



# **2025 Small Employer**

Health Insurance Options - South Dakota

**AVERA TRADITIONAL AND DIRECT PLANS**

Plans are available in Rating Areas 1, 2, 3 and 4 beginning in 2025

# Your Partner In Offering Coverage to Move Your Business Forward

Avera Health Plans is there for you and your employees through routine primary care visits, birth and unplanned surgeries. For years, we've insured businesses like yours with comprehensive health benefits, value-added services and access to Avera's award-winning providers and facilities.



## REVIEW NETWORK AND COVERAGES

Avera Health Plans offers a variety of plans for your business to consider, categorized by network and plan type. For South Dakota ACA small groups, two networks are available – the Avera Health Plans Network and the Avera Direct Network. Beginning in 2025, SD plans offering the Avera Health Plans Network will be available to employers with headquarters in Rating Areas 1, 2, 3 and 4. The Avera Direct Plan Network is available to employers headquartered in the designated counties in Rating Areas 2 and 3.

### The Avera Health Plans Network and the Avera Direct Network



#### Avera Health Plans Network

The Avera Health Plans Network features Avera and other independent providers and facilities across the state of South Dakota and northwest Iowa. When searching for providers on AveraHealthPlans.com, please select AHP Network in the network drop-down tool.



#### Avera Direct Network

The Avera Direct Network features Avera owned, managed and leased providers and is available to employers headquartered in Brown, Lincoln and Minnehaha counties in South Dakota — providing access to more than 2,000 providers. This network provides zero out-of-network coverage. When searching for providers on AveraHealthPlans.com, please select Avera Direct Network in the network drop down tool.

#### Based on the amount of employees taking coverage, you will have the following number of plans to choose from:

- 1 – 2 employees: 1 plan
- 3 – 9 employees: 2 plans
- 10 – 24 employees: 3 plans
- 25 – 50 employees: 4 plans

NOTE: Avera Direct Network plans must include an Avera Health Plans Network plan option as well. Adding an Avera Direct Network plan may increase the number of plans a group is eligible to choose.

#### Essential Health Benefits

Our plans comply with the Affordable Care Act requirements and include the following 10 Essential Health Benefits.

1. Outpatient services
2. Emergency services
3. Hospitalization
4. Maternity and newborn care
5. Mental health and substance use disorder services
6. Prescription drugs
7. Rehabilitative and habilitative services and devices
8. Laboratory services
9. Pediatric services, including dental and vision
10. Preventive and wellness services and chronic disease management



To search for an in-network provider, access our provider directory at [AveraHealthPlans.com](https://AveraHealthPlans.com)





# EXPLORE VALUE-ADDED SERVICES

Members have access to these services with Avera Health Plans insurance at no cost (available to South Dakota and Iowa ACA Small Group health insurance plans).

## Fitness Incentives

Membership discounts at select fitness centers such as GreatLIFE Golf & Fitness Club and Avera McKennan Fitness Center could be available to you.

## Virtual Visits\*

Avera Health Plans virtual visits is an online video visit program designed to conveniently connect you with a provider for urgent care needs 24/7 when you don't have time to go to the clinic. Use it for simple illnesses such as flu or sinus infections. In addition to virtual visits for urgent care, new for 2025 are virtual visits for behavioral health. Now, you can talk with a licensed therapist or board-certified psychiatrist. It's an easy and convenient way to get the mental health support you need whether you're at home, work or on the go.

\*For most members. Some limitations apply. NOTE: IRS guidelines indicate that members with HSA-eligible plans may be subject to tax penalties if they use the free virtual visits. If you have an HSA-eligible plan, you may use your HSA or Flex spending dollars for this service.

## Employee Assistance Program (EAP)

Avera EAP offers confidential counseling sessions with a licensed mental health professional at no cost for employees, spouses and eligible dependents. EAP can help with issues such as parenting, marital counseling, balancing work and home life, depression, anxiety, grief and more. Employees and their family members each have access to a total of three EAP visits every year. These visits are available to your business' employees, even if the employee opts not to enroll in coverage from Avera Health Plans.

