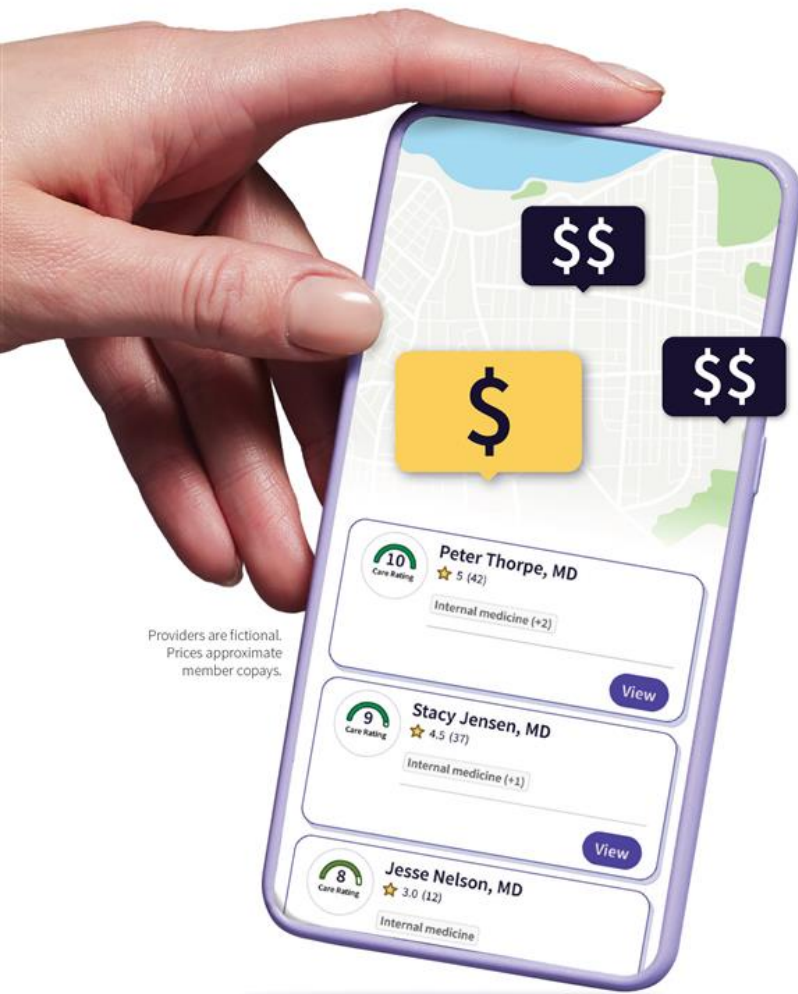


Pick the plan that lets you compare care options—from colds to cancer.



Now you can.



Providers are fictional.  
Prices approximate  
member copays.



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**Alabama**

F8000 – Surest\_AL\_2026\_RX\_ALT\_1  
Effective July 01, 2026 through June 30, 2027

**General plan details**

<b>Deductible</b>	\$0
<b>Broad, national network</b>	Yes
<b>Out-of-pocket limit</b>	
Employee	\$8,000
Family	\$16,000

**Prescription drugs**

31 days			
Preventive drugs	\$0	Specialty drugs	
Tier 1	\$10	Tier 1	\$10
Tier 2	\$35	Tier 2	\$100
Tier 3	\$70	Tier 3	\$200

**Your copays**

Preventive visit	\$0
Virtual visit (Primary and urgent)	\$0
Office visit	\$50 - \$160
Mental health and substance use disorder office visit	\$50
Urgent care visit	\$110
Emergency room visit	\$1,200
Basic diagnostic lab tests, X-rays, and ultrasounds	\$0
Physical therapy (visit limits apply)	\$25 - \$115
Maternity labor and delivery	\$2,400 - \$4,500

Insurance coverage provided by UnitedHealthcare Insurance Company or its affiliates. Administrative services provided by United HealthCare Services, Inc. or its affiliates.  
**All Fully Insured Plans in California:** If medically appropriate care from a qualified provider cannot be provided within the Network, we will arrange for the required care with an available and accessible out-of-network provider. You will only be responsible for paying the cost sharing in an amount equal to the cost sharing you would have otherwise paid for that service or a similar service if you had received the Covered Health Care Service from a Network provider.  
**Surest Fully Insured Plans in California:** A complete Network and timely access to care may only be available by obtaining treatment through providers available at the maximum Copayment shown for each service at the lowest cost-sharing tier. While some network providers are available at lower Copayments (reduced cost-sharing rates), there is no guarantee of a complete Network or timely access to care at any specific reduced cost-sharing rate.  
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