MyPhysicianPlan

Monthly Payment

Recommended

Initial Unshareable Amount (IUA) is the limit up to which the member is responsible to pay out of pocket for each incident (health episode).

Primary Care Plan: \$75 per person/per month, for all ages, no limitations, no restrictions. Flexible US Care (Primary Care + Other Medical Care Services) – Total Healthcare Solution:

\$500 Initial Unshareable Amount (IUA)						
Age	18-29 Years	30-39 Years	40-49 Years	50-59 Years	60-64 Years	
Member Only	\$267	\$354	\$354	\$413	\$655	
Member + Spouse	\$599	\$746	\$746	\$788	\$1,276	
Member + 1 Child*	\$537	\$686	\$686	\$752	\$1,213	
Member + Spouse + 1 Child*	\$875	\$1078	\$1078	\$1,130	\$1,839	

* plus \$50 per month for each additional child

\$1,000 Initial Unshareable Amount (IUA)						
Age	18-29 Years	30-39 Years	40-49 Years	50-59 Years	60-64 Years	
Member Only	\$253	\$297	\$312	\$365	\$574	
Member + Spouse	\$495	\$555	\$581	\$694	\$1,114	
Member + 1 Child*	\$458	\$540	\$563	\$663	\$1,060	
Member + Spouse + 1 Child*	\$721	\$809	\$839	\$995	\$1,604	

* plus \$50 per month for each additional child

\$1,500 Initial Unshareable Amount (IUA)						
Age	18-29 Years	30-39 Years	40-49 Years	50-59 Years	60-64 Years	
Member Only	\$230	\$273	\$288	\$341	\$537	
Member + Spouse	\$437	\$507	\$526	\$645	\$1,046	
Member + 1 Child*	\$420	\$493	\$516	\$617	\$993	
Member + Spouse + 1 Child*	\$624	\$739	\$769	\$927	\$1,503	

* plus \$50 per month for each additional child

\$2,500 Initial Unshareable Amount (IUA)						
Age	18-29 Years	30-39 Years	40-49 Years	50-59 Years	60-64 Years	
Member Only	\$212	\$236	\$258	\$314	\$495	
Member + Spouse	\$381	\$436	\$475	\$591	\$956	
Member + 1 Child*	\$383	\$420	\$463	\$563	\$909	
Member + Spouse + 1 Child*	\$565	\$628	\$689	\$845	\$1,378	

* plus \$50 per month for each additional child

\$5,000 Initial Unshareable Amount (IUA)						
Age	18-29 Years	30-39 Years	40-49 Years	50-59 Years	60-64 Years	
Member Only	\$179	\$213	\$235	\$258	\$414	
Member + Spouse	\$303	\$390	\$424	\$489	\$794	
Member + 1 Child*	\$309	\$374	\$413	\$467	\$757	
Member + Spouse + 1 Child*	\$453	\$558	\$613	\$699	\$1,136	

* plus \$50 per month for each additional child

Prices may vary depending on membership elections. Please see Membership Guidelines for full sharing rules. May not be available in all states. No representations or warranties that every or all memberships include any add-on/additional product(s).

Medical Cost Sharing Households with one or more Tobacco/Vape Users contribute an additional \$75.00 per month. All Tobacco/Vape Users over the age of 50 have a \$25,000 per Need sharing limit for Cancer, Respiratory disease, Vascular disease including coronary disease and stroke, Oral and Esophageal disease and Gastric and Duodenal Ulcers. See Section 8 and the Appendix of the applicable Sedera Guidelines for additional details.