



2026 Health Plan Comparison Guide



South Dakota **Individual and Family** Affordable Care Act Plans

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What matters to you, matters to us

Welcome to the health plan issuer that cares for nearly 400,000 South Dakotans.

Thank you for trusting us; we take this responsibility seriously. When you have a Wellmark Blue Cross and Blue Shield of South Dakota insurance plan, you are covered for life's expected and unexpected events. You can see the health care providers you know and trust, because your health plan was designed to include a broad, in-state provider network that delivers flexible and affordable coverage. This guide delivers options specifically designed for South Dakota individuals and families.

We hope you find it helpful in choosing a plan that's right for you.



We're making
health care better
by focusing on
what matters most.



More choices

Plans that fit you

Wellmark offers a mix of plans and cost shares so you can choose an option that fits your needs and lifestyle. Individual and family health coverage may be available to you at a reduced cost through premium tax credits (subsidies) that are based on income and household size.

Network availability

The Wellmark Exclusive Provider Network (EPO) is a local network that provides members with access to health care providers across the state and access to emergency care nationwide.

More value

Service you can count on

When you need support, Wellmark is there. Experienced customer service representatives can answer your questions or explain a claim, or you can access online support tools that are tailored to your specific health plan.

An industry leader

We are proud to serve more of your friends and neighbors than any other health insurance company in South Dakota.¹

¹ Sources: Exhibit of Premiums, Enrollment & Utilization and the Supplemental Health Care Exhibit (NAIC), Medical Loss Ratio Reports (CCIIO) and MFA ASO enrollment.

Understand the **network**

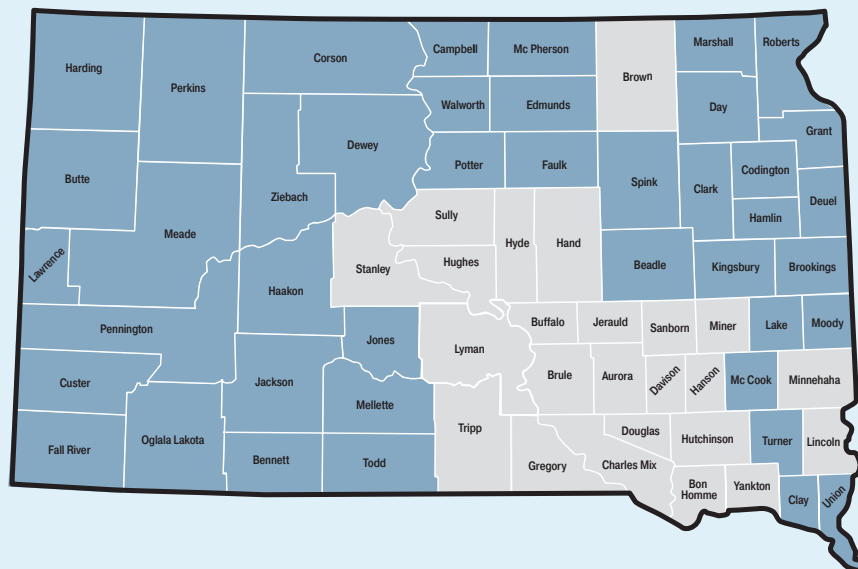


Building a long-term relationship with your primary care provider (PCP) can lead to better overall health¹.

Wellmark Blue EPOSM Network

Staying in network is easy as all Wellmark Affordable Care Act (ACA) plans offer the Wellmark Blue EPO network. Our EPO network provides members with access to health care providers throughout the state of South Dakota and access to emergency care nationwide.

The map below illustrates the eligible counties you must reside in to purchase a plan.



 **Counties eligible to purchase the Wellmark Blue EPO plans**

 Find the full description of our plan types at [Wellmark.com/Plans](https://www.wellmark.com/plans) to select the right plan for you.

