

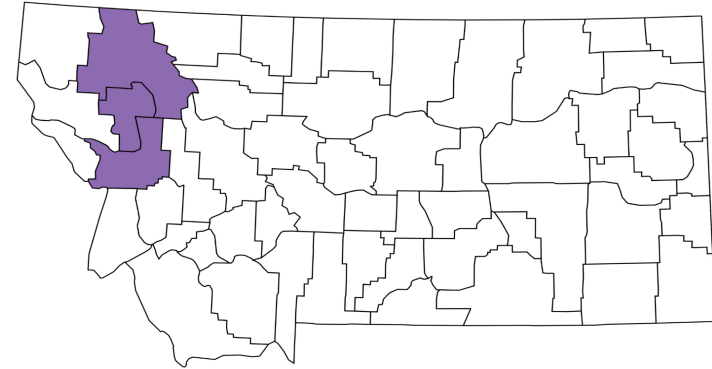
# State of Montana 2020 ACA Small Group Rates

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

The premium tables show 2020 monthly premiums for the fourth quarter of 2020 (Oct-Dec) 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%	\$298	\$389	\$391	\$442	\$476	\$498	\$562	\$695	\$868	\$1,057	\$1,168
	Blue Preferred Platinum PPO 101	\$750	\$1,500	20%	\$366	\$479	\$481	\$543	\$585	\$612	\$691	\$855	\$1,067	\$1,299	\$1,436
	Blue Preferred Platinum PPO 102	\$250	\$1,300	20%	\$378	\$495	\$497	\$561	\$604	\$632	\$714	\$883	\$1,103	\$1,343	\$1,484
UnitedHealthcare	UHC Choice Plus Platinum 250	\$250	\$2,500	10%	\$478	\$625	\$627	\$709	\$763	\$798	\$902	\$1,115	\$1,393	\$1,695	\$1,874
	UHC Choice Plus Platinum 500	\$500	\$5,000	20%	\$401	\$525	\$527	\$596	\$641	\$671	\$758	\$937	\$1,170	\$1,424	\$1,574
	UHC Choice Plus Platinum 0	\$0	\$3,500	0%	\$450	\$588	\$590	\$667	\$718	\$751	\$848	\$1,049	\$1,310	\$1,595	\$1,763

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%	\$244	\$318	\$320	\$361	\$389	\$407	\$460	\$569	\$710	\$864	\$955
	Blue Focus Gold POS 007	\$1,500	\$4,500	20%	\$240	\$314	\$315	\$357	\$384	\$402	\$454	\$561	\$701	\$853	\$942
	Blue Focus Gold POS 008	\$2,000	\$5,500	10%	\$237	\$310	\$312	\$352	\$379	\$397	\$448	\$554	\$692	\$842	\$931
	Blue Preferred Gold PPO 135	\$2,800	\$2,800	0%	\$301	\$393	\$394	\$446	\$480	\$502	\$567	\$702	\$876	\$1,066	\$1,179
	Blue Preferred Gold PPO 110	\$2,000	\$4,500	20%	\$309	\$404	\$406	\$459	\$494	\$517	\$584	\$722	\$902	\$1,098	\$1,213
	Blue Preferred Gold PPO 105	\$2,500	\$3,500	20%	\$310	\$405	\$407	\$460	\$495	\$518	\$585	\$724	\$904	\$1,100	\$1,216
	Blue Preferred Gold PPO 107	\$1,500	\$4,600	20%	\$309	\$405	\$406	\$459	\$494	\$517	\$584	\$722	\$902	\$1,098	\$1,214
	Blue Preferred Gold PPO 123	\$4,500	\$4,500	0%	\$265	\$346	\$348	\$393	\$423	\$442	\$500	\$618	\$772	\$940	\$1,039
Montana Health Co-op	Connected Care Gold	\$850	\$6,000	30%	\$248	\$324	\$326	\$368	\$396	\$415	\$469	\$579	\$724	\$881	\$973
	Co-op Plus Gold	\$850	\$6,000	30%	\$246	\$322	\$323	\$366	\$394	\$412	\$465	\$575	\$718	\$874	\$967
PacificSource	Voyager Gold 1000	\$1,000	\$5,500	30%	\$343	\$448	\$450	\$508	\$547	\$572	\$647	\$800	\$999	\$1,216	\$1,344
	Voyager Gold 2000	\$2,000	\$5,500	30%	\$313	\$410	\$411	\$465	\$501	\$524	\$592	\$732	\$914	\$1,112	\$1,229