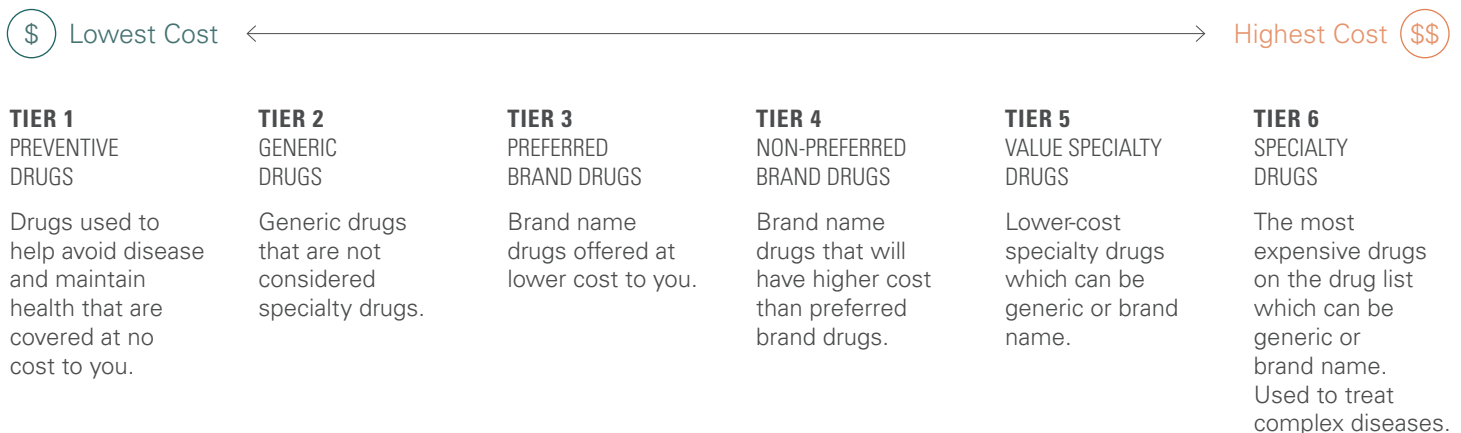
## Planet Heart Screenings

The best way to know your unique risk for cardiovascular disease is with a Planet Heart screening, available for men ages 40+ and women ages 45+. Planet Heart screenings scan for signs of cardiovascular disease to help you lower risk of heart attack and stroke.

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## Pharmacy Drug Tiers

Prescription drugs are divided into six tiers. The cost of a covered drug will depend on the tier where the drug is listed.



For additional details, please see your SBC on [AveraHealthPlans.com](http://AveraHealthPlans.com) where you can also find these resources:

- [Consumer Guide](#)
- [Provider Directory](#)
- [Drug Formulary](#)





**Let's get started.**



# Avera Traditional Plans

The Avera Traditional Plans feature the Avera Health Plans Network with Avera and other independent providers and facilities across the state of South Dakota and northwest Iowa. When searching for providers on AveraHealthPlans.com, please select AHP Network in the network drop-down tool. These plans are available statewide, unless otherwise noted.

