

# MINNESOTA INDIVIDUAL FAMILY 2025 OFFERINGS

<b>GOLD</b>	<b>GOLD \$2500 DED</b>	<b>GOLD MAINTENANCE \$500 DED</b>	<b>GOLD EASY COMPARE FLAT RX COPAYS</b>
<b>OOP Costs</b>	<b>OOP Costs</b>	<b>OOP Costs</b>	<b>OOP Costs</b>
<b>Single Deductible</b>	\$2,500	\$500	\$1,500
<b>Family Deductible</b>	\$5,000	\$1,000	\$3,000
<b>Coinsurance</b>	30%	0%	20%
<b>Medical Max Out-Of-Pocket SINGLE</b>	\$7,000	\$9,000	\$7,800
<b>Medical Max Out-of-Pocket</b>	\$14,000	\$18,000	\$15,600
<b>Office Visits</b>	<b>Office Visits</b>	<b>Office Visits</b>	<b>Office Visits</b>
<b>Virtual Visits (PCP/BH/UC)</b>	\$0	\$0	\$30
<b>Office Visit - PCP</b>	\$30	\$35	\$30
<b>Mental/Behavioral Health Visit</b>	\$30	\$35	\$30
<b>Office Visit - SPECIALTY</b>	\$60	\$70	\$60
<b>Urgent Care</b>	\$60	\$70	\$45
<b>LAB</b>	\$30	\$35	Ded & Coins
<b>XRAY</b>	\$60	\$70	Ded & Coins
<b>Hospital Services</b>	<b>Hospital Services</b>	<b>Hospital Services</b>	<b>Hospital Services</b>
<b>Emergency Room</b>	\$500	\$500	Ded & Coins
<b>Hospital IP</b>	Ded & Coins	\$2,500/day	Ded & Coins
<b>Mental/Behavioral Health IP</b>	Ded & Coins	\$2,500/day	Ded & Coins
<b>Hospital OP</b>	Ded & Coins	Ded & Coins	Ded & Coins
<b>Mental/Behavioral Health OP</b>	Ded & Coins	Ded & Coins	Ded & Coins
<b>Prescription Drug Benefits</b>	<b>Prescription Drug</b>	<b>Prescription Drug</b>	<b>Prescription Drug</b>
<b>Tier 1: \$0 and preventative drugs</b>	\$0	\$0	\$15
<b>Tier 2: Preferred Generic drugs</b>	\$5	\$5	\$30
<b>Tier 3: NonPreferred Generic drugs</b>	\$10	\$10	\$90
<b>Tier 4: Preferred Brand drugs</b>	\$40	\$40	\$360
<b>Tier 5: Non-preferred and high cost</b>	%50 coinsurance	%50 coinsurance	-
<b>Tier 6: Specialty drugs</b>	Ded & 60% Coinsurance	Ded & 60% Coinsurance	-
<b>Other Benefis/Services</b>	<b>Other Benefis/Services</b>	<b>Other Benefis/Services</b>	<b>Other Benefis/Services</b>
<b>MRI/PET/CAT</b>	Ded & Coins	Ded & \$150 copay	Ded & Coins
<b>PT/OT/ST</b>	Ded & Coins	Ded & \$50 copay	\$30
<b>DME</b>	30% Coins	No Charge	25% Coins
<b>Skilled Nursing</b>	Ded & Coins	\$2,500/day	Ded & Coins
<b>Dental</b>	Optional buy-up	Optional buy-up	Optional buy-up

