TRANSGENDER HEALTH INSURANCE GUIDE TO THE MARKETPLACE

Looking for health insurance for 2017 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 2017: Pennsylvania**. 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 2017 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.

UPMC Health Plan		
UPMC Advantage Silver $0/$50 - Partner Network	Summary of Benefits & Coverage	Evidence of Coverage
UPMC Advantage Silver $0/$50 - Premium Network	Summary of Benefits & Coverage	Evidence of Coverage
UPMC Advantage Silver $0/$50 - Select Network	Summary of Benefits & Coverage	Evidence of Coverage
UPMC Advantage Silver $1,750/$30 - Partner Network	Summary of Benefits & Coverage	Evidence of Coverage
UPMC Advantage Silver $1,750/$30 - Premium Network	Summary of Benefits & Coverage	Evidence of Coverage
UPMC Advantage Silver $1,750/$30 - Select Network	Summary of Benefits & Coverage	Evidence of Coverage
UPMC Advantage Silver $3,250/$10 - Partner Network	Summary of Benefits & Coverage	Evidence of Coverage
UPMC Advantage Silver $3,250/$10 - Premium Network	Summary of Benefits & Coverage	Evidence of Coverage
UPMC Advantage Silver $3,250/$10 - Select Network	Summary of Benefits & Coverage	Evidence of Coverage

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UPMC Advantage Silver $3,500/$30 - Partner Network	Summary of Benefits & Coverage	Evidence of Coverage
UPMC Advantage Silver $3,500/$30 - Premium Network	Summary of Benefits & Coverage	Evidence of Coverage
UPMC Advantage Silver $3,500/$30 - Select Network	Summary of Benefits & Coverage	Evidence of Coverage
UPMC Advantage Silver HSA $2,600/20% - Partner Network	Summary of Benefits & Coverage	Evidence of Coverage
UPMC Advantage Silver HSA $2,600/20% - Premium Network	Summary of Benefits & Coverage	Evidence of Coverage
UPMC Advantage Silver HSA $2,600/20% - Select Network	Summary of Benefits & Coverage	Evidence of Coverage
Capital Blue		
Silver PPO 4500/0/10	Summary of Benefits & Coverage	Evidence of Coverage
Geisinger Health Plan		
Geisinger Marketplace HMO 30/60/3500	Summary of Benefits & Coverage	Evidence of Coverage – unavailable
Independence Blue Cross		
Personal Choice PPO Silver	Summary of Benefits & Coverage	Evidence of Coverage – unavailable
Keystone HMO Silver	Summary of Benefits & Coverage	Evidence of Coverage – unavailable
Keystone HMO Silver Proactive	Summary of Benefits & Coverage	Evidence of Coverage – unavailable
Highmark Blue Cross Blue Shield		
my Community Blue Flex PPO 2100S	Summary of Benefits & Coverage	Evidence of Coverage available at https://shop.highmark.com/content/agreements/2017/WPA/Individual/G_01719083_20170101.pdf
my Community Blue Flex PPO 2800SQE	Summary of Benefits & Coverage	Evidence of Coverage available at: https://shop.highmark.com/content/agreements/2017/WPA/Individual/G_01719076_20170101.pdf
my Connect Blue EPO 1750S, a Community Blue Flex Plan	Summary of Benefits & Coverage	Evidence of Coverage available at: https://shop.highmark.com/content/agreements/2017/WPA/Individual/G_01719101_20170101.pdf
my Connect Blue EPO 2500S, a Community Blue	Summary of Benefits	Evidence of Coverage available at:

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Flex Plan	& Coverage	https://shop.highmark.com/content/agreements/2017/WPA/Individual/G_01719111_20170101.pdf
my Premier Blue Flex PPO 2700SQE	Summary of Benefits & Coverage	Evidence of Coverage available at: https://shop.highmark.com/content/agreements/2017/CPA/Individual/G_02514613_20170101.pdf
my Premier Blue Flex PPO 3200S	Summary of Benefits & Coverage	Evidence of Coverage available at: https://shop.highmark.com/content/agreements/2017/CPA/Individual/G_02514620_20170101.pdf
Alliance Flex Blue PPO 2300	Summary of Benefits & Coverage	Evidence of Coverage available at: https://shop.highmark.com/content/agreements/2017/CPA/Individual/G_02514642_20170101.pdf
Health Savings Blue PPO Embedded 2700	Summary of Benefits & Coverage	Evidence of Coverage available at: https://shop.highmark.com/content/agreements/2017/WPA/Individual/G_01719126_20170101.pdf
my Lehigh Valley Flex Blue PPO 2900S	Summary of Benefits & Coverage	Evidence of Coverage available at: https://shop.highmark.com/content/agreements/2017/CPA/Individual/G_02514649_20170101.pdf
my Priority Blue Flex HMO 2100S	Summary of Benefits & Coverage	Evidence of Coverage available at: https://shop.highmark.com/content/agreements/2017/NEPA/Individual/2920_G_01785813_20170101.pdf
my Priority Blue Flex HMO 2750SQE	Summary of Benefits & Coverage	Evidence of Coverage available at: https://shop.highmark.com/content/agreements/2017/NEPA/Individual/2927_G_01785820_20170101.pdf
my Lehigh Valley Flex Blue HMO 2500S	Summary of Benefits & Coverage	Evidence of Coverage available at: https://shop.highmark.com/content/agreements/2017/NEPA/Individual/2934_G_01785827_20170101.pdf

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