

Cost of Coverage

Rates Effective 12-1-16

	Primary Care Physician Visits	Specialist Visits; Outpatient Physical, Occupational, and Speech Therapy Visits	Behavioral Health Visits	Emergency Department Visits	Pharmacy	Monthly Premium
<i>Free CHIP</i>	\$0	\$0	\$0	\$0	\$0 generic drugs \$0 brand-name drugs	\$0
<i>Low-cost 1 CHIP</i>	\$0 preventive care \$5 other visits	\$10	\$0	\$25 (waived if admitted)	\$6 generic drugs \$9 brand-name drugs	\$45.46
<i>Low-cost 2 CHIP</i>	\$0 preventive care \$5 other visits	\$10	\$0	\$25 (waived if admitted)	\$6 generic drugs \$9 brand-name drugs	\$63.64
<i>Low-cost 3 CHIP</i>	\$0 preventive care \$5 other visits	\$10	\$0	\$25 (waived if admitted)	\$6 generic drugs \$9 brand-name drugs	\$72.74
<i>Full-cost CHIP</i>	\$0 preventive care \$15 other visits	\$25	\$0	\$50 (waived if admitted)	\$10 generic drugs \$18 brand-name drugs	\$183.88

