

# State of Montana 2020 ACA Small Group Rates

## Rating Area 3: Flathead, Lake, and Missoula

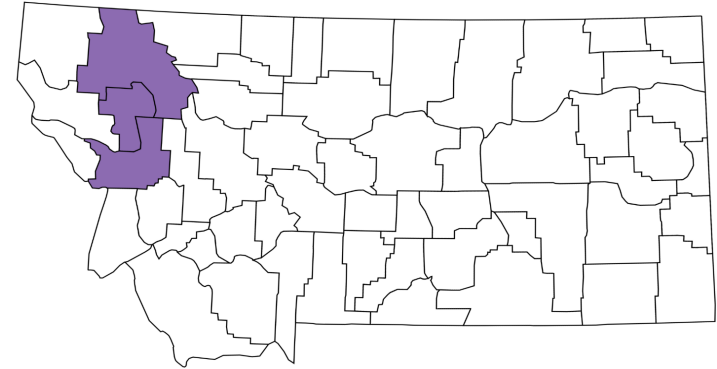
The premium tables show 2020 monthly premiums for the second quarter of 2020 (April-June) rounded to the nearest dollar. Premium is the monthly amount charged to a policyholder for insurance coverage. These premiums are shown by plan and rating area for the specific ages shown. Other ages, dental premiums, smoking surcharges, cost sharing small group options, and any premium subsidies or other financial assistance are not shown.

Cost sharing includes deductibles, copays, and coinsurance. The cost sharing in this summary applies to "in-network" services only. Out-of-network services have higher cost sharing.

To determine your individual premium, look for the rating area or county of your primary residence.

**NOTE:**

- This table does not include every possible monthly premium.
- These premiums are subject to change.
- Review actual policy language and plan details for deductibles, copays, and coinsurance information; provider networks; out-of-network coverage; excluded benefits; etc.



Metal Level Plan Selection					
Platinum	Monthly Premium	\$	\$	\$	On average, platinum plans pay 90% of your health care expenses. The monthly premium is the highest of all the metal levels; however, the out-of-pocket expenses are low. This could be a good option if you plan to use a lot of health care services.
	Out-of-Pocket Medical Expense	\$			
Gold	Monthly Premium	\$	\$	\$	On average, the gold plan pays 80% of your health care expenses. The monthly premium is higher, but out of pocket costs are lower. This could be a good option if you plan if you want to save on monthly premiums compared to Platinum but still want to keep our out-of-pocket costs low.
	Out-of-Pocket Medical Expense	\$	\$		
Silver	Monthly Premium	\$	\$		On average, the silver plan pays for 70% of your health care expenses. With a medium premium cost, this option could be a good option if you need to balance your monthly premium with your out-of-pocket costs.
	Out-of-Pocket Medical Expense	\$	\$	\$	
Bronze	Monthly Premium	\$			On average, the bronze plan pays for 60% of your health care expenses. This could be a good option if you do not need a lot of health services because it has the lowest premiums but tends to have the highest deductible.
	Out-of-Pocket Medical Expense	\$	\$	\$	

## Rating Area 3: Flathead, Lake, and Missoula Counties

Platinum															
Company	Plan Name	Deductible	Out of Pocket Max	Co-insurance	Ages										
					0-14	21-24	25	30	35	40	45	50	55	60	64+
BlueCross BlueShield	Blue Focus Platinum POS 006	\$750	\$1,500	20%	\$297	\$389	\$390	\$441	\$475	\$497	\$561	\$694	\$867	\$1,055	\$1,166
	Blue Preferred Platinum PPO 101	\$750	\$1,500	20%	\$365	\$478	\$480	\$542	\$584	\$610	\$690	\$853	\$1,065	\$1,296	\$1,433
	Blue Preferred Platinum PPO 102	\$250	\$1,300	20%	\$378	\$494	\$496	\$560	\$603	\$631	\$713	\$882	\$1,101	\$1,340	\$1,481
UnitedHealthcare	UHC Choice Plus Platinum 250	\$250	\$2,500	10%	\$450	\$588	\$590	\$667	\$719	\$752	\$849	\$1,050	\$1,311	\$1,596	\$1,764
	UHC Choice Plus Platinum 500	\$500	\$5,000	20%	\$378	\$494	\$496	\$561	\$604	\$631	\$713	\$882	\$1,102	\$1,341	\$1,482
	UHC Choice Plus Platinum 0	\$0	\$3,500	0%	\$423	\$553	\$555	\$628	\$676	\$707	\$799	\$988	\$1,234	\$1,502	\$1,660