	Navigator Gold 1000	\$1,000	\$5,500	30%	\$317	\$414	\$416	\$470	\$506	\$530	\$598	\$740	\$924	\$1,125	\$1,242
	Navigator Gold 2000	\$2,000	\$5,500	30%	\$290	\$379	\$381	\$430	\$463	\$484	\$547	\$677	\$845	\$1,029	\$1,137
	Navigator Gold HSA 3000	\$3,000	\$3,000	0%	\$262	\$342	\$344	\$389	\$418	\$438	\$494	\$612	\$764	\$929	\$1,026
	Voyager Gold HSA 3000	\$3,000	\$3,000	0%	\$283	\$370	\$372	\$420	\$452	\$473	\$534	\$661	\$825	\$1,004	\$1,110
	Voyager Gold 1000 VH	\$1,000	\$5,500	30%	\$346	\$452	\$454	\$513	\$552	\$577	\$652	\$807	\$1,007	\$1,226	\$1,355
	Voyager Gold 2000 VH	\$2,000	\$5,500	30%	\$316	\$414	\$415	\$469	\$505	\$529	\$597	\$739	\$922	\$1,122	\$1,241
	Navigator Gold 1000 VH	\$1,000	\$5,500	30%	\$320	\$418	\$419	\$474	\$511	\$534	\$603	\$746	\$932	\$1,134	\$1,253
Navigator Gold 2000 VH	\$2,000	\$5,500	30%	\$293	\$383	\$384	\$434	\$467	\$489	\$552	\$683	\$853	\$1,038	\$1,148	
UnitedHealthcare	UHC Choice Plus Gold 0	\$0	\$7,150	30%	\$397	\$519	\$521	\$589	\$634	\$663	\$749	\$927	\$1,157	\$1,408	\$1,556
	UHC Choice Plus Gold 1000-1	\$1,000	\$5,000	20%	\$357	\$467	\$469	\$530	\$571	\$597	\$675	\$834	\$1,042	\$1,268	\$1,402
	UHC Choice Plus Gold 1000-2	\$1,000	\$8,150	20%	\$342	\$447	\$448	\$507	\$546	\$571	\$645	\$798	\$996	\$1,212	\$1,340
	UHC Choice Plus Gold 1500	\$1,500	\$8,150	20%	\$364	\$476	\$477	\$540	\$581	\$608	\$687	\$849	\$1,061	\$1,291	\$1,427
	UHC Choice Plus Gold 500	\$500	\$6,750	30%	\$356	\$465	\$467	\$528	\$569	\$595	\$672	\$831	\$1,038	\$1,263	\$1,396
	UHC Choice Plus Gold 3000	\$3,000	\$7,000	20%	\$323	\$423	\$425	\$480	\$517	\$540	\$611	\$755	\$943	\$1,148	\$1,268
	UHC Choice Plus HSA Gold 1500-1	\$1,500	\$4,000	10%	\$389	\$508	\$510	\$577	\$621	\$650	\$734	\$908	\$1,133	\$1,379	\$1,525
	UHC Choice Plus HSA Gold 1500-2	\$1,500	\$4,000	0%	\$398	\$521	\$523	\$591	\$637	\$666	\$752	\$930	\$1,162	\$1,414	\$1,563
	UHC Choice Plus Gold 2000-2	\$2,000	\$7,500	20%	\$323	\$422	\$423	\$479	\$515	\$539	\$609	\$753	\$940	\$1,144	\$1,265
	UHC Choice Plus Gold 1000-3	\$1,000	\$7,500	20%	\$348	\$456	\$457	\$517	\$557	\$582	\$658	\$814	\$1,016	\$1,236	\$1,367
UHC Choice Plus Gold 2000-1	\$2,000	\$8,150	20%	\$343	\$449	\$450	\$509	\$548	\$573	\$648	\$801	\$1,000	\$1,217	\$1,346	

## 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	\$291	\$313	\$327	\$370	\$457	\$571	\$695	\$768
	Blue Focus Silver POS 003	\$3,700	\$6,750	10%	\$186	\$243	\$244	\$275	\$297	\$310	\$350	\$433	\$541	\$659	\$728
