

2025 ACA Small Group Snapshot Grids





PY25 ACA SG HMO Snapshot Grids

ACA Small Group PY 2025 Portfolio- HMO

Networks available: BSW Premier HMO & BSW Plus HMO

PY2025 ACA Small Group Snapshot Grid						Networks Available: BSW Premier HMO and BSW Plus HMO					
Plan Name / Network / Medical Rider			Coinsurance / Deductible / MOOP			In-Network Benefits					
Plan Name	Calendar Year		INN Coins	Deductible and MOOP INN		Primary Care Visit *First Non-Preventive Visit is No Charge	Pediatric PCP Copay**	Specialist Visit	Urgent Care	Emergency Services	Inpatient Hosp
	BSW Premier HMO	BSW Plus HMO		INN Deductible Individual Family	INN MOOP Individual Family						
Bronze HMO 100 9200	BHG25P30	BHG25A30	0%	\$9,200	\$9,200	0% copay AFD	No charge	0% copay, AFD	\$50 copay/visit	0% copay AFD	0% copay AFD
				\$18,400	\$18,400						
Bronze HMO 90 7900	BHG25P01	BHG25A01	10%	\$7,900	\$9,200	\$45 copay/visit	No charge	\$50 copay AFD	\$50 copay/visit	10% copay AFD	10% copay AFD
				\$15,800	\$18,400						
Bronze HMO 80 7500	BHG25P03	BHG25A03	20%	\$7,500	\$9,200	\$55 copay/visit	No charge	\$60 copay AFD	\$50 copay/visit	20% copay AFD	20% copay AFD
				\$15,000	\$18,400						
Bronze HMO HSA 7300	BHG25P02	BHG25A02	0%	\$7,300	\$7,300	0% copay AFD	No charge	0% copay, AFD	0% copay AFD	0% copay AFD	0% copay AFD
				\$14,600	\$1,4600						

Bronze

This is a summary of benefit highlights only. All benefits shown indicate member responsibility.

ACA Small Group PY 2025 Portfolio- HMO

Networks available: BSW Premier HMO & BSW Plus HMO

	PY2025 ACA Small Group Snapshot Grid						Networks Available: BSW Premier HMO and BSW Plus HMO					
	Plan Name / Network / Medical Rider			Coinsurance / Deductible / MOOP			In-Network Benefits					
	Plan Name	Calendar Year		INN Coins	Deductible and MOOP INN		Primary Care Visit *First Non-Preventive Visit is No Charge	Pediatric PCP Copay**	Specialist Visit	Urgent Care	Emergency Services	Inpatient Hosp
BSW Premier HMO		BSW Plus HMO	INN Deductible Individual Family		INN MOOP Individual Family							
Silver	Silver HMO 80 8900	SHG25P31	SHG25A31	20%	\$8,900	\$9,200	\$50 copay/visit	No charge	\$100 copay/visit	\$50 copay/visit	\$750 copay AFD	20% copay AFD
					\$17,800	\$18,400						
	Silver HMO 80 7500	SHG25P32	SHG25A32	20%	\$7,500	\$9,200	\$45 copay/visit	No charge	\$80 copay/visit	\$50 copay/visit	\$750 copay AFD	20% copay AFD
					\$15,000	\$18,400						
	Silver HMO 100 7300	SHG25P13	SHG25A13	0%	\$7,300	\$9,200	\$25 copay/visit	No charge	\$70 copay/visit	\$50 copay/visit	\$750 copay AFD	0% copay AFD
					\$14,600	\$18,400						
	Silver HMO 90 7000	SHG25P33	SHG25A33	10%	\$7,000	\$8,200	10% copay AFD	No charge	10% copay AFD	\$50 copay/visit	10% copay AFD	10% copay AFD
					\$14,000	\$16,400						
	Silver HMO 80 6900	SHG25P08	SHG25A08	20%	\$6,900	\$9,100	\$45 copay/visit	No charge	\$85 copay/visit	\$50 copay/visit	\$750 copay AFD	20% copay AFD
					\$13,800	\$18,200						
	Silver HMO 70 6700	SHG25P34	SHG25A34	30%	\$6,700	\$9,200	\$45 copay/visit	No charge	\$85 copay/visit	\$50 copay/visit	\$750 copay AFD	30% copay AFD
					\$13,400	\$18,400						
	Silver HMO 90 6500	SHG25P10	SHG25A10	10%	\$6,500	\$9,100	\$40 copay/visit	No charge	\$80 copay/visit	\$50 copay/visit	\$750 copay AFD	10% copay AFD
					\$13,000	\$18,200						
	Silver HMO 80 6250	SHG25P09	SHG25A09	20%	\$6,250	\$9,100	\$40 copay/visit	No charge	\$75 copay/visit	\$50 copay/visit	\$750 copay AFD	20% copay AFD
					\$12,500	\$18,200						
	Silver HMO HSA 6200	SHG25P35	SHG25A35	0%	\$6,200	\$6,200	0% copay AFD	No charge	0% copay, AFD	0% copay AFD	0% copay AFD	0% copay AFD
					\$12,400	\$12,400						

