

# 2024 Sentara Direct Plus Plans



## Small Groups with 1-50 total employees

This chart only summarizes standard covered expenses. Exclusions and limitations apply. Additional benefits may be available.

Plan Name	DED (In Net) Individual Family	DED (OON) Individual Family	MOOP (In Net) Individual Family	MOOP (OON) Individual Family	OON COINSURANCE	PCP Tier 1 / Tier 2 Physicians	VIRTUAL CONSULT No OON Coverage	SPECIALIST Tier 1 / Tier 2 Physicians	OUTPATIENT Tier 1 / Tier 2 Facilities	INPATIENT Tier 1 / Tier 2 Facilities	ED (In or OON)	UCC	PRESCRIPTION DRUG COVERAGE Deductible, if applicable
Sentara Direct Plus Platinum 0 Ded 100 Rx Ded	None	\$1,750 \$3,500	\$2,800 \$5,600	\$5,000 \$10,000	40% AD/AC	\$10/\$20	No charge	\$20/\$40	\$150/\$250	\$200/day (\$800 max) \$400/day (\$1,600 max)	\$350	\$20	\$100 Ded p/p Tier 1: \$15 Tier 2: \$50 Tier 3: 20% AD Tier 4: 20% AD (\$350 max)
Sentara Direct Plus Platinum 0 Ded 150 Rx Ded	None	\$2,000 \$4,000	\$3,000 \$6,000	\$6,000 \$12,000	40% AD/AC	\$15/\$30	No charge	\$35/\$70	\$150/\$250	\$300/day (\$1,200 max) \$600/day (\$2,400 max)	\$350	\$35	\$150 Ded p/p Tier 1: \$10 Tier 2: \$40 AD Tier 3: 20% AD Tier 4: 20% AD (\$350 max)
Sentara Direct Plus Gold 500 Ded 200 Rx Ded	\$500 \$1,000	\$1,000 \$2,000	\$7,500 \$15,000	\$15,000 \$30,000	40% AD/AC	\$25/\$50	No charge	\$50/\$100	20% AD/40% AD	20% AD/40% AD	30% AD	\$50	\$200 Ded p/p Tier 1: \$15 Tier 2: \$50 AD Tier 3: 20% AD Tier 4: 20% AD (\$350 max)
Sentara Direct Plus Gold 750 Ded	\$750 \$1,500	\$1,500 \$3,000	\$7,700 \$15,400	\$15,400 \$30,800	40% AD/AC	\$30/\$60	No charge	\$60/\$120	20% AD/40% AD	20% AD/40% AD	30% AD	\$60	Tier 1: \$15 Tier 2: \$50 Tier 3: 20% Tier 4: 20% (\$350 max)
Sentara Direct Plus Gold 1000 Ded 250 Rx Ded	\$1,000 \$2,000	\$2,000 \$4,000	\$7,000 \$14,000	\$14,000 \$28,000	30% AD/AC	\$20/\$40	No charge	\$40/\$80	\$250 AD/\$500 AD	\$500 AD/\$1,000 AD	\$350 AD	\$40	\$250 Ded p/p Tier 1: \$25 AD Tier 2: \$50 AD Tier 3: 20% AD Tier 4: 20% AD (\$350 max)
Sentara Direct Plus Gold 1250 Ded 200 Rx Ded	\$1,250 \$2,500	\$2,500 \$5,000	\$6,500 \$13,000	\$13,000 \$26,000	40% AD/AC	\$20/\$40	No charge	\$40/\$80	20% AD/40% AD	20% AD/40% AD	30% AD	\$40	\$200 Ded p/p Tier 1: \$15 Tier 2: \$50 AD Tier 3: 20% AD Tier 4: 20% AD (\$350 max)
Sentara Direct Plus Gold 1500 Ded 200 Rx Ded	\$1,500 \$3,000	\$3,250 \$6,500	\$6,500 \$13,000	\$13,000 \$26,000	40% AD/AC	\$25/\$50	No charge	\$50/\$100	20% AD/40% AD	20% AD/40% AD	30% AD	\$40	\$200 Ded p/p Tier 1: \$15 Tier 2: \$50 AD Tier 3: 20% AD Tier 4: 20% AD (\$350 max)
Sentara Direct Plus Gold 2000 Ded 100 Rx Ded	\$2,000 \$4,000	\$4,000 \$8,000	\$8,000 \$16,000	\$16,800 \$33,600	40% AD/AC	\$30/\$60	No charge	\$60/\$120	\$100/\$200	20% AD/40% AD	30% AD	\$60	\$100 Ded p/p Tier 1: \$25 AD Tier 2: \$50 AD Tier 3: 20% AD Tier 4: 20% AD (\$350 max)
Sentara Direct Plus Gold 2000 Ded	\$2,000 \$4,000	\$4,000 \$8,000	\$6,500 \$13,000	\$13,000 \$26,000	50% AD/AC	\$25/\$50	No charge	\$50/\$100	30% AD/50% AD	30% AD/50% AD	40% AD	\$50	Tier 1: \$15 Tier 2: \$50 Tier 3: 30% Tier 4: 30% (\$350 max)
Sentara Direct Plus Gold 2800 Ded 200 Rx Ded	\$2,800 \$5,600	\$5,600 \$11,200	\$8,400 \$16,800	\$16,800 \$33,600	30% AD/AC	\$35/\$70	No charge	\$65/\$130	No charge AD/20% AD	No charge AD/20% AD	20% AD	No charge AD	\$200 Ded p/p Tier 1: \$15 AD Tier 2: \$50 AD Tier 3: 25% AD Tier 4: 25% AD (\$350 max)
Sentara Direct Plus Silver 3000 Ded	\$3,000 \$6,000	\$6,000 \$12,000	\$8,800 \$17,600	\$17,600 \$35,200	45% AD/AC	\$35/\$70	No charge	\$70 AD/\$140 AD	25% AD/45% AD	25% AD/45% AD	35% AD	\$70 AD	MDA Tier 1: \$15 AD Tier 2: \$50 AD Tier 3: 25% AD Tier 4: 25% AD (\$350 max)

