

2026 Maine Plan Offerings

For employers with 2 to 50 full time equivalent employees

2026 Maine Small Group Plans — Effective January 1, 2026, through December 31, 2026.

This is only a summary of plans. For more complete information, please refer to the **Schedule of Benefits**.

Product Name	In-Network	Office Visit (PCP/Specialist)	Deductible (Ind/Fam)	Out of Pocket Max (Ind/Fam)	Coinsurance	Emergency Room	Urgent Care		Inpatient	Day Surgery	Labs	X-Rays	Scans: CT, MRI, PET	PT/OT/ST	Acupuncture & Chiropractic	RX Cost Sharing 30-day retail
							Hospital Based	Freestanding								
HMO																
Clear Choice HMO Gold 1500 MD0000201704, RX0000201375	N/A	\$25 */\$50	\$1,500/\$3,000	\$5,000/\$10,000	30%	Ded then 30%	\$40	\$40	Ded then 30%	Non-Hospital: \$300 Hospital: Ded then 30%	Non-Hospital: \$15 Hospital: Ded then 30%	Ded then 30%	Non-Hospital: \$250 Hospital: Ded then 30%	\$30	Acu: \$25 Chiro: \$30	\$5/\$25/\$50/Ded then \$80/Ded then \$250
Clear Choice HMO Gold 2500 MD0000201713, RX0000201377	N/A	\$20 */\$50	\$2,500/\$5,000	\$6,000/\$12,000	30%	Ded then 30%	\$40	\$40	Ded then 30%	Non-Hospital: \$300 Hospital: Ded then 30%	Non-Hospital: \$15 Hospital: Ded then 30%	Ded then 30%	Non-Hospital: \$250 Hospital: Ded then 30%	\$30	Acu: \$20 Chiro: \$30	\$10/\$25/\$50/30%, \$300/script max/50%, \$600/script max
Clear Choice HMO Silver 4000 MD0000201714, RX0000201378	N/A	\$40 */\$60	\$4,000/\$8,000	\$8,500/\$17,000	30%	Ded then 30%	\$40	\$40	Ded then 30%	Non-Hospital: \$300 Hospital: Ded then 30%	Non-Hospital: \$15 Hospital: Ded then 30%	Ded then 30%	Non-Hospital: \$250 Hospital: Ded then 30%	\$40	\$40	\$5/\$25/\$50/Ded then \$100/Ded then \$250
Clear Choice HMO Silver 5000 MD0000201716, RX0000201379	N/A	\$40 */\$60	\$5,000/\$10,000	\$8,500/\$17,000	30%	Ded then 30%	\$40	\$40	Ded then 30%	Non-Hospital: \$300 Hospital: Ded then 30%	Non-Hospital: \$15 Hospital: Ded then 30%	Ded then 30%	Non-Hospital: \$250 Hospital: Ded then 30%	\$40	\$40	\$5/\$25/\$50/Ded then 30%/Ded then 50%
Clear Choice HMO Bronze 7500 MD0000201718, RX0000201380	N/A	\$45 */\$80	\$7,500/\$15,000	\$10,000/\$20,000	50%	Ded then 50%	\$60	\$60	Ded then 50%	Ded then 50%	Ded then 50%	Ded then 50%	Ded then 50%	\$45	\$45	\$30/\$30/Ded then \$50/Ded then \$100/Ded then \$250
HMO Bronze 8500** MD0000201719, RX0000201381	N/A	\$50 */Ded then \$80	\$8,500/\$17,000	\$10,000/\$20,000	50%	Ded then \$300 then 50%	\$60	\$60	Ded then 50%	Ded then 50%	Ded then 50%	Ded then 50%	Ded then 50%	Ded then 50%	\$50	\$30/\$30/Ded then 50%/Ded then 50%/Ded then 50%
