

2025 Plan Highlights



UCare Individual & Family Plans

UCare Individual & Family Plans offer many options with different cost-sharing and premiums. Easy Compare plans offer state-regulated cost-sharing. The plans are offered on MNsure, Minnesota’s health insurance marketplace or by enrolling directly through UCare.

| UCare product | Eligibility | Service area (MN counties) | Network |
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| <p>UCare Individual & Family Plans (Qualified Health Plan)</p> <p>Plan options:</p> <ul style="list-style-type: none"> • Core • Bronze • Bronze Access • Silver • Gold • Easy Compare Bronze • Easy Compare Silver and Rx Copay • Easy Compare Gold and Rx Copay • Bronze HSA • Silver HSA | <p>Individuals and families who:</p> <ul style="list-style-type: none"> • Live in the UCare Individual & Family Plans service area • Are U.S. citizens or lawfully present and Minnesota residents • Not incarcerated at the time of enrollment • Not enrolled in certain Medicare programs • Core plan only available to those under 30 years of age or eligible for a hardship exemption | <p>Aitkin, Anoka, Becker, Beltrami, Benton, Big Stone, Blue Earth, Brown, Carlton, Carver, Cass, Chippewa, Chisago, Clay, Clearwater, Cook, Cottonwood, Crow Wing, Dakota, Douglas, Goodhue, Grant, Hennepin, Houston, Hubbard, Isanti, Itasca, Jackson, Kanabec, Kandiyohi, Kittson, Koochiching, Lac qui Parle, Lake, Lake of the Woods, Le Sueur, Lincoln, Lyon, Mahnommen, Marshall, Martin, McLeod, Meeker, Mille Lacs, Morrison, Nicollet, Nobles, Norman, Otter Tail, Pennington, Pine, Pipestone, Polk, Pope, Ramsey, Red Lake, Redwood, Renville, Rice, Rock, Roseau, Scott, Sherburne, Sibley, St. Louis, Stearns, Stevens, Swift, Todd, Traverse, Wabasha, Wadena, Washington, Wilkin, Winona, Wright and Yellow Medicine</p> | <p>More than 47,000 primary and specialty care doctors and clinics including Allina Health, Altru Health, CentraCare, Essentia Health, Gundersen Health System, Hennepin Healthcare, M Health Fairview, Mayo Clinic Health System, Northfield Hospitals and Clinics, Olmsted Medical Center, Park Nicollet, Sanford Health, St Luke’s, Winona Health and more</p> |

Resources and contacts for providers

Provider Assistance Center: 612-676-3300 or 1-888-531-1493 toll-free, 8 am-5 pm, Monday through Friday.

ucare.org/providers

Find information and resources related to authorizations, claims and billing, policies and resources, training and education, our network, credentialing and the Provider Manual. Log in to the provider portal to look up member eligibility, claims, EOPs and authorization status.

Sign up for email updates

Join our email list at ucare.org/providers to receive UCare’s provider newsletters, bulletins and alerts.

See back for overview of benefits and cost share information. Full details are available at ucare.org/member-documents.

| In-Network Service† | UCare Core | UCare Bronze | UCare Bronze Access | UCare Silver | UCare Gold | Easy Compare Bronze | Easy Compare Silver and Rx Copay | Easy Compare Gold and Rx Copay | UCare Bronze HSA | UCare Silver HSA |
|-------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|------------------------------------------------------------|-----------------------------------------------|-----------------------------------------------|------------------------------------------------|-----------------------------------------------|-----------------------------------------------|------------------|------------------|
| Deductible* | \$9,200 | \$5,500 | \$8,300 | \$2,500 | \$950 | \$7,000 | \$4,000 | \$1,500 | \$8,300 | \$3,300 |
| Preventive care** | No charge | | | | | | | | | |
| Primary Care Visit | \$30 copay first three visits, then 0% coinsurance | \$60 copay first three office visits, then 35% coinsurance | \$60 copay first three office visits, then 45% coinsurance | \$40 copay (unlimited), \$0 if telehealth | \$20 copay (unlimited) | \$50 copay (unlimited) | \$40 copay (unlimited) | \$30 copay (unlimited) | 0% coinsurance | 25% coinsurance |
| Specialty Care/Urgent Care Visit | 0% coinsurance | \$60 copay first three office visits, then 35% coinsurance | \$60 copay first three office visits, then 45% coinsurance | \$95 copay (unlimited) | \$35 copay (unlimited) | \$100 copay (unlimited)/\$75 copay (unlimited) | \$80 copay (unlimited)/\$60 copay (unlimited) | \$60 copay (unlimited)/\$45 copay (unlimited) | 0% coinsurance | 25% coinsurance |
| Convenience/retail clinics | No charge | No charge | No charge | No charge | No charge | \$50 copay (unlimited) | \$40 copay (unlimited) | \$30 copay (unlimited) | 0% coinsurance | 25% coinsurance |
| Mental Health Outpatient Counseling | 0% coinsurance | \$60 copay first three office visits, then 35% coinsurance | \$60 copay first three office visits, then 45% coinsurance | \$40 copay (unlimited), \$0 if telehealth | \$20 copay (unlimited) | \$50 copay (unlimited) | \$40 copay (unlimited) | \$30 copay (unlimited) | 0% coinsurance | 25% coinsurance |
| Diagnostic tests | 0% coinsurance | 35% coinsurance | 45% coinsurance | 30% coinsurance | 20% coinsurance | 50% coinsurance | 30% coinsurance | 20% coinsurance | 0% coinsurance | 25% coinsurance |
| Hospital stay | 0% coinsurance | 35% coinsurance | 45% coinsurance | 30% coinsurance | 20% coinsurance | 50% coinsurance | 30% coinsurance | 20% coinsurance | 0% coinsurance | 25% coinsurance |
| Outpatient surgery | 0% coinsurance | 35% coinsurance | 45% coinsurance | 30% coinsurance | 20% coinsurance | 50% coinsurance | 30% coinsurance | 20% coinsurance | 0% coinsurance | 25% coinsurance |
| Emergency room | 0% coinsurance | 35% coinsurance | 45% coinsurance | \$500 copay first visit, then 30% coinsurance | \$500 copay first visit, then 20% coinsurance | 50% coinsurance | 30% coinsurance | 20% coinsurance | 0% coinsurance | 25% coinsurance |
| Pediatric dental check-up***/eye exam (annual) | No charge | | | | | | | | | |
| Prescription Drugs | See member contract and formulary (https://www.ucare.org/member-documents) for information on preferred/non-preferred generic and brand drugs. | | | | | | | | | |
| Maximum out-of-pocket | \$9,200 | \$9,100 | \$9,200 | \$8,800 | \$7,400 | \$9,200 | \$8,700 | \$7,800 | \$8,300 | \$6,800 |

*Deductible and maximum out-of-pocket amounts shown for individuals (amounts for family coverage are twice that of an individual). No out-of-pocket limit for non-network services. // **Preventive care for adults includes routine exams, immunizations, cancer screenings, pregnancy care and quit smoking help. Preventive care for children up to age 18 includes routine exams, well-baby care and immunizations. See the U.S. Preventive Services Task Force recommendations for coverage of preventive services at <https://www.uspreventiveservicestaskforce.org/uspstf/recommendation-topics/uspstf-a-and-b-recommendations>***Limit of two pediatric (children up to age 18) dental exams/cleanings per year for all plans. †All coinsurance values are after deductible. **NOTE:** People who qualify for cost sharing reductions and Native Americans may pay lower or no costs for the benefits in this grid. Visit [MNSure.org](https://www.mnsure.org) or [UCare.org](https://www.ucare.org) to learn more.