

New Jersey 2025 Individual & Family Plans	Gold 1500 Chronic Care CKM Off Exchange	Silver 2500 Off Exchange	Bronze 3000 Off Exchange
The Basics			
Deductible (Individual / Family)	\$1,500 / \$3,000	\$2,500 / \$5,000	\$3,000 / \$6,000
Pharmacy Deductible (Individual / Family)	\$250 / \$500	\$250 / \$500	N/A
Out-of-Pocket Max (Individual / Family)	\$9,200 / \$18,400	\$9,200 / \$18,400	\$9,200 / \$18,400
\$0 Preventive care	\checkmark	\checkmark	\checkmark
Dedicated Care Team	~	\checkmark	\checkmark
HSA-Compatible?	No	No	No
Prices for Benefits			
Virtual Urgent Care	\$0	\$0	\$0
Primary Care Office Visits	\$5	\$50 after deductible	\$50 after deductible
Specialist Office Visits	\$50	\$75 after deductible	30% after deductible
Urgent Care	\$50	\$75	\$100
Emergency Room	30%	20% after deductible	30% after deductible
Mental Health Office Visits	\$5	\$50 after deductible	30% after deductible
Labs	\$15	\$20	30% after deductible
X-rays & Diagnostic Imaging	30% after deductible	20% after deductible	30% after deductible
MRIs & Advanced Imaging	\$100	20% after deductible	30% after deductible
Inpatient Facility Fee	30% after deductible	20% after deductible	30% after deductible
Outpatient Facility Fee	30% after deductible	20% after deductible	30% after deductible
RX Generics: Preferred (Tier 1a)	\$20	\$15	\$25
RX Generics: Non-preferred (Tier 1b)	\$20	\$15	\$25
RX Brand: Preferred (Tier 2)	\$50	\$50	50% after deductible (cost share applies, up to \$250 per script)
RX Brand: Non-preferred (Tier 3)	\$75 after deductible	50% after deductible (cost share applies, up to \$125 per script)	50% after deductible (cost share applies, up to \$250 per script)
RX Brand: Specialty (Tier 4)	\$75 after deductible	50% after deductible (cost share applies, up to \$125 per script)	50% after deductible (cost share applies, up to \$250 per script)

Disclaimers:

Benefits may be subject to deductible. Oscar has specific rates with in-network providers. Members pay Oscar's rate with in-network providers until reaching the plan's deductible. For coinsurance, member pays coinsurance percentage of the rate until deductible and out-of-pocket max is reached. Plan pays 100% thereafter.

The first 3 non-preventive visits across these categories are subject to the copay, pre-deductible. Subsequent visits are charged at 100% of negotiated rate until member meets the plan's deductible.

All insurance policies and group benefit plans contain exclusions and limitations. It is essential to review your policy documents carefully to determine which health care services are covered. For information on availability, costs, and coverage details, please contact a licensed agent, an Oscar Sales representative, or reach out to Oscar directly at 855-672-2788.

Oscar Primary Care: For 2025, Oscar Primary Care is available in TX (excluding non-elite EPO Bronze plans), NY (excluding Standard Silver, Standard Bronze, and Secure plans), FL (excluding HSA and Secure plans), AZ (excluding Secure plans), GA (excluding HSA and Secure plans), OK (excluding Secure plans). Oscar Primary Care providers are employed by Oscar Medical Group, not Oscar Insurance Company or its insurance plan affiliates. Oscar Primary Care is only available to members 18 years of age and older. Prescriptions, visits and services may be limited at the provider's discretion and Oscar Primary Care is not intended to be used in conjunction with another primary care consultation. Oscar Care in-person visits in conjunction with your virtual visit may have a copayment. Due to medical licensing laws, you must be in your home state at the time of your virtual visit.

Oscar's Virtual Urgent Care offerings are not available in US territories or internationally. If you have an HSA-compatible high-deductible health plan or a Secure plan, you won't be eligible for \$0 visits. Prescriptions, visits and services may be limited per provider discretion.

Oscar Medical coverage is underwritten by Oscar Insurance Company located in New York, New York,

Plans sold in Texas use policy and associated COC form numbers OSC-TX-IVL-HMO-EOC-2025-HIX OHIN-134128348; OSC-TX-IVL-HMO-EOC-2025 OHIN-134128297; GUIDED OSC-TX-IVL-HMO-GOLD-GUIDED-CARE-EOC-2025 OHIN-134128360; OSC-TX-IVL-EOC-2025 OHIN-134080911; OSC-TX-IVL-EOC-2025-HIX OHIN-134080906; OSC-TX-S-IVL-EOC-2025-HIX OHIN-134079760; OSC-TX-S-IVL-EOC-2025 OHIN-134079760. Plans sold in Virginia use policy and associated form numbers VA ON OSC-VA-IVL-EOC-2025-HIX OHIN-134065976; VA OFF OSC-VA-IVL-EOC-2025 OHIN-134065976.

HMO products are offered by Oscar Insurance Corporation and Oscar Buckeye State Insurance Corporation in Ohio, Oscar Health Plan, Inc. in Arizona and Illinois, Oscar Health Plan of Pennsylvania, Inc. in Pennsylvania, Oscar Health Plan of North Carolina, Inc. in North Carolina, Oscar Managed Care of South Florida, Inc. in Florida, Oscar Health Plan of New York, Inc. in New York, and Oscar Managed Care in Texas.