



Friday's health plan benefits help you take a holistic approach to your health by keeping your mind and body covered.

No cost? Yes please.

Unlimited \$0 Primary Care Visits On Many Plans

Easily take care of yourself and your family when you're sick or hurt with \$0 doctor visits.

\$0 Annual Wellness Exam

Say your yearly "hello" to your annual wellness exam, be proactive with a flu shot, and check out other preventive services that help you stay healthy.*

Unlimited \$0 Mental Health Visits

Because we believe that mental health is as important as physical health, Friday offers many plans with \$0 mental health visits.**

\$0 Preferred Generic Drugs

Thousands of \$0 preferred generic drugs on many plans.***

\$0 Annual Eye Exam

Get your vision checked for \$0 through VSP.

\$0 for Teladoc Services

Reach a doctor 24/7 from your phone or computer, wherever you are. *, ****

\$0 for Teladoc Mental Health

Talk to a mental health counselor from the comfort of your home by phone or video for \$0. Services are for members aged 18+.**, ****

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 of Colorado, Inc.

^{*} Per ACA guidelines, if your doctor does additional tests or provides treatments, you may have additional costs.

^{**}Covers counseling visits only.

^{***}Based on Friday Health Plans formulary, which is subject to change.

^{****}Teladoc.com is a value-added service that allows you to chat with a doctor 24/7 by phone or online.



Friday Health Plans New Mexico Provider Network

One seamless network

Friday's health network gives you access to providers and facilities across the state.

Your benefits are covered when you use in-network doctors, hospitals or facilities. Emergency care is covered in and out of network.



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



Visit the medical provider lookup at carenavigator.fridayhealthplans.com

for a full list of in-network doctors and facilities near you.

Friday Provider Network

Hospital Networks

- + Presbyterian Hospital
- + Presbyterian Kaseman Hospital
- + Presbyterian Rust Medical Center
- + Presbyterian Santa Fe Medical Center
- + Presbyterian Española Hospital
- + Dr. Dan C. Trigg Memorial Hospital
- + Socorro General Hospital
- + Lincoln County Medical Center
- + Plains Regional Medical Center
- + OptumCare
- + HME Specialist (DME)
- + New Mexico Cancer Center

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.

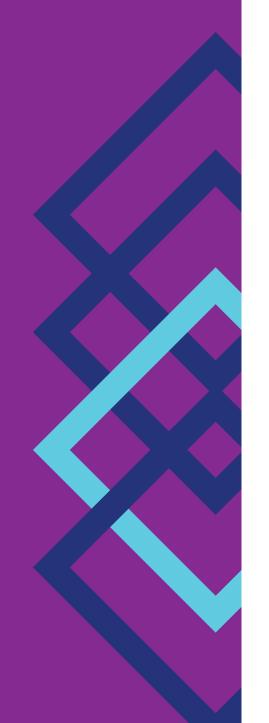
Copay: A copay is a fixed dollar amount you pay for certain covered health expenses, usually at the time you receive services (for example, a \$25 copay for an office visit). Copays do not count toward your deductible.

Deductible: The amount you pay for all your covered health services in a year before your insurance begins to pay for your health care.

Plans/Visits	BRONZE PLUS	BRONZE PLUS COPAY	BRONZE HSA	SILVER	SILVER COPAY	GOLD	GOLD COPAY
Individual Deductible/Family	\$8,700 / \$17,400	\$8,700 / \$17,400	\$7,000 / \$14,000	\$5,500 / \$11,000	\$5,500 / \$11,000	\$2,300 / \$4,600	\$2300 / \$4,600
Individual Max Out of Pocket/Family	\$8,700/\$17,400	\$8,700 / \$17,400	\$7,000 / \$14,000	\$8,700 / \$17,400	\$8,700 / \$17,400	\$8,250 / \$16,500	\$8,250 / \$16,500
Annual Wellness Visit	\$0 Copay						
Primary Care Visit	\$25 Copay	\$25 Copay	\$0 after Deductible	\$0 Copay	\$0 Copay	\$0 Copay	\$0 Copay
Mental Health Visit	\$0 Copay	\$0 Copay	\$0 after Deductible	\$0 Copay	\$0 Copay	\$0 Copay	\$0 Copay
Specialist Visit	\$0 after Deductible	\$180 Copay	\$0 after Deductible	20% after Deductible	\$80 per Visit	20% after Deductible	\$60 Copay
Annual Vision Exam	\$0 Copay						
Teladoc*	\$0 per Visit						
Urgent Care Visit	\$75 Copay	\$200 Copay	\$0 after Deductible	\$75 Copay	\$100 Copay	\$75 Copay	\$75 Copay
X-ray and Imaging	\$0 after Deductible	\$0 after Deductible	\$0 after Deductible	20% after Deductible	\$100 Copay	20% after Deductible	\$100 Copay
Inpatient Stay	\$0 after Deductible	\$0 after Deductible	\$0 after Deductible	20% after Deductible	30% after Deductible	20% after Deductible	20% after Deductible
Emergency Room	\$0 after Deductible	\$0 after Deductible	\$0 after Deductible	50% after Deductible	30% after Deductible	45% after Deductible	45% after Deductible
Drugs	BRONZE PLUS	BRONZE PLUS COPAY	BRONZE HSA	SILVER	SILVER COPAY	GOLD	GOLD COPAY
Preventive ACA Drugs	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Preferred Generic	Up to \$30 Copay	Up to \$40 Copay	\$0 after Deductible	\$0	Up to \$30 Copay	\$0	Up to \$10 Copay
Preferred Brand	\$0 after Deductible	Up to \$180 Copay	\$0 after Deductible	20% after Deductible	Up to \$80 Copay	20% after Deductible	Up to \$40 Copay
Non-Preferred Generic/Brand	\$0 after Deductible	\$0 after Deductible	\$0 after Deductible	50% after Deductible	Up to \$150 Copay	43% after Deductible	Up to \$75 Copay
Specialty Drugs	Up to \$500 Copay	Up to \$500 Copay	\$0 after Deductible	50% after Deductible	Up to \$425 Copay	50% after Deductible	Up to \$300 Copay

