

2021 Health Insurance Quotes  
Summary Document

	SET SEG BCBSM SB HSA 1400 0%; \$10/\$40/\$80 Rx	WMHIP BCBSM SB HSA 1400 20%; \$10/\$40/\$80 Rx
1P Deductible	1400	1400
2p/FF Deductible	2800	2800
Coinsurance after Deductible	0%	0%
Office Visit	0% after ded	0% after ded
Urgent Care/ER	0% after ded	0% after ded
Chiro	12/0% after ded	12/0% after ded
Rx	\$10/\$40/\$80 after ded	\$10/\$40/\$80 after ded
1P	605.75	588.92
2P	1453.81	1326.03
FF	1817.26	1648.96

BCBSM:

\*BCBSM current, renewal and proposed rates include certain federal taxes and fees established by the Affordable Care Act as well as certain State taxes and assessments.  
The figures are estimates and may change for future billings.

Priority Health:

\*Proposed rates are based on census provided by the district. Rates may change based on actual group enrollment and participation.  
\*Priority Health rates include estimated federal and state taxes.