



2017 Standardized Benefit Design Work Group
Thursday, November 9, 2017 | 10:00 A.M. – 12:00 P.M.
Maryland Health Benefit Exchange | 6th Floor Small Conference Room
750 East Pratt St. Baltimore, MD 21202
Dial-in: 1 (877) 431-1883
Passcode: 6876841631

MHBE Disclaimer on the 2019 Standard Plan Design

The Maryland Health Connection Standard Plans were designed to help consumers compare, apples-to-apples, the health plans offered on Maryland Health Connection. Out-of-pocket costs of most health care services have been standardized, which means you will be able to decide the health plan that is best for you by comparing other important health plan features like provider networks, quality, and premium.

The out-of-pocket costs that you see for each health care service are the lowest costs that you would pay. Your cost might increase if you use health care services at more expensive facility settings. For example, visiting a specialist to treat an illness at their office is less expensive than visiting a specialist's office in a hospital setting.

[+]For more information...

There are several important things to consider. While the out-of-pocket cost of most health care services have been standardized, there will be some difference between health plans of what specific services are included in each service category. For more information on which benefit categories are standardized, click [here](#).

Some services require that you meet your deductible before your out-of-pocket costs are covered by your health plan. How much you pay out-of-pocket for health care services before you meet your deductible is not standardized.

If you are consumer with unique health needs and require specific services check the health plan's contract (click here for more information) for the exact services that are included in each service category.

[Click here for additional, important reminders for 2019.](#)

[+] Birth-control:

While most contraceptive drugs or devices (*or birth-control*) are covered by health plans at no cost to you, some exceptions apply. You may have to pay out-of-pocket for specific birth-control if an alternative is covered by your health plan at no cost, **or if you get your birth-control from an out-of-network doctor or pharmacy**. If you require specific birth-control drugs, check the health plan's formulary (click on Prescription Drug Search while you shop). If you require specific birth-control devices, check the health plan's contract (click here for more information) or call the health plan.

[+] Pre-natal and Post-natal care:

Preventive pre-natal and post-natal care is covered at no cost to you. You may pay out-of-pocket costs for non-preventive pre-natal and post-natal care.

[+] Home health care and home visits for mothers and newborns:

While home visits for mothers and newborns following childbirth are covered at no cost to you, some exceptions apply. If you are enrolled in a H.S.A. Qualified health plan you will have to pay for services until you reach the deductible.