

2025 Easy Compare Plan Costs

Coverage	Gold	Silver (CSR*)	Silver (Standard)	Bronze
Average percent of costs the insurance company will cover annually	78%	73%	70%	64%
Covered services and the amount you pay at the time of service (co-payment) from an in-network provider, even if you haven't met your deductible yet				
Preventive care	FREE	FREE	FREE	FREE
Primary care visit	\$30	\$40	\$40	\$50
Urgent care visit	\$45	\$60	\$60	\$75
Specialist visit	\$60	\$80	\$80	\$100
Mental health and substance use disorder outpatient visits	\$30	\$40	\$40	\$50
Occupational and physical therapy	\$30	\$40	\$40	\$50
Amount you must pay out-of-pocket for covered services before your health insurance plan begins to pay (individual/family deductible)	\$1,500 / \$3,000	\$2,400 / \$4,800	\$4,000 / \$8,000	\$7,000 / \$14,000
Covered services and the percentage you pay for the service, after you've met your deductible (co-insurance)				
Emergency room services	20%	30%	30%	50%
Inpatient hospital services	20%	30%	30%	50%
Imaging (CT/PET scans, MRIs); X-rays and diagnostics	20%	30%	30%	50%
Laboratory services	20%	30%	30%	50%
Outpatient facility; Outpatient surgery physician & services	20%	30%	30%	50%
The most you pay during a policy period before your health insurance plan begins to pay 100% of the allowed amount (individual/family out-of-pocket maximum)	\$7,800 / \$15,600	\$7,000 / \$14,000	\$8,700 / \$17,400	\$9,200 / \$18,400

[*Cost-sharing reductions](#)

Contact the insurance company or review the plan documents for:

- Prescription drug coverage and costs
- A complete list of covered services and in-network providers
- Details about limitations and exceptions

MNSure does not discriminate, including because of race, color, national origin, sex, age or disability.

Attention. For free help interpreting this document, call 855-366-7873.

Xasusin. Caawimo lacag la'aan ah turjumaada dukumiintigan, soo wac 855-366-7873.

Atención: Si desea recibir asistencia gratuita para interpretar este documento, llame al 855-366-7873.