This is a summary of benefit highlights only. All benefits shown indicate member responsibility.

ACA Small Group PY 2025 Portfolio- HMO

Networks available: BSW Premier HMO & BSW Plus HMO

Silver	PY2025 ACA Small Group Snapshot Grid						Networks Available: BSW Premier HMO and BSW Plus HMO					
	Plan Name / Network / Medical Rider			Coinsurance / Deductible / MOOP			In-Network Benefits					
	Plan Name	Calendar Year		INN Coins	Deductible and MOOP INN		Primary Care Visit *First Non-Preventive Visit is No Charge	Pediatric PCP Copay**	Specialist Visit	Urgent Care	Emergency Services	Inpatient Hosp
		BSW Premier HMO	BSW Plus HMO		INN Deductible Individual Family	INN MOOP Individual Family						
Silver HMO 90 5900	SHG25P15	SHG25A15	10%	\$5,900	\$9,100	\$35 copay/visit	No charge	\$70 copay/visit	\$50 copay/visit	\$750 copay AFD	10% copay AFD	
				\$11,800	\$18,200							
Silver HMO 80 5000	SHG25P11	SHG25A11	20%	\$5,000	\$9,100	\$40 copay/visit	No charge	\$80 copay/visit	\$50 copay/visit	\$750 copay AFD	20% copay AFD	
				\$10,000	\$18,200							
Silver HMO HSA 5100	SHG25P14	SHG25A14	0%	\$5,100	\$5,100	0% copay AFD	No charge	0% copay AFD	0% copay AFD	0% copay AFD	0% copay AFD	
				\$10,200	\$10,200							
Silver HMO 70 4500	SHG25P12	SHG25A12	30%	\$4,500	\$9,100	\$40 copay/visit	No charge	\$80 copay/visit	\$50 copay/visit	\$750 copay AFD	30% copay AFD	
				\$9,000	\$18,200							
Silver HMO 80 4250	SHG25P40	SHG25A40	20%	\$4,250	\$9,100	\$50 copay/visit	No charge	\$95 copay/visit	\$50 copay/visit	\$750 copay AFD	20% copay AFD	
				\$8,500	\$18,200							
Silver HMO 60 4200	SHG25P41	SHG25A41	40%	\$4,200	\$9,200	\$45 copay AFD	No charge	\$80 copay AFD	\$50 copay/visit	\$750 copay AFD	40% copay AFD	
				\$8,400	\$18,400							
Silver HMO 70 3800	SHG25P17	SHG25A17	30%	\$3,800	\$9,100	\$50 copay/visit	No charge	\$95 copay/visit	\$50 copay/visit	\$750 copay AFD	30% copay AFD	
				\$7,600	\$18,200							
Silver HMO 60 3250	SHG25P37	SHG25A37	40%	\$3,250	\$9,100	\$55 copay/visit	No charge	\$95 copay/visit	\$50 copay/visit	\$750 copay AFD	40% copay AFD	
				\$6,500	\$18,200							
Silver HMO 90 750	SHG25P16	SHG25A16	10%	\$750	\$9,200	\$50 copay/visit	No charge	\$100 copay/visit	\$50 copay/visit	\$750 copay AFD	\$2,250 copay per hospital admission, AFD	
				\$1,500	\$18,400							

This is a summary of benefit highlights only. All benefits shown indicate member responsibility.

