

BLUE PLUS® 2017 INDIVIDUAL PRODUCT PORTFOLIO



	Bronze	Silver	Gold
BluePrintSM [Allina Health Network]	BluePrint HSA Plan 258/458 \$6,550 single/\$13,100 family deductible 0% coinsurance \$6,550 single /\$13,100 family OOP <u>Rx:</u> Preferred drugs: Deductible then coinsurance	BluePrint Plan 253/453 \$2,400 single/\$7,200 family deductible 20% coinsurance \$7,150 single/\$14,300 family OOP <u>Rx:</u> Preferred generic: \$20 copay Preferred brand & specialty: Deductible then coins	BluePrint Plan 254/455 \$1,200 single/\$3,600 family deductible 20% coinsurance \$3,600 single/\$10,800 family OOP <u>Rx:</u> Preferred generic: \$20 copay Preferred brand & specialty: Deductible then coins
BlueConnectSM [Sanford Health Network]	BlueConnect HSA Plan 257/457 \$6,550 single/\$13,100 family deductible 0% coinsurance \$6,550 single /\$13,100 family OOP <u>Rx:</u> Preferred drugs: Deductible then coinsurance	BlueConnect Plan 250/450 \$2,400 single/\$7,200 family deductible 20% coinsurance \$7,150 single/\$14,300 family OOP <u>Rx:</u> Preferred generic: \$20 copay Preferred brand & specialty: Deductible then coins	BlueConnect Plan 251/451 \$1,200 single/\$3,600 family deductible 20% coinsurance \$3,600 single/\$10,800 family OOP <u>Rx:</u> Preferred generic: \$20 copay Preferred brand & specialty: Deductible then coins
Blue Plus[®] with St. Luke's [St. Luke's Network]	Blue Plus HSA with St. Luke's Plan 280/480 \$6,550 single/\$13,100 family deductible 0% coinsurance \$6,550 single /\$13,100 family OOP <u>Rx:</u> Preferred drugs: Deductible then coinsurance	Blue Plus HSA with St. Luke's Plan 281/481 \$2,750 single/\$5,500 family deductible 15% coinsurance \$6,550 single/\$13,100 family OOP <u>Rx:</u> Preferred drugs: Deductible then coinsurance	Blue Plus with St. Luke's Plan 282/482 \$1,200 single/\$3,600 family deductible 20% coinsurance \$3,600 single/\$10,800 family OOP <u>Rx:</u> Preferred generic: \$20 copay Preferred brand & specialty: Deductible then coins
Blue Plus[®] with Mayo Clinic [Mayo Clinic Network]	Blue Plus HSA with Mayo Clinic Plan 270/470 \$6,550 single/\$13,100 family deductible 0% coinsurance \$6,550 single /\$13,100 family OOP <u>Rx:</u> Preferred drugs: Deductible then coinsurance	Blue Plus HSA with Mayo Clinic Plan 271/471 \$2,750 single/\$5,500 family deductible 15% coinsurance \$6,550 single/\$13,100 family OOP <u>Rx:</u> Preferred drugs: Deductible then coinsurance	Blue Plus with Mayo Clinic Plan 272/472 \$1,200 single/\$3,600 family deductible 20% coinsurance \$3,600 single/\$10,800 family OOP <u>Rx:</u> Preferred generic: \$20 copay Preferred brand & specialty: Deductible then coins

All plans available on and off of MNsure

9/12/2016

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