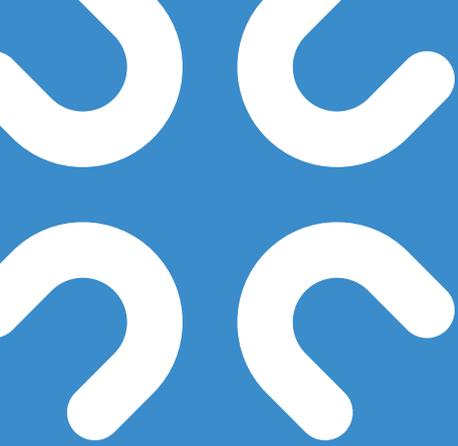


UCare Individual & Family Plans

For Minnesotans who buy health coverage on their own





Health plan simplifiers

UCare health plan simplifiers can help you pick a plan that fits your needs and budget. We've been the top plan on MNsure for the last four years and have been serving families like yours since 1984. When you choose UCare's Individual & Family Plans, you join more than 43,000 Minnesotans who count on us to sort through the details and simplify their health plan options — no matter the situation.

Contact our health plan figure-outers 8 am – 5 pm. Monday – Friday for help comparing plans, seeing if you may qualify for a subsidy and choosing the plan that's right for you. 1-855-307-6975 (TTY 1-800-688-2534) | ifpsales@ucare.org | ucare.org/ifp

Find a broker in your area

Brokers can help you select a health plan and enroll on MNsure. Find an independent broker who works with UCare at ucare.org/ifp-brokers.

Enroll on MNsure

When you're ready to enroll, go to MNsure.org to learn whether you qualify for a subsidy and to enroll in your UCare plan.

UCare Individual & Family Plans

Around the state, our plans offer:

- Some of the lowest rates so you can save on your monthly premium and get more for your money
- A large network of health providers so you can keep your doctor
- A variety of plans and coverage levels that offers flexibility to best suit your lifestyle
- Convenience and virtual care at no additional cost* so you can save a trip to the doctor
- In-network preventive care covered at 100%
- Enhanced coverage for COVID-19 testing and treatment during the public health emergency
- Valuable member perks like monthly reimbursements for gym memberships, monthly savings up to \$200 on healthy groceries, rewards when you complete your preventive visits and more!

Ranked #1 on MNsure four years running, UCare also offers one of the largest networks.

*Online and convenience care are available at no additional cost with copay plans but require payment for HSA-compatible plans.



A health plan with one of the largest networks across the state

From broad to focused health care networks, UCare Individual & Family Plans are available in 77 counties across Minnesota. We offer one of the largest networks in the metro area and beyond.

Broad network

Our broad network spans nearly the entire state and includes these and other health providers:

- Allina Health
- Altru Health System
- Avera Health System
- Carris Health
- CentraHealth
- Essentia Health
- Gundersen Health System
- Hennepin Healthcare
- Lake Region Healthcare
- M Health Fairview
- Mayo Clinic*
- Mayo Clinic Health System
- Northfield Hospital and Clinics
- Olmsted Medical Center
- Park Nicollet Clinics
- Sanford Health
- St. Luke's
- Winona Health