¹ Dean, Kristin. "Why You Should Build a Relationship with Your Doctor." Doctor On Demand, 22 June 2022, doctorondemand.com/blog

Traditional health plans

	 Gold	 Silver	 Bronze
	1750	5000	7200
Deductible			
• Single	\$1,750	\$5,000	\$7,200
• Family ¹	\$3,500	\$10,000	\$14,400
Coinsurance	25%	30%	50%
Out-of-pocket max			
• Single	\$7,500	\$7,500	\$9,900
• Family ¹	\$15,000	\$15,000	\$19,800
Medical benefits			
Preventive²	FREE	FREE	FREE
Virtual visit with Doctor On Demand®	\$0	\$0	\$0
• Behavioral Health Coaching services	\$0	\$0	\$0
Office exam			
• Primary care ³	\$20	\$50	\$80
• Non-primary care	\$45	\$75	\$150
Office-administered specialty medical drug	\$300 ⁴	\$300 ⁴	50% after deductible
Office laboratory services	25% after deductible	30% after deductible	50% after deductible
X-rays in office	25% after deductible	30% after deductible	50% after deductible
Emergency room services	25% after deductible	30% after deductible	50% after deductible
Blue Rx EssentialsSM			
• Tier 1	\$20	\$30	\$35
• Tier 2	\$60	\$60	50% after deductible
• Tier 3	\$125	\$140	50% after deductible
• Biosimilars	\$215	\$220	50% after deductible
• Preferred specialty ⁵	\$300	\$300	50% after deductible
• Non-preferred specialty ⁵	\$400	\$500	50% after deductible

¹ The family deductible and out-of-pocket maximum can be met through any combination of family members. No one member will be required to meet more than the single deductible or out-of-pocket maximum amount to receive benefits for covered services during a benefit period.

² Preventive services must be received from an in-network provider in the Wellmark Blue EPOSM network. Please see your coverage document for a full listing of preventive services.

³ The primary care office copay applies to certified nurse midwives, family practitioners, general practitioners, geriatricians, obstetricians/gynecologists, pediatricians, physicians assistants, advanced registered nurse practitioners, physical therapists, occupational therapists, speech pathologists, and in some cases, mental health or chemical dependency visits. All other in-network practitioners are subject to the non-primary care office copay. The copay applies per practitioner, per date of service.

⁴ The office visit copayment applies in addition to this office administered specialty medical drug copayment.

⁵ If you enroll with PrudentRx to get copayment assistance for your eligible specialty medications, you will have \$0 out-of-pocket responsibility for prescriptions listed on the PrudentRx drug list. If you fail to respond or decline to participate in the PrudentRx program, please note that you will be responsible for your member cost-share of 30 percent coinsurance.

Standard health plans

	 Gold	 Silver	 Bronze
	2000	6000	7500
Deductible			
• Single	\$2,000	\$6,000	\$7,500
• Family ¹	\$4,000	\$12,000	\$15,000
Coinsurance	25%	40%	50%
Out-of-pocket max			
• Single	\$8,200	\$8,900	\$10,000
• Family ¹	\$16,400	\$17,800	\$20,000
Medical benefits			
Preventive²	FREE	FREE	FREE
Virtual visit with Doctor On Demand[®]	\$30	\$40	\$50
• Behavioral Health Coaching services	\$0	\$0	\$0
Office services			
• Primary care ³	\$30	\$40	\$50
• Non-primary care	\$60	\$80	\$100
Office-administered specialty medical drug⁴	\$250	\$350 after deductible	\$500 after deductible
Emergency room services	25% after deductible	40% after deductible	50% after deductible
Blue Rx EssentialsSM			
• Tier 1	\$15	\$20	\$25
• Tier 2	\$30	\$40	\$50 after deductible
• Tier 3	\$60	\$80 after deductible	\$100 after deductible
• Biosimilars	\$250	\$350 after deductible	\$500 after deductible
• Preferred specialty ⁵	\$250	\$350 after deductible	\$500 after deductible
• Non-preferred specialty ⁵	\$250	\$350 after deductible	\$500 after deductible

¹ The family deductible and out-of-pocket maximum can be met through any combination of family members. No one member will be required to meet more than the single deductible or out-of-pocket maximum amount to receive benefits for covered services during a benefit period.

² Preventive services must be received from an in-network provider in the Wellmark Blue EPOSM network. Please see your coverage document for a full listing of preventive services.

³ The primary care office copay applies to certified nurse midwives, family practitioners, general practitioners, geriatricians, obstetricians/gynecologists, pediatricians, physicians assistants, advanced registered nurse practitioners, physical therapists, occupational therapists, speech pathologists, and in some cases, mental health or chemical dependency visits. All other in-network practitioners are subject to the non-primary care office copay. The copay applies per practitioner, per date of service.

