



COMMUNITY HEALTH PLAN
of Washington™

The power of community

INDIVIDUAL & FAMILY PLANS

2026 Benefit Highlights

Health coverage with
a personal touch.
From a local team you can trust.

individualandfamily.chpw.org



Why choose Community Health Plan of Washington (CHPW)?

We are a local, not-for-profit health plan with deep roots in Washington communities. In addition to your medical coverage, CHPW offers:

- **Personalized Care Management** – One-on-one support to help you manage your health
- **24/7 Virtual Care and Nurse Advice Line** – Talk with a doctor or nurse anytime, day or night
- **MemberFirst™ Rewards** – Earn gift cards for completing key preventive screenings

When and how can I enroll?

You can sign up for a plan through **Washington Healthplanfinder** during open enrollment from November 1 to December 15, 2025, for coverage beginning January 1, 2026. If you miss the deadline, you can still sign up for a plan up until January 15, for coverage to begin February 1.

What will my health coverage cost?

The cost (monthly premium plus cost-shares) depends on factors such as your age, location, plan choice, and household income. You'll see your specific costs when you apply and shop for a plan through Washington Healthplanfinder.



Scan for more
details on our
website



Questions about plan options?

CHPW offers *Cascade Select* health insurance plans for individuals and families through Washington Healthplanfinder. Depending on your income, you may be eligible for special savings such as **Cascade Care Savings**, a Washington State program that helps lower your monthly payment (premium). You'll find this out when you enroll.

Plans come in three metal levels: **Gold, Silver, and Bronze.**

Gold

Covers 80% of the cost of care. Best if you go to the doctor or use prescriptions often. Higher monthly premiums but covers more of the cost when you need care. Eligible for Cascade Care Savings.

Two types: **Vital Gold** (lower premiums, higher out-of-pocket costs) and **Complete Gold** (higher premiums, lower out-of-pocket costs).

Silver

Covers 70% of the cost of care. Good if you regularly use your coverage and qualify for savings. These plans are eligible for Cascade Care Savings and other income-based discounts.

If you're currently on a Silver Plan, consider switching to the Vital Gold Plan for 2026. With federal subsidies set to decrease, the Vital Gold Plan could actually be the more affordable option next year.

Bronze

Covers 60% of the cost of care. Best if you rarely see the doctor. Lower monthly premiums, but higher costs when you get care. Not eligible for Cascade Care Savings.

Benefit	Gold		Silver	Bronze
	Complete Gold	Vital Gold		
Deductible	\$1,000 individual \$2,000 family	\$1,900 individual \$3,800 family	\$2,500 individual \$5,000 family	\$6,000 individual \$12,000 family
Maximum Out-of-Pocket	\$7,000 individual \$14,000 family	\$8,800 individual \$17,600 family	\$9,750 individual \$19,500 family	\$10,150 individual \$20,300 family
Primary Care	\$15 copay	\$15 copay	\$20 copay (first 2 visits at \$1 copay)	\$40 copay (first 2 visits at \$1 copay)
Specialist Care	\$40 copay	\$40 copay	\$65 copay	\$100 copay
Urgent Care (CHPW Virtual Care (MDLive) telehealth visits are \$0 copay)	\$35 copay	\$35 copay	\$65 copay	\$100 copay
Mental/Behavioral Health Care (Office Visit)	\$15 copay	\$15 copay	\$20 copay (first 2 visits at \$1 copay)	\$40 copay (first 2 visits at \$1 copay)
Preventive Care (includes routine pregnancy care)	\$0	\$0	\$0	\$0
Emergency Room	\$450 copay*	\$800 copay*	\$800 copay*	40% coinsurance*
Hospital Stay	\$525 copay/day	\$650 copay/day	\$800 copay/day*	40% coinsurance/day*
Hearing	Hearing exams: \$15 copay Hearing aids: 20% coinsurance	Hearing exams: \$15 copay Hearing aids: 20% coinsurance	Hearing exams: \$20 copay (first 2 visits at \$1 copay) Hearing aids: 30% coinsurance	Hearing exams: \$40 copay (first 2 visits at \$1 copay) Hearing aids: 40% coinsurance
Pediatric Vision	\$0	\$0	\$0	\$0
Lab	\$20 copay	\$30 copay	\$40 copay	40% coinsurance*
X-ray and Diagnostic Imaging	\$30 copay	\$30 copay	\$65 copay	40% coinsurance*
Prescription Drugs	Generic - \$10 copay Preferred - \$60 copay Non-Preferred - \$100 copay Specialty - \$100 copay	Generic - \$10 copay Preferred - \$75 copay Non-Preferred - \$200 copay* Specialty - \$200 copay*	Generic - \$25 copay Preferred - \$75 copay Non-Preferred - \$250 copay* Specialty - \$250 copay*	Generic - \$32 copay Preferred - 40%* Non-Preferred - 40%* Specialty - 40%*

**After you meet your deductible*

This is an abbreviated list of benefits. For a more detailed list, as well as other Silver plan variations, visit our website: individualandfamily.chpw.org/2026bh
For Dental coverage, visit wahealthplanfinder.org to compare and enroll in standalone dental plans.

Scan for more details



Or visit
individualandfamily.chpw.org/2026bh

Apply by phone

A CHPW team member can help you apply through Washington Healthplanfinder. **Call us at 1-833-993-0181** (TTY: 711), 8 a.m. - 5 p.m., Monday - Friday.

Apply online

Visit our webpage at: **individualandfamily.chpw.org/enrollment** and follow the steps to apply through Washington Healthplanfinder.

Questions?

We're here to help you choose the best plan for the health needs of you and your family. Whether you are a renewing CHPW member or looking to become a CHPW member, we are here. Call a friendly CHPW plan specialist today at **1-833-993-0181** (TTY: 711), 8 a.m. – 5 p.m., Monday – Friday.

Community Health Plan of Washington complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-866-907-1906 (TTY: 711). ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-866-907-1906 (телетайп: 711).