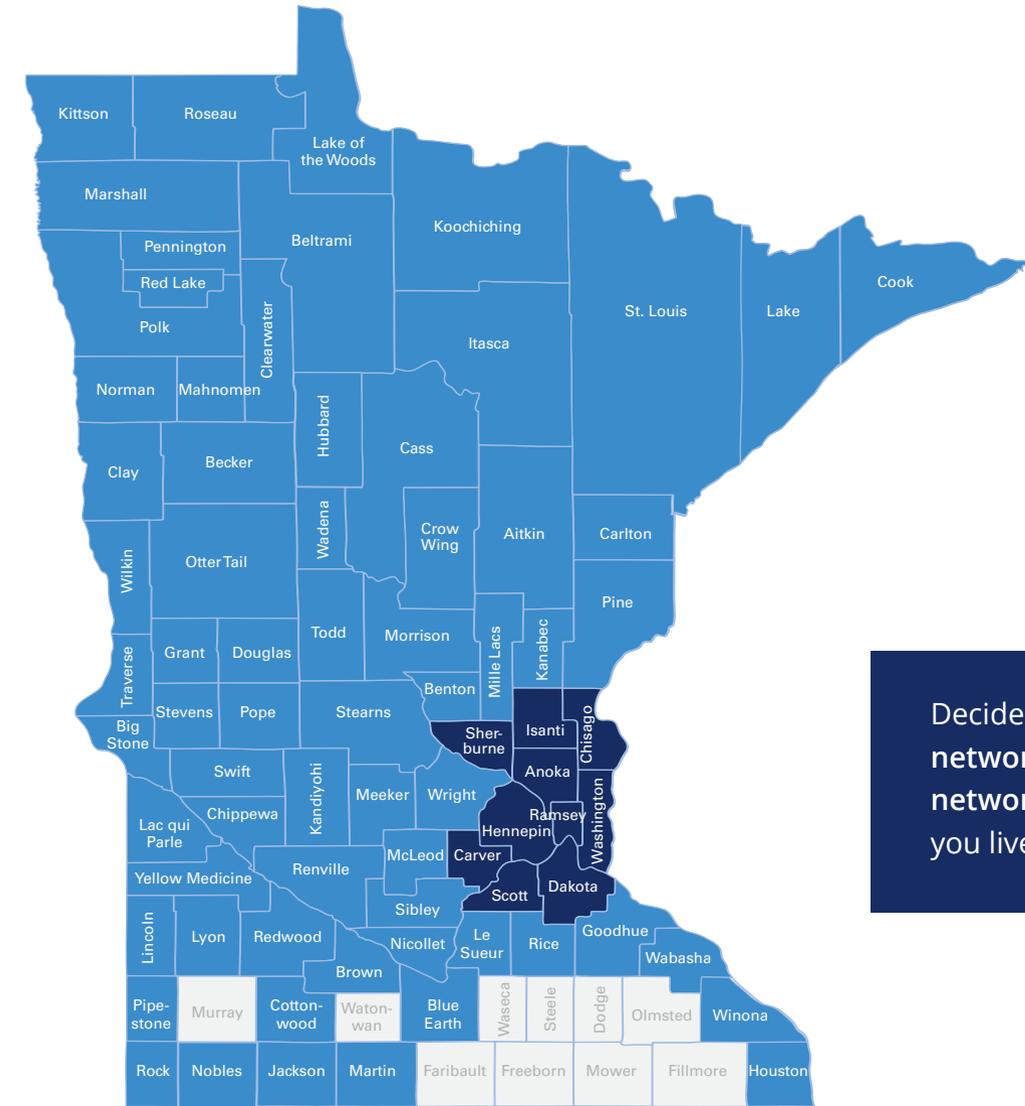
*Specialty care for rare, complex and serious conditions is available for broad network members at Mayo Clinic in Rochester by referral from a health care provider and with prior authorization obtained from UCare Clinical Services.

Focused network

If you're in the 10-county metro area surrounding the Twin Cities, choose between our broad or more focused network with M Health Fairview.

The **focused M Health Fairview network** gives you access to this leading health system with coordinated care across 122 primary care clinics, 460 specialty care clinics and 11 hospitals as well as specialists at the University of Minnesota and other independent providers in the network.

Health plans with a more focused network offer less expensive monthly premiums in exchange for a more localized provider network.



Decide between UCare's **broad network** or our more **focused network with M Health Fairview**, if you live in the 10-county metro.

Service Area

- UCare Individual & Family Plans (**broad network**)
- Choice of UCare Individual & Family Plans (**broad network**) or UCare Individual & Family Plans with M Health Fairview (**focused network**)

Plan comparisons

Compare plans easily by reviewing plan types and cost-sharing levels to find the plan that fits your lifestyle.

Two plan types

- **Copay plans** offer greater upfront protection at a higher premium. They are best if you need consistent health care in the plan year.
- **HSA-compatible plans** offer a lower monthly premium with greater upfront costs before the health plan begins to pay for care. These are best if you don't expect large expenses in the plan year or want to maximize tax savings for retirement.

Four cost-sharing levels

“Metal levels” determine how you and your health plan split the cost for care. UCare offers four metal levels for its copay plans and two for its HSA-compatible plans. The greater the metal level, the lower the deductible and higher the premium is, generally.

