



TRANSGENDER HEALTH INSURANCE GUIDE TO THE MARKETPLACE



Looking for health insurance for 2018 through HealthCare.gov? We've created new state-specific Transgender Health Insurance Guides to help you better understand your options and select a plan that meets your needs and fits your budget.

- To see our analysis of **transgender exclusions** in silver plans sold through HealthCare.gov, check out: [Transgender Health Insurance Guide for 2018: Ohio](#). These ratings were compiled by Out2Enroll through a review of silver marketplace plans only. Out2Enroll did not contact insurance companies to verify this information. In addition, plans may have other exclusions (such as cosmetic exclusions) that may impact your coverage so you should carefully review each plan to ensure it meets your needs. Not all insurers offer coverage in all areas of the state so carefully review the options in your area.
- To see more **detailed information about each silver plan**, check out the documents below. Insurance companies are listed in **bold** and we have included links to each plan’s specific **Summary of Benefits & Coverage** (a summary of plan features and out-of-pocket costs) and **Evidence of Coverage** (detailed plan information that includes coverage exclusions and limitations). Transgender and cosmetic exclusions will only be found in the Evidence of Coverage documents. We strongly recommend that you review both of these documents before selecting a 2018 marketplace plan.

If you still have questions about choosing a plan, we can help. Make an appointment with an [LGBT-friendly expert](#) who can help you consider your options and enroll for free.

Ambetter Balanced Care

Ambetter Balanced Care 1 (2018)	Summary of Benefits & Coverage	Evidence of Coverage
Ambetter Balanced Care 2 (2018)	Summary of Benefits & Coverage	Evidence of Coverage
Ambetter Balanced Care 10 (2018)	Summary of Benefits & Coverage	Evidence of Coverage
Ambetter Balanced Care 12 (2018)	Summary of Benefits & Coverage	Evidence of Coverage
Ambetter Balanced Care 5 (2018)	Summary of Benefits & Coverage	Evidence of Coverage
Ambetter Balanced Care 1 (2018) + Vision	Summary of Benefits & Coverage	Evidence of Coverage

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OHIO
2018



Ambetter Balanced Care 2 (2018) + Vision	Summary of Benefits & Coverage	Evidence of Coverage
Ambetter Balanced Care 10 (2018) + Vision	Summary of Benefits & Coverage	Evidence of Coverage
Ambetter Balanced Care 1 (2018) + Vision + Adult Dental	Summary of Benefits & Coverage	Evidence of Coverage
Ambetter Balanced Care 2 (2018) + Vision + Adult Dental	Summary of Benefits & Coverage	Evidence of Coverage
Ambetter Balanced Care 10 (2018) + Vision + Adult Dental	Summary of Benefits & Coverage	Evidence of Coverage

AultCare

Silver 5000 No Pediatric Dental	Summary of Benefits & Coverage	Evidence of Coverage
Silver 3000 No Pediatric Dental	Summary of Benefits & Coverage	Evidence of Coverage
Silver 2500 No Pediatric Dental	Summary of Benefits & Coverage	Evidence of Coverage
Silver 5000 Select	Summary of Benefits & Coverage	Evidence of Coverage
Silver 3000 Select	Summary of Benefits & Coverage	Evidence of Coverage
Silver 2500 Select	Summary of Benefits & Coverage	Evidence of Coverage
Silver 5000	Summary of Benefits & Coverage	Evidence of Coverage
Silver 3000	Summary of Benefits & Coverage	Evidence of Coverage
Silver 2500	Summary of Benefits & Coverage	Evidence of Coverage
Silver 2500 Select No Pediatric Dental	Summary of Benefits & Coverage	Evidence of Coverage
Silver 5000 Select No Pediatric Dental	Summary of Benefits & Coverage	Evidence of Coverage
Silver 6850 Select	Summary of Benefits & Coverage	Evidence of Coverage
Silver 6850 No Pediatric Dental	Summary of Benefits & Coverage	Evidence of Coverage

SummaCare

SummaCare Silver 3500	Summary of Benefits & Coverage	Evidence of Coverage – unavailable
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SummaCare Silver 5000 40	Summary of Benefits & Coverage	Evidence of Coverage – unavailable
SummaCare Silver 5000	Summary of Benefits & Coverage	Evidence of Coverage – unavailable
Molina		
Molina Marketplace Options Silver 250 Plan	Summary of Benefits & Coverage	Evidence of Coverage
Molina Silver 250 Plan	Summary of Benefits & Coverage	Evidence of Coverage
Paramount Insurance		
Paramount SILVER 1 & 5	Summary of Benefits & Coverage	Evidence of Coverage
Paramount SILVER 2 & 6	Summary of Benefits & Coverage	Evidence of Coverage
Paramount SILVER 4	Summary of Benefits & Coverage	Evidence of Coverage
CareSource		
CareSource Federal Simple Choice Silver Dental and Vision	Summary of Benefits & Coverage	Evidence of Coverage
CareSource Federal Simple Choice Silver	Summary of Benefits & Coverage	Evidence of Coverage
CareSource Low Premium Silver Dental and Vision	Summary of Benefits & Coverage	Evidence of Coverage
CareSource Low Premium Silver	Summary of Benefits & Coverage	Evidence of Coverage
CareSource Silver Dental and Vision	Summary of Benefits & Coverage	Evidence of Coverage
CareSource Silver	Summary of Benefits & Coverage	Evidence of Coverage
Medical Mutual		
Market HMO 2000/30	Summary of Benefits & Coverage	Evidence of Coverage – unavailable
Market HMO 2400	Summary of Benefits & Coverage	Evidence of Coverage – unavailable

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Market HMO 3500	Summary of Benefits & Coverage	Evidence of Coverage – unavailable
Market HMO 4000 HSA	Summary of Benefits & Coverage	Evidence of Coverage – unavailable
Oscar		
Classic Silver Plan	Summary of Benefits & Coverage	Evidence of Coverage
Simple Silver Plan	Summary of Benefits & Coverage	Evidence of Coverage
Saver Silver Plan	Summary of Benefits & Coverage	Evidence of Coverage

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