⁴ The office visit copayment applies in addition to this office administered specialty medical drug copayment.

⁵ If you enroll with PrudentRx to get copayment assistance for your eligible specialty medications, you will have \$0 out-of-pocket responsibility for prescriptions listed on the PrudentRx drug list. If you fail to respond or decline to participate in the PrudentRx program, please note that you will be responsible for your member cost-share of 30 percent coinsurance.

High-deductible health plan

⌘ Bronze

8300	
Deductible / Out-of-pocket max	
• Single	\$8,300
• Family ¹	\$16,600
Medical benefits	
• Preventive ²	FREE
• Behavioral Health Coaching with Doctor On Demand [®]	FREE
Lowest cost	\$
• Virtual visit with Doctor On Demand	
Low cost	\$\$
• PCP office visit ³	
• Facility lab/X-ray	
• Urgent care	
Medium cost	\$\$\$
• Non-PCP office visit	
• Outpatient physical therapist	
• Home health care	
High cost	\$\$\$\$
• Emergency room	
• Ambulatory	
• Inpatient hospitalization	
• Office-administered specialty medical drug cost share	
Blue Rx EssentialsSM	
• All tiers	Deductible applies



¹ The family deductible and out-of-pocket maximum can be met through any combination of family members. No one member will be required to meet more than the single deductible or out-of-pocket maximum amount to receive benefits for covered services during a benefit period.

² Preventive services must be received from an in-network provider in the Wellmark Blue EPOSM network. Please see your coverage document for a full listing of preventive services.

³ The primary care office visit cost applies to certified nurse midwives, family practitioners, general practitioners, geriatricians, obstetricians/gynecologists, pediatricians, physicians assistants, advanced registered nurse practitioners, physical therapists, occupational therapists, speech pathologists, and in some cases, mental health or chemical dependency visits. All other in-network practitioners are subject to the non-primary care office visit cost.

Pharmacy benefits



When the cost of a drug is lower than the copay amount, members will pay the cost of the drug.

No matter which plan you choose, our pharmacy benefits are easy to navigate with Blue Rx EssentialsSM. Prescriptions are grouped into tiers based on factors like cost and effectiveness when compared to similar drugs. Combined with our easy-to-navigate pharmacy network and tools in your myWellmark account and on [Wellmark.com](https://www.wellmark.com), you will understand what you'll pay without any hidden costs or fees.

\$ — DRUG TIER 1 will have the lowest costs. It includes most generics and select branded drugs.

\$\$ — DRUG TIER 2 has a higher cost share than Tier 1. It is made up of drugs that are preferred based on effectiveness when compared to similar drugs.

\$\$\$ — DRUG TIER 3 also increases out-of-pocket costs. It consists of non-preferred drugs that have reasonable, more cost-effective alternatives on Tier 1 or Tier 2.

\$\$\$\$ — BIOSIMILAR AND GENERIC SPECIALTY DRUGS are safe, effective and less costly specialty treatment options. According to the Food and Drug Administration (FDA), a biosimilar is highly similar to and has no meaningful differences from an existing FDA-approved product.

\$\$\$\$\$ — SPECIALTY DRUGS are split into two categories — preferred and non-preferred. Preferred drugs are proven to treat complex or rare conditions. There is insufficient clinical evidence indicating non-preferred drugs are more beneficial than preferred alternatives.

Save money on your specialty prescriptions with manufacturer discount cards available through PrudentRx, a third-party vendor of Wellmark's pharmacy benefits administrator, CVS. PrudentRx will reach out directly to enroll. If you fail to respond or decline to participate in the PrudentRx program, please note that you will be responsible for your member cost-share of 30 percent coinsurance. The PrudentRx drug list can be found at [Wellmark.com/DrugLists](https://www.wellmark.com/DrugLists).

