



**Simple, comprehensive
health insurance to live
your healthiest life.**



Friday Health Plans includes benefits that keep you healthy year-round, with ironclad coverage if you get sick or hurt. All Friday Health Plans are ACA-compliant.



No cost?
Yes please.



\$0 for your yearly checkup and three \$0 in-network primary care visits for each plan member

and other preventive services that help you stay healthy



\$0 for preferred generic drugs

The list includes thousands of generic prescription drugs



Annual eye exam

\$0 on all plans with a VSP provider

Convenient Care.
Around the clock.



Urgent care clinic visits
\$25–\$75 copay depending on your plan



Teladoc services

Reach a doctor 24/7 from your phone or computer, wherever you are, \$45 flat fee



DispatchHealth

Urgent care that comes to you (limited geographic availability)



Online Mental Health Visits

Access a licensed counselor through secure video or chat with Start Talking.

For a full list of benefits, provisions, exclusions and limitations, and to see everything included in Friday's plans and networks, please contact Friday Health Plans.

Friday Health Plans Benefits Overview

Friday Health Plans are ACA-compliant—we include all essential health benefits and do not exclude anyone for pre-existing conditions.



Friday Cost-Share Silver Plans									
Plans/Visits	SILVER	SILVER RX COPAY	SILVER 73%	SILVER RX COPAY 73%	SILVER 87%	SILVER RX COPAY 87%	SILVER 94%	SILVER RX COPAY 94%	
Individual Deductible / Family	\$4,900 / \$9,800	\$3,850 / \$7,700	\$3,600 / \$7,200	\$2,750 / \$5,500	\$950 / \$1,900	\$725 / \$1,450	\$75 / \$150	\$25 / \$50	
Individual Max Out of Pocket / Family	\$8,150 / \$16,300	\$8,150 / \$16,300	\$6,500 / \$13,000	\$6,500 / \$13,000	\$2,700 / \$5,400	\$2,700 / \$5,400	\$2,700 / \$5,400	\$2,700 / \$5,400	
Annual Wellness Visit	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
Primary Care Visit	3 visits at \$0, then 20% after Deductible	3 visits at \$0, then 20% after Deductible	3 visits at \$0, then 20% after Deductible	3 visits at \$0, then 20% after Deductible	3 visits at \$0, then 15% after Deductible	3 visits at \$0, then 15% after Deductible	3 visits at \$0, then 10% after Deductible	3 visits at \$0, then 10% after Deductible	
Specialist Visit	20% after Deductible	20% after Deductible	20% after Deductible	20% after Deductible	15% after Deductible	15% after Deductible	10% after Deductible	10% after Deductible	
Teladoc*	\$45 Flat Fee								
Annual Vision Exam	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
Urgent Care Visit	\$75–\$80 Copay	\$75–\$80 Copay	\$75 Copay	\$75 Copay	\$50 Copay	\$50 Copay	\$25 Copay	\$25 Copay	
Behavioral Health Visit	20% after Deductible	20% after Deductible	20% after Deductible	20% after Deductible	15% after Deductible	15% after Deductible	10% after Deductible	10% after Deductible	
X-ray and Imaging	20% after Deductible	20% after Deductible	20% after Deductible	20% after Deductible	15% after Deductible	15% after Deductible	10% after Deductible	10% after Deductible	
Inpatient Stay	20% after Deductible	20% after Deductible	20% after Deductible	20% after Deductible	15% after Deductible	15% after Deductible	10% after Deductible	10% after Deductible	
Emergency Room	50% after Deductible	50% after Deductible	50% after Deductible	50% after Deductible	30% after Deductible	30% after Deductible	20% after Deductible	20% after Deductible	
Drugs	SILVER	SILVER RX COPAY	SILVER 73%	SILVER RX COPAY 73%	SILVER 87%	SILVER RX COPAY 87%	SILVER 94%	SILVER RX COPAY 94%	
Preventive ACA Drugs	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
Preferred Generic	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
Preferred Brand	20% after Deductible	Up to \$250 Copay	20% after Deductible	Up to \$225 Copay	15% after Deductible	Up to \$100 Copay	10% after Deductible	Up to \$30 Copay	
Non-Preferred Generic / Brand	50% after Deductible	Up to \$350 Copay	50% after Deductible	Up to \$350 Copay	30% after Deductible	Up to \$225 Copay	20% after Deductible	Up to \$225 Copay	
Specialty Drugs	45% after Deductible	Up to \$675 Copay	45% after Deductible	Up to \$540 Copay	28% after Deductible	Up to \$220 Copay	19% after Deductible	Up to \$220 Copay	

Benefits apply only within the Friday medical provider network, except in medical emergencies.

*Teladoc is a value-added service, does not apply toward deductible or max out-of-pocket.

New for 2020

Friday Health Plans

Colorado Network



One seamless network across Colorado

Friday's new health network gives you access to providers and facilities in all regions Friday serves.

Your healthcare is only covered when you use in-network doctors, hospitals or facilities, except in a medical emergency.



No referrals for most doctors, services and specialists in the Friday network.



Visit the medical provider lookup for a full list of in-network doctors and facilities near you, plus additional independently contracted pediatricians, OBGYN's and primary care doctors in all regions.

fridayhealthplans.com

800-475-8466





Hospital Networks

- + SCL Health
- + Children's Hospital Colorado
- + National Jewish Health
- + Centura Health
- + Banner Health
- + Many other local hospitals



Urgent Care Facilities and Options

- + Concentra
- + Locally contracted urgent care centers
- + DispatchHealth (Denver, Boulder, Colorado Springs)
- + Teladoc.com



Mental Health Providers

- + Heart-Centered Counseling
- + Mental Health Center of Denver
- + Peak Vista Community Health Center
- + Start Talking
- + Many more



Counties Served by Region

DENVER METRO

Adams	Boulder	Elbert
Arapahoe	Denver	Jefferson
Broomfield	Douglas	

NORTHERN COLORADO

Larimer	Weld
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WESTERN COLORADO

Mesa	Summit
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SOUTHERN & EASTERN COLORADO

Alamosa	Crowley	Las Animas
Archuleta	Custer	Lincoln
Baca	El Paso	Mineral
Bent	Fremont	Otero
Chaffee	Huerfano	Prowers
Cheyenne	Kiowa	Pueblo
Conejos	Kit Carson	Rio Grande
Costilla	La Plata	Saguache

monday
tuesday
wednesday
thursday

friday[®]
health plans
of colorado

We're here to help 800.475.8466
questions@fridayhealthplans.com

CONNECT WITH US  



This document provides a brief overview of the benefits offered under this Friday Health Plans Policy. Full information is available in the Evidence of Coverage. To request a copy of the Evidence of Coverage, call **800.475.8466** or visit fridayhealthplans.com.

Learn more about Connect for Health Colorado
and financial assistance at ConnectforHealthCO.com

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