	<b>Avera \$1500</b> <i>(only available in rating areas 2, 3 and 4)</i>	<b>Avera \$2000</b>	<b>Avera \$2500</b>
Individual	\$1,500	\$2,000	\$2,500
Family	\$3,000	\$4,000	\$5,000
<b>Coinsurance</b>			
	30%	30%	30%
<b>Out-of-Pocket Maximum</b>			
Individual	\$6,250	\$6,250	\$6,650
Family	\$12,500	\$12,500	\$13,300
<b>Medical Benefits</b>			
Preventive Care Services	No cost to member. This includes preventive immunizations, screenings, examst.		
Primary Care Physician Visit	Co-pay \$25	Co-pay \$0/visit* for the first 3 visits, then \$25 co-pay	Co-pay \$25
Urgent Care Services			
Chiropractic Visit			
Specialist Visit	Co-pay \$75	Co-pay \$75	Co-pay \$75
Lab and X-Ray (Diagnostic Test)	Co-pay \$25	Co-pay \$25	Co-pay \$25
Hospital Services	Medical deductible/ 30% coinsurance	Medical deductible/ 30% coinsurance	Medical deductible/ 30% coinsurance
Emergency Services	Co-pay \$500	Co-pay \$500	Co-pay \$500
Maternity Services	Medical deductible/ 30% coinsurance	Medical deductible/ 30% coinsurance	Medical deductible/ 30% coinsurance
Pediatric Vision Services	Included with all plans. No cost to member.		
Pediatric Dental Services			
Avera Virtual Visits	No cost to member.	No cost to member.	No cost to member.
<b>Mental Health and Substance Use Disorder</b>			
Outpatient Services/Avera Virtual Visits	Co-pay \$25	Co-pay \$0 visit* for the first 3 visits, then \$25 co-pay	Co-pay \$25
Inpatient Services	Medical deductible/ 30% coinsurance	Medical deductible/ 30% coinsurance	Medical deductible/ 30% coinsurance
<b>Pharmacy Benefits</b>			
Pharmacy Deductible - Individual	\$0	\$0	\$0
Pharmacy Deductible - Family	\$0	\$0	\$0
Tier 1: Preventive Drugs	\$0	\$0	\$0
Tier 2: Generic Drugs	\$15	\$15	\$15
Tier 3: Preferred Brand Drugs	\$50	\$50	\$50
Tier 4: Non-Preferred Brand Drugs	\$75	\$75	\$75
Tier 5: Value Specialty Drugs	\$10	\$10	\$10
Tier 6: Specialty Drugs (Brand and Generic)	30% coinsurance	30% coinsurance	30% coinsurance
	<b>Gold</b>	<b>Gold</b>	<b>Gold</b>
<b>Quote:</b>	\$	\$	\$

Please see list of disclaimers on the back cover.



# Avera Traditional Plans

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	Avera \$3300 HSA Eligible HDHP <sup>∞</sup>	Avera \$3500	Avera \$4000 <i>(only available in rating areas 2, 3 and 4)</i>
<b>Medical Deductible</b>			
Individual	\$3,300	\$3,500	\$4,000
Family	\$6,600	\$7,000	\$8,000
<b>Coinsurance</b>			
	10%	50%	40%
<b>Out-of-Pocket Maximum</b>			
Individual	\$4,000	\$9,200	\$9,200
Family	\$8,000	\$18,400	\$18,400
<b>Medical Benefits</b>			
Preventive Care Services	No cost to member. This includes preventive immunizations, screenings, examst.		
Primary Care Physician Visit	This is an HSA-compatible plan. Medical deductible/ 10% coinsurance	Co-pay \$0/visit* for the first 3 visits, then \$40 co-pay	Co-pay \$50
Urgent Care Services			
Chiropractic Visit			
Specialist Visit		Co-pay \$100	Co-pay \$100
Lab and X-Ray (Diagnostic Test)		Medical deductible/ 50% coinsurance	Medical deductible/ 40% coinsurance
Hospital Services		Co-pay \$700	Co-pay \$700
Emergency Services		Medical deductible/ 50% coinsurance	Medical deductible/ 40% coinsurance
Maternity Services			
Pediatric Vision Services	Included with all plans. No cost to member.		
Pediatric Dental Services			
Avera Virtual Visits	Medical deductible/ 10% coinsurance	No cost to member.	No cost to member.
<b>Mental Health and Substance Use Disorder</b>			
Outpatient Services/Avera Virtual Visits	This is an HSA-compatible plan. Medical Deductible/ 10% Coinsurance	Co-pay \$0 visit* for the first 3 visits, then \$40 co-pay	Co-pay \$50
Inpatient Services		Medical deductible/50% coinsurance	Medical deductible/40% coinsurance
<b>Pharmacy Benefits</b>			
Pharmacy Deductible - Individual	NA	\$0	\$0
Pharmacy Deductible - Family	NA	\$0	\$0
Tier 1: Preventive Drugs	\$0	\$0	\$0
Tier 2: Generic Drugs	Medical deductible/ 10% coinsurance	\$15	\$15
Tier 3: Preferred Brand Drugs		\$50	\$50
Tier 4: Non-Preferred Brand Drugs		\$150	\$150
Tier 5: Value Specialty Drugs		\$12	\$12
Tier 6: Specialty Drugs (Brand and Generic)		30% coinsurance	30% coinsurance
		<b>Gold</b>	<b>Silver</b>
<b>Quote:</b>	\$	\$	\$



