

## 2022 ARHOME Cost Sharing Comparison Tables: Region 2

### Table 1: Complete In-Network Plan Comparison of What You Pay

The table below shows all benefit categories covered by each insurance plan. This table only shows the cost for in-network providers. If you only want to see benefits with differences in cost between issuers, see **Table 2** (In-Network Differences)

To find information about the doctors, hospitals, and other providers available in an issuer network, click on any "Doctors and Hospitals Search" link below.

**What is Copay?**

Copay is a fee that you pay for certain medical services. Copays are shown by dollar (\$) amounts.

**What is Coinsurance?**

Coinsurance is your percentage (%) of the cost for medical insurance. For example, if the table below shows 20% coinsurance for a medical service, you pay 20% toward the charges and the insurance company pays 80%.

Company		Ambetter from Arkansas Health & Wellness	Ambetter from Arkansas Health & Wellness (QualChoice)	Ambetter from Arkansas Health & Wellness (QualChoiceLife)	Arkansas Blue Cross and Blue Shield	Health Advantage
Marketing Name:		Ambetter Balanced Care 7	Ambetter Balanced Care 7 (QualChoice)	Ambetter Balanced Care 7 (QualChoiceLife)	Silver Plan AH1	HA Silver Plan AH1
<b>In Network</b>	<b>Office Visits and Outpatient Services</b>					
	Primary Care Visit to Treat an Injury or Illness	\$4.70 copay	\$4.70 copay	\$4.70 copay	\$4.70 copay	\$4.70 copay
	Preventive Care/Screening/Immunization	No Charge	No Charge	No Charge	No Charge	No Charge
	Other Practitioner Office Visit (Nurse, Physician Assistant)	\$4.70 copay	\$4.70 copay	\$4.70 copay	\$4.70 copay	\$4.70 copay
	Specialist Visit	\$4.70 copay	\$4.70 copay	\$4.70 copay	\$4.70 copay	\$4.70 copay
	Outpatient Facility Fee (e.g., Ambulatory Surgery Center)	\$4.70 Copay	\$4.70 Copay	\$4.70 Copay	\$4.70 Copay	\$4.70 Copay
	Chiropractic Care	\$4.70 copay	\$4.70 copay	\$4.70 copay	\$4.70 copay	\$4.70 copay
	Acupuncture	Not Covered	Not Covered	Not Covered	Not Covered	Not Covered
	Nutritional Counseling	\$4.70 copay	\$4.70 copay	\$4.70 copay	No Charge	No Charge

Company		Ambetter from Arkansas Health & Wellness	Ambetter from Arkansas Health & Wellness (QualChoice)	Ambetter from Arkansas Health & Wellness (QualChoiceLife)	Arkansas Blue Cross and Blue Shield	Health Advantage
		Doctors and Hospitals Search (click here)	Doctors and Hospitals Search (click here)	Doctors and Hospitals Search (click here)	Doctors and Hospitals Search (click here)	Doctors and Hospitals Search (click here)
Marketing Name:		Ambetter Balanced Care 7	Ambetter Balanced Care 7 (QualChoice)	Ambetter Balanced Care 7 (QualChoiceLife)	Silver Plan AH1	HA Silver Plan AH1
In Network	<b>Pharmacy</b>					
	Generic Drugs	\$4.70 copay	\$4.70 copay	\$4.70 copay	\$4.70 copay	\$4.70 copay
	Preferred Brand Drugs	\$4.70 copay	\$4.70 copay	\$4.70 copay	\$4.70 copay	\$4.70 copay
	Non-Preferred Brand Drugs	\$9.40 copay	\$9.40 copay	\$9.40 copay	\$9.40 copay	\$9.40 copay
	Specialty Drugs	\$9.40 copay	\$9.40 copay	\$9.40 copay	\$9.40 copay	\$9.40 copay
In Network	<b>Testing and Imaging</b>					
	X-rays and Diagnostic Imaging	\$4.70 copay	\$4.70 copay	\$4.70 copay	\$4.70 copay	\$4.70 copay
	Imaging (CT/PET Scans, MRIs)	\$4.70 copay	\$4.70 copay	\$4.70 copay	\$4.70 copay	\$4.70 copay
	Laboratory Outpatient and Professional Services	\$4.70 copay	\$4.70 copay	\$4.70 copay	\$4.70 copay	\$4.70 copay
	Allergy Testing	\$4.70 copay	\$4.70 copay	\$4.70 copay	No Charge	No Charge
In Network	<b>Inpatient Services</b>					
	Inpatient Hospital Services (e.g., Hospital Stay)	No Charge	No Charge	No Charge	No Charge	No Charge
In Network	<b>Emergency and Urgent Care</b>					
	Emergency Room Services	\$9.40 copay	\$9.40 copay	\$9.40 copay	No Charge	No Charge
	Emergency Transportation/Ambulance	\$9.40 Copay	\$9.40 Copay	\$9.40 Copay	No Charge	No Charge
	Urgent Care Centers or Facilities	\$4.70 copay	\$4.70 copay	\$4.70 copay	\$4.70 copay	\$4.70 copay
In Network	<b>Durable Medical Equipment</b>					
	Durable Medical Equipment	\$4.70 copay	\$4.70 copay	\$4.70 copay	\$4.70 copay	\$4.70 copay
	Prosthetic Devices	\$4.70 copay	\$4.70 copay	\$4.70 copay	No Charge	No Charge