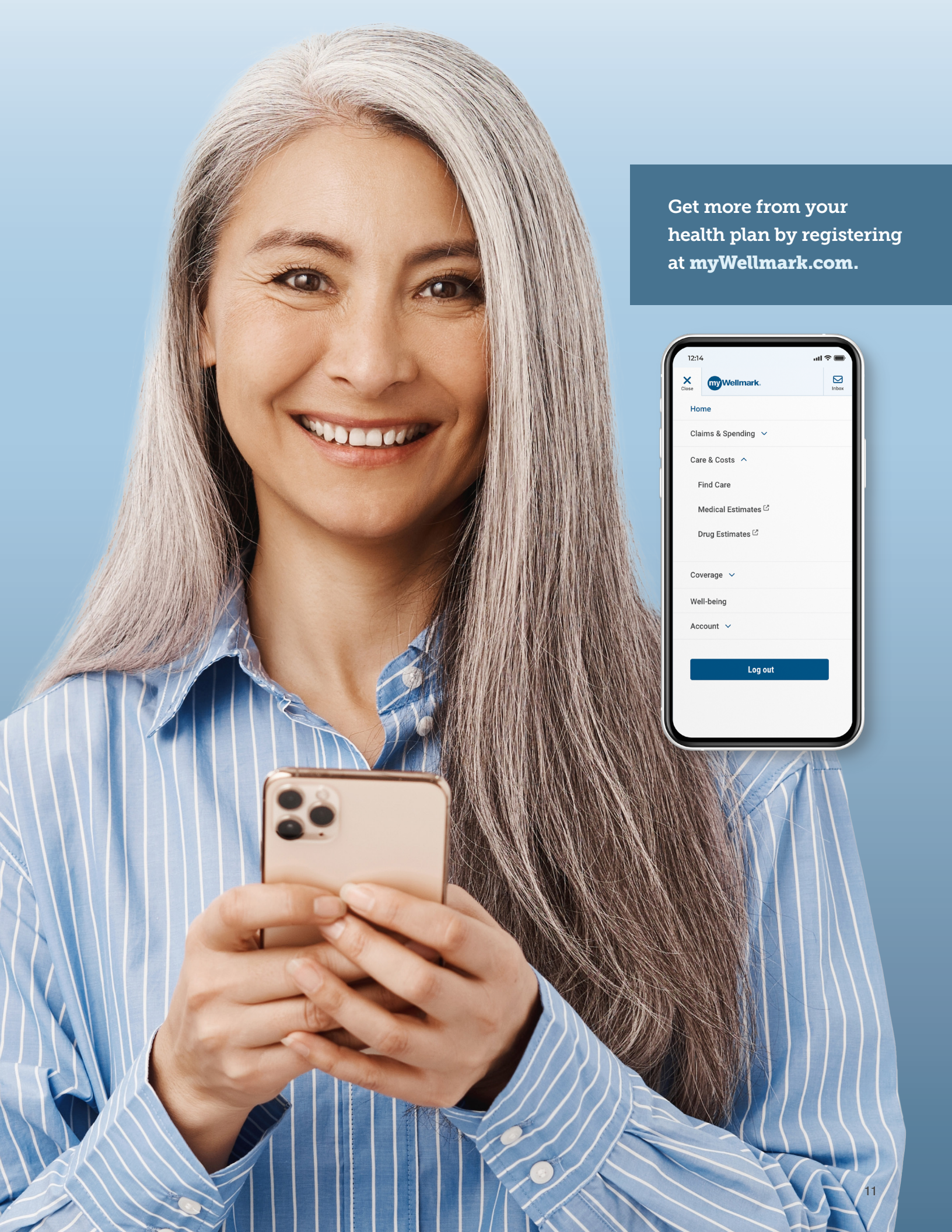




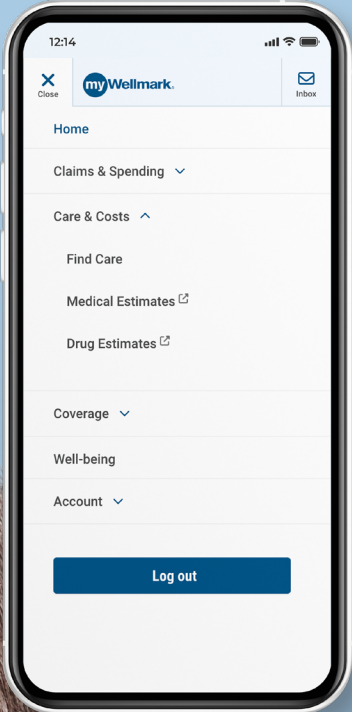
Use myWellmark, our secure member website and app that has tools, resources and insights to help manage your health care spending and live a healthier life. myWellmark streamlines your health insurance information and makes it easier to find what you need, when you need it, on any device.