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	Avera \$5200 HSA Eligible HDHP <sup>∞</sup>	Avera \$5500 <i>(only available in rating areas 2, 3 and 4)</i>	Avera \$6000	Avera \$6000 HSA Eligible HDHP <sup>∞</sup> <i>(only available in rating areas 2, 3 and 4)</i>
<b>Medical Deductible</b>				
Individual	\$5,200	\$5,500	\$6,000	\$6,000
Family	\$10,400	\$11,000	\$12,000	\$12,000
<b>Coinsurance</b>				
	0%	50%	50%	50%
<b>Out-of-Pocket Maximum</b>				
Individual	\$5,200	\$9,200	\$9,200	\$7,500
Family	\$10,400	\$18,400	\$18,400	\$15,000
<b>Medical Benefits</b>				
Preventive Care Services	No cost to member. This includes preventive immunizations, screenings, examst.			
Primary Care Physician Visit	This is an HSA-compatible plan. Member will pay \$0 after meeting the medical deductible.	Co-pay \$50	Co-pay \$60	This is an HSA-compatible plan. Medical deductible/ 50% coinsurance
Urgent Care Services				
Chiropractic Visit				
Specialist Visit		Co-pay \$100	Co-pay \$120	
Lab and X-Ray (Diagnostic Test)		Co-pay \$50	Co-pay \$60	
Hospital Services		Medical deductible/ 50% coinsurance	Medical Deductible/ 50% Coinsurance	
Emergency Services		Co-pay \$700	Co-pay \$700	
Maternity Services	Medical deductible/ 50% coinsurance	Medical Deductible/ 50% Coinsurance		
Pediatric Vision Services	Included with all plans. No cost to member.			
Pediatric Dental Services				
Avera Virtual Visits	Member will pay \$0 after meeting the medical deductible.	No cost to member.	No cost to member.	Medical deductible/ 50% coinsurance
<b>Mental Health and Substance Use Disorder</b>				
Outpatient Services/ Avera Virtual Visits	This is an HSA-compatible plan.	Co-pay \$50	Co-pay \$60	This is an HSA-compatible plan.
Inpatient Services	Member will pay \$0 after meeting the medical deductible.	Medical deductible/ 50% coinsurance	Medical Deductible/ 50% Coinsurance	Medical deductible/ 50% coinsurance
<b>Pharmacy Benefits</b>				
Pharmacy Deductible - Individual	NA	\$0	\$0	NA
Pharmacy Deductible - Family	NA	\$0	\$0	NA
Tier 1: Preventive Drugs	\$0	\$0	\$0	\$0
Tier 2: Generic Drugs	Member will pay \$0 after meeting the medical deductible.	\$15	\$15	Medical deductible/ 50% coinsurance
Tier 3: Preferred Brand Drugs		\$50	\$50	
Tier 4: Non-Preferred Brand Drugs		\$150	\$150	
Tier 5: Value Specialty Drugs		\$12	\$12	
Tier 6: Specialty Drugs (Brand and Generic)		30% coinsurance	30% coinsurance	
	<b>Silver</b>	<b>Silver</b>	<b>Silver</b>	<b>Expanded Bronze</b>
<b>Quote:</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>

