

Price comparisons make it easier to shop for care.

GENERAL PLAN DETAILS

Deductible	\$0
Broad, national network	Yes
Out-of-pocket limit	
Employee	\$5,000
Family	\$10,000

PRESCRIPTION DRUGS

30-day

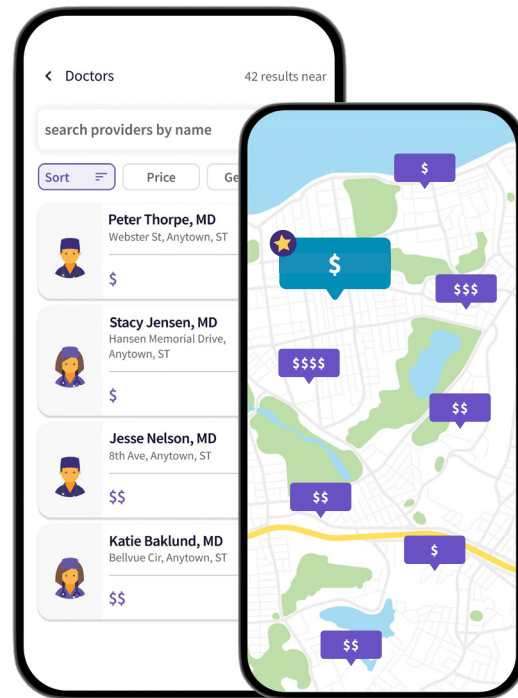
Preventive drugs	\$0
Tier 1	\$5
Tier 2	\$40
Tier 3	\$60

YOUR COPAYS

Preventive visit	\$0
Virtual visit (primary and urgent)	\$0
Virtual visit (specialty)	\$0 – \$65
Office visit	\$10 – \$65
Mental health and substance use disorder office visit	\$10
Urgent care visit	\$35
Emergency room visit	\$375
Basic diagnostic lab tests, X-rays, and ultrasounds	\$0
Physical therapy	\$5 – \$45
Maternity labor and delivery	\$625 – \$1,600

“The big ‘a-ha’ moment for me is **I know what I’m going to pay.** I never did before. Never.”

Freeman B., Surest member



Illustrative example only. Costs and coverage may vary.

See how powerful simple can be.



Check prices
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