	Blue Focus Silver POS 001	\$4,550	\$8,150	30%	\$188	\$246	\$247	\$280	\$301	\$315	\$356	\$440	\$549	\$668	\$739
	Blue Focus Silver POS 004	\$5,000	\$7,900	30%	\$185	\$241	\$242	\$274	\$295	\$308	\$348	\$431	\$538	\$655	\$724
	Blue Preferred Silver PPO 136	\$5,500	\$5,500	0%	\$244	\$318	\$320	\$361	\$389	\$407	\$460	\$569	\$710	\$864	\$955
	Blue Preferred Silver PPO 120	\$4,750	\$7,900	30%	\$252	\$330	\$331	\$374	\$403	\$421	\$476	\$589	\$735	\$895	\$989
	Blue Preferred Silver PPO 122	\$4,200	\$4,200	0%	\$267	\$349	\$351	\$396	\$427	\$446	\$504	\$624	\$779	\$948	\$1,048
	Blue Preferred Silver PPO 127	\$4,500	\$6,500	30%	\$232	\$304	\$305	\$345	\$371	\$388	\$439	\$543	\$677	\$824	\$911
	Blue Preferred Silver PPO 117	\$3,000	\$5,250	20%	\$261	\$342	\$343	\$388	\$418	\$437	\$493	\$610	\$762	\$927	\$1,025
Blue Preferred Silver PPO 131	\$4,000	\$7,350	30%	\$245	\$321	\$322	\$364	\$392	\$410	\$463	\$573	\$715	\$870	\$962	
Montana Health Co-op	Connected Care Silver	\$3,000	\$8,150	40%	\$216	\$283	\$284	\$321	\$345	\$361	\$408	\$505	\$630	\$767	\$848
	Connected Care Silver Plus	\$4,400	\$4,400	0%	\$218	\$286	\$287	\$324	\$349	\$365	\$412	\$510	\$637	\$775	\$857
	Connected Care Silver Option 2	\$5,700	\$7,500	40%	\$214	\$279	\$280	\$317	\$341	\$357	\$403	\$499	\$623	\$758	\$838
	Co-op Plus Silver	\$3,000	\$8,150	40%	\$208	\$271	\$272	\$308	\$332	\$347	\$392	\$485	\$605	\$737	\$814
PacificSource	Voyager Silver HSA 4500	\$4,500	\$4,500	0%	\$251	\$328	\$330	\$373	\$401	\$420	\$474	\$587	\$733	\$892	\$984
	Voyager Silver HSA 3000	\$3,000	\$6,750	20%	\$253	\$330	\$331	\$375	\$403	\$422	\$477	\$590	\$736	\$896	\$990
	Voyager Silver 5500	\$5,500	\$7,500	30%	\$268	\$350	\$351	\$397	\$428	\$447	\$505	\$625	\$781	\$950	\$1,050
	Voyager Silver 6500	\$6,500	\$7,500	30%	\$263	\$344	\$346	\$391	\$421	\$440	\$497	\$615	\$768	\$934	\$1,032
	Navigator Silver HSA 4500	\$4,500	\$4,500	0%	\$232	\$304	\$305	\$345	\$371	\$388	\$439	\$543	\$678	\$825	\$912
	Navigator Silver HSA 3000	\$3,000	\$6,750	20%	\$234	\$305	\$307	\$347	\$373	\$390	\$441	\$545	\$681	\$829	\$915
	Navigator Silver 5500	\$5,500	\$7,500	30%	\$248	\$324	\$325	\$368	\$396	\$414	\$468	\$578	\$722	\$879	\$972
	Navigator Silver 6500	\$6,500	\$7,500	30%	\$244	\$318	\$320	\$361	\$389	\$407	\$460	\$569	\$710	\$864	\$954