Gold															
Company	Plan Name	Deductible	Out of Pocket Max	Co-insurance	Ages										
					0-14	21-24	25	30	35	40	45	50	55	60	64+
BlueCross BlueShield	Blue Focus Gold POS 005	\$1,250	\$6,000	20%	\$243	\$318	\$319	\$361	\$388	\$406	\$459	\$567	\$709	\$862	\$953
	Blue Focus Gold POS 007	\$1,500	\$4,500	20%	\$240	\$314	\$315	\$356	\$383	\$401	\$453	\$560	\$699	\$851	\$941
	Blue Focus Gold POS 008	\$2,000	\$5,500	10%	\$237	\$310	\$311	\$351	\$378	\$396	\$447	\$553	\$691	\$840	\$929
	Blue Preferred Gold PPO 135	\$2,800	\$2,800	0%	\$300	\$392	\$394	\$445	\$479	\$501	\$566	\$700	\$874	\$1,064	\$1,176
	Blue Preferred Gold PPO 110	\$2,000	\$4,500	20%	\$309	\$404	\$405	\$458	\$493	\$516	\$583	\$721	\$900	\$1,096	\$1,211
	Blue Preferred Gold PPO 105	\$2,500	\$3,500	20%	\$310	\$405	\$406	\$459	\$494	\$517	\$584	\$723	\$902	\$1,098	\$1,214
	Blue Preferred Gold PPO 107	\$1,500	\$4,600	20%	\$309	\$404	\$405	\$458	\$493	\$516	\$583	\$721	\$900	\$1,096	\$1,211
	Blue Preferred Gold PPO 123	\$4,500	\$4,500	0%	\$264	\$346	\$347	\$392	\$422	\$442	\$499	\$617	\$771	\$938	\$1,037
Montana Health Co-op	Connected Care Gold	\$850	\$6,000	30%	\$261	\$341	\$342	\$387	\$416	\$435	\$492	\$608	\$760	\$924	\$1,022
	Co-op Plus Gold	\$850	\$6,000	30%	\$259	\$338	\$340	\$384	\$413	\$432	\$488	\$604	\$754	\$918	\$1,015
PacificSource	Voyager Gold 1000	\$1,000	\$5,500	30%	\$331	\$433	\$435	\$492	\$529	\$554	\$626	\$774	\$966	\$1,176	\$1,299
	Voyager Gold 2000	\$2,000	\$5,500	30%	\$303	\$396	\$398	\$450	\$484	\$507	\$572	\$708	\$884	\$1,076	\$1,188
	Navigator Gold 1000	\$1,000	\$5,500	30%	\$307	\$401	\$402	\$455	\$490	\$512	\$579	\$716	\$894	\$1,088	\$1,202
	Navigator Gold 2000	\$2,000	\$5,500	30%	\$280	\$367	\$368	\$416	\$448	\$469	\$529	\$655	\$818	\$995	\$1,100
	Navigator Gold HSA 3000	\$3,000	\$3,000	0%	\$253	\$331	\$332	\$376	\$405	\$423	\$478	\$591	\$738	\$899	\$993
