

## Premiums and Copayments

Income Category	Doctor Visit	Brand Name Prescription	Generic Prescription	Specialist Visit	Emergency Room Visit **	Monthly Premium
Free	\$0	\$0	\$0	\$0	\$0	\$0
Low-Cost 1	\$5.00 *	\$9.00	\$6.00	\$10.00	\$25.00	\$36.78
Low-Cost 2	\$5.00 *	\$9.00	\$6.00	\$10.00	\$25.00	\$51.49
Low-Cost 3	\$5.00 *	\$9.00	\$6.00	\$10.00	\$25.00	\$58.85
At Cost	\$15.00	\$18.00	\$10.00	\$25.00	\$50.00	\$148.29

\* Well-Child visits do not have a copay.

\*\*Emergency Room Visits co-pay applies if the child is not admitted for a hospital stay.



## Primas y copagos

Categoría de ingresos	Visitas médicas	Receta de medicamentos de marca	Receta de medicamentos genéricos	Visitas a especialistas	Visitas a la sala de emergenci **	Prima mensual
Free	\$0	\$0	\$0	\$0	\$0	\$0
Low-Cost 1	\$5.00 *	\$9.00	\$6.00	\$10.00	\$25.00	\$36.78
Low-Cost 2	\$5.00 *	\$9.00	\$6.00	\$10.00	\$25.00	\$51.49
Low-Cost 3	\$5.00 *	\$9.00	\$6.00	\$10.00	\$25.00	\$58.85
At Cost	\$15.00	\$18.00	\$10.00	\$25.00	\$50.00	\$148.29

\* No se aplica un copago a las visitas para niños sanos

\*\*En la visita de Emergencia, se aplicara el copago, solo si el niño no es hospitalizado.