## 2024 Sentara Direct Plus Plans continued

Plan Name	DED (In Net) Individual Family	DED (OON) Individual Family	MOOP (In Net) Individual Family	MOOP (OON) Individual Family	OON COINSURANCE	PCP Tier 1 / Tier 2 Physicians	VIRTUAL CONSULT No OON Coverage	SPECIALIST Tier 1 / Tier 2 Physicians	OUTPATIENT Tier 1 / Tier 2 Facilities	INPATIENT Tier 1 / Tier 2 Facilities	ED (In or OON)	UCC	PRESCRIPTION DRUG COVERAGE Deductible, if applicable
<b>Sentara Direct Plus Silver 4000 Ded 250 Rx Ded</b>	\$4,000 \$8,000	\$8,000 \$16,000	\$8,650 \$17,300	\$17,000 \$34,000	40% AD/AC	\$40/\$80	No charge	\$80/\$160	20% AD/40% AD	20% AD/40% AD	30% AD	\$80	<b>\$250 Ded p/p</b> Tier 1: \$25 AD Tier 2: \$50 AD Tier 3: 20% AD Tier 4: 20% AD (\$350 max)
<b>Sentara Direct Plus Silver 6500 Ded 250 Rx Ded</b>	\$6,500 \$13,000	\$13,000 \$26,000	\$8,000 \$16,000	\$16,000 \$32,000	30% AD/AC	No charge AD/ 20% AD	No charge AD	No charge AD/ 20% AD	No charge AD/ 20% AD	No charge AD/ 20% AD	20% AD	No charge AD	<b>\$250 Ded p/p</b> Tier 1: \$15 AD Tier 2: \$50 AD Tier 3: 25% AD Tier 4: 25% AD (\$350 max)
<b>Sentara Direct Plus Bronze 7200 Ded</b>	\$7,200 \$14,400	\$14,400 \$28,800	\$9,400 \$18,800	\$18,800 \$37,600	50% AD/AC	\$45/\$90	No charge	\$90/\$180	40% AD/50% AD	40% AD/50% AD	50% AD	\$90	<b>MDA</b> Tier 1: \$25 AD Tier 2: \$55 AD Tier 3: 40% AD Tier 4: 40% AD (\$350 max)
<b>Sentara Direct Plus Bronze 8500 Ded</b>	\$8,500 \$17,000	\$17,000 \$34,000	\$9,450 \$18,900	\$18,900 \$37,800	50% AD/AC	\$50/\$100	No charge	\$100/\$200	30% AD/50% AD	30% AD/50% AD	40% AD	\$100	<b>MDA</b> Tier 1: \$25 AD Tier 2: \$55 AD Tier 3: 30% AD Tier 4: 30% AD (\$350 max)

