



# TRANSGENDER HEALTH INSURANCE GUIDE TO THE MARKETPLACE



Looking for health insurance for 2018 through [HealthCare.gov](http://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: Louisiana](#). 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.

### **Blue Cross and Blue Shield of Louisiana**

Blue POS Copay 60/40 \$3300	<a href="#">Summary of Benefits &amp; Coverage</a>	Evidence of Coverage – information unavailable
Blue POS 100/80 \$3500	<a href="#">Summary of Benefits &amp; Coverage</a>	Evidence of Coverage – information unavailable
Blue POS 80/60 \$3200	<a href="#">Summary of Benefits &amp; Coverage</a>	Evidence of Coverage – information unavailable
Community Blue copay 70/50 \$2100	<a href="#">Summary of Benefits &amp; Coverage</a>	Evidence of Coverage – information unavailable
Blue Connect Copay 70/50 \$2100 (N)	<a href="#">Summary of Benefits &amp; Coverage</a>	Evidence of Coverage – information unavailable
Blue Connect 80/60 \$3200 (N)	<a href="#">Summary of Benefits &amp; Coverage</a>	Evidence of Coverage – information unavailable
Blue Connect Copay 70/50 \$2100 (L)	<a href="#">Summary of Benefits &amp; Coverage</a>	Evidence of Coverage – information unavailable

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Blue Connect 80/60 \$3200 (L)	<a href="#">Summary of Benefits &amp; Coverage</a>	Evidence of Coverage - information unavailable
Blue Connect Copay 70/50 \$2100 (S)	<a href="#">Summary of Benefits &amp; Coverage</a>	Evidence of Coverage - information unavailable
Blue Connect 80/60 \$3200 (S)	<a href="#">Summary of Benefits &amp; Coverage</a>	Evidence of Coverage - information unavailable
Signature Blue Copay 70/50 \$2100	<a href="#">Summary of Benefits &amp; Coverage</a>	Evidence of Coverage - information unavailable
Signature Blue 80/60 \$3200	<a href="#">Summary of Benefits &amp; Coverage</a>	Evidence of Coverage - information unavailable
Blue Max Copay 70/50 \$2800	<a href="#">Summary of Benefits &amp; Coverage</a>	Evidence of Coverage - information unavailable
Blue Saver 90/70 \$3000	<a href="#">Summary of Benefits &amp; Coverage</a>	Evidence of Coverage - information unavailable
<b>Vantage Health Plan</b>		
ESSENTIAL SILVER 3500 - INDIVIDUAL	<a href="#">Summary of Benefits &amp; Coverage</a>	<a href="#">Evidence of Coverage</a>
FREEDOM SILVER 2500 - INDIVIDUAL	<a href="#">Summary of Benefits &amp; Coverage</a>	<a href="#">Evidence of Coverage</a>

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