

Michael W. Smith Agency
(763) 535-7293



Aware CareSM



Traditional health care coverage

For you and/or your family

2008

You're independent. Maybe you have your own business or are between careers. Or maybe you need health care coverage for dependents that aren't covered by a group health plan.

Get the traditional health care coverage you're used to

Aware Care from Blue Cross and Blue Shield of Minnesota is the answer for you and your family. It's a health plan that gives you traditional benefits you'd expect such as coverage for:

- preventive care
- doctor visits
- maternity coverage
- prescription drugs
- emergency room coverage
- hospital stays

And much more. When you choose Blue Cross, you get a great health plan from a company that's been around for 75 years. It's a name that's recognized and trusted for health plans by more Minnesotans than any other.

You'll have plenty of support for living life healthy

Life's better when you're healthy. That's why we offer important extras like:

- a fitness discounts program that credits you up to \$20 on your monthly dues at a participating fitness center
- a 24-hour nurse advice line

- a proven-successful stop-smoking program that has helped thousands quit
- a care support program for members with ongoing health conditions to help better manage their health

You choose your doctor

A health plan should be flexible to fit you and your family's needs. With Aware Care, you choose the doctor you want with no referrals. You'll have access to the largest provider network in the state including over 95 percent of all doctors and nearly all hospitals. And the Blue Cross member ID card is recognized and respected everywhere in the U.S. and in more than 200 countries. So no matter where you are in the world, Blue Cross is with you. When you use a doctor in the network, you'll get the most benefit from your plan. We feature a large network of health care providers. Each provider is an independent contractor and is not our agent.

A health plan that lets you plan ahead

With Aware Care, you tailor the deductible and coverage amounts to suit your particular situation. You'll have peace of mind knowing up front the maximum amount of money you'll spend per year on health care. And your plan is guaranteed renewable. As long as you continue to pay your premiums, your coverage can't be cancelled.

Get information about your health and your health plan online

There's a wealth of information you can find at myBlueCross, Blue Cross' online member center. You can get the latest research on a variety of topics, check to see if your drug is on the formulary, get information about doctor and hospital quality, look up a claim, research medical cost information and much more. And it's there for you 24 hours a day.

It's easy to get started

We're ready when you are. For more information or to apply for Aware Care, talk to an agent. You can find one in the yellow pages or visit bluecrossmn.com and select "find an agent." Or you can call Blue Cross at (651) 662-5050 or toll free at 1-800-262-0823.

Other plans as individual as you are

When your health care needs change, so should your health plan coverage. You can count on Blue Cross for a variety of individual plans to match whatever your life situation is.