ACA Small Group PY 2025 Portfolio- HMO

Networks available: BSW Premier HMO & BSW Plus HMO

PY2025 ACA Small Group Snapshot Grid						Networks Available: BSW Premier HMO and BSW Plus HMO					
Plan Name / Network / Medical Rider			Coinsurance / Deductible / MOOP			In-Network Benefits					
Plan Name	Calendar Year		INN Coins	Deductible and MOOP INN		Primary Care Visit *First Non-Preventive Visit is No Charge	Pediatric PCP Copay**	Specialist Visit	Urgent Care	Emergency Services	Inpatient Hosp
	BSW Premier HMO	BSW Plus HMO		INN Deductible Individual Family	INN MOOP Individual Family						
Gold HMO 90 4500	GHG25P07	GHG25A07	10%	\$4,500	\$6,300	\$5 copay/visit	No charge	\$40 copay/visit	\$50 copay/visit	\$750 copay AFD	10% copay AFD
				\$9,000	\$12,600						
Gold HMO 100 4000	GHG25P38	GHG25A38	0%	\$4,000	\$6,500	\$15 copay/visit	No charge	\$25 copay/visit	\$50 copay/visit	\$750 copay AFD	0% copay AFD
				\$8,000	\$13,000						
Gold HMO 100 3500	GHG25P19	GHG25A19	0%	\$3,500	\$6,900	No charge	No charge	\$65 copay/visit	\$50 copay/visit	\$750 copay AFD	0% copay AFD
				\$7,000	\$13,800						
Gold HMO HSA 3700	GHG25P18	GHG25A18	0%	\$3,700	\$3,700	0% copay AFD	No charge	0% copay, AFD	0% copay AFD	0% copay AFD	0% copay AFD
				\$7,400	\$7,400						
Gold HMO HSA 3300	GHG25P20	GHG25A20	0%	\$3,300	\$3,300	0% copay AFD	No charge	0% copay, AFD	0% copay AFD	0% copay AFD	0% copay AFD
				\$6,600	\$6,600						
Gold HMO 100 3000	GHG25P27	GHG25A27	0%	\$3,000	\$4,400	\$25 copay/visit	No charge	\$60 copay/visit	\$50 copay/visit	\$750 copay AFD	0% copay AFD
				\$6,000	\$8,800						
Gold HMO 80 3000	GHG25P42	GHG25A42	20%	\$3,000	\$5,500	\$35 copay/visit	No charge	\$80 copay/visit	\$50 copay/visit	\$750 copay AFD	20% copay AFD
				\$6,000	\$11,000						

Gold

This is a summary of benefit highlights only. All benefits shown indicate member responsibility.

ACA Small Group PY 2025 Portfolio- HMO

Networks available: BSW Premier HMO & BSW Plus HMO

Gold	PY2025 ACA Small Group Snapshot Grid						Networks Available: BSW Premier HMO and BSW Plus HMO					
	Plan Name / Network / Medical Rider			Coinsurance / Deductible / MOOP			In-Network Benefits					
	Plan Name	Calendar Year		INN Coins	Deductible and MOOP INN		Primary Care Visit *First Non-Preventive Visit is No Charge	Pediatric PCP Copay**	Specialist Visit	Urgent Care	Emergency Services	Inpatient Hosp
		BSW Premier HMO	BSW Plus HMO		INN Deductible Individual Family	INN MOOP Individual Family						
Gold HMO 100 2300	GHG25P26	GHG25A26	0%	\$2,300	\$8,500	No charge	No charge	\$70 copay/visit	\$50 copay/visit	\$750 copay AFD	0% copay AFD	
				\$4,600	\$17,000							
Gold HMO 90 2000	GHG25P25	GHG25A25	10%	\$2,000	\$5,500	\$25 copay/visit	No charge	\$60 copay/visit	\$50 copay/visit	\$750 copay AFD	10% copay AFD	
				\$4,000	\$11,000							
Gold HMO 90 1900	GHG25P28	GHG25A28	10%	\$1,900	\$7,500	No charge	No charge	\$60 copay/visit	\$50 copay/visit	\$750 copay AFD	10% copay AFD	
				\$3,800	\$15,000							
Gold HMO 80 1500	GHG25P23	GHG25A23	20%	\$1,500	\$7,000	\$25 copay/visit	No charge	\$60 copay/visit	\$50 copay/visit	\$750 copay AFD	20% copay AFD	
				\$3,000	\$14,000							
Gold HMO 80 1000	GHG25P24	GHG25A24	20%	\$1,000	\$8,200	\$25 copay/visit	No charge	\$60 copay/visit	\$50 copay/visit	\$750 copay AFD	20% copay AFD	
				\$2,000	\$16,400							
Gold HMO 80 750	GHG25P39	GHG25A39	20%	\$750	\$8,250	\$40 copay/visit	No charge	\$70 copay/visit	\$50 copay/visit	\$750 copay AFD	20% copay AFD	
				\$1,500	\$16,500							
Gold HMO copayment 0 7000	GHG25P22	GHG25A22	10%	\$0	\$7,000	\$20 copay/visit	No charge	\$55 copay/visit	\$50 copay/visit	\$750 copay/visit	\$1,500 copayment per hospital admission	
				\$0	\$14,000							
Gold HMO SM 0 9200	GHG25P29	GHG25A29	30%	\$0	\$9,200	\$50 copay/visit	No charge	\$85 copay/visit	\$50 copay/visit	\$750 copay/visit	30% copayment	
				\$0	\$18,400							