	Voyager Silver 4500	\$4,500	\$7,500	30%	\$273	\$357	\$358	\$405	\$436	\$456	\$515	\$638	\$796	\$969	\$1,071
	Navigator Silver 4500	\$4,500	\$7,500	30%	\$253	\$330	\$332	\$375	\$404	\$422	\$477	\$590	\$736	\$896	\$990
	Voyager Silver HSA 5500	\$5,500	\$5,500	0%	\$235	\$307	\$308	\$348	\$375	\$392	\$443	\$548	\$684	\$832	\$920
	Navigator Silver HSA 5500	\$5,500	\$5,500	0%	\$217	\$284	\$285	\$322	\$347	\$363	\$410	\$507	\$633	\$770	\$851
	Voyager Silver 3000	\$3,000	\$8,150	40%	\$277	\$362	\$363	\$411	\$442	\$462	\$522	\$646	\$807	\$982	\$1,085
	Navigator Silver 3000	\$3,000	\$8,150	40%	\$256	\$335	\$336	\$380	\$409	\$428	\$483	\$598	\$746	\$908	\$1,004
	Voyager Silver 5500 VH	\$5,500	\$7,500	30%	\$271	\$354	\$355	\$402	\$432	\$452	\$511	\$632	\$789	\$960	\$1,062
	Voyager Silver 6500 VH	\$6,500	\$7,500	30%	\$266	\$348	\$349	\$395	\$425	\$445	\$503	\$622	\$776	\$944	\$1,044
	Navigator Silver 5500 VH	\$5,500	\$7,500	30%	\$250	\$327	\$329	\$372	\$400	\$418	\$473	\$585	\$730	\$888	\$981
	Navigator Silver 6500 VH	\$6,500	\$7,500	30%	\$246	\$322	\$323	\$365	\$393	\$411	\$465	\$575	\$718	\$874	\$966
Voyager Silver 4500 VH	\$4,500	\$7,500	30%	\$277	\$362	\$363	\$411	\$442	\$462	\$522	\$646	\$807	\$982	\$1,085	
Navigator Silver 4500 VH	\$4,500	\$7,500	30%	\$256	\$335	\$336	\$380	\$409	\$428	\$483	\$598	\$746	\$908	\$1,004	
UnitedHealthcare	UHC Choice Plus Silver 2500	\$2,500	\$8,150	40%	\$277	\$362	\$364	\$411	\$443	\$463	\$523	\$647	\$808	\$983	\$1,087
	UHC Choice Plus Silver 3000	\$3,000	\$8,150	40%	\$277	\$363	\$364	\$412	\$443	\$463	\$524	\$648	\$809	\$984	\$1,088
	UHC Choice Plus Silver 5500-1	\$5,500	\$8,150	30%	\$284	\$371	\$372	\$421	\$453	\$474	\$535	\$662	\$827	\$1,006	\$1,112
	UHC Choice Plus Silver 6100	\$6,100	\$8,150	20%	\$284	\$371	\$373	\$421	\$453	\$474	\$536	\$663	\$827	\$1,007	\$1,113
	UHC Choice Plus Silver 7400	\$7,400	\$8,150	0%	\$281	\$367	\$369	\$417	\$449	\$469	\$530	\$656	\$819	\$997	\$1,102
	UHC Choice Plus HSA Silver 2500-1	\$2,500	\$6,700	20%	\$317	\$415	\$417	\$471	\$507	\$530	\$599	\$741	\$925	\$1,126	\$1,245
	UHC Choice Plus HSA Silver 2000	\$2,000	\$6,900	30%	\$314	\$410	\$412	\$466	\$501	\$524	\$592	\$733	\$915	\$1,114	\$1,231
	UHC Choice Plus HSA Silver 2500-2	\$2,500	\$6,900	20%	\$311	\$407	\$409	\$462	\$498	\$520	\$588	\$727	\$908	\$1,105	\$1,221
	UHC Choice Plus HSA Silver 3000	\$3,000	\$5,000	30%	\$319	\$416	\$418	\$473	\$509	\$532	\$601	\$744	\$929	\$1,130	\$1,249
