



# AN **AFFORDABLE** **LOCAL PLAN** FOR SOUTHEAST TEXAS

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

**A Healthy Life  
for Every Texan**

[CommunityHealthChoice.org](https://CommunityHealthChoice.org)





## 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.

# WHY PICK **COMMUNITY?**

**1**

**Network** - Community Health Choice plans connect Members with the largest network of doctors and hospitals in Southeast Texas.

**2**

**Telehealth** - Telehealth lets Members access health care services remotely and manage their health care using digital information and communication technologies, such as computers, tablets, and mobile devices. Community Members have 24/7/365 access to quality medical care via video and telephone consultations, right in the privacy of their own home. Best of all, there's no copay.

**3**

**Low copays for most services** - Community provides easy-to-understand plans with low copays for most services, including primary care, basic laboratory and X-ray services, and generic prescriptions. This gives Members peace of mind knowing they can predict out-of-pocket costs.

**4**

**No-deductible plan** - With no deductible and copays for almost all services, the Community Health Choice HMO Gold 001 plan gives Members a clear understanding of out-of-pocket costs.

**5**

**Services never subject to a deductible** - To ensure Members get the care they need, Primary Care Provider visits, preventive care, urgent care, and generic prescriptions are never subject to a deductible with Community's plans, except for HSA-eligible plans. Members pay a copay only for these services.

**6**

**No referral needed to see a specialist** - Community provides access to our wide network of specialty Providers without requiring Members to get a referral from their primary care provider. To help manage costs, Members should always make sure their Provider and specialist participate in Community's network.

# THE NETWORK SOUTHEAST TEXAS NEEDS

**Service Area Expansion** – Community expanded our Marketplace service area to include the following counties: Walker, San Jacinto, Polk, Tyler, Jasper, Newton, Hardin, Austin, Wharton, and Matagorda. This means we will now offer CHIP, STAR, and Marketplace in the same 20-county service area.



# OUR PLANS

**Your premium can be lower, based on your income.**

No matter which metal category you choose, you can save a lot of money on your monthly premium based on your income. When you fill out a Marketplace insurance application, you'll find out if you qualify for these savings. Visit **HealthCare.gov** for more information.



# BRONZE PLAN 003

LOWEST PREMIUMS

HIGHER OUT-OF-POCKET COST FOR SERVICES



## Important Features of 2020 Community Bronze Plan:

1. No copay increase
2. PCP, Specialists, urgent care, and generic drugs are available before deductible
3. Telehealth services available
4. Referrals not required to see Specialists
5. Preventive Care is available at no cost



## Things to Keep in Mind:

1. Out-of-network services are not covered under this plan
2. Prior Authorization/Step Therapy requirements apply to some medical and pharmacy benefits

■ Medical Deductible (Individual)	\$7,150
■ Maximum Out-of-Pocket (Individual)	\$8,150
■ Primary Care Physician Office Visit	\$40*
■ Specialist Office Visit	\$70*
■ Urgent Care Visit	\$70*
■ Emergency Room Visit	30%
■ Inpatient Hospital Stay	30%
■ Prescription Drug Deductible	Combined with Medical Deductible
■ Generic	\$15*
■ Preferred Brand	\$70
■ Non-Preferred Brand	\$120
■ Specialty High-Cost Drugs	45%

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

# BRONZE PLAN 008

## LOWEST PREMIUMS

## HEALTH SAVINGS ACCOUNT ELIGIBLE



### Important Features of 2020 Community Bronze 008 HSA Plan:

1. You must pay all costs until deductible is met
2. Plan covers all costs after deductible is met
3. Telehealth services are not available
4. Referrals not required to see Specialists



### Things to Keep in Mind:

1. Out-of-network services are not covered under this plan
2. Prior Authorization/Step Therapy requirements apply to some medical and pharmacy benefits

■ Medical Deductible (Individual)	\$6,750
■ Maximum Out-of-Pocket (Individual)	\$6,750
■ Primary Care Physician Office Visit	No charge after deductible
■ Specialist Office Visit	No charge after deductible
■ Urgent Care Visit	No charge after deductible
■ Emergency Room Visits	No charge after deductible
■ Inpatient Hospital Stay	No charge after deductible
■ Prescription Drug Deductible	No charge after deductible
■ Generic	No charge after deductible
■ Preferred Brand	No charge after deductible
■ Non-Preferred Brand	No charge after deductible
■ Specialty High-Cost Drugs	No charge after deductible



# SILVER PLAN 004

## MODERATE PREMIUMS

## LOW TO MODERATE COST-SHARING



### Important Features of 2020 Community Silver Plan:

1. No copay increases
2. PCP, urgent care, and generic drugs are not subject to deductible
3. Telehealth services available
4. Referrals not required to see Specialists
5. Preventive Care is available at no cost

*The Advanced Premium Tax Credit can lower your monthly payment.  
If you're eligible, you can apply it to any Bronze, Silver or Gold plan.*



