



2020 Small Employer Market Horizon Advantage EPO Health Plan Changes

Horizon Advantage EPO Gold 100 \$40/\$60	2019	2020
Primary Care Visit	\$30	\$40
Specialist Visit	\$50	\$60
Behavioral Health/Substance Use Disorder – Office Visit	\$30	\$40
Behavioral Health/Substance Use Disorder – Outpatient Facility	\$30	\$40
Home Health Care	\$30	\$40
Cognitive Rehabilitation Therapy – Office	\$30	\$40
Occupational Therapy – Office	\$30	\$40
Physical Therapy – Office	\$30	\$40
Speech Therapy – Office	\$30	\$40
Orthotic and Prosthetic	\$30	\$40

Horizon Advantage EPO Gold 100/80 \$20/\$40	2019	2020
Maximum Out-of-Pocket (MOOP) Limit – <i>Single</i>	\$5,500	\$6,000



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Horizon Advantage EPO Silver 100/70	2019	2020
Deductible – <i>Single</i>	\$2,200	\$2,450
Maximum Out-of-Pocket (MOOP) Limit – <i>Single</i>	\$7,900	\$8,150
Primary Care Visit	\$30	\$45
Specialist Visit	\$50	\$70
Behavioral Health/Substance Use Disorder – Office Visit	\$30	\$45
Cognitive Rehabilitation Therapy – Office Visit	\$30	\$40
Occupational Therapy – Office Visit	\$30	\$40
Physical Therapy – Office Visit	\$30	\$40
Speech Therapy – Office Visit	\$30	\$40
Home Health Care	\$30	\$45
Orthotic and Prosthetic	\$30	\$45



2020 Small Employer Market Horizon Advantage EPO Health Plan Changes

Horizon Advantage EPO Silver 100/50	2019	2020
Deductible – <i>Single</i>	\$2,000	\$2,200
Maximum Out-of-Pocket (MOOP) Limit – <i>Single</i>	\$7,900	\$8,150
Specialist Visit	\$50	\$60
Laboratory/Radiology (<i>non-complex</i>) – Outpatient Facility	\$75	\$100
Generic Drugs	\$15	\$20

Horizon Advantage EPO Gold 100/80 \$50 (Base Plan)	2019	2020
Maximum Out-of-Pocket (MOOP) Limit – <i>Single</i>	\$6,500	\$7,900

Horizon Advantage EPO HSA Bronze 100	2019	2020
Maximum Out-of-Pocket (MOOP) Limit – In-Network – <i>Single</i>	\$6,550	\$6,900
Laboratory/Radiology (<i>non-complex</i>) – Outpatient Facility	50% after deductible	\$100 after deductible
Laboratory/Radiology (<i>non-complex</i>) – Outpatient Professional	50% after deductible	No Charge after deductible