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# Avera Traditional Plans

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	Avera \$7000 Medical Deductible with \$50 Rx Deductible	Avera \$7500 HSA Eligible HDHP <sup>oo</sup>
<b>Medical Deductible</b>		
Individual	\$7,000	\$7,500
Family	\$14,000	\$15,000
<b>Coinsurance</b>		
	50%	0%
<b>Out-of-Pocket Maximum</b>		
Individual	\$9,200	\$7,500
Family	\$18,400	\$15,000
<b>Medical Benefits</b>		
Preventive Care Services	No cost to member. This includes preventive immunizations, screenings, examst.	
Primary Care Physician Visit	Co-pay \$60/visit <sup>ss</sup> for the first 3 visits then subject to medical deductible/ 50% coinsurance	This is an HSA-compatible plan.  Member will pay \$0 after meeting the medical deductible.
Urgent Care Services		
Chiropractic Visit		
Specialist Visit	Medical deductible/ 50% coinsurance	
Lab and X-Ray (Diagnostic Test)		
Hospital Services		
Emergency Services	Co-pay \$900	
Maternity Services	Medical deductible/ 50% coinsurance	
Pediatric Vision Services	Included with all plans. No cost to member.	
Pediatric Dental Services		
Avera Virtual Visits	No cost to member.	Member will pay \$0 after meeting the medical deductible
<b>Mental Health and Substance Use Disorder</b>		
Outpatient Services/Avera Virtual Visits	Co-pay \$60/visit <sup>ss</sup> for the first 3 visits then subject to medical deductible/50% coinsurance	This is an HSA-compatible plan.
Inpatient Services	Medical deductible/ 50% coinsurance	Member will pay \$0 after meeting the medical deductible.
<b>Pharmacy Benefits</b>		
Pharmacy Deductible - Individual	\$50	NA
Pharmacy Deductible - Family	\$100	NA
Tier 1: Preventive Drugs	\$0	\$0
Tier 2: Generic Drugs	\$25	Member will pay \$0 after meeting the medical deductible.
Tier 3: Preferred Brand Drugs	\$100	
Tier 4: Non-Preferred Brand Drugs	\$150	
Tier 5: Value Specialty Drugs	\$15	
Tier 6: Specialty Drugs (Brand and Generic)	30% coinsurance	
	<b>Bronze</b>	<b>Expanded Bronze</b>
<b>Quote:</b>	<b>\$</b>	<b>\$</b>

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# Avera Direct Plans

The Avera Direct Network features Avera owned, managed and leased providers and is available to employers headquartered in Brown, Lincoln and Minnehaha counties in South Dakota — providing access to more than 2,000 providers. This network provides zero out-of-network coverage, except for urgent and emergency care while traveling.

	Avera Direct \$2000	Avera Direct \$3300 HSA Eligible HDHP <sup>∞</sup>	
<b>Medical Deductible</b>			
Individual	\$2,000	\$3,300	
Family	\$4,000	\$6,600	
<b>Coinsurance</b>			
	30%	10%	
<b>Out-of-Pocket Maximum</b>			
Individual	\$6,250	\$4,000	
Family	\$12,500	\$8,000	
<b>Medical Benefits</b>			
Preventive Care Services	No cost to member. This includes preventive immunizations, screenings, examst.		
Primary Care Physician Visit	Co-pay \$0/visit <sup>☺</sup> for the first 5 visits, then \$25 co-pay	This is an HSA-compatible plan.  Medical deductible/ 10% coinsurance	
Urgent Care Services	Co-pay \$25		
Chiropractic Visit	Co-pay \$0/visit <sup>☺</sup> for the first 5 visits, then \$25 co-pay		
Specialist Visit	Co-pay \$75		
Lab and X-Ray (Diagnostic Test)	Co-pay \$25		
Hospital Services	Medical deductible/ 30% coinsurance		
Emergency Services	Co-pay \$500		
Maternity Services	Medical deductible/ 30% coinsurance		
Pediatric Vision Services	Included with all plans. No cost to member.		
Pediatric Dental Services			
Avera Virtual Visits	No cost to member.	Medical deductible/ 10% coinsurance	
<b>Mental Health and Substance Use Disorder</b>			
Outpatient Services/Avera Virtual Visits	Co-pay \$0/visit <sup>☺</sup> for the first 5 visits, then \$25 co-pay	This is an HSA-compatible plan. Medical deductible/ 10% coinsurance	
Inpatient Services	Medical deductible/ 30% coinsurance		
<b>Pharmacy Benefits</b>			
Pharmacy Deductible - Individual	\$0	NA	
Pharmacy Deductible - Family	\$0	NA	
Tier 1: Preventive Drugs	\$0	\$0	
Tier 2: Generic Drugs	\$15	Medical deductible/ 10% coinsurance	
Tier 3: Preferred Brand Drugs	\$50		
Tier 4: Non-Preferred Brand Drugs	\$75		
Tier 5: Value Specialty Drugs	\$10		
Tier 6: Specialty Drugs (Brand and Generic)	30% coinsurance		
	<b>Gold</b>	<b>Gold</b>	
<b>Quote:</b>	<b>\$</b>	<b>\$</b>	