### Things to Keep in Mind:

1. Out-of-network services are not covered under this plan
2. Prior Authorization/Step Therapy requirements apply to some medical and pharmacy benefits

■ Medical Deductible (Individual)	Medical and Drug: \$3,000
■ Maximum Out-of-Pocket (Individual)	\$7,900
■ Primary Care Physician Office Visit	\$30*
■ Specialist Office Visit	\$60*
■ Urgent Care Visit	\$60*
■ Emergency Room Visit	30%
■ Inpatient Hospital Stay	30%
■ Prescription Drug Deductible	Combined with Medical Deductible
■ Generic	\$10*
■ Preferred Brand	\$60
■ Non-Preferred Brand	\$100
■ Specialty High-Cost Drugs	45%

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



# SILVER PLAN 009

## MODERATE PREMIUMS

### LOW TO MODERATE COST-SHARING



#### Important Features of 2020 Community Silver Plan:

1. No copay increases
2. PCP, urgent care, and generic drugs are not subject to deductible
3. Telehealth services available
4. Referrals not required to see Specialists
5. Preventative Care is available at no cost

*The Advanced Premium Tax Credit can lower your monthly payment. If you're eligible, you can apply it to any Bronze, Silver or Gold plan.*



#### Things to Keep in Mind:

1. Out-of-network services are not covered under this plan
2. Prior Authorization/Step Therapy requirements apply to some medical and pharmacy benefits

■ Medical Deductible (Individual)	Medical and Drug: \$5,000
■ Maximum Out-of-Pocket (Individual)	\$7,000
■ Primary Care Physician Office Visit	\$30*
■ Specialist Office Visit	\$60
■ Urgent Care Visit	\$60*
■ Emergency Room Visit	30%
■ Inpatient Hospital Stay	30%
■ Prescription Drug Deductible	Combined with Medical Deductible
■ Generic	\$15*
■ Preferred Brand	\$70
■ Non-Preferred Brand	\$120
■ Specialty High-Cost Drugs	45%

\*Services are exempt from deductible where indicated (PCP/Urgent Care/Generic Rx)

# GOLD DEDUCTIBLE PLAN 005

HIGH MONTHLY PREMIUMS  
LOW TO MODERATE COST-SHARING



## Important Features of 2020 Community Gold Plan:

1. PCP, urgent care, and generic drugs are not subject to deductible
2. Telehealth services available
3. Referrals not required to see Specialists
4. Preventive Care is available at no cost

*The Advanced Premium Tax Credit can lower your monthly payment.  
If you're eligible, you can apply it to any Bronze, Silver or Gold plan.*



## Things to Keep in Mind:

1. Out-of-network services are not covered under this plan
2. Prior Authorization/Step Therapy requirements apply to some medical and pharmacy benefits

■ Medical Deductible (Individual)	Medical and Drug: \$750
■ Maximum Out-of-Pocket (Individual)	\$6,500
■ Primary Care Physician Office Visit	\$20*
■ Specialist Office Visit	\$40*
■ Urgent Care Visit	\$40*
■ Emergency Room Visit	20%
■ Inpatient Hospital Stay	20%
■ Prescription Drug Deductible	Combined with Medical Deductible
■ Generic	\$10*
■ Preferred Brand	\$40
■ Non-Preferred Brand	\$70
■ Specialty High-Cost Drugs	30%

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

# GOLD COPAY PLAN 001

HIGH MONTHLY PREMIUMS  
LOW TO MODERATE COST-SHARING



## Important Features of 2020 Community Gold Plan:

1. Telehealth services available
2. Referrals not required to see Specialists
3. Preventive Care is available at no cost

*The Advanced Premium Tax Credit can lower your monthly payment. If you're eligible, you can apply it to any Bronze, Silver or Gold plan.*



## Things to Keep in Mind:

1. Out-of-network services are not covered under this plan
2. Prior Authorization/Step Therapy requirements apply to some medical and pharmacy benefits

■ Medical Deductible (Individual)	Medical and Drug: \$0/\$0
■ Maximum Out-of-Pocket (Individual)	\$8,150
■ Primary Care Physician Office Visit	\$30
■ Specialist Office Visit	\$65
■ Urgent Care Visit	\$65
■ Emergency Room Visit	\$700
■ Inpatient Hospital Stay	\$700**
■ Prescription Drug Deductible	Combined with Medical Deductible
■ Generic	\$20
■ Preferred Brand	\$40
■ Non-Preferred Brand	\$80
■ Specialty High-Cost Drugs	30%

\*\*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



## FIND OUT **HOW YOU CAN** **GET COVERED** IN 2020!

**Visit** [CommunityHealthChoice.org](https://CommunityHealthChoice.org)

**Call** us at 713.295.6704 or Toll-free at 1.855.315.5386

**Email** [Marketplace@CommunityHealthChoice.org](mailto:Marketplace@CommunityHealthChoice.org)

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