

## Health Plan Co-payment Chart – Regions I & II

	<b>All Kids Assist and Moms &amp; Babies (White Card)</b>	<b>FamilyCare Assist (White Card)</b>	<b>All Kids Share and FamilyCare Share (Yellow Card)</b>	<b>All Kids Premium Level 1 and Family Care Premium (Yellow Card)</b>
Illinois Health Connect	No Co-pays	<ul style="list-style-type: none"> <li>- \$2 Doctor Visit</li> <li>- \$3 Brand Name Drugs</li> <li>- \$0 Generic Drugs</li> <li>- \$0 to \$3 per day Hospital Inpatient</li> </ul>	<ul style="list-style-type: none"> <li>- No Co-pays for well-child visits or immunizations (shots)</li> <li>- \$2 Doctor Visit</li> <li>- \$2 Brand Name Drugs</li> <li>- \$2 Generic Drugs</li> <li>- \$2 ER Visit</li> <li>- \$2 Hospital Admission</li> <li>- \$100 Maximum</li> </ul>	<ul style="list-style-type: none"> <li>- No Co-pays for well-child visits or immunizations (shots)</li> <li>- \$5 Doctor Visit</li> <li>- \$5 Brand Name Drugs</li> <li>- \$3 Generic Drugs</li> <li>- \$2 ER Visit</li> <li>- \$5 Hospital Admission</li> <li>- \$100 Maximum</li> </ul>
Meridian Health Plan	No Co-pays	<ul style="list-style-type: none"> <li>- No Co-pay for Doctor Visit</li> <li>- No Co-pay for Hospital Inpatient</li> <li>- \$3 Brand Name Drugs</li> <li>- \$0 Generic Drugs</li> </ul>	<ul style="list-style-type: none"> <li>- No Co-pays for well-child visits or immunizations (shots)</li> <li>- No Co-pay for Doctor Visit</li> <li>- No Co-pay for ER Visit</li> <li>- No Co-pay for Hospital Admission</li> <li>- \$2 Brand Name Drugs</li> <li>- \$2 Generic Drugs</li> </ul>	<ul style="list-style-type: none"> <li>- No Co-pays for well-child visits or immunizations (shots)</li> <li>- No Co-pay for Doctor Visit</li> <li>- No Co-pay for ER Visit</li> <li>- No Co-pay for Hospital Admission</li> <li>- \$5 Brand Name Drugs</li> <li>- \$3 Generic Drugs</li> </ul>