

Grandfathered Medical Plan Rates

Copayment plans

	\$5 C	opaymer	nt Plan			\$15 C	Copayme	nt Plan		\$20 Copayment Plan					
Age	EE only	EE+S	EE+C	EE+S+C	Age	EE only	EE+S	EE+C	EE+S+C	Age	EE only	EE+S	EE+C	EE+S+C	
<30	\$620	\$1,732	\$1,703	\$2,410	<30	\$494	\$1,380	\$1,357	\$1,920	<30	\$462	\$1,290	\$1,269	\$1,795	
30–39	\$685	\$1,861	\$1,751	\$2,664	30–39	\$546	\$1,483	\$1,395	\$2,123	30–39	\$510	\$1,386	\$1,304	\$1,984	
40–49	\$884	\$2,033	\$1,679	\$2,683	40–49	\$704	\$1,620	\$1,338	\$2,138	40-49	\$658	\$1,514	\$1,250	\$1,998	
50-54	\$1,150	\$2,390	\$1,897	\$3,055	50-54	\$916	\$1,904	\$1,511	\$2,434	50-54	\$857	\$1,781	\$1,413	\$2,276	
55–59	\$1,453	\$3,052	\$2,172	\$3,510	55–59	\$1,158	\$2,432	\$1,731	\$2,797	55-59	\$1,083	\$2,274	\$1,619	\$2,615	
60–64	\$1,792	\$3,404	\$2,397	\$3,974	60–64	\$1,428	\$2,713	\$1,910	\$3,167	60–64	\$1,335	\$2,536	\$1,786	\$2,961	
65+	65+ \$2,033 \$4,393 \$3,056 \$4,829					\$1,620	\$3,501	\$2,435	\$3,849	65+	\$1,514	\$3,272	\$2,276	\$3,597	
	* 00 /				¢50 Consumption Diam										

	\$30 C	Copayme	nt Plan		\$50 Copayment Plan						
Age	EE only	EE+S	EE+C	EE+S+C	Age	EE only	EE+S	EE+C	EE+S+C		
<30	\$419	\$1,170	\$1,150	\$1,628	<30	\$381	\$1,064	\$1,046	\$1,481		
30–39	\$463	\$1,257	\$1,183	\$1,799	30–39	\$421	\$1,144	\$1,076	\$1,637		
40–49	\$597	\$1,373	\$1,134	\$1,812	40–49	\$543	\$1,249	\$1,032	\$1,648		
50-54	\$777	\$1,615	\$1,281	\$2,064	50-54	\$707	\$1,469	\$1,166	\$1,878		
55–59	\$982	\$2,062	\$1,468	\$2,372	55–59	\$893	\$1,875	\$1,335	\$2,157		
60–64	\$1,211	\$2,300	\$1,620	\$2,685	60–64	\$1,101	\$2,092	\$1,473	\$2,442		
65+	\$1,373	\$2,967	\$2,064	\$3,262	65+	\$1,249	\$2,699	\$1,878	\$2,967		

Deductible HMO plans

\$3	30/\$1,000	Deductib	le HMO F	Plan	\$3	30/\$1,500	Deductik	ole HMO F	Plan	\$40/\$2,000 Deductible HMO Plan					
Age	EE only	EE+S	EE+C	EE+S+C	Age	EE only	EE+S	EE+C	EE+S+C	Age	EE only	EE+S	EE+C	EE+S+C	
<30	\$352	\$964	\$797	\$1,162	<30	\$308	\$844	\$697	\$1,017	<30	\$285	\$780	\$645	\$940	
30–39	\$416	\$1,111	\$840	\$1,301	30–39	\$364	\$973	\$735	\$1,139	30–39	\$336	\$898	\$679	\$1,051	
40–49	\$562	\$1,147	\$879	\$1,457	40–49	\$492	\$1,004	\$770	\$1,276	40-49	\$455	\$928	\$712	\$1,179	
50–54	\$751	\$1,559	\$1,028	\$1,726	50–54	\$658	\$1,366	\$901	\$1,512	50-54	\$607	\$1,261	\$831	\$1,396	
55–59	\$932	\$1,938	\$1,208	\$2,124	55–59	\$816	\$1,697	\$1,058	\$1,860	55–59	\$754	\$1,568	\$978	\$1,719	
60–64	\$1,195	\$2,391	\$1,477	\$2,646	60–64	\$1,046	\$2,094	\$1,293	\$2,317	60-64	\$966	\$1,934	\$1,194	\$2,140	
65+	\$1,449	\$3,304	\$1,720	\$3,466	65+	\$1,269	\$2,893	\$1,506	\$3,035	65+	\$1,172	\$2,672	\$1,391	\$2,803	