	Voyager Gold HSA 3000	\$3,000	\$3,000	0%	\$274	\$358	\$359	\$406	\$437	\$457	\$517	\$639	\$798	\$971	\$1,074
	Voyager Gold 1000 VH	\$1,000	\$5,500	30%	\$334	\$437	\$439	\$496	\$534	\$558	\$631	\$780	\$974	\$1,186	\$1,311
	Voyager Gold 2000 VH	\$2,000	\$5,500	30%	\$306	\$400	\$402	\$454	\$489	\$511	\$578	\$714	\$892	\$1,086	\$1,200
	Navigator Gold 1000 VH	\$1,000	\$5,500	30%	\$309	\$404	\$406	\$459	\$494	\$516	\$584	\$722	\$901	\$1,097	\$1,212
Navigator Gold 2000 VH	\$2,000	\$5,500	30%	\$283	\$370	\$371	\$420	\$452	\$473	\$534	\$661	\$825	\$1,004	\$1,110	
UnitedHealthcare	UHC Choice Plus Gold 0	\$0	\$7,150	30%	\$374	\$489	\$490	\$554	\$597	\$624	\$705	\$872	\$1,089	\$1,326	\$1,466
	UHC Choice Plus Gold 1000-1	\$1,000	\$5,000	20%	\$337	\$440	\$442	\$499	\$538	\$562	\$635	\$786	\$981	\$1,194	\$1,320
	UHC Choice Plus Gold 1000-2	\$1,000	\$8,150	20%	\$322	\$420	\$422	\$477	\$514	\$537	\$607	\$751	\$938	\$1,141	\$1,261
	UHC Choice Plus Gold 1500	\$1,500	\$8,150	20%	\$343	\$448	\$450	\$508	\$547	\$572	\$647	\$800	\$999	\$1,215	\$1,343
	UHC Choice Plus Gold 500	\$500	\$6,750	30%	\$335	\$438	\$440	\$497	\$536	\$560	\$633	\$783	\$977	\$1,189	\$1,315
	UHC Choice Plus Gold 3000	\$3,000	\$7,000	20%	\$305	\$398	\$400	\$452	\$486	\$509	\$575	\$711	\$888	\$1,080	\$1,194
	UHC Choice Plus HSA Gold 1500-1	\$1,500	\$4,000	10%	\$366	\$479	\$480	\$543	\$585	\$612	\$691	\$855	\$1,067	\$1,299	\$1,436
	UHC Choice Plus HSA Gold 1500-2	\$1,500	\$4,000	0%	\$375	\$490	\$492	\$557	\$599	\$627	\$708	\$876	\$1,094	\$1,331	\$1,471
	UHC Choice Plus Gold 2000-2	\$2,000	\$7,500	20%	\$304	\$397	\$399	\$451	\$485	\$507	\$573	\$709	\$885	\$1,077	\$1,191
	UHC Choice Plus Gold 1000-3	\$1,000	\$7,500	20%	\$328	\$429	\$431	\$487	\$524	\$548	\$619	\$766	\$956	\$1,164	\$1,287
UHC Choice Plus Gold 2000-1	\$2,000	\$8,150	20%	\$323	\$422	\$424	\$479	\$516	\$540	\$610	\$754	\$942	\$1,146	\$1,267	