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	Avera Direct \$3500	Avera Direct \$4000	Avera Direct \$5500
<b>Medical Deductible</b>			
Individual	\$3,500	\$4,000	\$5,500
Family	\$7,000	\$8,000	\$11,000
<b>Coinsurance</b>			
	50%	40%	50%
<b>Out-of-Pocket Maximum</b>			
Individual	\$9,200	\$9,200	\$9,200
Family	\$18,400	\$18,400	\$18,400
<b>Medical Benefits</b>			
Preventive Care Services	No cost to member. This includes preventive immunizations, screenings, examst.		
Primary Care Physician Visit	Co-pay \$0/visit for the first 5 visits, then \$40 co-pay	Co-pay \$0/visit for the first 5 visits, then \$50 co-pay	Co-pay \$0/visit for the first 5 visits, then \$50 co-pay
Urgent Care Services	Co-pay \$40	Co-pay \$50	Co-pay \$50
Chiropractic Visit	Co-pay \$0/visit for the first 5 visits, then \$40 co-pay	Co-pay \$0/visit for the first 5 visits, then \$50 co-pay	Co-pay \$0/visit for the first 5 visits, then \$50 co-pay
Specialist Visit	Co-pay \$100	Co-pay \$100	Co-pay \$100
Lab and X-Ray (Diagnostic Test)	Medical deductible/ 50% coinsurance	Medical deductible/ 40% coinsurance	Co-pay \$50
Hospital Services			Medical deductible/ 50% coinsurance
Emergency Services	Co-pay \$700	Co-pay \$700	Co-pay \$1,000
Maternity Services	Medical deductible/ 50% coinsurance	Medical deductible/ 40% coinsurance	Medical deductible/ 50% coinsurance
Pediatric Vision Services	Included with all plans. No cost to member.		
Pediatric Dental Services			
Avera Virtual Visits	No cost to member.	No cost to member.	No cost to member.
<b>Mental Health and Substance Use Disorder</b>			
Outpatient Services/Avera Virtual Visits	Co-pay \$0/visit for the first 5 visits, then \$40 co-pay	Co-pay \$0/visit for the first 5 visits, then \$50 co-pay	Co-pay \$0/visit for the first 5 visits, then \$50 co-pay
Inpatient Services	Medical deductible/ 50% coinsurance	Medical deductible/ 40% coinsurance	Medical deductible/ 50% coinsurance
<b>Pharmacy Benefits</b>			
Pharmacy Deductible - Individual	\$0	\$0	\$0
Pharmacy Deductible - Family	\$0	\$0	\$0
Tier 1: Preventive Drugs	\$0	\$0	\$0
Tier 2: Generic Drugs	\$15	\$15	\$15
Tier 3: Preferred Brand Drugs	\$50	\$50	\$50
Tier 4: Non-Preferred Brand Drugs	\$150	\$150	\$150
Tier 5: Value Specialty Drugs	\$12	\$12	\$12
Tier 6: Specialty Drugs (Brand and Generic)	30% coinsurance	30% coinsurance	30% coinsurance
	<b>Silver</b>	<b>Silver</b>	<b>Silver</b>
<b>Quote:</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>