This is a summary of benefit highlights only. All benefits shown indicate member responsibility.



PY25 ACA SG PPO Snapshot Grids

ACA Small Group PY 2025 Portfolio- PPO

Networks available: BSW Plus PPO & BSW Access PPO

PY2025 ACA Small Group Snapshot Grid								Networks Available: BSW Plus PPO and BSW Access PPO					
Plan Name / Network / Medical Rider			Coinsurance / Deductible / MOOP					In-Network Benefits					
Plan Name	Calendar Year		INN Coins	Deductible and MOOP INN & OON				Primary Care Visit *First Non-Preventive Visit is No Charge	Pediatric PCP Copay**	Specialist Visit	Urgent Care	Emergency Services	Inpatient Hosp
	BSW Plus PPO	BSW Access PPO		INN Deductible Individual Family	OON Deductible Individual Family	INN MOOP Individual Family	OON MOOP Individual Family						
Bronze PPO 100 9200	BPG25D30	UHC25F30	0%	\$9,200	\$18,400	\$9,200	\$27,600	0% coins AFD	No charge	0% coins, AFD	\$50 copay/visit	0% coins AFD	0% coins AFD
				\$18,400	\$36,800	\$18,400	\$55,200						
Bronze PPO 90 7900	BPG25D01	UHC25F01	10%	\$7,900	\$15,800	\$9,200	\$27,600	\$45 copay/visit	No charge	\$50 copay AFD	\$50 copay/visit	10% coins AFD	10% coins AFD
				\$15,800	\$31,600	\$18,400	\$55,200						
Bronze PPO 80 7500	BPG25D03	UHC25F03	20%	\$7,500	\$15,000	\$9,200	\$27,600	\$55 copay/visit	No charge	\$60 copay AFD	\$50 copay/visit	20% coins AFD	20% coins AFD
				\$15,000	\$30,000	\$18,400	\$55,200						
Bronze PPO HSA 7300	BPG25D02	UHC25F02	0%	\$7,300	\$14,600	\$7,300	\$21,900	0% coins AFD	No charge	0% coins, AFD	0% coins AFD	0% coins AFD	0% coins AFD
				\$14,600	\$29,200	\$1,4600	\$43,800						

Bronze

This is a summary of benefit highlights only. All benefits shown indicate member responsibility.