## Rating Area 3: Flathead, Lake, and Missoula Counties

Silver															
Company	Plan Name	Deductible	Out of Pocket Max	Co-insurance	Ages										
					0-14	21-24	25	30	35	40	45	50	55	60	64+
BlueCross BlueShield	Blue Focus Silver POS 010	\$3,000	\$5,250	20%	\$196	\$256	\$257	\$290	\$312	\$327	\$369	\$456	\$570	\$694	\$767
	Blue Focus Silver POS 003	\$3,700	\$6,750	10%	\$185	\$242	\$243	\$275	\$296	\$309	\$350	\$432	\$540	\$657	\$726
	Blue Focus Silver POS 001	\$4,550	\$8,150	30%	\$188	\$246	\$247	\$279	\$300	\$314	\$355	\$439	\$548	\$667	\$737
	Blue Focus Silver POS 004	\$5,000	\$7,900	30%	\$184	\$241	\$242	\$273	\$294	\$308	\$348	\$430	\$537	\$653	\$722
	Blue Preferred Silver PPO 136	\$5,500	\$5,500	0%	\$243	\$318	\$319	\$361	\$388	\$406	\$459	\$567	\$708	\$862	\$953
	Blue Preferred Silver PPO 120	\$4,750	\$7,900	30%	\$252	\$329	\$330	\$373	\$402	\$420	\$475	\$588	\$734	\$893	\$987
	Blue Preferred Silver PPO 122	\$4,200	\$4,200	0%	\$267	\$349	\$350	\$396	\$426	\$445	\$503	\$623	\$777	\$946	\$1,046
	Blue Preferred Silver PPO 127	\$4,500	\$6,500	30%	\$232	\$303	\$304	\$344	\$370	\$387	\$438	\$541	\$676	\$823	\$910
	Blue Preferred Silver PPO 117	\$3,000	\$5,250	20%	\$261	\$341	\$342	\$387	\$417	\$436	\$492	\$609	\$760	\$926	\$1,023
Blue Preferred Silver PPO 131	\$4,000	\$7,350	30%	\$245	\$320	\$321	\$363	\$391	\$409	\$462	\$572	\$714	\$869	\$960	
Montana Health Co-op	Connected Care Silver	\$3,000	\$8,150	40%	\$227	\$296	\$298	\$336	\$362	\$379	\$428	\$529	\$661	\$804	\$889
	Connected Care Silver Plus	\$4,400	\$4,400	0%	\$229	\$299	\$301	\$340	\$366	\$383	\$432	\$535	\$668	\$813	\$898
	Connected Care Silver Option 2	\$5,700	\$7,500	40%	\$224	\$293	\$294	\$332	\$358	\$374	\$423	\$523	\$653	\$795	\$878
	Co-op Plus Silver	\$3,000	\$8,150	40%	\$218	\$284	\$286	\$323	\$348	\$363	\$411	\$508	\$634	\$772	\$853
PacificSource	Voyager Silver HSA 4500	\$4,500	\$4,500	0%	\$243	\$318	\$319	\$361	\$388	\$406	\$459	\$567	\$708	\$862	\$953
	Voyager Silver HSA 3000	\$3,000	\$6,750	20%	\$244	\$319	\$321	\$362	\$390	\$408	\$461	\$570	\$712	\$866	\$957
	Voyager Silver 5500	\$5,500	\$7,500	30%	\$259	\$339	\$340	\$384	\$414	\$433	\$489	\$605	\$755	\$919	\$1,016
	Voyager Silver 6500	\$6,500	\$7,500	30%	\$255	\$333	\$334	\$378	\$407	\$425	\$481	\$595	\$742	\$904	\$999
	Navigator Silver HSA 4500	\$4,500	\$4,500	0%	\$225	\$294	\$295	\$334	\$359	\$376	\$424	\$525	\$655	\$798	\$882
	Navigator Silver HSA 3000	\$3,000	\$6,750	20%	\$226	\$295	\$296	\$335	\$361	\$377	\$426	\$527	\$658	\$801	\$885
	Navigator Silver 5500	\$5,500	\$7,500	30%	\$240	\$313	\$314	\$355	\$383	\$400	\$452	\$559	\$698	\$850	\$939