ALL PLANS INCLUDE VISION

# MINNESOTA INDIVIDUAL FAMILY 2025 OFFERINGS

SILVER	NON CSR Variants		
	SILVER \$7000 DED	SILVER \$0 DED FLAT RX COPAY	SILVER STANDARD EASY COMPARE
<b>OOP Costs</b>	<b>OOP Costs</b>	<b>OOP Costs</b>	<b>OOP Costs</b>
Single Deductible	\$7,000	\$0	\$4,000
Family Deductible	\$14,000	\$0	\$8,000
Coinsurance	50%	50%	30%
Medical Max Out-Of-Pocket SINGLE	\$9,000	\$9,200	\$8,700
Medical Max Out-of-Pocket FAMILY	\$18,000	\$18,400	\$17,400
<b>Office Visits</b>	<b>Office Visits</b>	<b>Office Visits</b>	<b>Office Visits</b>
Virtual Visits (PCP/BH/UC)	\$0	\$0	\$40
Office Visit PCP	\$50	\$50	\$40
Mental/Behavioral Health Visit	\$50	\$50	\$40
Office Visit SPECIALTY	\$100	\$100	\$80
Urgent Care	\$100	\$100	\$60
LAB	\$60	\$50	Ded & Coins
XRAY	\$120	\$100	Ded & Coins
<b>Hospital Services</b>	<b>Hospital Services</b>	<b>Hospital Services</b>	<b>Hospital Services</b>
Emergency Room	\$1,000	\$1,200	Ded & Coins
Hospital IP	Ded & Coins	\$1,500/day	Ded & Coins
Mental/Behavioral Health IP	Ded & Coins	\$1,500/day	Ded & Coins
Hospital OP	Ded & Coins	\$400	Ded & Coins
Mental/Behavioral Health OP	Ded & Coins	\$400	Ded & Coins
<b>Prescription Drug Benefits</b>	<b>Prescription Drug</b>	<b>Prescription Drug</b>	<b>Prescription Drug</b>
Tier 1: \$0 and preventative drugs	\$0	\$0	\$20
Tier 2: Preferred Generic drugs	\$10	\$10	\$40
Tier 3: NonPreferred Generic drugs	\$35	\$35	\$120
Tier 4: Preferred Brand drugs	\$150	\$150	\$480
Tier 5: Non-preferred and high cost	%50 coinsurance	\$300	-
Tier 6: Specialty drugs	Ded & 60% Coinsurance	\$600	-
<b>Other Benefits/Services</b>	<b>Other Benefits/Services</b>	<b>Other Benefits/Services</b>	<b>Other Benefits/Services</b>
MRI/PET/CAT	Ded & Coins	\$500	Ded & Coins
PT/OT/ST	Ded & Coins	\$100	\$40
DME	50% Coins	50% Coins	40% Coins
Skilled Nursing	Ded & Coins	\$1,500/day	Ded & Coins
Dental	Optional buy-up	Optional buy-up	Optional buy-up

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# MINNESOTA INDIVIDUAL FAMILY 2025 OFFERINGS

BRONZE	BRONZE \$7250 HSA	BRONZE \$9100 DED FLAT RX COPAY	BRONZE STANDARD EASY COMPARE
<b>OOP Costs</b>	<b>OOP Costs</b>	<b>OOP Costs</b>	<b>OOP Costs</b>
Single Deductible	\$7,250	\$9,100	\$7,500
Family Deductible	\$14,500	\$18,200	\$15,000
Coinsurance	0%	0%	50%
Medical Max Out-Of-Pocket SINGLE	\$7,250	\$7,250	\$9,200
Medical Max Out-of-Pocket FAMILY	\$14,500	\$14,500	\$18,400
<b>Office Visits</b>	<b>Office Visits</b>	<b>Office Visits</b>	<b>Office Visits</b>
Virtual Visits (PCP/BH/UC)	Ded & Coins	\$0	\$50
Office Visit PCP	Ded & Coins	\$75	\$50
Mental/Behavioral Health Visit	Ded & Coins	Ded & Coins	\$50
Office Visit SPECIALTY	Ded & Coins	Ded & Coins	\$100
LAB	Ded & Coins	Ded & Coins	Ded & Coins
XRAY	Ded & Coins	Ded & Coins	Ded & Coins
Urgent Care	Ded & Coins	\$75	\$75
<b>Hospital Services</b>	<b>Hospital Services</b>	<b>Hospital Services</b>	<b>Hospital Services</b>
Emergency Room	Ded & Coins	Ded & Coins	Ded & Coins
Hospital IP	Ded & Coins	Ded & Coins	Ded & Coins
Mental/Behavioral Health IP	Ded & Coins	Ded & Coins	Ded & Coins
Hospital OP	Ded & Coins	Ded & Coins	Ded & Coins
Mental/Behavioral Health OP	Ded & Coins	Ded & Coins	Ded & Coins
<b>Prescription Drug Benefits</b>	<b>Prescription Drug</b>	<b>Prescription Drug</b>	<b>Prescription Drug</b>
Tier 1: \$0 and preventative drugs	Ded & Coins	\$0	\$25
Tier 2: Preferred Generic drugs	Ded & Coins	\$15	Ded & \$50
Tier 3: NonPreferred Generic drugs	Ded & Coins	\$35	Ded & \$100
Tier 4: Preferred Brand drugs	Ded & Coins	\$200	Ded & \$500
Tier 5: Non-preferred and high cost	Ded & Coins	\$500	-
Tier 6: Specialty drugs	Ded & Coins	\$750	-
<b>Other Benefis/Services</b>	<b>Other Benefis/Services</b>	<b>Other Benefis/Services</b>	<b>Other Benefis/Services</b>
MRI/PET/CAT	Ded & Coins	Ded & Coins	Ded & Coins
PT/OT/ST	Ded & Coins	Ded & Coins	\$50
DME	Ded & Coins	50% Coins	50% Coins
Skilled Nursing	Ded & Coins	Ded & Coins	Ded & Coins
Dental	Not Available	Optional buy-up	Optional buy-up