ACA Small Group PY 2025 Portfolio- PPO

Networks available: BSW Plus PPO & BSW Access PPO

Silver	PY2025 ACA Small Group Snapshot Grid								Networks Available: BSW Plus PPO and BSW Access PPO					
	Plan Name / Network / Medical Rider			Coinsurance / Deductible / MOOP					In-Network Benefits					
	Plan Name	Calendar Year		INN Coins	Deductible and MOOP INN				Primary Care Visit *First Non-Preventive Visit is No Charge	Pediatric PCP Copay**	Specialist Visit	Urgent Care	Emergency Services	Inpatient Hosp
		BSW Plus PPO	BSW Access PPO		INN Deductible Individual Family	OON Deductible Individual Family	INN MOOP Individual Family	OON MOOP Individual Family						
Silver PPO 80 8900	SPG25D31	UHC25F31	20%	\$8,900 \$17,800	\$17,800 \$35,600	\$9,200 \$18,400	\$27,600 \$55,200	\$50 copay/visit	No charge	\$100 copay/visit	\$50 copay/visit	\$750 copay AFD	20% coins AFD	
Silver PPO 80 7500	SPG25D32	UHC25F32	20%	\$7,500 \$15,000	\$15,000 \$30,000	\$9,200 \$18,400	\$27,600 \$55,200	\$45 copay/visit	No charge	\$80 copay/visit	\$50 copay/visit	\$750 copay AFD	20% coins AFD	
Silver PPO 100 7300	SPG25D13	UHC25F13	0%	\$7,300 \$14,600	\$14,600 \$29,200	\$9,200 \$18,400	\$27,600 \$55,200	\$25 copay/visit	No charge	\$70 copay/visit	\$50 copay/visit	\$750 copay AFD	0% coins AFD	
Silver PPO 90 7000	SPG25D33	UHC25F33	10%	\$7,000 \$14,000	\$14,000 \$28,000	\$8,200 \$16,400	\$24,600 \$49,200	10% coins AFD	No charge	10% coins AFD	\$50 copay/visit	10% coins AFD	10% coins AFD	
Silver PPO 80 6900	SPG25D08	UHC25F08	20%	\$6,900 \$13,800	\$13,800 \$27,600	\$9,100 \$18,200	\$27,300 \$54,600	\$45 copay/visit	No charge	\$85 copay/visit	\$50 copay/visit	\$750 copay AFD	20% coins AFD	
Silver PPO 70 6700	SPG25D34	UHC25F34	30%	\$6,700 \$13,400	\$13,400 \$26,800	\$9,200 \$18,400	\$27,600 \$55,200	\$45 copay/visit	No charge	\$85 copay/visit	\$50 copay/visit	\$750 copay AFD	30% coins AFD	
Silver PPO 90 6500	SPG25D10	UHC25F10	10%	\$6,500 \$13,000	\$13,000 \$26,000	\$9,100 \$18,200	\$27,300 \$54,600	\$40 copay/visit	No charge	\$80 copay/visit	\$50 copay/visit	\$750 copay AFD	10% coins AFD	
Silver PPO 80 6250	SPG25D09	UHC25F09	20%	\$6,250 \$12,500	\$12,500 \$25,000	\$9,100 \$18,200	\$27,300 \$54,600	\$40 copay/visit	No charge	\$75 copay/visit	\$50 copay/visit	\$750 copay AFD	20% coins AFD	
Silver PPO HSA 6200	SPG25D35	UHC25F35	0%	\$6,200 \$12,400	\$12,400 \$24,800	\$6,200 \$12,400	\$18,600 \$37,200	0% coins AFD	No charge	0% coins AFD	0% coins AFD	0% coins AFD	0% coins AFD	

This is a summary of benefit highlights only. All benefits shown indicate member responsibility.