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

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



Friday Health Plans Individual and Family Silver Cost-Share Reduction Plans

Plans / Visits	SILVER 73%	SILVER COPAY 73%	SILVER 87%	SILVER COPAY 87%	SILVER 94%	SILVER COPAY 94%
Individual Deductible / Family	\$4,000 / \$8,000	\$4,000 / \$8,000	\$1,000 / \$2,000	\$1,000 / \$2,000	\$0	\$0
Individual Max Out of Pocket / Family	\$6,950 / \$13,900	\$6,950 / \$13,900	\$2,900 / \$5,800	\$2,900 / \$5,600	\$2,900 / \$5,800	\$2,900 / \$5,600
Annual Wellness Visit	\$0 Copay					
Primary Care Visit	\$0 Copay					
Mental Health Visit	\$0 Copay					
Specialist Visit	20% after Deductible	\$80 Copay	15% after Deductible	\$40 Copay	10% after Deductible	\$20 Copay
Annual Vision Exam	\$0 Copay					
Teladoc*	\$0 per Visit					
Urgent Care Visit	\$75 Copay	\$100 Copay	\$50 Copay	\$50 Copay	\$25 Copay	\$25 Copay
X-ray and Imaging	20% after Deductible	\$100 Copay	15% after Deductible	\$50 Copay	10% after Deductible	\$25 Copay
Inpatient Stay	20% after Deductible	20% after Deductible	15% after Deductible	15% after Deductible	10% after Deductible	10% after Deductible
Emergency Room	50% after Deductible	20% after Deductible	30% after Deductible	15% after Deductible	20% after Deductible	10% after Deductible
Drugs	SILVER 73%	SILVER COPAY 73%	SILVER 87%	SILVER COPAY 87%	SILVER 94%	SILVER COPAY 94%
Preventive ACA Drugs	\$0	\$0	\$0	\$0	\$0	\$0
Preferred Generic	\$0	Up to \$25 Copay	\$0	Up to \$10 Copay	\$0	\$0
Preferred Brand	20% after Deductible	Up to \$80 Copay	15% after Deductible	Up to \$40 Copay	10% after Deductible	Up to \$20 Copay
Non-Preferred Generic / Brand	50% after Deductible	Up to \$150 Copay	30% after Deductible	Up to \$75 Copay	20% after Deductible	Up to \$75 Copay
Specialty Drugs	50% after Deductible	Up to \$425 Copay	30% after Deductible	Up to \$240 Copay	20% after Deductible	Up to \$240 Copay

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





Access Your Health Plan Anywhere

Download the Friday Mobile App

- + Display ID cards
 - + Find a doctor
- + Make a payment
 - + View claims





Follow Friday Health Plans for tips on how to get the most out of your health plan, member perks and more!







WE'RE HERE TO HELP 844-805-5000

questions@fridayhealthplans.com

Atención: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 844-805-5000 (TTY: 800-659-2656).

This document provides a brief overview of the benefits and services offered for certain plans. See plan documents for a complete description of benefits, exclusions, limitations and conditions of coverage. To request a copy of the Evidence of Coverage, call **844-805-5000** or visit **fridayhealthplans.com**.



All products, services and policies are issued by or through Friday Health Plans of Colorado, Inc. and administered by Friday Health Plans Management Services Company, Inc. The Friday name, logo and other Friday marks are owned by Friday Health Plans, Inc. 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 of Colorado, Inc.