myWellmark helps you get the most from your health insurance benefits. With myWellmark, you can:

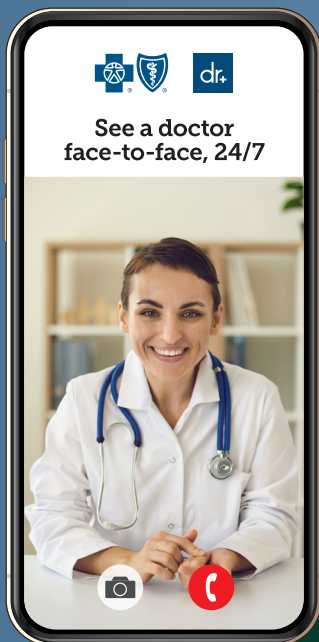
-  **Find a health care provider in your plan's network and designate a primary care provider.**
-  **Find information related to specific benefits.**
-  **Estimate cost of care for procedures and services.**
-  **View detailed claims information, including cost breakdown and status tracker.**
-  **View year-to-date spend report.**
-  **Receive electronic documents quickly and securely.**
-  **Access digital ID cards.**
-  **Enhance well-being with tailored insights.**
-  **Find mental health resources.**



Get more from your health plan by registering at myWellmark.com.



Doctor On Demand®
physicians can treat
hundreds of the most
common medical
conditions and prescribe
medication if needed.¹



¹ Doctor On Demand physicians do not prescribe Drug Enforcement Administration-controlled substances, and may elect not to treat or prescribe other medications based on what is clinically appropriate.

Virtual support

BeWell 24/7®

Sometimes you just need to talk to a knowledgeable resource for answers to health-related questions. BeWell 24/7, Wellmark's exclusive service for members, securely connects you to trained health care professionals who can help you navigate anything from where to get care, to getting advice on how to treat common illnesses at home.



Virtual visits

give you

convenient

access to

quality care

from any device.

All our plans

include low

or no-cost

coverage for

virtual care

visits.

Doctor On Demand®

Most Wellmark plans provide virtual visits through Doctor On Demand. With Doctor On Demand you can connect face-to-face with a board-certified doctor from virtually anywhere using a smartphone, tablet or computer. You get the care you need when you need it at a lower cost than an office visit or other virtual visit provider. It's as easy as downloading the app from the App Store®, on Google Play™ or visiting [DoctorOnDemand.com/Wellmark-BHC](https://www.doctorondemand.com/Wellmark-BHC).

You and your family members can see a virtual doctor for:

- Cold and flu symptoms
- Bronchitis and sinus infections
- Urinary tract infections
- Sore throats
- Allergies
- Fever
- Headaches
- Pink eye
- Skin conditions
- Mental health services¹
- Behavioral health coaching²

¹ Doctor On Demand benefits may include treatment for certain psychological conditions, emotional issues and chemical dependency. Services performed by Doctor On Demand psychologists and psychiatrists are covered.

² Behavioral health coaching is only available for adults age 18 and older.

Additional support



As a Wellmark member, you have access to additional programs and support to help you, no matter your stage of life. See why more South Dakotans choose Wellmark.¹

Available for all Wellmark members

Blue365[®] Program

Blue365 offers exclusive access to discounts and resources that help you live a healthier lifestyle. You can take advantage of discounts and savings on gym memberships, fitness equipment from brands like Fitbit[®] and Garmin[®], vision care and more through Blue365. Registration is simple, and the exclusive deals come right to your inbox. You can access this program at [Wellmark.com/Blue365](https://www.wellmark.com/blue365).

BlueSM Magazine

Blue Magazine features health and wellness articles, consumer tips, health plan news and healthy recipes. It helps you get the most from your plan — and your life. Find it online at [Wellmark.com/Blue](https://www.wellmark.com/blue).