ACA Small Group PY 2025 Portfolio- PPO

Networks available: BSW Plus PPO & BSW Access PPO

Silver	PY2025 ACA Small Group Snapshot Grid							Networks Available: BSW Plus PPO and BSW Access PPO					
	Plan Name / Network / Medical Rider			Coinsurance / Deductible / MOOP				In-Network Benefits					
	Plan Name	Calendar Year		INN Coins	Deductible and MOOP INN				Primary Care Visit *First Non-Preventive Visit is No Charge	Pediatric PCP Copay**	Specialist Visit	Urgent Care	Emergency Services
BSW Plus PPO		BSW Access PPO	INN Deductible Individual Family		OON Deductible Individual Family	INN MOOP Individual Family	OON MOOP Individual Family						
Silver PPO 90 5900	SPG25D15	UHC25F15	10%	\$5,900	\$11,800	\$9,100	\$27,300	\$35 copay/visit	No charge	\$70 copay/visit	\$50 copay/visit	\$750 copay AFD	10% coins AFD
				\$11,800	\$23,600	\$18,200	\$54,600						
Silver PPO 80 5000	SPG25D11	UHC25F11	20%	\$5,000	\$10,000	\$9,100	\$27,300	\$40 copay/visit	No charge	\$80 copay/visit	\$50 copay/visit	\$750 copay AFD	20% coins AFD
				\$10,000	\$20,000	\$18,200	\$54,600						
Silver PPO HSA 5100	SPG25D14	UHC25F14	0%	\$5,100	\$10,200	\$5,100	\$15,300	0% coins AFD	No charge	0% coins, AFD	0% coins AFD	0% coins AFD	0% coins AFD
				\$10,200	\$20,400	\$10,200	\$30,600						
Silver PPO 70 4500	SPG25D12	UHC25F12	30%	\$4,500	\$9,000	\$9,100	\$27,300	\$40 copay/visit	No charge	\$80 copay/visit	\$50 copay/visit	\$750 copay AFD	30% coins AFD
				\$9,000	\$18,000	\$18,200	\$54,600						
Silver PPO 80 4250	SPG25D40	UHC25F40	20%	\$4,250	\$8,500	\$9,100	\$27,300	\$50 copay/visit	No charge	\$95 copay/visit	\$50 copay/visit	\$750 copay AFD	20% coins AFD
				\$8,500	\$17,000	\$18,200	\$54,600						
Silver PPO 60 4200	SPG25D41	UHC25F41	40%	\$4,200	\$8,400	\$9,200	\$27,600	\$45 copay AFD	No charge	\$80 copay AFD	\$50 copay/visit	\$750 copay AFD	40% coins AFD
				\$8,400	\$16,800	\$18,400	\$55,200						
Silver PPO 70 3800	SPG25D17	UHC25F17	30%	\$3,800	\$7,600	\$9,100	\$27,300	\$50 copay/visit	No charge	\$95 copay/visit	\$50 copay/visit	\$750 copay AFD	30% coins AFD
				\$7,600	\$15,200	\$18,200	\$54,600						
Silver PPO 60 3250	SPG25D37	UHC25F37	40%	\$3,250	\$6,500	\$9,100	\$27,300	\$55 copay/visit	No charge	\$95 copay/visit	\$50 copay/visit	\$750 copay AFD	40% coins AFD
				\$6,500	\$13,000	\$18,200	\$54,600						
Silver PPO 90 750	SPG25D16	UHC25F16	10%	\$750	\$1,500	\$9,200	\$27,600	\$50 copay/visit	No charge	\$100 copay/visit	\$50 copay/visit	\$750 copay AFD	\$2,250 copay per hospital admission, AFD
				\$1,500	\$3,000	\$18,400	\$55,200						

This is a summary of benefit highlights only. All benefits shown indicate member responsibility.

ACA Small Group PY 2025 Portfolio- PPO

Networks available: BSW Plus PPO & BSW Access PPO

PY2025 ACA Small Group Snapshot Grid								Networks Available: BSW Plus PPO and BSW Access PPO					
Plan Name / Network / Medical Rider			Coinsurance / Deductible / MOOP					In-Network Benefits					
Plan Name	Calendar Year		INN Coins	Deductible and MOOP INN				Primary Care Visit *First Non-Preventive Visit is No Charge	Pediatric PCP Copay**	Specialist Visit	Urgent Care	Emergency Services	Inpatient Hosp
	BSW Plus PPO	BSW Access PPO		INN Deductible Individual Family	OON Deductible Individual Family	INN MOOP Individual Family	OON MOOP Individual Family						
Gold PPO 90 4500	GPG25D07	UHC25F07	10%	\$4,500	\$9,000	\$6,300	\$18,900	\$5 copay/visit	No charge	\$40 copay/visit	\$50 copay/visit	\$750 copay AFD	10% coins AFD
				\$9,000	\$18,000	\$12,600	\$37,800						
Gold PPO 100 4000	GPG25D38	UHC25F38	0%	\$4,000	\$8,000	\$6,500	\$19,500	\$15 copay/visit	No charge	\$25 copay/visit	\$50 copay/visit	\$750 copay AFD	0% coins AFD
				\$8,000	\$16,000	\$13,000	\$39,000						
Gold PPO 100 3500	GPG25D19	UHC25F19	0%	\$3,500	\$7,000	\$6,900	\$20,700	No charge	No charge	\$65 copay/visit	\$50 copay/visit	\$750 copay AFD	0% coins AFD
				\$7,000	\$14,000	\$13,800	\$41,400						
Gold PPO HSA 3700	GPG25D18	UHC25F18	0%	\$3,700	\$7,400	\$3,700	\$11,100	0% coins AFD	No charge	0% coins, AFD	0% coins AFD	0% coins AFD	0% coins AFD
				\$7,400	\$14,800	\$7,400	\$22,200						
Gold PPO HSA 3300	GPG25D20	UHC25F20	0%	\$3,300	\$6,600	\$3,300	\$9,900	0% coins AFD	No charge	0% coins, AFD	0% coins AFD	0% coins AFD	0% coins AFD
				\$6,600	\$13,200	\$6,600	\$19,800						
Gold PPO 100 3000	GPG25D27	UHC25F27	0%	\$3,000	\$6,000	\$4,400	\$13,200	\$25 copay/visit	No charge	\$60 copay/visit	\$50 copay/visit	\$750 copay AFD	0% coins AFD
				\$6,000	\$12,000	\$8,800	\$26,400						
Gold PPO 80 3000	GPG25D42	UHC25F42	20%	\$3,000	\$6,000	\$5,500	\$16,500	\$35 copay/visit	No charge	\$80 copay/visit	\$50 copay/visit	\$750 copay AFD	20% coins AFD
				\$6,000	\$12,000	\$11,000	\$33,000						

