Individual & Family Plan Options – Wisconsin 2022

(Adams, Buffalo, Columbia, Crawford, Dodge, Fond du Lac, Grant, Green, Green Lake, Iowa, Jackson, Jefferson, Juneau, Lafayette, Marquette, Monroe, Richland, Rock, Sauk, Trempealeau, Vernon, Walworth, Waukesha, and Waushara counties)

Tiered Choice Plus Network

100-150% Federal Poverty Level	Network Tiers	Deductible (Single/Family)	Coinsurance	Maximum Out-of-Pocket (Single/Family)	Virtual Visits	Office Visit (PCP/Specialist)	Mental Health Outpatient	Hospital (Inpatient/Outpatient) MRI/PET/CAT	Urgent Care	Emergency Room	Pharmacy	Dental Coverage Available for an Additional Charge?	HSA Eligible?	Summary of Benefits and Coverage (SBC) Tracking ID
Silver 1305 - 06	Tier 1	\$75 / \$150	10%	\$1,000 / \$2,000	\$0	\$5 / \$10	\$5	Ded & Coins	\$10	\$100	\$5 / \$10 / 40% / 40%	Yes	No	TCS225118206
311421 1303 - 00	Tier 2	\$150 / \$300	10%	\$2,000 / \$4,000	\$3	\$10 / \$20	\$10	Ded & Coins	,					
Silver 1306 - 06	Tier 1	\$150 / \$300	20%	\$500 / \$1,000	\$0	\$10 / \$20	\$10	Ded & Coins	\$20	\$200	\$10 / \$30 / 40% / 40%	S Yes	No	TCS225118306
311VEI 1300 - 00	Tier 2	\$300 / \$600	20%	\$1,000 / \$2,000	\$10	\$20 / \$40	\$20	Ded & Coins						
150-200% Federal Poverty Level	Network Tiers	Deductible (Single/Family)	Coinsurance	Maximum Out-of-Pocket (Single/Family)	Virtual Visits	Office Visit (PCP/Specialist)	Mental Health Outpatient	Hospital (Inpatient/Outpatient) MRI/PET/CAT	Urgent Care	Emergency Room	Pharmacy	Dental Coverage Available for an Additional Charge?	HSA Eligible?	Summary of Benefits and Coverage (SBC) Tracking ID
Silver I305 - 05	Tier 1	\$1,000 / \$2,000	30%	\$1,500 / \$3,000	\$0	\$30 / \$50	\$30	Ded & Coins	\$50	\$300	\$10 / \$30 / 40% / 40%	Yes	No	TCS225118205
311VEI 13U3 - U3	Tier 2	\$2,000 / \$4,000	30%	\$2,900 / \$5,800	\$30	\$60 / \$100	\$60	Ded & Coins	\$30					
Silver 1306 - 05	Tier 1	\$1,000 / \$2,000	40%	\$1,500 / \$3,000	\$0	\$35 / \$60	\$35	Ded & Coins	\$60	\$400	\$10 / \$30 / 40% / 40%	Yes	No	TCS225118305
311VC1 1300 - 03	Tier 2	\$2,000 / \$4,000	40%	\$2,900 / \$5,800	\$30	\$70 / \$120	\$70	Ded & Coins	400	Ş - 00				
200-250% Federal Poverty Level	Network Tiers	Deductible (Single/Family)	Coinsurance	Maximum Out-of-Pocket (Single/Family)	Virtual Visits	Office Visit (PCP/Specialist)	Mental Health Outpatient	Hospital (Inpatient/Outpatient) MRI/PET/CAT	Urgent Care	Emergency Room	Pharmacy	Dental Coverage Available for an Additional Charge?	HSA Eligible?	Summary of Benefits and Coverage (SBC) Tracking ID
Silver 1305 - 04	Tier 1	\$3,250 / \$6,500	40%	\$5,250 / \$10,000	\$0	\$50 / \$90	\$50	Ded & Coins	600	\$475	\$20 / \$75 / 500/ / 600/	.,		TCS225118204
Silver1305 - 04	Tier 2	\$6,500 / \$13,000	40%	\$6,950 / \$13,900	\$30	\$100 / \$180	\$100	Ded & Coins	\$90	ఫ475	\$20 / \$75 / 50% / 60%	Yes	No	1C3225118204
Silver I306 - 04	Tier 1	\$3,000 / \$6,000	50%	\$5,000 / \$10,000	\$0	\$60 / \$110	\$60	Ded & Coins	\$100	\$450	\$20 / \$85 / 50% / 60%	Yes	No	TCS225118304
311VEF 1300 - 04	Tier 2	\$6,000 / \$12,000	50%	\$6,950 / \$13,900	\$30	\$120 / \$220	\$120	Ded & Coins	\$±00	\$45U	J20 / J03 / 30% / 00%	ies		

