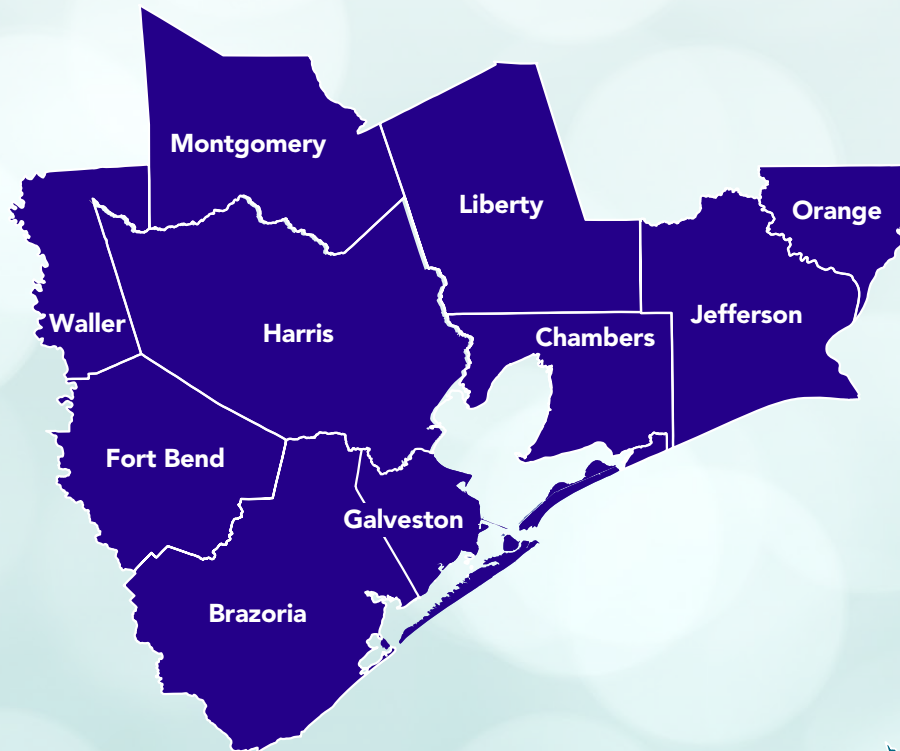
WHO IS COMMUNITY HEALTH CHOICE?

Community Health Choice is a local, non-profit health plan that exists to make sure people have health insurance coverage so they can get the care they need.

We've been offering Health Insurance Marketplace plans ever since they were introduced in 2014. We've grown our plans and our service from the very beginning.

THE NETWORK SOUTHEAST TEXAS NEEDS

In an effort to provide the highest level of care and accessibility to our Members, we've created a network of over 6,500 trusted Providers including over 70 acute care hospitals across 10 counties in Southeast Texas.



OUR LIMITED NETWORK PLANS

Community also offers two separate plans through its partnership with Kelsey-Seybold Clinic: the Silver Limited Network Plan and the Gold Limited Network Plan. These plans offer the Kelsey-Seybold Clinic network of clinics and doctors, which makes Members of these independent plans a part of Kelsey-Seybold Clinic's acclaimed system of coordinated care.



MEMBER COST SHARE	Deductible Plans					Copay Plans	
	High Deductible Health Plan HSA Compatible Plan ID 27248TX0010008	HMO Bronze 003 Plan ID 27248TX0010003	HMO Lean Silver 009 ✓ Plan ID 27248TX0010009	HMO Silver 004 ✓ Plan ID 27248TX0010004	HMO Gold 005 Plan ID 27248TX0010005	Copay HMO Silver 002 ✓ Plan ID 27248TX0010002	Copay HMO Gold 001 Plan ID 27248TX0010001
Medical Deductible (individual/family)	\$6,750 / \$13,500	\$6,500 / \$13,000	\$5,000 / \$10,000	\$3,000 / \$6,000	\$750 / \$1,500	N/A	N/A
Out-of-Pocket Max (individual/family)	\$6,750 / \$13,500	\$7,900 / \$15,800	\$7,000 / \$14,000	\$7,900 / \$15,800	\$6,000 / \$12,000	\$7,900 / \$15,800	\$7,900 / \$15,800
PCP Office Visit	no charge after deductible	*\$40	*\$30	*\$30	*\$20	\$40	\$30
Specialist Office Visit	no charge after deductible	*\$70	\$60	*\$50	*\$40	\$75	\$65
Outpatient Facility	no charge after deductible	30%	30%	30%	20%	\$600	\$300
Medical Imaging (CT/PET Scans, MRIs)	no charge after deductible	30%	30%	30%	20%	\$500	\$500

PRESCRIPTION DRUGS

Prescription Drug Deductible (individual/family)	\$0	Combined with medical deductible	Combined with medical deductible	Combined with medical deductible	Combined with medical deductible	\$450 / \$900	N/A
Generic	no charge after deductible	*\$15	*\$15	*\$10	*\$10	*\$35	\$15
Preferred Brand	no charge after deductible	\$70	\$70	\$60	\$40	\$110	\$40
Non-Preferred Brand	no charge after deductible	\$120	\$120	\$100	\$70	\$120	\$80
Specialty High-Cost Drugs	no charge after deductible	45%	45%	45%	30%	50%	30%

MEMBER COST SHARE	Copay Plans	
	Community Health Choice Silver Limited Network Plan 007 ✓ Plan ID 27248TX0010007	Community Health Choice Gold Limited Network Plan 006 Plan ID 27248TX0010006
Medical Deductible (individual/family)	N/A	N/A
Out-of-Pocket Max (individual/family)	\$7,900 / \$15,800	\$7,900 / \$15,800
PCP Office Visit	\$40	\$30
Specialist Office Visit	\$75	\$65
Outpatient Facility	\$600	\$300
Medical Imaging (CT/PET Scans, MRIs)	\$500	\$500

PRESCRIPTION DRUGS

Prescription Drug Deductible (individual/family)	\$450 / \$900	N/A
Generic	*\$35	\$15
Preferred Brand	\$110	\$40
Non-Preferred Brand	\$120	\$80
Specialty High-Cost Drugs	50%	30%

✓ Your costs may be even less if you qualify for financial help.

* Services are exempt from deductible where indicated (PCP/Specialist/Urgent Care/Generic RX)

** Copay applies for first 5 days of admission for all inpatient services

For Deductible Plans: All coinsurance/copays apply after annual deductible has been met unless otherwise indicated

WE'RE COMMITTED TO HELPING YOU SUCCEED!

Building a Partnership

We want to take care of those who are helping us take care of our Members, so we offer an Agent Concierge service that includes:

- Designated agent support team and email
- Assistance with claims/billing/enrollment issues
- CHIP and Medicaid application assistance

Commission Structure

Community offers competitive commissions. Annual commission payout begins after the first month's premium payment is received and follows the annual commission payment schedule.



INTERESTED IN OFFERING COMMUNITY?

Tell us about your business goals and how we can connect your clients with high quality, affordable healthcare coverage.

Call a member of our sales team today at **713.295.6760**
or email them at **Agent.Credentialing@CommunityHealthChoice.org**.

**You can also learn more at
CommunityHealthChoice.org/Agent-Portal**