HMO HSA																
Clear Choice HMO HSA Silver 4500 MD0000201705, RX0000201382	N/A	Ded then 20%	\$4,500/\$9,000	\$7,000/\$14,000	20%	Ded then 20%	Ded then 20%	Ded then 20%	Ded then 20%	Ded then 20%	Ded then 20%	Ded then 20%	Ded then 20%	Ded then 20%	Ded then 20%	Ded then 20%/20%/20%/20%/20%
Clear Choice HMO HSA Bronze 6300 MD0000201699, RX0000201383	N/A	Ded then 50%	\$6,300/\$12,600	\$8,000/\$16,000	50%	Ded then 50%	Ded then 50%	Ded then 50%	Ded then 50%	Ded then 50%	Ded then 50%	Ded then 50%	Ded then 50%	Ded then 50%	Ded then 50%	Ded then 50%/50%/50%/50%/50%
Clear Choice HMO HSA Bronze 8000 MD0000201700, RX0000201384	N/A	Ded then CIF	\$8,000/\$16,000	\$8,000/\$16,000	None	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Ded then 0%/0%/0%/0%/0%
Maine's Choice Plus HMO																
Clear Choice Maine's Choice Plus HMO Gold 1500 MD0000201701, RX0000201375	Preferred	\$25 */\$50	\$1,500/\$3,000	\$5,000/\$10,000	30%	Preferred Ded then 30%	\$40	\$40	Ded then 30%	Non-Hospital: \$300 Hospital: Ded then 30%	Non-Hospital: \$15 Hospital: Ded then 30%	Ded then 30%	Non-Hospital: \$250 Hospital: Ded then 30%	\$30	Acu: \$25 Chiro: \$30	\$5/\$25/\$50/Ded then \$80/Ded then \$250
	Standard	\$50 */\$100	\$4,000/\$8,000	\$5,000/\$10,000	50%		Ded then 50%	Ded then 50%	Ded then 50%	Ded then 50%	Ded then 50%	Ded then 50%	Ded then 50%	\$60		
Clear Choice Maine's Choice Plus HMO Gold 2500 MD0000201706, RX0000201391	Preferred	\$20 */\$50	\$2,500/\$5,000	\$6,000/\$12,000	30%	Preferred Ded then 30%	\$40	\$40	Ded then 30%	Non-Hospital: \$300 Hospital: Ded then 30%	Non-Hospital: \$15 Hospital: Ded then 30%	Ded then 30%	Non-Hospital: \$250 Hospital: Ded then 30%	\$30	Acu: \$20 Chiro: \$30	\$10/\$25/\$50/30%, \$300/script max/50%, \$600/script max
	Standard	\$50 */\$100	\$5,500/\$11,000	\$6,000/\$12,000	50%		Ded then 50%	Ded then 50%	Ded then 50%	Ded then 50%	Ded then 50%	Ded then 50%	Ded then 50%	\$60		
Clear Choice Maine's Choice Plus HMO Silver 4000 MD0000201707, RX0000201378	Preferred	\$40 */\$60	\$4,000/\$8,000	\$8,500/\$17,000	30%	Preferred Ded then 30%	\$40	\$40	Ded then 30%	Non-Hospital: \$300 Hospital: Ded then 30%	Non-Hospital: \$15 Hospital: Ded then 30%	Ded then 30%	Non-Hospital: \$250 Hospital: Ded then 30%	\$40	\$40	\$5/\$25/\$50/Preferred Ded then \$100/Preferred Ded then \$250
