



Individual & Family Plan Options – Illinois 2024

Carroll, Jo Daviess, Lee, Ogle, and Stephenson

Quartz One

100–150%	Deductible (Single/Family)	Coins	MOOP (Single/Family)	PCP / Specialist Visit*	Lab / Xray	Hospital Inpatient/ Outpatient	Urgent Care*	Emergency Room	Pharmacy	SBC Tracking Id Base	SBC Tracking Id W / Vision & Dental
SILVER I303-06 VALUE TIER RX – IL	\$0 / \$0	50%	\$1,400 / \$2,800	\$5 / \$10	\$5 / \$10	Ded & Coins	\$10	\$50	\$0/\$5/\$15/50%/60% ¹	QIS240305406	N/A
SILVER I304-06 – IL	\$525 / \$1,050	0%	\$525 / \$1,050	Ded & Coins	Ded & Coins	Ded & Coins	Ded & Coins	Ded & Coins	Ded & Coins	QIS240300806	N/A
SILVER I308-06 FIXED RX COPAY – IL	\$0 / \$0	50%	\$1,250 / \$2,500	\$0 / \$10	\$10	\$125 per day IP \$100 MRI/PET/CAT	\$10	\$50	\$0/\$5/\$15/\$100/\$200 ¹	QIS240303806	QIS240403806
SILVER I309-06 STANDARD – IL	\$0 / \$0	25%	\$1,800 / \$3,600	\$0 / \$10	Ded & Coins	Ded & Coins	\$5	Ded & Coins	\$0/\$15/\$50/\$150	QIS240303906	N/A
SILVER I320-06 VALUE TIER RX – IL	\$250 / \$500	50%	\$900 / \$1,800	\$10 / \$20	\$10 / \$20	Ded & Coins	\$20	\$35	\$0/\$5/\$15/Ded & 50%/Ded & 60% ¹	QIS240305506	QIS240405506

* Virtual Visits and Telehealth services may be available to you at reduced cost share.

1. Value Tier Rx plan.
2. Safe Harbor Prescription Drug List Available Plan.
3. Applies to the first three office visits with PCP then deductible and coinsurance.
MOOP = Maximum-Out-of-Pocket.

Quartz is a Qualified Health Plan issuer in the Health Insurance Marketplace.

Quartz does not discriminate on the basis of race, color, national origin, disability, age, sex, gender identity, sexual orientation, or health status in the administration of the plan, including enrollment and benefit determinations.



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150-200%	Deductible (Single/Family)	Coins	MOOP (Single/Family)	PCP / Specialist Visit*	Lab / Xray	Hospital Inpatient/ Outpatient	Urgent Care*	Emergency Room	Pharmacy	SBC Tracking Id Base	SBC Tracking Id W / Vision & Dental
SILVER I303-05 VALUE TIER RX – IL	\$1,500 / \$3,000	50%	\$3,000 / \$6,000	\$20 / \$50	\$25 / \$50	Ded & Coins	\$20	\$100	\$5/\$10/\$20/50%/Ded & 60% ¹	QIS240305405	N/A
SILVER I304-05 – IL	\$1,700 / \$3,400	0%	\$1,700 / \$3,400	Ded & Coins	Ded & Coins	Ded & Coins	Ded & Coins	Ded & Coins	Ded & Coins	QIS240300805	N/A
SILVER I308-05 FIXED RX COPAY – IL	\$0 / \$0	50%	\$3,000 / \$6,000	\$25 / \$60	\$25 / \$60	\$300 per day IP \$300 OP \$400 MRI/PET/CAT	\$60	\$250	\$5/\$10/\$20/\$250/\$400 ¹	QIS240303805	QIS240403805
SILVER I309-05 STANDARD – IL	\$700 / \$1,400	30%	\$3,000 / \$6,000	\$20 / \$40	Ded & Coins	Ded & Coins	\$30	Ded & Coins	\$10/\$20/Ded & \$60/Ded & \$250	QIS240303905	N/A
SILVER I320-05 VALUE TIER RX – IL	\$1,250 / \$2,500	50%	\$2,500 / \$5,000	\$10 / \$45	\$20 / \$45	Ded & Coins	\$45	\$80	\$0/\$10/\$20/Ded & 50%/Ded & 60% ¹	QIS240305505	QIS240405505

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200-250%	Deductible (Single/Family)	Coins	MOOP (Single/Family)	PCP / Specialist Visit*	Lab / Xray	Hospital Inpatient/ Outpatient	Urgent Care*	Emergency Room	Pharmacy	SBC Tracking Id Base	SBC Tracking Id W / Vision & Dental
SILVER I303-04 VALUE TIER RX – IL	\$7,000 / \$14,000	50%	\$7,550 / \$15,100	\$50 / \$100	\$60 / \$120	Ded & Coins	\$100	\$1,000	\$10/\$35/\$80/50%/Ded & 60% ¹	QIS240305404	N/A
SILVER I304-04 HSA – IL	\$4,500 / \$9,000	0%	\$4,500 / \$9,000	Ded & Coins	Ded & Coins	Ded & Coins	Ded & Coins	Ded & Coins	Ded & Coins ²	QIS240300804	N/A
SILVER I308-04 FIXED RX COPAY – IL	\$0 / \$0	50%	\$7,550 / \$15,100	\$45 / \$90	\$45 / \$90	\$1,500 per day IP \$400 OP \$500 MRI/PET/CAT	\$90	\$1,200	\$10/\$35/\$150/\$300/\$500 ¹	QIS240303804	QIS240403804
SILVER I309-04 STANDARD – IL	\$5,700 / \$11,400	40%	\$7,200 / \$14,400	\$40 / \$80	Ded & Coins	Ded & Coins	\$60	Ded & Coins	\$20/\$40/Ded & \$80/Ded & \$350	QIS240303904	N/A
SILVER I320-04 VALUE TIER RX – IL	\$2,250 / \$4,500	50%	\$7,550 / \$15,100	\$20 / \$100	\$40 / \$100	Ded & Coins	\$100	\$1,250	\$0/\$35/\$150/Ded & 50%/Ded & 60% ¹	QIS240305504	QIS240405504

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