RATES APPLY TO GROUPS WITH GRANDFATHERED PLANS Grandfathered Plans are not available to New Groups Existing Groups are not allowed to add Grandfathered Plans Existing Groups are not allowed to change a current Grandfather Plan to a different Grandfathered Plan

Employee/Dependent Codes	EE only = eligible employee only (subscriber) EE+S = eligible employee plus spouse (subscriber and spouse)
Age is based on employee/subscriber	EE+C = eligible employee plus child(ren) (subscriber and child[ren] without spouse) EE+S+C = eligible employee plus spouse and child(ren) (subscriber and spouse and child[ren])

For effective dates January 1–December 1, 2023



Grandfathered Medical Plan Rates

HSA-qualified deductible HMO plans

\$0/\$2,	000 Dedu	ctible HM	IO Plan w	ith HSA	\$0/\$3	,000 Dedu	ctible HN	IO Plan w	vith HSA	\$30/\$3,000 Deductible HMO Plan with HSA						
Age	EE only	EE+S	EE+C	EE+S+C	Age	EE only	EE+S	EE+C	EE+S+C	Age	EE only	EE+S	EE+C	EE+S+C		
<30	\$307	\$841	\$695	\$1,013	<30	\$250	\$684	\$565	\$824	<30	\$221	\$605	\$500	\$729		
30–39	\$363	\$970	\$733	\$1,136	30–39	\$295	\$788	\$595	\$923	30–39	\$261	\$697	\$527	\$816		
40-49	\$491	\$1,002	\$768	\$1,273	40-49	\$399	\$814	\$624	\$1,034	40-49	\$353	\$720	\$552	\$915		
50-54	\$655	\$1,360	\$897	\$1,506	50-54	\$533	\$1,106	\$730	\$1,224	50-54	\$471	\$978	\$645	\$1,083		
55–59	\$813	\$1,691	\$1,054	\$1,854	55–59	\$661	\$1,375	\$857	\$1,507	55–59	\$585	\$1,217	\$758	\$1,334		
60–64	\$1,043	\$2,087	\$1,289	\$2,309	60-64	\$847	\$1,695	\$1,047	\$1,876	60–64	\$750	\$1,501	\$927	\$1,661		
65+	\$1,264	\$2,883	\$1,500	\$3,024	65+	\$1,028	\$2,344	\$1,220	\$2,459	65+	\$909	\$2,073	\$1,079	\$2,175		

Deductible HMO plans with HRA plans

\$30/\$1	,500 Dedi	uctible HI	MO Plan v	with HRA	\$30/\$2	,500 Dedi	uctible HI	MO Plan v	with HRA
		== . 0	==.0	==			== . 0	==.0	==
Age	EE only	EE+S	EE+C	EE+S+C	Age	EE only	EE+S	EE+C	EE+S+C
<30	\$320	\$877	\$725	\$1,057	<30	\$287	\$786	\$649	\$947
30–39	\$378	\$1,011	\$764	\$1,184	30–39	\$339	\$906	\$684	\$1,061
40–49	\$512	\$1,045	\$801	\$1,328	40–49	\$458	\$935	\$716	\$1,188
50-54	\$684	\$1,420	\$937	\$1,572	50–54	\$612	\$1,271	\$838	\$1,407
55–59	\$849	\$1,765	\$1,101	\$1,935	55–59	\$760	\$1,580	\$985	\$1,732
60-64	\$1,088	\$2,177	\$1,345	\$2,409	60–64	\$974	\$1,949	\$1,204	\$2,157
65+	\$1,319	\$3,008	\$1,565	\$3,155	65+	\$1,181	\$2,693	\$1,402	\$2,825

RATES APPLY TO GROUPS WITH GRANDFATHERED PLANS Grandfathered Plans are not available to New Groups Existing Groups are not allowed to add Grandfathered Plans Existing Groups are not allowed to change a current Grandfather Plan to a different Grandfathered Plan

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Age is based on employee/subscriber	EE+C = eligible employee plus child(ren) (subscriber and child[ren] without spouse) EE+S+C = eligible employee plus spouse and child(ren) (subscriber and spouse and child[ren])