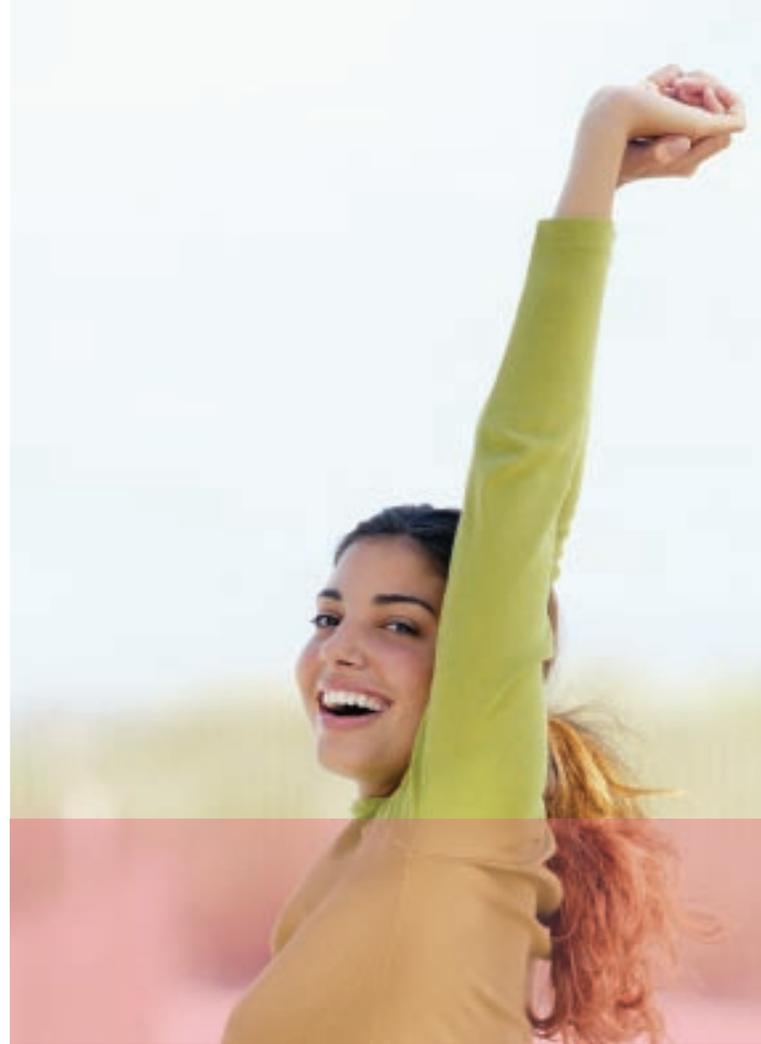
Insta-CareSM. A temporary health plan when you need coverage right away. Just graduated, between jobs, or waiting for group coverage to take effect? Insta-Care provides 30-, 60- or 90-day coverage for a long list of medical and hospital services but does not cover preexisting conditions.

Options Blue. A plan for you and/or your family that puts you in control of your health care spending. The high-deductible plan helps keep premium costs down and the health savings account can give you tax advantages.

Simply BlueSM. A plan designed for how you live. It's a new kind of health plan that covers your doctor visits right from the very first dollar. It has all the essential health care you need and none of what you don't. It's easy to understand and affordable but does not cover childbirth labor and delivery.

If you'd like more information on any of these plans, contact your agent, go to bluecrossmn.com or call Blue Cross at (651) 662-5050 or toll free at 1-800-262-0823.

Life. Live it well.SM



Aware Care plan highlights

Aware Care offers traditional health coverage for individuals and families with a wide range of deductible options to suit your budget and health plan needs. You also have access to our fitness discounts program that credits up to \$20 per month of your health club dues, an online wellness center, stop-smoking program, 24-hour nurse advice line and care support program.

	\$300 Option Most benefits paid at 80%*		\$500 to \$5,000 Options Most benefits paid at 80%*		\$5,000 to \$10,000 Options Most benefits paid at 100%*	
Annual deductible Maximum of three deductibles per family each year	Deductible \$300	Out-of-pocket maximum** \$940	Deductible \$500	Out-of-pocket maximum \$1,400	Deductible \$5,000	Out-of-pocket maximum equal to deductible
Out-of-pocket maximum Family out-of-pocket costs limited to three times the out-of-pocket maximum	** A separate \$300 annual out-of-pocket maximum applies to prescription drug copays		\$750	\$1,600	\$10,000	equal to deductible
Office visits In the doctor's office or urgent care facility (within the network) for an illness or injury	80% after deductible is paid continuing until your out-of-pocket maximum is reached, then coverage is 100%*				100% after deductible*	
Preventive care (routine physicals, eye exams, cancer screening)						
Prescription drugs Maintenance prescriptions: 90-day supply available through 90dayRx program at participating retail pharmacies or by mail order	At participating pharmacies: \$7 copay for formulary drugs \$10 copay for non-formulary drugs		80% after deductible*		100% after deductible*	
Emergency room care	80% after deductible is paid continuing until your out-of-pocket maximum is reached, then coverage is 100%*				100% after deductible*	
Inpatient and outpatient lab and X-ray services						
Inpatient and outpatient hospital services						
Ambulance						
Medical supplies						
Chiropractic, occupational, physical and speech therapy						
Home health care up to \$25,000 per year						
Behavioral health/mental health care						
Behavioral health/substance abuse (You can decline this coverage and receive a lower rate)						
Well-child services to age 6 Immunizations to age 18						
Prenatal care						
Maternity labor, delivery and and post-delivery care	First 18 months: Benefits are limited to \$500 after deductible 19th month and after: Benefits are paid 80% after deductible*				First 18 months: Benefits are limited to \$500 after deductible 19th month and after: Benefits are paid 100% after deductible*	
Lifetime maximum benefit per person	\$5 million					