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# MINNESOTA INDIVIDUAL FAMILY 2025 OFFERINGS with CSR

SILVER	CSR-73 (201-250% FPL)		
	SILVER \$7,000 DED CSR-73	SILVER \$0 DED FLAT RX COPAY CSR-73	SILVER STANDARD EASY COMPARE CSR-73
<b>OOP Costs</b>	<b>OOP Costs</b>	<b>OOP Costs</b>	<b>OOP Costs</b>
Single Deductible	\$7,000	\$0	\$2,400
Family Deductible	\$14,000	\$0	\$4,800
Coinsurance	50%	50%	30%
Medical Max Out-Of-Pocket SINGLE	\$7,350	\$7,350	\$7,000
Medical Max Out-of-Pocket FAMILY	\$14,700	\$14,700	\$14,000
<b>Office Visits</b>	<b>Office Visits</b>	<b>Office Visits</b>	<b>Office Visits</b>
Virtual Visits (PCP/BH/UC)	\$0	\$0	\$40
Office Visit PCP	\$45	\$45	\$40
Mental/Behavioral Health Visit	\$45	\$45	\$40
Office Visit SPECIALTY	\$90	\$90	\$80
Urgent Care	\$90	\$90	\$60
LAB	\$60	\$45	Ded & Coins
XRAY	\$120	\$90	Ded & Coins
<b>Hospital Services</b>	<b>Hospital Services</b>	<b>Hospital Services</b>	<b>Hospital Services</b>
Emergency Room	\$900	\$1,200	Ded & Coins
Hospital IP	Ded & Coins	\$1,500/day	Ded & Coins
Mental/Behavioral Health IP	Ded & Coins	\$1,500/day	Ded & Coins
Hospital OP	Ded & Coins	\$400	Ded & Coins
Mental/Behavioral Health OP	Ded & Coins	\$400	Ded & Coins
<b>Prescription Drug Benefits</b>	<b>Prescription Drug</b>	<b>Prescription Drug</b>	<b>Prescription Drug</b>
Tier 1: \$0 and preventative drugs	\$0	\$0	\$20
Tier 2: Preferred Generic drugs	\$10	\$10	\$40
Tier 3: NonPreferred Generic drugs	\$35	\$35	\$120
Tier 4: Preferred Brand drugs	\$80	\$150	\$480
Tier 5: Non-preferred and high cost	%50 coinsurance	\$300	-
Tier 6: Specialty drugs	Ded & 60% Coinsurance	\$500	-
<b>Other Benefits/Services</b>	<b>Other Benefits/Services</b>	<b>Other Benefits/Services</b>	<b>Other Benefits/Services</b>
MRI/PET/CAT	Ded & Coins	\$500	Ded & Coins
PT/OT/ST	Ded & Coins	\$90	\$40
DME	50% Coins	50% Coins	30% Coins
Skilled Nursing	Ded & Coins	\$1,500/day	Ded & Coins
Dental + Vision	Optional buy-up	Optional buy-up	Optional buy-up

ALL PLANS INCLUDE VISION