Grandfathered Medical Plan Rates

Copayment plans

	\$5 C	opaymer	nt Plan			\$15 C	Copayme	nt Plan		\$20 Copayment Plan					
Age	EE only	EE+S	EE+C	EE+S+C	Age	EE only	EE+S	EE+C	EE+S+C	Age	EE only	EE+S	EE+C	EE+S+C	
<30	\$654	\$1,827	\$1,797	\$2,543	<30	\$521	\$1,456	\$1,432	\$2,026	<30	\$487	\$1,361	\$1,339	\$1,894	
30–39	\$723	\$1,964	\$1,848	\$2,811	30–39	\$576	\$1,565	\$1,472	\$2,240	30-39	\$539	\$1,464	\$1,377	\$2,095	
40-49	\$933	\$2,146	\$1,772	\$2,832	40–49	\$743	\$1,710	\$1,412	\$2,257	40-49	\$695	\$1,599	\$1,320	\$2,110	
50-54	\$1,214	\$2,523	\$2,002	\$3,225	50-54	\$967	\$2,010	\$1,595	\$2,569	50-54	\$904	\$1,879	\$1,491	\$2,402	
55–59	\$1,534	\$3,221	\$2,293	\$3,705	55–59	\$1,222	\$2,567	\$1,827	\$2,952	55-59	\$1,143	\$2,400	\$1,709	\$2,760	
60–64	\$1,892	\$3,594	\$2,530	\$4,196	60–64	\$1,508	\$2,864	\$2,017	\$3,343	60-64	\$1,410	\$2,678	\$1,886	\$3,126	
65+	\$2,146	\$4,637	\$3,226	\$5,098	65+	\$1,710	\$3,695	\$2,571	\$4,062	65+	\$1,599	\$3,455	\$2,404	\$3,798	
	\$20 (Conavmo	nt Plan		\$50 Consyment Plan										

	\$30 (Copayme	nt Plan		\$50 Copayment Plan						
Age	EE only	EE+S	EE+C	EE+S+C	Age	EE only	EE+S	EE+C	EE+S+C		
<30	\$442	\$1,235	\$1,214	\$1,718	<30	\$402	\$1,123	\$1,104	\$1,563		
30–39	\$488	\$1,327	\$1,248	\$1,899	30–39	\$444	\$1,207	\$1,135	\$1,728		
40–49	\$630	\$1,449	\$1,197	\$1,912	40–49	\$573	\$1,318	\$1,089	\$1,740		
50-54	\$820	\$1,704	\$1,352	\$2,178	50-54	\$746	\$1,551	\$1,230	\$1,982		
55–59	\$1,036	\$2,176	\$1,549	\$2,503	55–59	\$943	\$1,980	\$1,409	\$2,277		
60–64	\$1,278	\$2,428	\$1,709	\$2,834	60–64	\$1,163	\$2,209	\$1,555	\$2,579		
65+	\$1,449	\$3,132	\$2,179	\$3,443	65+	\$1,318	\$2,849	\$1,982	\$3,132		

Deductible HMO plans

\$3	30/\$1,000	Deductib	ole HMO F	Plan	\$	30/\$1,500	Deductik	ole HMO F	Plan	\$40/\$2,000 Deductible HMO Plan					
Age	EE only	EE+S	EE+C	EE+S+C	Age	EE only	EE+S	EE+C	EE+S+C	Age	EE only	EE+S	EE+C	EE+S+C	
<30	\$372	\$1,018	\$841	\$1,227	<30	\$325	\$891	\$736	\$1,074	<30	\$300	\$822	\$680	\$991	
30–39	\$439	\$1,173	\$886	\$1,373	30–39	\$384	\$1,027	\$775	\$1,202	30–39	\$355	\$949	\$717	\$1,111	
40–49	\$594	\$1,212	\$929	\$1,540	40–49	\$520	\$1,061	\$813	\$1,348	40–49	\$480	\$980	\$751	\$1,245	
50–54	\$793	\$1,646	\$1,086	\$1,822	50–54	\$694	\$1,441	\$950	\$1,595	50-54	\$641	\$1,331	\$878	\$1,473	
55–59	\$984	\$2,046	\$1,276	\$2,243	55–59	\$862	\$1,792	\$1,117	\$1,964	55–59	\$796	\$1,655	\$1,032	\$1,814	
60–64	\$1,261	\$2,524	\$1,559	\$2,793	60–64	\$1,104	\$2,210	\$1,365	\$2,445	60–64	\$1,020	\$2,041	\$1,261	\$2,258	
65+	\$1,530	\$3,488	\$1,816	\$3,659	65+	\$1,339	\$3,054	\$1,589	\$3,204	65+	\$1,237	\$2,821	\$1,468	\$2,959	