*Percentage of allowed amount when you use a participating provider. You are responsible for charges greater than the allowed amount when you use a nonparticipating provider. Coverage for substance abuse is included in the contract. You may choose to decline substance abuse coverage. Your premium will be slightly reduced if you decline substance abuse. This is only a summary. Your contract will provide a detailed description of what is and is not covered. Services not covered include private duty nursing, custodial care or rest cures, eyewear, dental services, hearing aids, services that are experimental, not medically necessary or received while on military duty. Preexisting conditions you had during the six months before your enrollment date are not covered. This limit applies for 12 months. Prior continuous coverage without a gap in coverage greater than 63 days counts toward reducing the 12-month period.

Monthly rates

Aware Care is an individual health plan designed for people who prefer traditional coverage for themselves and their families. On the following pages you'll find the monthly rates for our ten deductible options.

Here's how to use our rate tables:

- 1 Find the rate table on the following page that applies to you. We offer a lower rate if you haven't used tobacco for 24 months or more, and you can decide if you want substance abuse coverage.
- 2 Locate your age group on the left side of the table and choose the deductible amount you want.
- 3 Your monthly rate will appear in the column below your deductible choice.

Please note that your rate will change when you move to a new age category — for example, from age 44 to age 45. Aware Care rates are subject to benefit changes mandated by law.

Automatic payment saves time, stamps and checks

There's a convenient, worry-free way to make your monthly Aware Care payment automatically. With Pay-O-Matic, Blue Cross can deduct the payment from your bank account — no checks to write or bills to mail. Look for information about Pay-O-Matic in the Aware Care packet.

The application and payment must be received by Blue Cross within 15 days of the date of your signature. Minnesota law prohibits Blue Cross from accepting an employer's check for individual plans like Aware Care. Please pay by personal check* or money order.

Be sure to allow time for Blue Cross to process your application. Once it's approved, Blue Cross will confirm the effective date of your coverage.

*When you pay by check, you authorize Blue Cross to use information from your check to make a one-time electronic funds transfer (EFT) from your account or to process a check transaction. When we make an EFT, funds may be withdrawn from your account as soon as the same day we receive your check and your check will not be returned to you by your financial institution.



Monthly rates

Tobacco-free — without substance abuse coverage

Coinsurance	80/20%								100/0%	
Deductible:	\$300	\$500	\$750	\$1,000	\$1,500	\$2,000	\$3,000	\$5,000	\$5,000	\$10,000
Subscriber/ Spouse age										
90 days - 18 yrs	\$286.00	\$219.50	\$200.50	\$159.00	\$131.00	\$120.00	\$99.50	\$84.00	\$89.50	\$62.00
19 - 29	\$322.00	\$247.50	\$226.00	\$179.50	\$147.50	\$135.00	\$112.00	\$94.50	\$101.00	\$70.00
30 - 34	\$354.00	\$272.00	\$248.00	\$197.00	\$162.00	\$148.50	\$123.50	\$104.00	\$110.50	\$77.00
35 - 39	\$367.50	\$282.50	\$257.50	\$204.50	\$168.00	\$154.00	\$128.00	\$108.00	\$115.00	\$80.00
40 - 44	\$409.00	\$314.50	\$286.50	\$227.50	\$187.00	\$171.50	\$142.50	\$120.00	\$128.00	\$89.00
45 - 49	\$505.00	\$388.00	\$354.00	\$281.00	\$231.00	\$212.00	\$176.00	\$148.00	\$158.00	\$109.50
50 - 54	\$661.50	\$508.50	\$463.50	\$368.00	\$302.50	\$277.50	\$230.50	\$194.00	\$207.00	\$143.50
55 - 59	\$831.50	\$639.00	\$582.50	\$462.50	\$380.00	\$348.50	\$289.50	\$244.00	\$260.00	\$180.50
60 - 64	\$915.50	\$703.50	\$641.50	\$509.50	\$419.00	\$384.00	\$319.00	\$268.50	\$286.50	\$198.50
65+	\$915.50	\$703.50	\$641.50	\$509.50	\$419.00	\$384.00	\$319.00	\$268.50	\$286.50	\$198.50
Children 90 days – 18 yrs (or up to age 25 if covered as a dependent under family contract)										
1 child	\$286.00	\$219.50	\$200.50	\$159.00	\$131.00	\$120.00	\$99.50	\$84.00	\$89.50	\$62.00
2 children	\$572.00	\$439.00	\$401.00	\$318.00	\$262.00	\$240.00	\$199.00	\$168.00	\$179.00	\$124.00
3 or more children	\$858.00	\$658.50	\$601.50	\$477.00	\$393.00	\$360.00	\$298.50	\$252.00	\$268.50	\$186.00