	Navigator Silver 6500	\$6,500	\$7,500	30%	\$236	\$308	\$309	\$350	\$376	\$394	\$445	\$550	\$687	\$836	\$924
	Voyager Silver 4500	\$4,500	\$7,500	30%	\$264	\$345	\$347	\$392	\$422	\$441	\$499	\$617	\$770	\$937	\$1,035
	Navigator Silver 4500	\$4,500	\$7,500	30%	\$244	\$319	\$321	\$363	\$390	\$408	\$461	\$570	\$712	\$867	\$957
	Voyager Silver HSA 5500	\$5,500	\$5,500	0%	\$227	\$297	\$298	\$337	\$362	\$379	\$428	\$530	\$661	\$805	\$890
	Navigator Silver HSA 5500	\$5,500	\$5,500	0%	\$210	\$274	\$275	\$311	\$335	\$351	\$396	\$490	\$612	\$745	\$822
	Voyager Silver 3000	\$3,000	\$8,150	40%	\$268	\$350	\$351	\$397	\$428	\$447	\$505	\$625	\$780	\$950	\$1,050
	Navigator Silver 3000	\$3,000	\$8,150	40%	\$248	\$324	\$325	\$367	\$396	\$414	\$467	\$578	\$722	\$879	\$971
	Voyager Silver 5500 VH	\$5,500	\$7,500	30%	\$262	\$342	\$344	\$388	\$418	\$437	\$494	\$611	\$763	\$929	\$1,026
	Voyager Silver 6500 VH	\$6,500	\$7,500	30%	\$257	\$337	\$338	\$382	\$411	\$430	\$486	\$601	\$751	\$913	\$1,010
	Navigator Silver 5500 VH	\$5,500	\$7,500	30%	\$242	\$317	\$318	\$359	\$387	\$405	\$457	\$565	\$706	\$859	\$950
Navigator Silver 6500 VH	\$6,500	\$7,500	30%	\$238	\$311	\$313	\$353	\$380	\$398	\$450	\$556	\$694	\$845	\$933	
Voyager Silver 4500 VH	\$4,500	\$7,500	30%	\$268	\$350	\$351	\$397	\$428	\$447	\$505	\$625	\$780	\$950	\$1,050	
Navigator Silver 4500 VH	\$4,500	\$7,500	30%	\$248	\$324	\$325	\$367	\$396	\$414	\$467	\$578	\$722	\$878	\$971	
UnitedHealthcare	UHC Choice Plus Silver 2500	\$2,500	\$8,150	40%	\$261	\$341	\$343	\$387	\$417	\$436	\$493	\$609	\$761	\$926	\$1,023
	UHC Choice Plus Silver 3000	\$3,000	\$8,150	40%	\$261	\$341	\$343	\$388	\$417	\$436	\$493	\$610	\$761	\$927	\$1,024
	UHC Choice Plus Silver 5500-1	\$5,500	\$8,150	30%	\$267	\$349	\$350	\$396	\$427	\$446	\$504	\$623	\$778	\$947	\$1,047
	UHC Choice Plus Silver 6100	\$6,100	\$8,150	20%	\$267	\$349	\$351	\$397	\$427	\$446	\$504	\$624	\$779	\$948	\$1,048
	UHC Choice Plus Silver 7400	\$7,400	\$8,150	0%	\$265	\$346	\$347	\$393	\$423	\$442	\$499	\$618	\$771	\$939	\$1,037
	UHC Choice Plus HSA Silver 2500-1	\$2,500	\$6,700	20%	\$299	\$391	\$392	\$444	\$478	\$499	\$564	\$698	\$871	\$1,061	\$1,172
	UHC Choice Plus HSA Silver 2000	\$2,000	\$6,900	30%	\$296	\$386	\$388	\$438	\$472	\$494	\$558	\$690	\$861	\$1,048	\$1,159
	UHC Choice Plus HSA Silver 2500-2	\$2,500	\$6,900	20%	\$293	\$383	\$385	\$435	\$468	\$490	\$554	\$685	\$855	\$1,040	\$1,150
	UHC Choice Plus HSA Silver 3000	\$3,000	\$5,000	30%	\$300	\$392	\$394	\$445	\$479	\$501	\$566	\$700	\$874	\$1,064	\$1,176
UHC Choice Plus Silver 6000	\$6,000	\$8,150	30%	\$261	\$342	\$343	\$388	\$417	\$436	\$493	\$610	\$762	\$927	\$1,025	