Gold

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ACA Small Group PY 2025 Portfolio- PPO

Networks available: BSW Plus PPO & BSW Access PPO

Gold	PY2025 ACA Small Group Snapshot Grid							Networks Available: BSW Plus PPO and BSW Access PPO					
	Plan Name / Network / Medical Rider			Coinsurance / Deductible / MOOP				In-Network Benefits					
	Plan Name	Calendar Year		INN Coins	Deductible and MOOP INN				Primary Care Visit *First Non-Preventive Visit is No Charge	Pediatric PCP Copay**	Specialist Visit	Urgent Care	Emergency Services
BSW Plus PPO		BSW Access PPO	INN Deductible Individual Family		OON Deductible Individual Family	INN MOOP Individual Family	OON MOOP Individual Family						
Gold PPO 100 2300	GPG25D26	UHC25F26	0%	\$2,300	\$4,600	\$8,500	\$25,500	No charge	No charge	\$70 copay/visit	\$50 copay/visit	\$750 copay AFD	0% coins AFD
				\$4,600	\$9,200	\$17,000	\$51,000						
Gold PPO 90 2000	GPG25D25	UHC25F25	10%	\$2,000	\$4,000	\$5,500	\$16,500	\$25 copay/visit	No charge	\$60 copay/visit	\$50 copay/visit	\$750 copay AFD	10% coins AFD
				\$4,000	\$8,000	\$11,000	\$33,000						
Gold PPO 90 1900	GPG25D28	UHC25F28	10%	\$1,900	\$3,800	\$7,500	\$22,500	No charge	No charge	\$60 copay/visit	\$50 copay/visit	\$750 copay AFD	10% coins AFD
				\$3,800	\$7,600	\$15,000	\$45,000						
Gold PPO 80 1500	GPG25D23	UHC25F23	20%	\$1,500	\$3,000	\$7,000	\$21,000	\$25 copay/visit	No charge	\$60 copay/visit	\$50 copay/visit	\$750 copay AFD	20% coins AFD
				\$3,000	\$6,000	\$14,000	\$42,000						
Gold PPO 80 1000	GPG25D24	UHC25F24	20%	\$1,000	\$2,000	\$8,200	\$24,600	\$25 copay/visit	No charge	\$60 copay/visit	\$50 copay/visit	\$750 copay AFD	20% coins AFD
				\$2,000	\$4,000	\$16,400	\$49,200						
Gold PPO 80 750	GPG25D39	UHC25F39	20%	\$750	\$1,500	\$8,250	\$24,750	\$40 copay/visit	No charge	\$70 copay/visit	\$50 copay/visit	\$750 copay AFD	20% coins AFD
				\$1,500	\$3,000	\$16,500	\$49,500						
Gold PPO copayment 0 7000	GPG25D22	UHC25F22	10%	\$0	\$2,750	\$7,000	\$21,000	\$20 copay/visit	No charge	\$55 copay/visit	\$50 copay/visit	\$750 copay/visit	\$1,500 copay per hospital admission
				\$0	\$5,500	\$14,000	\$42,000						

This is a summary of benefit highlights only. All benefits shown indicate member responsibility.