Tobacco-free — including substance abuse coverage

Coinsurance	80/20%								100/0%	
Deductible:	\$300	\$500	\$750	\$1,000	\$1,500	\$2,000	\$3,000	\$5,000	\$5,000	\$10,000
Subscriber/ Spouse age										
90 days - 18 yrs	\$294.50	\$226.00	\$206.50	\$164.00	\$134.50	\$123.50	\$102.50	\$86.50	\$92.00	\$64.00
19 - 29	\$332.00	\$255.00	\$232.50	\$184.50	\$152.00	\$139.00	\$115.50	\$97.50	\$104.00	\$72.00
30 - 34	\$365.00	\$280.50	\$255.50	\$203.00	\$167.00	\$153.00	\$127.00	\$107.00	\$114.00	\$79.00
35 - 39	\$378.50	\$291.00	\$265.00	\$210.50	\$173.00	\$159.00	\$132.00	\$111.00	\$118.50	\$82.00
40 - 44	\$421.50	\$324.00	\$295.50	\$234.50	\$193.00	\$177.00	\$147.00	\$123.50	\$132.00	\$91.50
45 - 49	\$520.00	\$399.50	\$364.50	\$289.50	\$238.00	\$218.00	\$181.00	\$152.50	\$162.50	\$113.00
50 - 54	\$681.50	\$523.50	\$477.50	\$379.00	\$311.50	\$286.00	\$237.50	\$200.00	\$213.00	\$148.00
55 - 59	\$856.00	\$658.00	\$600.00	\$476.50	\$391.50	\$359.00	\$298.00	\$251.50	\$268.00	\$186.00
60 - 64	\$943.00	\$724.50	\$661.00	\$525.00	\$431.50	\$395.50	\$328.50	\$276.50	\$295.00	\$204.50
65+	\$943.00	\$724.50	\$661.00	\$525.00	\$431.50	\$395.50	\$328.50	\$276.50	\$295.00	\$204.50
Children 90 days – 18 yrs (or up to age 25 if covered as a dependent under family contract)										
1 child	\$294.50	\$226.00	\$206.50	\$164.00	\$134.50	\$123.50	\$102.50	\$86.50	\$92.00	\$64.00
2 children	\$589.00	\$452.00	\$413.00	\$328.00	\$269.00	\$247.00	\$205.00	\$173.00	\$184.00	\$128.00
3 or more children	\$883.50	\$678.00	\$619.50	\$492.00	\$403.50	\$370.50	\$307.50	\$259.50	\$276.00	\$192.00

These are individual rates, effective April 1, 2008 through March 31, 2009.
Each adult subscriber must select a rate based on his or her age.