HSA-compatible plans

| | UCare Individual & Family Plans and UCare Individual & Family Plans with M Health Fairview | |
|---|--|-----------------|
| | Bronze | Silver |
| Individual deductible | \$6,950 | \$3,000 |
| Family deductible <small>For a family of two or more</small> | \$13,900 | \$6,000 |
| Individual out-of-pocket limit | \$6,950 | \$6,800 |
| Family out-of-pocket limit <small>For a family of two or more</small> | \$13,900 | \$13,600 |
| Preventive care | No charge | No charge |
| After the deductible | | |
| Office visit / urgent care | 0% coinsurance | 25% coinsurance |
| Retail and online visits | 0% coinsurance | 25% coinsurance |
| Preferred generic drugs | 0% coinsurance | 25% coinsurance |
| Non-preferred generic drugs | 0% coinsurance | 25% coinsurance |
| Preferred brand drugs | 0% coinsurance | 25% coinsurance |
| Emergency room | 0% coinsurance | 25% coinsurance |
| Diagnostic tests | 0% coinsurance | 25% coinsurance |
| Hospital stays | 0% coinsurance | 25% coinsurance |

Copay plans

| | UCare Individual & Family Plans and UCare Individual & Family Plans with M Health Fairview | | | |
|---|--|---|---|---|
| | Core* | Bronze | Silver | Gold |
| Individual deductible | \$8,550 | \$5,900 | \$2,900 | \$900 |
| Family deductible <small>For a family of two or more</small> | \$17,100 | \$11,800 | \$5,800 | \$1,800 |
| Individual out-of-pocket limit | \$8,550 | \$8,550 | \$7,900 | \$7,300 |
| Family out-of-pocket limit <small>For a family of two or more</small> | \$17,100 | \$17,100 | \$15,800 | \$14,600 |
| Office visit / urgent care | \$30 copay first three primary care office visits, then 0% after deductible | \$60 copay first three visits, then 35% after deductible | \$30 copay first three visits, then 30% after deductible | \$20 copay for unlimited visits |
| Retail and online visits | No charge | No charge | No charge | No charge |
| Preventive care | No charge | No charge | No charge | No charge |
| Preferred generic drugs | 0% coinsurance after the deductible | \$15 copay per prescription. \$30 copay for 90-day supply | \$10 copay per prescription. \$20 copay for 90-day supply | \$5 copay per prescription. \$10 copay for 90-day supply |
| Non-preferred generic drugs | 0% coinsurance after the deductible | \$25 copay per prescription. \$50 copay for 90-day supply | \$20 copay per prescription. \$40 copay for 90-day supply | \$15 copay per prescription. \$30 copay for 90-day supply |
| Preferred brand drugs | 0% coinsurance after the deductible | \$200 copay per prescription | \$175 copay per prescription | \$125 copay per prescription |
| Emergency room | 0% coinsurance after the deductible | 35% coinsurance after the deductible | \$250 first visit, then 30% after deductible | \$500 first visit, then 20% after deductible |
| Diagnostic tests | 0% coinsurance after the deductible | 35% coinsurance after the deductible | 30% coinsurance after the deductible | 20% coinsurance after the deductible |
| Hospital stays | 0% coinsurance after the deductible | 35% coinsurance after the deductible | 30% coinsurance after the deductible | 20% coinsurance after the deductible |

*Available via UCare's broad network plans and only to those who are under age 30 or those with a federal hardship exemption based on coverage being unaffordable.

Notice of Nondiscrimination

UCare complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex. UCare does not exclude people or treat them differently because of race, color, national origin, age, disability or sex.

We provide aids and services at no charge to people with disabilities to communicate effectively with us, such as TTY line, or written information in other formats, such as large print.

If you need these services, contact us at **612-676-3200 (voice)** or toll free at **1-800-203-7225 (voice)**, **612-676-6810 (TTY)**, or **1-800-688-2534 (TTY)**.

We provide language services at no charge to people whose primary language is not English, such as qualified interpreters or information written in other languages.

If you need these services, contact us at the **number on the back of your membership card** or **612-676-3200** or toll free at **1-800-203-7225 (voice)**; **612-676-6810** or toll free at **1-800-688-2534 (TTY)**.