Quartz One Network

100-150% Federal Poverty Level	Deductible (Single/Family)	Coinsurance	Maximum Out-of-Pocket (Single/Family)	Virtual Visits	Office Visit (PCP/Specialist)	Mental Health Outpatient	Hospital (Inpatient/Outpatient) MRI/PET/CAT	Urgent Care	Emergency Room	Pharmacy	Dental Coverage Available for an Additional Charge?	HSA Eligible?	Summary of Benefits and Coverage (SBC) Tracking ID
Silver I303-06	\$625 / \$1,250	0%	\$625 / \$1,250	\$0	\$5 / \$10	\$5	Ded & Coins	\$10	\$50	\$5 / \$10 / 40% / 40%	Yes	No	Q1S225118706
Silver I304-06 Deductible*	\$475 / \$950	0%	\$475 / \$950	Ded & Coins	Ded & Coins	Ded & Coins	Ded & Coins	Ded & Coins	Ded & Coins	Ded & Coins	No	No	Q1S225406906
150-200% Federal Poverty Level	Deductible (Single/Family)	Coinsurance	Maximum Out-of-Pocket (Single/Family)	Virtual Visits	Office Visit (PCP/Specialist)	Mental Health Outpatient	Hospital (Inpatient/Outpatient) MRI/PET/CAT	Urgent Care	Emergency Room	Pharmacy	Dental Coverage Available for an Additional Charge?	HSA Eligible?	Summary of Benefits and Coverage (SBC) Tracking ID
Silver I 303-05	\$2,500 / \$5,000	0%	\$2,500 / \$5,000	\$0	\$15 / \$20	\$15	Ded & Coins	\$20	\$300	\$10 / \$30 / 40% / 40%	Yes	No	Q1S225118705



Silver I304-05 HSA*	\$1,400 / \$2,800	0%	\$1,400 / \$2,800	Ded & Coins	Ded & Coins	Ded & Coins	Ded & Coins	Ded & Coins	Ded & Coins	Ded & Coins	No	Yes*	Q1S225406905
200-250% Federal Poverty Level	Deductible (Single/Family)	Coinsurance	Maximum Out-of-Pocket (Single/Family)	Virtual Visits	Office Visit (PCP/Specialist)	Mental Health Outpatient	Hospital (Inpatient/Outpatient) MRI/PET/CAT	Urgent Care	Emergency Room	Pharmacy	Dental Coverage Available for an Additional Charge?	HSA Eligible?	Summary of Benefits and Coverage (SBC) Tracking ID
Silver I303-04	\$6,500 / \$13,000	0%	\$6,500 / \$13,000	\$0	\$50 / \$90	\$50	Ded & Coins	\$90	\$650	\$20 / \$80 / 50% / 60%	Yes	No	Q1S225118704
Silver I304-04 HSA*	\$3,700 / \$7,400	0%	\$3,700 / \$7,400	Ded & Coins	Ded & Coins	Ded & Coins	Ded & Coins	Ded & Coins	Ded & Coins	Ded & Coins	No	Yes*	Q1S225406904

^{*}Quartz HSA and Deductible family plans have an aggregate deductible. Aggregate means that if more than one person's covered by the plan, the "per person" deductible does not apply. The family deductible must be met before Quartz will pay benefits. One person's claims may satisfy the entire family deductible. Likewise, the "per person" Maximum-Out-of-Pocket Limit does not apply to family plans. However, to comply with Health Care Reform rules, one member of a family will never pay more than \$8,700.

Quartz is a Qualified Health Plan issuer in the Health Insurance Marketplace.

Quartz does not discriminate on the basis of race, color, national origin, disability, age, sex, gender identity, sexual orientation, or health status in the administration of the plan, including enrollment and benefit determinations.



^{**}Only applies to the first three office visits with PCP then deductible and coinsurance applies.