Company		Ambetter from Arkansas Health & Wellness	Ambetter from Arkansas Health & Wellness (QualChoice)	Ambetter from Arkansas Health & Wellness (QualChoiceLife)	Arkansas Blue Cross and Blue Shield	Health Advantage
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In Network	<b>Mental and Behavioral Health and Substance Abuse</b>					
	Mental/Behavioral Health Outpatient Services	\$4.70 copay	\$4.70 copay	\$4.70 copay	\$4.70 copay	\$4.70 copay
	Mental/Behavioral Health Inpatient Services	No Charge	No Charge	No Charge	No Charge	No Charge
	Substance Abuse Disorder Inpatient Services	No Charge	No Charge	No Charge	No Charge	No Charge
	Substance Abuse Disorder Outpatient Services	\$4.70 copay	\$4.70 copay	\$4.70 copay	\$4.70 copay	\$4.70 copay
In Network	<b>Rehabilitation and Habilitation</b>					
	Rehabilitative Occupational and Rehabilitative Physical Therapy	\$4.70 copay	\$4.70 copay	\$4.70 copay	\$4.70 copay	\$4.70 copay
	Rehabilitative Speech Therapy	\$4.70 copay	\$4.70 copay	\$4.70 copay	\$4.70 copay	\$4.70 copay
	Outpatient Rehabilitation Services	\$4.70 copay	\$4.70 copay	\$4.70 copay	\$4.70 copay	\$4.70 copay
	Habilitation Services	\$4.70 copay	\$4.70 copay	\$4.70 copay	\$4.70 copay	\$4.70 copay
In Network	<b>Surgery</b>					
	Inpatient Physician and Surgical Services	No Charge	No Charge	No Charge	No Charge	No Charge
	Outpatient Surgery Physician/Surgical Services	\$4.70 copay	\$4.70 copay	\$4.70 copay	\$4.70 copay	\$4.70 copay
	Reconstructive Surgery	No Charge	No Charge	No Charge	No Charge	No Charge