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For effective dates January 1–December 1, 2023



Grandfathered Medical Plan Rates

HSA-qualified deductible HMO plans

\$0/\$2,	000 Dedu	ctible HM	IO Plan w	vith HSA	\$0/\$3	,000 Dedu	ctible HN	/IO Plan w	vith HSA	\$30/\$3,000 Deductible HMO Plan with HSA						
Age	EE only	EE+S	EE+C	EE+S+C	Age	EE only	EE+S	EE+C	EE+S+C	Age	EE only	EE+S	EE+C	EE+S+C		
<30	\$324	\$888	\$734	\$1,070	<30	\$263	\$721	\$596	\$869	<30	\$233	\$638	\$528	\$769		
30–39	\$383	\$1,024	\$773	\$1,199	30–39	\$311	\$832	\$628	\$974	30–39	\$275	\$736	\$556	\$862		
40-49	\$518	\$1,057	\$810	\$1,343	40-49	\$421	\$859	\$658	\$1,091	40-49	\$372	\$760	\$582	\$966		
50-54	\$692	\$1,436	\$948	\$1,590	50-54	\$562	\$1,167	\$770	\$1,292	50–54	\$497	\$1,032	\$681	\$1,143		
55-59	\$859	\$1,786	\$1,114	\$1,958	55–59	\$698	\$1,451	\$905	\$1,591	55–59	\$618	\$1,285	\$801	\$1,408		
60-64	\$1,100	\$2,202	\$1,360	\$2,437	60–64	\$894	\$1,790	\$1,105	\$1,981	60–64	\$791	\$1,583	\$978	\$1,752		
65+	\$1,335	\$3,044	\$1,584	\$3,193	65+	\$1,085	\$2,474	\$1,288	\$2,595	65+	\$960	\$2,189	\$1,139	\$2,296		

Deductible HMO plans with HRA plans

\$30/\$1	,500 Dedu	uctible HI	MO Plan v	with HRA	\$30/\$2	,500 Dedi	uctible HI	MO Plan v	vith HRA
-									
Age	EE only	EE+S	EE+C	EE+S+C	Age	EE only	EE+S	EE+C	EE+S+C
<30	\$338	\$926	\$765	\$1,116	<30	\$303	\$829	\$686	\$999
30–39	\$400	\$1,068	\$807	\$1,250	30–39	\$358	\$956	\$722	\$1,119
40–49	\$540	\$1,102	\$845	\$1,400	40–49	\$484	\$987	\$757	\$1,254
50-54	\$722	\$1,499	\$989	\$1,659	50–54	\$646	\$1,341	\$885	\$1,485
55–59	\$896	\$1,863	\$1,162	\$2,042	55–59	\$802	\$1,668	\$1,040	\$1,828
60-64	\$1,148	\$2,298	\$1,419	\$2,543	60–64	\$1,028	\$2,057	\$1,271	\$2,276
65+	\$1,393	\$3,176	\$1,653	\$3,332	65+	\$1,247	\$2,843	\$1,480	\$2,982

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Grandfathered Medical Plan Rates

Copayment plans

	\$5 Copayment Plan					\$15 Copayment Plan						\$20 Copayment Plan					
Age	EE only	EE+S	EE+C	EE+S+C	Age	EE only	EE+S	EE+C	EE+S+C	Age	EE only	EE+S	EE+C	EE+S+C			
<30	\$689	\$1,924	\$1,892	\$2,677	<30	\$549	\$1,533	\$1,508	\$2,133	<30	\$513	\$1,433	\$1,409	\$1,994			
30–39	\$761	\$2,068	\$1,945	\$2,960	30–39	\$606	\$1,647	\$1,550	\$2,358	30-39	\$567	\$1,540	\$1,449	\$2,204			
40-49	\$982	\$2,259	\$1,866	\$2,981	40-49	\$782	\$1,800	\$1,486	\$2,375	40-49	\$731	\$1,682	\$1,389	\$2,220			
50-54	\$1,278	\$2,656	\$2,108	\$3,395	50–54	\$1,018	\$2,116	\$1,679	\$2,705	50-54	\$952	\$1,979	\$1,570	\$2,530			
55–59	\$1,615	\$3,391	\$2,414	\$3,900	55–59	\$1,287	\$2,702	\$1,924	\$3,108	55-59	\$1,203	\$2,526	\$1,798	\$2,905			
60-64	\$1,992	\$3,783	\$2,664	\$4,416	60–64	\$1,587	\$3,014	\$2,122	\$3,519	60-64	\$1,484	\$2,819	\$1,985	\$3,291			
65+	\$2,259	\$4,882	\$3,396	\$5,367	65+	\$1,800	\$3,890	\$2,706	\$4,276	65+	\$1,683	\$3,637	\$2,530	\$3,998			
	\$30 Conavment Plan					\$50 Conavment Plan											