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	<b>Avera Direct \$7000 Medical Deductible with \$50 Rx Deductible</b>	<b>Avera Direct \$5200 HSA Eligible HDHP<sup>∞</sup></b>	<b>Avera Direct \$6000 HSA Eligible HDHP<sup>∞</sup></b>	<b>Avera Direct \$7500 HSA Eligible HDHP<sup>∞</sup></b>
<b>Medical Deductible</b>				
Individual	\$7,000	\$5,200	\$6,000	\$7,500
Family	\$14,000	\$10,400	\$12,000	\$15,000
<b>Coinsurance</b>				
	50%	0%	50%	0%
<b>Out-of-Pocket Maximum</b>				
Individual	\$9,200	\$5,200	\$7,500	\$7,500
Family	\$18,400	\$10,400	\$15,000	\$15,000
<b>Medical Benefits</b>				
Preventive Care Services	No cost to member. This includes preventive immunizations, screenings, examst.			
Primary Care Physician Visit	Co-pay \$0/visit <sup>≈</sup> for the first 3 visits, medical deductible/ 50% coinsurance	This is an HSA-compatible plan.  Member will pay \$0 after meeting the medical deductible.	This is an HSA-compatible plan.  Medical deductible/ 50% coinsurance	This is an HSA-compatible plan.  Member will pay \$0 after meeting the medical deductible.
Urgent Care Services				
Chiropractic Visit				
Specialist Visit	Medical deductible/ 50% coinsurance	Member will pay \$0 after meeting the medical deductible.	Medical deductible/ 50% coinsurance	Member will pay \$0 after meeting the medical deductible.
Lab and X-Ray (Diagnostic Test)				
Hospital Services				
Emergency Services	Co-pay \$900			
Maternity Services	Medical deductible/ 50% coinsurance			
Pediatric Vision Services	Included with all plans. No cost to member.			
Pediatric Dental Services				
Avera Virtual Visits	No cost to member.	Member will pay \$0 after meeting the medical deductible.	Medical deductible/ 50% coinsurance	Member will pay \$0 after meeting the medical deductible.
<b>Mental Health and Substance Use Disorder</b>				
Outpatient Services/ Avera Virtual Visits	Co-pay \$0/visit <sup>≈</sup> for the first 3 visits, then subject to medical deductible/ 50% coinsurance	This is an HSA-compatible plan. Member will pay \$0 after meeting the medical deductible.	This is an HSA-compatible plan.  Medical deductible/ 50% coinsurance	This is an HSA-compatible plan. Member will pay \$0 after meeting the medical deductible.
Inpatient Services	Medical deductible/ 50% coinsurance			
<b>Pharmacy Benefits</b>				
Pharmacy Deductible - Individual	\$50	NA	NA	NA
Pharmacy Deductible - Family	\$100	NA	NA	NA
Tier 1: Preventive Drugs	\$0	\$0	\$0	\$0
Tier 2: Generic Drugs	\$25	Member will pay \$0 after meeting the medical deductible.	Medical deductible/ 50% coinsurance	Member will pay \$0 after meeting the medical deductible.
Tier 3: Preferred Brand Drugs	\$100			
Tier 4: Non-Preferred Brand Drugs	\$150			
Tier 5: Value Specialty Drugs	\$15			
Tier 6: Specialty Drugs (Brand and Generic)	30% coinsurance			
	<b>Bronze</b>	<b>Silver</b>	<b>Expanded Bronze</b>	<b>Expanded Bronze</b>
<b>Quote: \$</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>

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The Avera Direct Network features Avera owned, managed and leased providers and is available to employers headquartered in Brown, Lincoln and Minnehaha counties in South Dakota — providing access to more than 2,000 providers. This network provides zero out-of-network coverage.