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Marketing Name:		Ambetter Balanced Care 7	Ambetter Balanced Care 7 (QualChoice)	Ambetter Balanced Care 7 (QualChoiceLife)	Silver Plan AH1	HA Silver Plan AH1
In Network	<b>Treatments and Therapies</b>					
	Chemotherapy	\$4.70 Copay	\$4.70 Copay	\$4.70 Copay	No Charge	No Charge
	Radiation	\$4.70 Copay	\$4.70 Copay	\$4.70 Copay	No Charge	No Charge
	Infertility Treatment	\$4.70 Copay	Not Covered	\$4.70 Copay	No Charge	Not Covered
	Infusion Therapy	\$4.70 Copay	\$4.70 Copay	\$4.70 Copay	No Charge	No Charge
In Network	<b>Vision</b>					
	Routine Eye Exam for Children	No Charge	No Charge	No Charge	No Charge	No Charge
	Routine Eye Exam (Adult)	Not Covered	Not Covered	Not Covered	Not Covered	Not Covered
	Eye Glasses for Children	No Charge	No Charge	No Charge	No Charge	No Charge
In Network	<b>Dental</b>					
	Routine Dental Services (Adult)	Not Covered	Not Covered	Not Covered	Not Covered	Not Covered
	Basic Dental Care - Adult	Not Covered	Not Covered	Not Covered	Not Covered	Not Covered
	Accidental Dental	\$4.70 Copay	\$4.70 Copay	\$4.70 Copay	No Charge	No Charge
In Network	<b>Women's Services</b>					
	Delivery and All Inpatient Services for Maternity Care	No Charge	No Charge	No Charge	No Charge	No Charge
	Prenatal and Postnatal Care	\$4.70 copay	\$4.70 copay	\$4.70 copay	No Charge	No Charge

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<b>In Network</b>	<b>Other</b>					
	Eyeglasses for Adult	Not Covered	Not Covered	Not Covered	Not Covered	Not Covered
	Diabetes Education	\$4.70 copay	\$4.70 copay	\$4.70 copay	No Charge	No Charge
	Skilled Nursing Facility	\$20 Copay per Day	\$20 Copay per Day	\$20 Copay per Day	\$20 Copay per Day	\$20 Copay per Day
	Home Health Care Services	\$4.70 copay	\$4.70 copay	\$4.70 copay	No Charge	No Charge
	Private-Duty Nursing	Not Covered	Not Covered	Not Covered	Not Covered	Not Covered
	Hospice Services	\$20 Copay	\$20 Copay	\$20 Copay	No Charge	No Charge
	Dialysis	\$4.70 Copay	\$4.70 Copay	\$4.70 Copay	No Charge	No Charge
	Transplant	No Charge	No Charge	No Charge	No Charge	No Charge
	Hearing Aids	\$4.70 copay	\$4.70 copay	\$4.70 copay	No Charge	No Charge
Treatment for Temporomandibular Joint Disorders	\$4.70 Copay	\$4.70 Copay	\$4.70 Copay	No Charge	No Charge	

**Table 2: Difference In Plans Only - In-Network Comparison of What You Pay**

To find information about the doctors, hospitals, and other providers available in an issuer network, click on any "Doctors and Hospitals Search" link below.

**What is Copay?**

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	Nutritional Counseling	\$4.70 copay	\$4.70 copay	\$4.70 copay	No Charge	No Charge
In Network	<b>Testing and Imaging</b>					
	Allergy Testing	\$4.70 copay	\$4.70 copay	\$4.70 copay	No Charge	No Charge
In Network	<b>Emergency and Urgent Care</b>					
	Emergency Room Services	\$9.40 copay	\$9.40 copay	\$9.40 copay	No Charge	No Charge
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In Network	<b>Durable Medical Equipment</b>					
	Prosthetic Devices	\$4.70 copay	\$4.70 copay	\$4.70 copay	No Charge	No Charge

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	Accidental Dental	\$4.70 Copay	\$4.70 Copay	\$4.70 Copay	No Charge	No Charge
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	Prenatal and Postnatal Care	\$4.70 copay	\$4.70 copay	\$4.70 copay	No Charge	No Charge
In Network	<b>Other</b>					
	Diabetes Education	\$4.70 copay	\$4.70 copay	\$4.70 copay	No Charge	No Charge
	Home Health Care Services	\$4.70 copay	\$4.70 copay	\$4.70 copay	No Charge	No Charge
	Hospice Services	\$20 Copay	\$20 Copay	\$20 Copay	No Charge	No Charge
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