Tobacco user — without substance abuse coverage

Coinsurance	80/20%								100/0%	
Deductible:	\$300	\$500	\$750	\$1,000	\$1,500	\$2,000	\$3,000	\$5,000	\$5,000	\$10,000
Subscriber/ Spouse age										
90 days - 18 yrs	\$286.00	\$219.50	\$200.50	\$159.00	\$131.00	\$120.00	\$99.50	\$84.00	\$89.50	\$62.00
19 - 29	\$419.00	\$322.00	\$293.50	\$233.00	\$191.50	\$175.50	\$146.00	\$123.00	\$131.00	\$91.00
30 - 34	\$460.50	\$354.00	\$322.50	\$256.50	\$210.50	\$193.00	\$160.50	\$135.00	\$144.00	\$100.00
35 - 39	\$477.50	\$367.00	\$334.50	\$266.00	\$218.50	\$200.50	\$166.50	\$140.00	\$149.50	\$103.50
40 - 44	\$532.00	\$408.50	\$372.50	\$296.00	\$243.50	\$223.00	\$185.50	\$156.00	\$166.50	\$115.50
45 - 49	\$656.50	\$504.50	\$460.00	\$365.50	\$300.00	\$275.50	\$228.50	\$192.50	\$205.50	\$142.50
50 - 54	\$860.00	\$660.50	\$602.50	\$478.50	\$393.50	\$360.50	\$299.50	\$252.50	\$269.00	\$186.50
55 - 59	\$1,080.50	\$830.50	\$757.00	\$601.50	\$494.50	\$453.50	\$376.50	\$317.00	\$338.00	\$234.50
60 - 64	\$1,190.00	\$914.50	\$834.00	\$662.50	\$544.50	\$499.50	\$414.50	\$349.50	\$372.00	\$258.50
65+	\$1,190.00	\$914.50	\$834.00	\$662.50	\$544.50	\$499.50	\$414.50	\$349.50	\$372.00	\$258.50
Children 90 days – 18 yrs (or up to age 25 if covered as a dependent under family contract)										
1 child	\$286.00	\$219.50	\$200.50	\$159.00	\$131.00	\$120.00	\$99.50	\$84.00	\$89.50	\$62.00
2 children	\$572.00	\$439.00	\$401.00	\$318.00	\$262.00	\$240.00	\$199.00	\$168.00	\$179.00	\$124.00
3 or more children	\$858.00	\$658.50	\$601.50	\$477.00	\$393.00	\$360.00	\$298.50	\$252.00	\$268.50	\$186.00

Tobacco user — including substance abuse coverage

Coinsurance	80/20%								100/0%	
Deductible:	\$300	\$500	\$750	\$1,000	\$1,500	\$2,000	\$3,000	\$5,000	\$5,000	\$10,000
Subscriber/ Spouse age										
90 days - 18 yrs	\$294.50	\$226.00	\$206.50	\$164.00	\$134.50	\$123.50	\$102.50	\$86.50	\$92.00	\$64.00
19 - 29	\$431.50	\$331.50	\$302.50	\$240.00	\$197.50	\$181.00	\$150.50	\$126.50	\$135.00	\$93.50
30 - 34	\$474.00	\$364.50	\$332.50	\$264.00	\$217.00	\$199.00	\$165.00	\$139.00	\$148.50	\$103.00
35 - 39	\$492.00	\$378.00	\$345.00	\$274.00	\$225.00	\$206.50	\$171.50	\$144.50	\$154.00	\$107.00
40 - 44	\$548.00	\$421.00	\$384.00	\$305.00	\$250.50	\$230.00	\$191.00	\$161.00	\$171.50	\$119.00
45 - 49	\$676.00	\$519.50	\$473.50	\$376.50	\$309.50	\$283.50	\$235.50	\$198.50	\$211.50	\$146.50
50 - 54	\$885.50	\$680.50	\$620.50	\$493.00	\$405.00	\$371.50	\$308.50	\$260.00	\$277.00	\$192.00
55 - 59	\$1,113.00	\$855.50	\$780.00	\$619.50	\$509.00	\$467.00	\$387.50	\$326.50	\$348.00	\$241.50
60 - 64	\$1,226.00	\$942.00	\$859.00	\$682.50	\$561.00	\$514.50	\$427.00	\$360.00	\$383.50	\$266.00
65+	\$1,226.00	\$942.00	\$859.00	\$682.50	\$561.00	\$514.50	\$427.00	\$360.00	\$383.50	\$266.00
Children 90 days – 18 yrs (or up to age 25 if covered as a dependent under family contract)										
1 child	\$294.50	\$226.00	\$206.50	\$164.00	\$134.50	\$123.50	\$102.50	\$86.50	\$92.00	\$64.00
2 children	\$589.00	\$452.00	\$413.00	\$328.00	\$269.00	\$247.00	\$205.00	\$173.00	\$184.00	\$128.00
3 or more children	\$883.50	\$678.00	\$619.50	\$492.00	\$403.50	\$370.50	\$307.50	\$259.50	\$276.00	\$192.00