	\$3U (Jopayme	nt Plan		\$50 Copayment Plan						
Age	EE only	EE+S	EE+C	EE+S+C	Age	EE only	EE+S	EE+C	EE+S+C		
<30	\$465	\$1,299	\$1,278	\$1,808	<30	\$423	\$1,182	\$1,162	\$1,645		
30–39	\$514	\$1,397	\$1,314	\$1,999	30–39	\$468	\$1,271	\$1,196	\$1,819		
40–49	\$663	\$1,526	\$1,260	\$2,014	40-49	\$603	\$1,388	\$1,146	\$1,832		
50-54	\$863	\$1,794	\$1,423	\$2,293	50-54	\$785	\$1,632	\$1,295	\$2,086		
55–59	\$1,091	\$2,291	\$1,631	\$2,635	55–59	\$992	\$2,083	\$1,483	\$2,396		
60-64	\$1,345	\$2,555	\$1,799	\$2,983	60–64	\$1,224	\$2,325	\$1,637	\$2,714		
65+	\$1,526	\$3,297	\$2,294	\$3,624	65+	\$1,388	\$2,999	\$2,087	\$3,297		

Deductible HMO plans

\$3	30/\$1,000	Deductib	ole HMO F	Plan	\$3	30/\$1,500	Deductik	ole HMO F	Plan	\$40/\$2,000 Deductible HMO Plan					
Age	EE only	EE+S	EE+C	EE+S+C	Age	EE only	EE+S	EE+C	EE+S+C	Age	EE only	EE+S	EE+C	EE+S+C	
<30	\$391	\$1,071	\$885	\$1,290	<30	\$342	\$937	\$775	\$1,129	<30	\$316	\$866	\$716	\$1,044	
30–39	\$462	\$1,235	\$933	\$1,446	30–39	\$405	\$1,082	\$817	\$1,267	30–39	\$374	\$999	\$755	\$1,169	
40–49	\$625	\$1,275	\$977	\$1,620	40–49	\$547	\$1,116	\$856	\$1,418	40-49	\$505	\$1,031	\$790	\$1,310	
50-54	\$834	\$1,732	\$1,142	\$1,917	50-54	\$731	\$1,517	\$1,001	\$1,679	50-54	\$675	\$1,401	\$924	\$1,551	
55–59	\$1,036	\$2,154	\$1,343	\$2,361	55–59	\$907	\$1,886	\$1,176	\$2,067	55–59	\$838	\$1,742	\$1,086	\$1,910	
60–64	\$1,328	\$2,657	\$1,641	\$2,940	60–64	\$1,162	\$2,326	\$1,436	\$2,574	60-64	\$1,074	\$2,149	\$1,328	\$2,378	
65+	\$1,610	\$3,671	\$1,911	\$3,851	65+	\$1,410	\$3,215	\$1,673	\$3,373	65+	\$1,302	\$2,969	\$1,545	\$3,115	