Health Services

Wellmark's Health Services team provides comprehensive solutions to better manage your health by helping you get the right care at the right time in the right place at the right cost. Our case management nurses and social workers provide clinical expertise for complex health conditions; including high-risk pregnancies, neonatal intensive care, organ transplants and behavioral health conditions. Wellmark's Transition of Care team supports members with the highest risk of emergency room visits or readmission as they transition from a medical or behavioral health setting.

Wellmark Connect powered by WebMD[®]

Wellmark Connect is a free digital platform that delivers personalized health content, podcasts, videos, habit-tracking tools, recipes and more. Be sure to take the 15-minute wellness assessment and get a personalized report on your health. You may be eligible to receive a reward for completing important health actions. Visit Wellmark Connect through myWellmark to learn more.

Blue Distinction[®] Centers

When you need specialized care, like a surgery or a transplant, choosing where to get care can be a big decision. And, where you go can impact your results. Blue Distinction Centers are recognized for their proven history of delivering exceptional care and results. This could mean fewer complications, lower readmissions and higher survival rates. All Wellmark members have full in-network access to Blue Distinction Centers — no matter their plan.

¹ Sources: Exhibit of Premiums, Enrollment & Utilization and the Supplemental Health Care Exhibit (NAIC), Medical Loss Ratio Reports (CIIIO) and MFA ASO enrollment.

This document is intended to be used solely for illustrative purposes, and provides simplified information and examples of a general nature. It is not intended as legal or tax advice, nor as an indication that you are eligible to contribute to an HSA, and should not be construed as such. Consult your tax advisor for specific tax advice and for more information about tax savings.

This guide is a brief summary of policies presented, which are subject to exclusions, limitations, reductions in benefits, and terms under which the policies may be renewed or discontinued. For costs and complete details of the coverage, call or write your authorized insurance agent or Wellmark.

Also, please note, this is a general description of coverage. It is not a statement of contract. Actual coverage is subject to the terms and conditions specified in the policy itself and enrollment regulations in force when the policy becomes effective.



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Blue365® is a discount program available to members who have medical coverage with Wellmark. This is NOT insurance. Blue365® is a registered mark of the Blue Cross and Blue Shield Association. BeWell 24/7®, Wellmark® and myWellmark® are registered marks of Wellmark, Inc.

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CVS/Caremark® is a registered trademark of CVS Health Corp., an independent company that provides pharmacy services on behalf of Wellmark Blue Cross and Blue Shield. CVS Specialty® pharmacy provides Rx management and personalized support for patients with complex or chronic conditions.

PrudentRx is an independent company providing cost savings for specialty medications through enrollment in copay assistance programs from drug manufacturers.

Doctor On Demand physicians do not prescribe Drug Enforcement Administration-controlled substances, and may elect not to treat conditions or prescribe other medications based on what is clinically appropriate. For plans that include benefits for mental health treatment, Doctor On Demand benefits may include treatment for certain psychological conditions, emotional issues and chemical dependency. Services performed by Doctor On Demand psychologists are covered. Doctor On Demand does not provide psychiatry services. For more information, call Wellmark at the number on your ID card or call Wellmark Customer Service.

Doctor On Demand by Included Health is a separate company providing an online telehealth solution for Wellmark members. Doctor On Demand® is a registered mark of Included Health, Inc.

Blue Distinction Centers (BDC) met overall quality measures for patient safety and outcomes, developed with input from the medical community. A Local Blue Plan may require additional criteria for providers located in its own service area; for details, contact your Local Blue Plan. Blue Distinction Centers+ (BDC+) also met cost measures that address consumers' need for affordable healthcare. Each provider's cost of care is evaluated using data from its Local Blue Plan. Providers in CA, ID, NY, PA, and WA may lie in two Local Blue Plans' areas, resulting in two evaluations for cost of care; and their own Local Blue Plans decide whether one or both cost of care evaluation(s) must meet BDC+ national criteria. National criteria for BDC and BDC+ are displayed on www.bcbs.com. Individual outcomes may vary. For details on a provider's in-network status or your own policy's coverage, contact your Local Blue Plan and ask your provider before making an appointment. Neither Blue Cross and Blue Shield Association nor any Blue Plans are responsible for non-covered charges or other losses or damages resulting from Blue Distinction or other provider finder information or care received from Blue Distinction or other providers.

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