



# 2023 SureFit Plan Design

	SureFit Plan
<b>Coverage</b>	<b>In-Network Only</b>
<b>Medical Network Basis</b>	<b>TriCounty<sup>1</sup> SureFit Network</b>
<b>PCP Coordination of Medical Care</b>	<b>Yes</b>
<b>Medical Benefits</b>	
Deductible (Individual/Family)	\$150/\$250
Out of Pocket Max (Ind/Fam)(incl ded. & copay & Rx)	\$1,500/\$3,000
Coinsurance	30%
Telemedicine	\$0
Primary Care Physician OV	\$20/ \$0 M-DCPS Clinic
Tier 1 Specialist	\$50
Non-Tier 1 Specialist	N.A.
Outpatient BH	\$0
Physical Therapy	\$35
Speech & Occupational Therapies (40 days per year)	\$20 PCP/ \$50 SCP
Pulmonary Cardiac Therapy (40 days per year)	\$45
Chiropractic Care (30 days per year)	\$45
Convenience Care Centers	\$10
Urgent Care	\$40
Imaging	30% AD, or \$100 at non-hospital based
Inpatient Hospital	30% AD
Outpatient Hospital and Major Diagnostics	30% AD or \$100 at affiliated Non-hospital
Emergency Room	\$300/\$150 preferred facilities
Other - Hearing Aides	\$50 visit/ 30% AD for devices
Other - Bariatric Surgery	Not covered
<b>Prescription Drug Benefits (50% Retail only out-of-network benefit)</b>	
Prescription Drug Deductible (Ind/Fam)	N/A
Formulary	Same as OAP plans
Other - Insulin Copay Waiver	Yes
<b>Retail Drug Network (no coverage for maintenance meds after 3rd fill)</b>	
Generic Seven Drug Classes <sup>2</sup>	\$0
Generic	\$15 - no coverage for maintenance meds after 3rd fill
Generic ADD & ADHD	\$15
Preferred Brand (Including Specialty Drugs)	\$40 - no coverage for maintenance meds after 3rd fill
Non-Preferred Brand (Including Specialty Drugs)	\$125 - no coverage for maintenance meds after 3rd fill
<b>Mail Order Prescription (90 day supply)</b>	
Generic Seven Drug Classes <sup>2</sup>	\$0
Generic	\$30
Generic ADD & ADHD	\$30
Preferred Brand (Including Specialty Drugs)	\$80
Non-Preferred Brand (Including Specialty Drugs)	\$315

<sup>1</sup> Broward, Dade and Palm Beach Counties, FL

<sup>2</sup> 90-Day supply on Seven Drug Classes related to the following conditions: Asthma, Blood Pressure, Blood Thinner, Cholesterol, Diabetes, Osteoporosis, Prenatal Vitamins

AD = after deductible, OV = office visit