UHC Choice Plus Silver 6000	\$6,000	\$8,150	30%	\$278	\$363	\$364	\$412	\$443	\$464	\$524	\$648	\$809	\$984	\$1,088	

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	\$205	\$232	\$249	\$261	\$295	\$364	\$455	\$554	\$612
	Blue Focus Bronze POS 009	\$7,350	\$7,350	0%	\$160	\$210	\$210	\$238	\$256	\$268	\$303	\$374	\$468	\$569	\$629
	Blue Preferred Bronze PPO 134	\$6,500	\$6,750	10%	\$220	\$287	\$288	\$326	\$351	\$367	\$415	\$513	\$640	\$779	\$861
	Blue Preferred Bronze PPO 116	\$7,350	\$7,350	0%	\$217	\$284	\$285	\$322	\$347	\$363	\$410	\$507	\$633	\$770	\$852
<b>Montana Health Co-op</b>	Connected Care Bronze	\$7,200	\$8,150	60%	\$180	\$235	\$236	\$266	\$287	\$300	\$339	\$419	\$523	\$637	\$704
	Connected Care Bronze Plus	\$6,900	\$6,900	0%	\$192	\$250	\$251	\$284	\$306	\$320	\$362	\$447	\$558	\$680	\$751
	Connected Care Expanded Bronze	\$4,500	\$8,150	50%	\$191	\$250	\$251	\$283	\$305	\$319	\$360	\$446	\$557	\$678	\$749
	Co-op Plus Bronze	\$7,200	\$8,150	60%	\$180	\$235	\$236	\$267	\$288	\$301	\$340	\$420	\$525	\$639	\$706
<b>PacificSource</b>	Voyager Bronze HSA 6750	\$6,750	\$6,750	0%	\$217	\$283	\$284	\$322	\$346	\$362	\$409	\$506	\$632	\$769	\$849
	Voyager Bronze HSA 5000	\$5,000	\$6,750	50%	\$223	\$292	\$293	\$331	\$356	\$373	\$421	\$521	\$651	\$792	\$875
	Voyager Bronze 8150	\$8,150	\$8,150	0%	\$218	\$286	\$287	\$324	\$349	\$365	\$412	\$510	\$637	\$775	\$857
	Navigator Bronze HSA 6750	\$6,750	\$6,750	0%	\$200	\$262	\$263	\$297	\$320	\$335	\$378	\$468	\$584	\$711	\$786
	Navigator Bronze HSA 5000	\$5,000	\$6,750	50%	\$206	\$270	\$271	\$306	\$330	\$345	\$390	\$482	\$602	\$732	\$810
	Navigator Bronze 8150	\$8,150	\$8,150	0%	\$202	\$264	\$265	\$300	\$323	\$338	\$382	\$472	\$589	\$717	\$792
<b>UnitedHealthcare</b>	UHC Choice Plus Bronze 7450	\$7,450	\$8,150	40%	\$251	\$328	\$330	\$373	\$401	\$420	\$474	\$586	\$732	\$891	\$985
	UHC Choice Plus HSA Bronze 4000	\$4,000	\$6,900	40%	\$271	\$354	\$355	\$401	\$432	\$452	\$511	\$632	\$789	\$960	\$1,061
	UHC Choice Plus HSA Bronze 5750	\$5,750	\$6,550	30%	\$258	\$337	\$338	\$382	\$411	\$430	\$486	\$601	\$751	\$914	\$1,010
	UHC Choice Plus HSA Bronze 6000	\$6,000	\$6,550	20%	\$257	\$336	\$337	\$381	\$410	\$429	\$485	\$599	\$748	\$911	\$1,007
	UHC Choice Plus HSA Bronze 6650	\$6,650	\$6,650	0%	\$255	\$333	\$334	\$378	\$407	\$425	\$480	\$594	\$742	\$903	\$998

**Bronze**