	Avera Direct MyWeighForward \$1500	Avera Direct MyWeighForward \$5500
<b>Medical Deductible</b>		
Individual	\$1,500	\$5,500
Family	\$3,000	\$11,000
<b>Coinsurance</b>		
	30%	50%
<b>Out-of-Pocket Maximum</b>		
Individual	\$6,250	\$9,200
Family	\$12,500	\$18,400
<b>Medical Benefits</b>		
Preventive Care Services	No cost to member. This includes preventive immunizations, screenings, examst.	
Primary Care Physician Visit	Co-pay \$0/visit <sup>^</sup> for the first 5 visits, then \$25 co-pay	Co-pay \$0/visit <sup>^</sup> for the first 5 visits, then \$50 co-pay
Urgent Care Services	Co-pay \$25	Co-pay \$50
Chiropractic Visit	Co-pay \$0/visit <sup>^</sup> for the first 5 visits, then \$25 co-pay	Co-pay \$0/visit <sup>^</sup> for the first 5 visits, then \$50 co-pay
Specialist Visit	Co-pay \$75	Co-pay \$100
Lab and X-Ray (Diagnostic Test)	Co-pay \$25	Co-pay \$50
Hospital Services	Medical deductible/ 30% coinsurance	Medical deductible/ 50% coinsurance
Emergency Services	Co-pay \$500	Co-pay \$1,000
Maternity Services	Medical deductible/ 30% coinsurance	Medical deductible/ 50% coinsurance
Pediatric Vision Services	Included with all plans. No cost to member.	
Pediatric Dental Services		
Avera Virtual Visits	No cost to member.	No cost to member.
<b>Mental Health and Substance Use Disorder</b>		
Outpatient Services/Avera Virtual Visits	Co-pay \$0/visit <sup>^</sup> for the first 5 visits, then \$25 co-pay	Co-pay \$0/visit <sup>^</sup> for the first 5 visits, then \$50 co-pay
Inpatient Services	Medical deductible/ 30% coinsurance	Medical deductible/ 50% coinsurance
<b>Pharmacy Benefits</b>		
Pharmacy Deductible - Individual	\$0	\$0
Pharmacy Deductible - Family	\$0	\$0
Tier 1: Preventive Drugs	\$0	\$0
Tier 2: Generic Drugs	\$15	\$15
Tier 3: Preferred Brand Drugs	\$50	\$50
Tier 4: Non-Preferred Brand Drugs	\$75	\$150
Tier 5: Value Specialty Drugs	\$10	\$12
Tier 6: Specialty Drugs (Brand and Generic)	30% coinsurance	30% coinsurance
	<b>Gold</b>	<b>Silver</b>
<b>Quote: \$</b>	<b>\$</b>	<b>\$</b>

Please see list of disclaimers on the back cover.





- † Examples include gynecologic exam, screening mammography, well-child care and newborn care. Limitations do apply. For a detailed listing, visit [AveraHealthPlans.com](https://www.averahospital.com/health-plans).
- ∞ These plans are considered High Deductible Health Plans (HDHP) that can be paired with a Health Savings Account (HSA).
- 🌀 Each plan member will receive their first 3 office visits per year at a co-pay in the categories of primary care physician, urgent care, chiropractic, mental health, habilitation or rehabilitation. Not 3 visits per category. After 3 visits, members are subject to coinsurance after deductible.
- \* Each plan member will receive their first 3 office visits per year at a co-pay in the categories of primary care physician, urgent care, chiropractic, mental health, habilitation or rehabilitation. Not 3 visits per category. After 3 visits, members are subject to coinsurance after deductible.
- ≈ Each direct plan member will receive their first 3 office visits per year at no charge in the categories of primary care physician, chiropractic, mental health, habilitation or rehabilitation. Not 3 visits per category. After 3 visits, members are subject to coinsurance after deductible.
- 🍷 Each direct plan member will receive their first 5 office visits per year at no charge in the categories of primary care physician, chiropractic, mental health, habilitation or rehabilitation. Not 5 visits per category. After 5 visits, members are subject to co-pay.
- ^ Each direct plan member will receive their first 5 office visits per year at no charge in the categories of primary care physician, chiropractic, mental health, habilitation or rehabilitation. Not 5 visits per category. After 5 visits, members are subject to co-pay.

# Questions?



We can help you find the best plan options for your company.

Talk to your agent or request a quote at [AveraHealthPlans.com/Solutions](https://AveraHealthPlans.com/Solutions).

Moving Health  
**Forward.**