If you believe that UCare has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability or sex, you can file an oral or written grievance.

Oral grievance

If you are a current UCare member, please call the number on the back of your membership card. Otherwise please call **612-676-3200** or toll free at **1-800-203-7225 (voice)**; **612-676-6810** or toll free at **1-800-688-2534 (TTY)**. You can also use these numbers if you need assistance filing a grievance.

Written grievance

Mailing Address

UCare
Attn: Appeals and Grievances
PO Box 52
Minneapolis, MN 55440-0052
Email: cag@ucare.org
Fax: 612-884-2021

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at:

U.S. Department of Health and Human Services
200 Independence Avenue SW
Room 509F, HHH Building
Washington, D.C. 20201
1-800-368-1019, 1-800-537-7697 (TDD)

Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 612-676-3200/1-800-203-7225 (TTY: 612-676-6810/1-800-688-2534).

LUS CEEV: Yog tias koj hais lus Hmoob, cov kev pab txog lus, muaj kev pab dawb rau koj. Hu rau 612-676-3200/1-800-203-7225 (TTY: 612-676-6810/1-800-688-2534).

XIYYEEFFANNAA: Afaan dubbattu Oroomiffa, tajaajila gargaarsa afaanii, kanfaltiidhaan ala, ni argama. Bilbilaa 612-676-3200/1-800-203-7225 (TTY: 612-676-6810/1-800-688-2534).

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 612-676-3200/1-800-203-7225 (TTY: 612-676-6810/1-800-688-2534).

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 612-676-3200/1-800-203-7225（TTY：612-676-6810/1-800-688-2534）。

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 612-676-3200/1-800-203-7225 (телетайп: 612-676-6810/1-800-688-2534).

ໂປດຊາບ: ຖ້າວ່າ ທ່ານເວົ້າພາສາ ລາວ, ການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາ, ໂດຍບໍ່ເສັຽຄ່າ, ແມ່ນມີພ້ອມໃຫ້ທ່ານ. ໂທ 612-676-3200/1-800-203-7225 (TTY: 612-676-6810/1-800-688-2534).

ማሳሰቢያ: የሚናገሩት ቋንቋ አማርኛ ከሆነ የትርጉም እርዳታ ድርጅቶቻችን በነጻ ሊያግዝዎት ተዘጋጅተዋል። ወደ ሚከተለው ቁጥር ይደውሉ 612-676-3200/1-800-203-7225 (መስማት ለተሳናቸው: 612-676-6810/1-800-688-2534).

ဟံသုဂ်ဟံသး-နမ့်ကတိံ ကညိ ကျိာ်အယိ, နမန့် ကျိာ်အတိာ်မဇာလၢ တလၢ်ဘျုးလၢ်စု နိတမံဘျုးသ့န့ၣ်လိၢ်. ကိ: 612-676-3200/1-800-203-7225 (TTY: 612-676-6810/1-800-688-2534).

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 612-676-3200/1-800-203-7225 (TTY: 612-676-6810/1-800-688-2534).

ប្រយ័ត្ន៖ បើសិនជាអ្នកនិយាយភាសាខ្មែរ, រសវាជន្តយវជ្ជកភាសា ដោយមិនគិតល្អល គឺអាចមានសំរាប់បរិវេណ។ ចូរ ទូរស័ព្ទ 612-676-3200/1-800-203-7225 (TTY: 612-676-6810/1-800-688-2534)។

ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 612-676-3200/1-800-203-7225 (رقم هاتف الصم والبكم: 612-676-6810/1-800-688-2534).

ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 612-676-3200/1-800-203-7225 (ATS : 612-676-6810/1-800-688-2534).

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 612-676-3200/1-800-203-7225 (TTY: 612-676-6810/1-800-688-2534) 번으로 전화해 주십시오.

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 612-676-3200/1-800-203-7225 (TTY: 612-676-6810/1-800-688-2534).



500 Stinson Blvd
Minneapolis, MN 55413
1-855-307-6975 | TTY 1-800-688-2534
8 am – 5 pm, Monday - Friday
ucare.org/ifp

U7265 (09/2020)