These are individual rates, effective April 1, 2008 through March 31, 2009.
Each adult subscriber must select a rate based on his or her age.



This notice required by law

Notice concerning policyholders' rights in an insolvency under the Minnesota Life and Health Insurance Guaranty Association Law

If the insurer who issued your life, annuity or health insurance policy becomes impaired or insolvent, you are entitled to compensation for your policy from the assets of that insurer. The amount you recover will depend on the financial condition of the insurer.

In addition, residents of Minnesota who purchase life insurance, annuities or health insurance from insurance companies authorized to do business in Minnesota are protected, subject to limits and exclusions, in the event the insurer becomes financially impaired or insolvent. This protection is provided by the Minnesota Life and Health Insurance Guaranty Association.

Minnesota Life & Health Insurance Guaranty Association

4760 White Bear Parkway

Suite 101

White Bear Lake, MN 55110

Telephone: (651) 407-3149

Fax: (651) 407-3150

Executive Director: Gerald C. Backhaus

The **maximum amount** the Guaranty Association will pay for all policies issued on one life by the same insurer **is limited to \$300,000. Subject to this \$300,000 limit**, the Guaranty Association will pay up to \$300,000 in life insurance death benefits, \$100,000 in net cash surrender and net cash withdrawal values for life insurance, \$300,000 in health insurance benefits, including any net cash surrender and net cash withdrawal values, \$300,000 in present value of annuity benefits for annuities which are part of a structured settlement for annuities in regard to which periodic annuity benefits, for a period of not less than the annuitant's lifetime or for a period certain of not less than ten years, have begun to be paid on or before the date of impairment or insolvency, or if no coverage limit has been specified for a covered policy or benefit, the coverage limit shall be \$300,000 in present value. Unallocated annuity contracts issued to retirement plans, other than defined benefit plans, established under section 401, 403(b), or 457 of the Internal Revenue Code of 1986, as amended through December 31, 1992, are covered up to \$100,000 in net cash surrender and net cash withdrawal values, for Minnesota

residents covered by the plan provided, however, that the Association shall not be responsible for more than \$7,500,000 in claims from all Minnesota residents covered by the plan. If total claims exceed \$7,500,000, the \$7,500,000 shall be prorated among all claimants. These are the maximum claim amounts. Coverage by the Guaranty Association is also subject to other substantial limitations and exclusions and requires continued residency in Minnesota. If your claim exceeds the Guaranty Association's limits, you may still recover a part or all of that amount from the proceeds of the liquidation of the insolvent insurer, if any exist. Funds to pay claims may not be immediately available. The Guaranty Association assesses insurers licensed to sell life and health insurance in Minnesota after the insolvency occurs. Claims are paid from this assessment.

The coverage provided by the Guaranty Association is not a substitute for using care in selecting insurance companies that are well managed and financially stable. In selecting an insurance company or policy you are advised not to rely on coverage by the Guaranty Association.

This notice is required by Minnesota state law to advise policyholders of life, annuity or health insurance policies of their rights in the event their insurance carrier becomes financially impaired or insolvent. This notice in no way implies that the company currently has any type of financial problems. All life, annuity and health insurance policies are required to provide this notice.

Disclosure (required by Minnesota law)

This contract is expected to return, on average, at least 72 percent of your premium dollar for health care. The lowest percentage permitted by state law for this contract is 72 percent.