

## What are value plans?

Value plans are health plans that offer lower deductibles and useful coverage for more health care services before your deductible is met. Value plans are designed to lower your out-of-pocket costs for the health care services the majority of people use most frequently.

## How can I tell which plans are value plans?

All value plans include “Value” in the plan names you will see when shopping on Maryland Health Connection.

## What’s covered and how much does it cost?

All value plans include doctor and specialist visits, generic drugs, urgent care and more before you meet the deductible. Also, enrollees with diabetes pay \$0 for many diabetes-related services, medications, and supplies. Insulin, test strips, and glucometers are free in value plans. Other free diabetes services include eye and foot exams, certain tests, and more.

When choosing a health insurance plan, it’s important to look at what costs you will be responsible for and what costs the insurance company will cover. All value plans are required to cover core benefits with a copay before you meet your deductible, and preventive services are free.

Plan Metal Level	Bronze	Silver	Gold
<b>Medical Deductible</b>	<b>\$9,200</b>	<b>\$0, \$1,000, or \$4,500*</b>	<b>\$1,000</b>
<b>Included free in all plans</b>	<ul style="list-style-type: none"> <li>Preventive care</li> <li>Diabetes care including insulin, glucometers, test strips and certain routine diabetes care services, such as foot exams and lab tests. For the full list of diabetic care benefits, visit <a href="https://MarylandHealthConnection.gov/Value-Plan">MarylandHealthConnection.gov/Value-Plan</a>.</li> </ul>		
<b>Services covered with a copay before deductible is met</b>	<ul style="list-style-type: none"> <li>Primary care (\$35)</li> <li>Urgent care (\$75)</li> <li>Specialist visit (\$100)</li> <li>Mental health and substance use disorder office visits (\$35)</li> <li>Lab tests (\$80)</li> <li>X-rays and diagnostics (\$150)</li> <li>Generic drugs (\$25)</li> </ul>	<ul style="list-style-type: none"> <li>Primary care (\$5-\$35)</li> <li>Urgent care (\$15-\$75)</li> <li>Specialist visit (\$20-\$100)</li> <li>Mental health and substance use disorder office visits (\$5-\$35)</li> <li>Lab tests (\$5-\$80)</li> <li>X-rays and diagnostics (\$20-\$150)</li> <li>Generic drugs (\$0-\$25)</li> <li>Additional services for eligible enrollees**</li> </ul>	<ul style="list-style-type: none"> <li>Primary care (\$10)</li> <li>Urgent care (\$40)</li> <li>Specialist visit (\$35)</li> <li>Mental health and substance use disorder office visits (\$10)</li> <li>Lab tests (\$25)</li> <li>X-rays and diagnostics (\$50)</li> <li>Generic drugs (\$10)</li> <li>Preferred brand drugs (\$30)</li> </ul>

\* Depending on your income, you may be eligible for extra savings when you enroll in a Silver plan. For a household of one, the deductible would be \$0 if income is between \$20,783 – \$22,590; \$1,000 if income is between \$22,591 – \$30,120; or \$4,500 if income is between \$30,121 – \$37,650. For larger households, see what plans you are eligible for by providing your income information when you apply or [get an estimate](#).

\*\* For those who are eligible, some Silver plans cover additional services and medications before deductible is met. To find out if you are eligible, enter your income when you apply at [MarylandHealthConnection.gov](https://MarylandHealthConnection.gov) or [get an estimate](#).

## Understanding your health insurance

**Coinsurance:** Your share of the costs of a covered health care service, calculated as a percent, versus copayment paid at the time of service.

**Copayment:** A fixed amount you pay for a covered health service, usually when you receive the service.

**Core benefits** will be covered partially by the insurance company. These include: doctor visits, hospitalization, emergency care, maternity and newborn care, pediatric care, prescription drugs, lab tests and more.

**Deductible:** How much you have to spend for covered health services before your insurance company pays anything.

**Out-of-pocket maximum:** The most you have to spend for covered services in a year. After you reach this amount, the insurance company pays 100% for covered services.

**Preventive services** are free when you see a doctor in your network, including wellness visits, shots and screenings.



## Where can I compare all the value plans side by side?

You can use the “Compare Plans” feature while you are shopping for a health plan on [MarylandHealthConnection.gov](https://MarylandHealthConnection.gov).

When you shop for a plan through [MarylandHealthConnection.gov](https://MarylandHealthConnection.gov), you can review exactly what is covered, and the costs for specific medical services.