



2020

BENEFITS SUMMARY

Individual and Family Health Plans

**Simple, comprehensive
health insurance to live
your healthiest life.**



Friday Health Plans includes benefits that keep you healthy year-round, with ironclad coverage if you get sick or hurt. All Friday Health Plans are ACA-compliant.



No cost?
Yes please.

Convenient Care.
Around the clock.



\$0 for your yearly checkup and three \$0 in-network primary care visits for each plan member

and other preventive services that help you stay healthy (\$0 after deductible for Bronze HSA)



Urgent care clinic visits

\$75 copay for Bronze, Silver and Gold plans (\$0 after deductible for Bronze HSA and Catastrophic plans)



\$0 for preferred generic drugs

The list includes thousands of generic prescription drugs (\$0 after deductible for Bronze HSA and Catastrophic plans)



Teladoc services

Reach a doctor 24/7 from your phone or computer, wherever you are, \$45 flat fee



Annual eye exam

\$0 in all plans with a VSP provider



DispatchHealth

Urgent care that comes to you (limited geographic availability)



Online Mental Health Visits

Access a licensed counselor through secure video or chat with Start Talking.

For a full list of benefits, provisions, exclusions and limitations, and to see everything included in Friday's plans and networks, please contact Friday Health Plans.

Friday Health Plans Benefits Overview

Friday Health Plans are ACA-compliant—we include all essential health benefits and do not exclude anyone for pre-existing conditions.



Plans/Visits	CATASTROPHIC (BELOW AGE 30)	BRONZE HSA	BRONZE RX COPAY	SILVER	SILVER RX COPAY	GOLD	GOLD RX COPAY
Individual Deductible / Family	\$8,150 / \$16,300	\$6,900 / \$13,800	\$8,150 / \$16,300	\$4,900 / \$9,800	\$3,850 / \$7,700	\$1,875 / \$3,750	\$550 / \$1,100
Individual Max Out of Pocket / Family	\$8,150 / \$16,300	\$6,900 / \$13,800	\$8,150 / \$16,300	\$8,150 / \$16,300	\$8,150 / \$16,300	\$7,500 / \$15,000	\$7,500 / \$15,000
Annual Wellness Visit	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Primary Care Visit	3 visits at \$0, then \$0 after Deductible	\$0 after Deductible	3 visits at \$0, then \$0 after Deductible	3 visits at \$0, then 20% after Deductible	3 visits at \$0, then 20% after Deductible	3 visits at \$0, then 20% after Deductible	3 visits at \$0, then 20% after Deductible
Specialist Visit	\$0 after Deductible	\$0 after Deductible	\$0 after Deductible	20% after Deductible	20% after Deductible	20% after Deductible	20% after Deductible
Teladoc*	\$45 Flat Fee	\$45 Flat Fee	\$45 Flat Fee	\$45 Flat Fee	\$45 Flat Fee	\$45 Flat Fee	\$45 Flat Fee
Annual Vision Exam	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Urgent Care Visit	\$0 after Deductible	\$0 after Deductible	\$75 Copay	\$75–\$80 Copay	\$75–\$80 Copay	\$75 Copay	\$75 Copay
Behavioral Health Visit	\$0 after Deductible	\$0 after Deductible	\$0 after Deductible	20% after Deductible	20% after Deductible	20% after Deductible	20% after Deductible
X-ray and Imaging	\$0 after Deductible	\$0 after Deductible	\$0 after Deductible	20% after Deductible	20% after Deductible	20% after Deductible	20% after Deductible
Inpatient Stay	\$0 after Deductible	\$0 after Deductible	\$0 after Deductible	20% after Deductible	20% after Deductible	20% after Deductible	20% after Deductible
Emergency Room	\$0 after Deductible	\$0 after Deductible	\$0 after Deductible	50% after Deductible	50% after Deductible	50% after Deductible	50% after Deductible
Drugs	CATASTROPHIC (BELOW AGE 30)	BRONZE HSA	BRONZE RX COPAY	SILVER	SILVER RX COPAY	GOLD	GOLD RX COPAY
Preventive ACA Drugs	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Preferred Generic	\$0 after Deductible	\$0 after Deductible	\$0	\$0	\$0	\$0	\$0
Preferred Brand	\$0 after Deductible	\$0 after Deductible	Up to \$250 Copay	20% after Deductible	Up to \$250 Copay	20% after Deductible	Up to \$250 Copay
Non-Preferred Generic / Brand	\$0 after Deductible	\$0 after Deductible	Up to \$350 Copay	50% after Deductible	Up to \$350 Copay	50% after Deductible	Up to \$350 Copay
Specialty Drugs	\$0 after Deductible	\$0 after Deductible	Up to \$675 Copay	45% after Deductible	Up to \$675 Copay	45% after Deductible	Up to \$625 Copay

Benefits apply only within the Friday medical provider network, except in medical emergencies.

*Teladoc is a value-added service, does not apply toward deductible or max out-of-pocket.

New for 2020

Friday Health Plans

Colorado Network



One seamless network across Colorado

Friday's new health network gives you access to providers and facilities in all regions Friday serves.

Your healthcare is only covered when you use in-network doctors, hospitals or facilities, except in a medical emergency.



No referrals for most doctors, services and specialists in the Friday network.



Visit the medical provider lookup for a full list of in-network doctors and facilities near you, plus additional independently contracted pediatricians, OBGYN's and primary care doctors in all regions.

fridayhealthplans.com

800-475-8466





Hospital Networks

- + SCL Health
- + Children’s Hospital Colorado
- + National Jewish Health
- + Centura Health
- + Banner Health
- + Many other local hospitals



Urgent Care Facilities and Options

- + Concentra
- + Locally contracted urgent care centers
- + DispatchHealth (Denver, Boulder, Colorado Springs)
- + Teladoc.com



Mental Health Providers

- + Heart-Centered Counseling
- + Mental Health Center of Denver
- + Peak Vista Community Health Center
- + Start Talking
- + Many more

Counties Served by Region

DENVER METRO

Adams	Boulder	Elbert
Arapahoe	Denver	Jefferson
Broomfield	Douglas	

NORTHERN COLORADO

Larimer	Weld
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WESTERN COLORADO

Mesa	Summit
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SOUTHERN & EASTERN COLORADO

Alamosa	Crowley	Las Animas
Archuleta	Custer	Lincoln
Baca	El Paso	Mineral
Bent	Fremont	Otero
Chaffee	Huerfano	Prowers
Cheyenne	Kiowa	Pueblo
Conejos	Kit Carson	Rio Grande
Costilla	La Plata	Saguache



monday tuesday wednesday thursday friday[®] health plans of colorado

We're here to help 800.475.8466
questions@fridayhealthplans.com

CONNECT WITH US



This document provides a brief overview of the benefits offered under this Friday Health Plans Policy. Full information is available in the Evidence of Coverage. To request a copy of the Evidence of Coverage, call **800.475.8466** or visit fridayhealthplans.com.

Learn more about **Connect for Health Colorado** and financial assistance at ConnectforHealthCO.com

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