## 2024 Sentara Direct Plus HSA Plans

Plan Name	DED (In Net) Individual Family	DED (OON) Individual Family	MOOP (In Net) Individual Family	MOOP (OON) Individual Family	OON COINSURANCE	PCP Tier 1 / Tier 2 Physicians	VIRTUAL CONSULT No OON Coverage	SPECIALIST Tier 1 / Tier 2 Physicians	OUTPATIENT Tier 1 / Tier 2 Facilities	INPATIENT Tier 1 / Tier 2 Facilities	ED (In or OON)	UCC	PRESCRIPTION DRUG COVERAGE Deductible, if applicable
<b>Sentara Direct Plus HSA Silver 1900 Ded</b>	\$1,900 \$3,800	\$3,800 \$7,600	\$7,500 \$15,000	\$15,000 \$30,000	30% AD/AC	\$25 AD/\$50 AD	No charge AD	\$50 AD / \$100 AD	\$400 AD / \$800 AD	\$500 AD / \$1,000 AD	\$350 AD	\$50 AD	<b>Prev BD, MDA</b> Tier 1: \$25 AD Tier 2: \$55 AD Tier 3: 25% AD Tier 4: 25% AD (\$350 max)
<b>Sentara Direct Plus HSA Silver 3200 Ded</b>	\$3,200 \$6,400	\$6,400 \$12,800	\$7,200 \$14,400	\$14,400 \$28,800	40% AD/AC	20% AD/40% AD	No charge AD	20% AD/40% AD	20% AD/40% AD	20% AD/40% AD	30% AD	20% AD	<b>Prev BD, MDA</b> Tier 1: \$25 AD Tier 2: \$55 AD Tier 3: 20% AD Tier 4: 20% AD (\$350 max)
<b>Sentara Direct Plus HSA Silver 4000 Ded</b>	\$4,000 \$8,000	\$8,000 \$16,000	\$6,900 \$13,800	\$13,800 \$27,600	30% AD/AC	\$40 AD/\$80 AD	No charge AD	\$80 AD/\$160 AD	No charge AD/ 20% AD	No charge AD/20% AD	20% AD	\$80 AD	<b>Prev BD, MDA</b> Tier 1: \$25 AD Tier 2: \$55 AD Tier 3: 20% AD Tier 4: 20% AD (\$350 max)
<b>Sentara Direct Plus HSA Bronze 6500 Ded</b>	\$6,500 \$13,000	\$13,000 \$26,000	\$7,500 \$15,000	\$15,000 \$30,000	30% AD/AC	No charge AD/ 20% AD	No charge AD	No charge AD/ 20% AD	No charge AD/ 20% AD	No charge AD/20% AD	20% AD	No charge AD	<b>Prev BD, MDA</b> Tier 1: 25% AD Tier 2: 25% AD Tier 3: 25% AD Tier 4: 25% AD (\$350 max)
<b>Sentara Direct Plus HSA Bronze 7000 Ded</b>	\$7,000 \$14,000	\$14,000 \$28,000	\$7,500 \$15,000	\$15,000 \$30,000	30% AD/AC	No charge AD/ 20% AD	No charge AD	No charge AD/ 20% AD	No charge AD/ 20% AD	No charge AD/20% AD	20% AD	No charge AD	<b>Prev BD, MDA</b> Tier 1: 25% AD Tier 2: 25% AD Tier 3: 25% AD Tier 4: 25% AD (\$350 max)

AD: After Deductible | AC: Allowable Charges | Ded p/p: Deductible per person | MDA: Medical Deductible Applies | Prev BD: Preventive Drugs Before Deductible

Sentara Health Plans is a trade name of Sentara Health Plans, Sentara Health Insurance Company, Sentara Behavioral Health Services, Inc., and Sentara Health Administration, Inc. Sentara Vantage (HMO), Point of Service (POS), Direct, and Select plans are issued and underwritten by Sentara Health Plans. Sentara Plus (PPO) products are issued and underwritten by Sentara Health Insurance Company. Self-funded employer group health plans and BusinessEDGE® level-funded plans are administered, but not underwritten, by Sentara Health Administration, Inc. Stop Loss products are issued and underwritten by Sentara Health Insurance Company. All plans have benefit exclusions and limitations and terms under which the policy may be continued in force or discontinued. Wellness and rewards programs are administered by Sentara Health Administration, Inc. and are not covered benefits under any Sentara plan. Value-added services are not covered benefits under any of our health plans. For costs and complete details of coverage, please call your broker or Sentara Health Plans at 1-800-745-1271 or visit [sentarahealthplans.com](http://sentarahealthplans.com).