Silver

## Rating Area 3: Flathead, Lake, and Missoula Counties

Bronze															
Company	Plan Name	Deductible	Out of Pocket Max	Co-insurance	Ages										
					0-14	21-24	25	30	35	40	45	50	55	60	64+
<b>BlueCross BlueShield</b>	Blue Focus Bronze POS 002	\$6,500	\$6,750	20%	\$156	\$204	\$204	\$231	\$249	\$260	\$294	\$364	\$454	\$553	\$611
	Blue Focus Bronze POS 009	\$7,350	\$7,350	0%	\$160	\$209	\$210	\$237	\$256	\$267	\$302	\$374	\$467	\$568	\$628
	Blue Preferred Bronze PPO 134	\$6,500	\$6,750	10%	\$219	\$287	\$288	\$325	\$350	\$366	\$414	\$512	\$639	\$778	\$860
	Blue Preferred Bronze PPO 116	\$7,350	\$7,350	0%	\$217	\$283	\$284	\$322	\$346	\$362	\$409	\$506	\$632	\$769	\$850
<b>Montana Health Co-op</b>	Connected Care Bronze	\$7,200	\$8,150	60%	\$188	\$246	\$247	\$279	\$300	\$314	\$355	\$439	\$548	\$667	\$737
	Connected Care Bronze Plus	\$6,900	\$6,900	0%	\$201	\$262	\$263	\$298	\$320	\$335	\$379	\$468	\$585	\$712	\$787
	Connected Care Expanded Bronze	\$4,500	\$8,150	50%	\$200	\$261	\$262	\$297	\$319	\$334	\$377	\$467	\$583	\$709	\$784
	Co-op Plus Bronze	\$7,200	\$8,150	60%	\$188	\$246	\$247	\$280	\$301	\$315	\$356	\$440	\$549	\$668	\$739
<b>PacificSource</b>	Voyager Bronze HSA 6750	\$6,750	\$6,750	0%	\$210	\$274	\$275	\$311	\$335	\$350	\$396	\$489	\$611	\$744	\$822
	Voyager Bronze HSA 5000	\$5,000	\$6,750	50%	\$216	\$282	\$283	\$320	\$345	\$361	\$407	\$504	\$629	\$766	\$846
	Voyager Bronze 8150	\$8,150	\$8,150	0%	\$211	\$276	\$277	\$313	\$338	\$353	\$399	\$493	\$616	\$750	\$828
	Navigator Bronze HSA 6750	\$6,750	\$6,750	0%	\$194	\$253	\$254	\$288	\$310	\$324	\$366	\$453	\$565	\$688	\$759
	Navigator Bronze HSA 5000	\$5,000	\$6,750	50%	\$200	\$261	\$262	\$296	\$319	\$334	\$377	\$466	\$582	\$708	\$783
	Navigator Bronze 8150	\$8,150	\$8,150	0%	\$195	\$256	\$257	\$290	\$312	\$327	\$369	\$456	\$570	\$693	\$767
<b>UnitedHealthcare</b>	UHC Choice Plus Bronze 7450	\$7,450	\$8,150	40%	\$237	\$309	\$310	\$351	\$378	\$395	\$446	\$552	\$689	\$839	\$927
	UHC Choice Plus HSA Bronze 4000	\$4,000	\$6,900	40%	\$255	\$333	\$334	\$378	\$407	\$426	\$481	\$595	\$742	\$904	\$999
	UHC Choice Plus HSA Bronze 5750	\$5,750	\$6,550	30%	\$242	\$317	\$318	\$360	\$387	\$405	\$458	\$566	\$707	\$860	\$951
	UHC Choice Plus HSA Bronze 6000	\$6,000	\$6,550	20%	\$242	\$316	\$317	\$359	\$386	\$404	\$456	\$564	\$705	\$858	\$948
	UHC Choice Plus HSA Bronze 6650	\$6,650	\$6,650	0%	\$240	\$313	\$315	\$356	\$383	\$400	\$452	\$560	\$699	\$850	\$940

