

Plan Highlights: FFM Bronze



Plan Name	Core Care Bronze 4	Core Care Bronze 5
Deductible	\$0	\$0
Max OOP	\$8,550	\$8,550
PCP Copay	\$30	\$60
Specialist Copay	\$90	\$150
Urgent Copay	\$30	\$60
Teladoc Virtual Care	\$0	\$0
Inpatient Copay	\$1,500 / day 2 copay max	\$1,500 / day 2 copay max
Prescription Drug Deductible	\$3,000	\$3,000
Rx Tier 1	\$28	\$27
Rx Tier 2	\$125	\$130
Rx Tier 3	50% after deductible	50% after deductible
Rx Tier 4	50% after deductible	50% after deductible
Adult Vision Option	No	No

Plan Highlights: FFM Silver



Plan Name	Constant Care Silver 1 (100)	Constant Care Silver 1 (250)
Deductible	\$0	\$0
Max OOP	\$1,200	\$8,500
PCP Copay	\$0	\$30
Specialist Copay	\$10	\$60
Urgent Copay	\$0	\$30
Teladoc Virtual Care	\$0	\$0
Inpatient Copay	\$600/day 2 copay max	\$1,200 / day 2 copay max
Prescription Drug Deductible	\$0	\$800
Rx Tier 1	\$0	\$29
Rx Tier 2	\$10	\$60
Rx Tier 3	10% after deductible	40% after deductible
Rx Tier 4	10% after deductible	40% after deductible
Adult Vision Option	Yes	Yes

Plan Highlights: FFM Silver (cont'd)



Plan Name	Constant Care Silver 4 (100)	Constant Care Silver 4 (250)
Deductible	\$725	\$7,450
Max OOP	\$725	\$7,450
PCP Copay	\$0	\$30
Specialist Copay	\$10	\$65
Urgent Copay	\$0	\$30
Teladoc Virtual Care	\$0	\$0
Inpatient Copay	\$100 / day 2 copay max	\$1,500 / day 2 copay max
Prescription Drug Deductible	included in medical deductible	included in medical deductible
Rx Tier 1	\$0	\$25
Rx Tier 2	\$20	\$75
Rx Tier 3	0% after deductible	0% after deductible
Rx Tier 4	0% after deductible	0% after deductible
Adult Vision Option	No	No

Plan Highlights: FFM Gold



Plan Name	Confident Care Gold 1
Deductible	\$2,925
Max OOP	\$6,500
PCP Copay	\$10
Specialist Copay	\$50
Urgent Copay	\$10
Teladoc Virtual Care	\$0
Inpatient Copay	20% after deductible
Prescription Drug Deductible	Included in medical deductible
Rx Tier 1	\$10
Rx Tier 2	\$50
Rx Tier 3	30% after deductible
Rx Tier 4	30% after deductible
Adult Vision Option	Yes