

# 2021 Advantage Health Plan Rates

## 100% Employer Contribution

Monthly Rates	Employee Coverage			Dependent Coverage			Family Coverage		
	Health Plan	Total	State	Employee	Total	State	Employee	Total	State
Advantage BlueCross	732.94	696.30	36.64	1422.44	1209.08	213.36	2155.38	1905.38	250.00
Advantage HealthPartners	732.94	696.30	36.64	1422.44	1209.08	213.36	2155.38	1905.38	250.00
Advantage PreferredOne	732.94	696.30	36.64	1422.44	1209.08	213.36	2155.38	1905.38	250.00

## 75% Employer Contribution

Monthly Rates	Employee Coverage			Dependent Coverage			Family Coverage		
	Health Plan	Total	State	Employee	Total	State	Employee	Total	State
Advantage BlueCross	732.94	522.22	210.72	1422.44	906.82	515.62	2155.38	1429.04	726.34
Advantage HealthPartners	732.94	522.22	210.72	1422.44	906.82	515.62	2155.38	1429.04	726.34
Advantage PreferredOne	732.94	522.22	210.72	1422.44	906.82	515.62	2155.38	1429.04	726.34

## 50% Employer Contribution

Monthly Rates	Employee Coverage			Dependent Coverage			Family Coverage		
	Health Plan	Total	State	Employee	Total	State	Employee	Total	State
Advantage BlueCross	732.94	348.16	384.78	1422.44	604.54	817.90	2155.38	952.70	1202.68
Advantage HealthPartners	732.94	348.16	384.78	1422.44	604.54	817.90	2155.38	952.70	1202.68
Advantage PreferredOne	732.94	348.16	384.78	1422.44	604.54	817.90	2155.38	952.70	1202.68

## 0% Employer Contribution

Monthly Rates	Employee Coverage			Dependent Coverage			Family Coverage		
	Health Plan	Total	State	Employee	Total	State	Employee	Total	State
Advantage BlueCross	732.94	0	732.94	1422.44	0	1422.44	2155.38	0	2155.38
Advantage HealthPartners	732.94	0	732.94	1422.44	0	1422.44	2155.38	0	2155.38
Advantage PreferredOne	732.94	0	732.94	1422.44	0	1422.44	2155.38	0	2155.38