	Standard	\$80 */\$120	\$7,500/\$15,000	\$8,500/\$17,000	50%		Ded then 50%	Ded then 50%	Ded then 50%	Ded then 50%	Ded then 50%	Ded then 50%	Ded then 50%	\$70		
Clear Choice Maine's Choice Plus HMO Silver 5000 MD0000201710, RX0000201379	Preferred	\$40 */\$60	\$5,000/\$10,000	\$8,500/\$17,000	30%	Preferred Ded then 30%	\$40	\$40	Ded then 30%	Non-Hospital: \$300 Hospital: Ded then 30%	Non-Hospital: \$15 Hospital: Ded then 30%	Ded then 30%	Non-Hospital: \$250 Hospital: Ded then 30%	\$40	\$40	\$5/\$25/\$50/Preferred Ded then 30%/Preferred Ded then 50%
	Standard	\$70 */\$110	\$7,500/\$15,000	\$8,500/\$17,000	50%		Ded then 50%	Ded then 50%	Ded then 50%	Ded then 50%	Ded then 50%	Ded then 50%	Ded then 50%	\$80		
Maine's Choice Plus HMO Silver 6000 MD0000201742, RX0000201392	Preferred	\$45 */\$70	\$6,000/\$12,000	\$9,000/\$18,000	30%	Preferred Ded then \$300 then 30%	\$45	\$45	Ded then 30%	Non-Hospital: \$300 Hospital: Ded then 30%	Non-Hospital: \$15 Hospital: Ded then 30%	Ded then 30%	Non-Hospital: \$250 Hospital: Ded then 30%	Ded then 30%	\$45	\$5/\$25/Preferred Ded then 30%/Preferred Ded then 30%/Preferred Ded then 50%
	Standard	\$75 */\$100	\$8,500/\$17,000	\$10,000/\$20,000	50%		Ded then 50%	Ded then 50%	Ded then 50%	Ded then 50%	Ded then 50%	Ded then 50%	Ded then 50%	Ded then 50%		
Clear Choice Maine's Choice Plus HMO Bronze 7500 MD0000201731, RX0000201396	Preferred	\$45 */\$80	\$7,500/\$15,000	\$10,000/\$20,000	50%	Preferred Ded then 50%	\$60	\$60	Ded then 50%	Non-Hospital: \$300 Hospital: Ded then 50%	Non-Hospital: \$15 Hospital: Ded then 50%	Ded then 50%	Non-Hospital: \$250 Hospital: Ded then 50%	\$45	\$45	\$20/\$30/Preferred Ded then \$50/Preferred Ded then \$100/Preferred Ded then \$250
	Standard	\$80 */Ded then CIF	\$10,000/\$20,000	\$10,000/\$20,000	None		Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF		
Maine's Choice Plus HMO Bronze 8500** MD0000201737, RX0000201395	Preferred	\$50 */Ded then \$80	\$8,500/\$17,000	\$10,000/\$20,000	50%	Preferred Ded then \$300 then 50%	\$60	\$60	Ded then 50%	Non-Hospital: \$300 Hospital: Ded then 50%	Non-Hospital: \$15 Hospital: Ded then 50%	Ded then 50%	Non-Hospital: \$250 Hospital: Ded then 50%	Ded then 50%	\$50	\$20/\$30/Preferred Ded then 50%/Preferred Ded then 50%/Preferred Ded then 50%
	Standard	\$85 */Ded then CIF	\$10,000/\$20,000	\$10,000/\$20,000	None		Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF		

