

**ANNUAL PREMIUM MEDICARE SELECT
Currently Marketed in Minnesota**

Company	Basic Plan	Part A	100% Excess	Preventive	50% Part A Ded	Part \$20 & \$50 Copay Part B	Extended Basic	High Ded.
Blue Cross and Blue Shield Senior Gold								
Tobacco	\$3,266	\$432	\$12	\$48				
Nontobacco	\$2,723	\$432	\$12	\$48				
Sanford Health Plan of Minnesota								
Tobacco	\$3,159	\$288	\$65	\$120		\$3,042	\$3,540	\$1,791
Nontobacco	\$2,773	\$252	\$47	\$120		\$2,676	\$3,114	\$1,576

Rates may vary due to rounding, discounts or fees.

Updated 10/1/2020