* Copay waived for the first non-routine PCP visit per year.

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							Hospital Based	Freestanding								
Maine's Choice Plus HMO HSA																
Clear Choice Maine's Choice Plus HMO HSA Silver 4000 MD00000201698, RX00000201393	Preferred	Ded then 20%	\$4,000/\$8,000	\$7,000/\$14,000	20%	Preferred Ded then 20%	Ded then 20%	Ded then 20%	Ded then 20%	Ded then 20%	Ded then 20%	Ded then 20%	Ded then 20%	Ded then 20%	Preferred Ded then 20%	Preferred Ded then \$5/\$25/\$50/\$100/\$250
	Standard	Ded then CIF	\$7,000/\$14,000	\$7,000/\$14,000	None		Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF		
Clear Choice Maine's Choice Plus HMO HSA Silver 4500 MD00000201711, RX00000201382	Preferred	Ded then 20%	\$4,500/\$9,000	\$7,000/\$14,000	20%	Preferred Ded then 20%	Ded then 20%	Ded then 20%	Ded then 20%	Ded then 20%	Ded then 20%	Ded then 20%	Ded then 20%	Ded then 20%	Preferred Ded then 20%	Preferred Ded then 20%/20%/20%/20%/20%
	Standard	Ded then CIF	\$7,000/\$14,000	\$7,000/\$14,000	None		Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF		
Clear Choice Maine's Choice Plus HMO HSA Bronze 6300 MD00000201732, RX00000201383	Preferred	Ded then 50%	\$6,300/\$12,600	\$8,000/\$16,000	50%	Preferred Ded then 50%	Ded then 50%	Ded then 50%	Ded then 50%	Ded then 50%	Ded then 50%	Ded then 50%	Ded then 50%	Ded then 50%	Preferred Ded then 50%	Preferred Ded then 50%/50%/50%/50%/50%
	Standard	Ded then CIF	\$8,000/\$16,000	\$8,000/\$16,000	None		Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF		
Maine's Choice Plus HMO HSA Bronze 7200 MD00000201733, RX00000201394	Preferred	Ded then 50%	\$7,200/\$14,400	\$8,000/\$16,000	50%	Preferred Ded then \$300 then 50%	Ded then 50%	Ded then 50%	Ded then 50%	Ded then 50%	Ded then 50%	Ded then 50%	Ded then 50%	Ded then 50%	Preferred Ded then 50%	Preferred Ded then 50%/50%/50%/50%/50%
	Standard	Ded then CIF	\$8,000/\$16,000	\$8,000/\$16,000	None		Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF		
PPO Access																
Clear Choice PPO Access Gold 2500 MD00000201702, RX00000201397	In-Network	\$20*/\$50	\$2,500/\$5,000	\$6,000/\$12,000	30%	IN Ded then 30%	\$40	\$40	Ded then 30%	Non-Hospital: \$300 Hospital: Ded then 30%	Non-Hospital: \$15 Hospital: Ded then 30%	Ded then 30%	Non-Hospital: \$250 Hospital: Ded then 30%	\$30	Acu: \$20 Chiro: \$30	\$5/\$25/\$50/30%, \$300/script max/50%, \$600/script max
	Out-of- Network	Ded then 50%	\$5,000/\$10,000	\$12,000/\$24,000	50%		Ded then 50%	Ded then 50%	Ded then 50%	Ded then 50%	Ded then 50%	Ded then 50%	Ded then 50%	Ded then 50%	Ded then 50%	
Clear Choice PPO Access Silver 4000 MD00000201743, RX00000201378	In-Network	\$40*/\$60	\$4,000/\$8,000	\$8,500/\$17,000	30%	IN Ded then 30%	\$40	\$40	Ded then 30%	Non-Hospital: \$300 Hospital: Ded then 30%	Non-Hospital: \$15 Hospital: Ded then 30%	Ded then 30%	Non-Hospital: \$250 Hospital: Ded then 30%	Ded then 50%	\$40	\$5/\$25/\$50/Ded then \$100/Ded then \$250
	Out-of- Network	Ded then 50%	\$8,000/\$16,000	\$17,000/\$34,000	50%		Ded then 50%	Ded then 50%	Ded then 50%	Ded then 50%	Ded then 50%	Ded then 50%	Ded then 50%	Ded then 50%	Ded then 50%	
PPO Access HSA																
Clear Choice PPO Access HSA Silver 4000 MD00000201703, RX00000201393	In-Network	Ded then 20%	\$4,000/\$8,000	\$7,000/\$14,000	20%	IN Ded then 20%	Ded then 20%	Ded then 20%	Ded then 20%	Ded then 20%	Ded then 20%	Ded then 20%	Ded then 20%	Ded then 20%	Ded then 20%	IN Ded then \$5/\$25/\$50/\$100/\$250
	Out-of- Network	Ded then 40%	\$8,000/\$16,000	\$14,000/\$28,000	40%		Ded then 40%	Ded then 40%	Ded then 40%	Ded then 40%	Ded then 40%	Ded then 40%	Ded then 40%	Ded then 40%	Ded then 40%	
Clear Choice PPO Access HSA Silver 4500 MD00000201738, RX00000201382	In-Network	Ded then 20%	\$4,500/\$9,000	\$7,000/\$14,000	20%	IN Ded then 20%	Ded then 20%	Ded then 20%	Ded then 20%	Ded then 20%	Ded then 20%	Ded then 20%	Ded then 20%	Ded then 20%	Ded then 20%	IN Ded then 20%/20%/20%/20%/20%
	Out-of- Network	Ded then 40%	\$9,000/\$18,000	\$14,000/\$28,000	40%		Ded then 40%	Ded then 40%	Ded then 40%	Ded then 40%	Ded then 40%	Ded then 40%	Ded then 40%	Ded then 40%	Ded then 40%	
Clear Choice PPO Access HSA Bronze 8000 MD00000201739, RX00000201384	In-Network	Ded then CIF	\$8,000/\$16,000	\$8,000/\$16,000	None	IN Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	Ded then CIF	IN Ded then 0%/0%/0%/0%/0%
	Out-of- Network	Ded then 20%	\$15,000/\$30,000	\$16,000/\$32,000	20%		Ded then 20%	Ded then 20%	Ded then 20%	Ded then 20%	Ded then 20%	Ded then 20%	Ded then 20%	Ded then 20%	Ded then 20%	

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