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\$0/\$2,	000 Dedu	ctible HN	IO Plan w	ith HSA	\$0/\$3	,000 Dedu	ctible HN	IO Plan w	ith HSA	\$30/\$3,000 Deductible HMO Plan with HSA						
Age	EE only	EE+S	EE+C	EE+S+C	Age	EE only	EE+S	EE+C	EE+S+C	Age	EE only	EE+S	EE+C	EE+S+C		
<30	\$341	\$934	\$772	\$1,126	<30	\$277	\$759	\$627	\$915	<30	\$245	\$672	\$555	\$810		
30–39	\$403	\$1,077	\$814	\$1,261	30–39	\$328	\$876	\$662	\$1,025	30–39	\$290	\$775	\$585	\$907		
40-49	\$545	\$1,112	\$853	\$1,413	40-49	\$443	\$904	\$693	\$1,149	40-49	\$392	\$800	\$613	\$1,016		
50-54	\$728	\$1,511	\$997	\$1,673	50-54	\$592	\$1,229	\$811	\$1,360	50–54	\$524	\$1,087	\$717	\$1,203		
55–59	\$904	\$1,880	\$1,172	\$2,061	55–59	\$735	\$1,528	\$953	\$1,675	55–59	\$650	\$1,352	\$843	\$1,482		
60–64	\$1,158	\$2,318	\$1,431	\$2,565	60-64	\$941	\$1,884	\$1,163	\$2,085	60–64	\$833	\$1,667	\$1,030	\$1,845		
65+	\$1,405	\$3,204	\$1,667	\$3,361	65+	\$1,142	\$2,604	\$1,355	\$2,732	65+	\$1,010	\$2,303	\$1,199	\$2,416		

Deductible HMO plans with HRA plans

\$30/\$1	,500 Dedi	uctible HI	MO Plan v	vith HRA	\$30/\$	2,500 Ded	uctible H	MO Plan v	with HRA
	FF and a	FFIO	55.0	55.0.0	•	EE andar	55.0	55.0	55.0.0
Age	EE only	EE+S	EE+C	EE+S+C	Age	EE only	EE+S	EE+C	EE+S+C
<30	\$356	\$975	\$806	\$1,175	<30	\$319	\$873	\$722	\$1,052
30–39	\$421	\$1,124	\$849	\$1,316	30–3	9 \$376	\$1,006	\$759	\$1,178
40-49	\$569	\$1,161	\$890	\$1,475	40-4	9 \$509	\$1,039	\$796	\$1,320
50-54	\$760	\$1,577	\$1,041	\$1,746	50–5	4 \$680	\$1,412	\$931	\$1,563
55–59	\$943	\$1,961	\$1,223	\$2,150	55–5	9 \$844	\$1,755	\$1,094	\$1,924
60-64	\$1,208	\$2,418	\$1,493	\$2,676	60–6	4 \$1,082	\$2,165	\$1,337	\$2,396
65+	\$1,466	\$3,342	\$1,740	\$3,506	65+	\$1,312	\$2,992	\$1,557	\$3,139

RATES APPLY TO GROUPS WITH GRANDFATHERED PLANS Grandfathered Plans are not available to New Groups Existing Groups are not allowed to add Grandfathered Plans Existing Groups are not allowed to change a current Grandfather Plan to a different Grandfathered Plan

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Age is based on employee/subscriber	EE+C = eligible employee plus child(ren) (subscriber and child[ren] without spouse) EE+S+C = eligible employee plus spouse and child(ren) (subscriber and spouse and child[ren])



Grandfathered Medical Plan Rates

Copayment plans

	\$5 Copayment Plan					\$15 Copayment Plan						\$20 Copayment Plan					
Age	EE only	EE+S	EE+C	EE+S+C	Age	EE only	EE+S	EE+C	EE+S+C	Age	EE only	EE+S	EE+C	EE+S+C			
<30	\$723	\$2,020	\$1,986	\$2,811	<30	\$576	\$1,609	\$1,583	\$2,239	<30	\$539	\$1,505	\$1,480	\$2,094			
30–39	\$799	\$2,171	\$2,042	\$3,108	30–39	\$637	\$1,730	\$1,628	\$2,476	30–39	\$595	\$1,617	\$1,521	\$2,315			
40–49	\$1,031	\$2,372	\$1,959	\$3,130	40–49	\$821	\$1,889	\$1,560	\$2,493	40-49	\$768	\$1,767	\$1,459	\$2,332			
50-54	\$1,342	\$2,789	\$2,213	\$3,565	50-54	\$1,069	\$2,222	\$1,763	\$2,840	50-54	\$1,000	\$2,078	\$1,649	\$2,656			
55–59	\$1,696	\$3,561	\$2,535	\$4,096	55–59	\$1,351	\$2,837	\$2,020	\$3,263	55-59	\$1,263	\$2,652	\$1,888	\$3,050			
60–64	\$2,091	\$3,972	\$2,797	\$4,637	60–64	\$1,666	\$3,165	\$2,228	\$3,695	60-64	\$1,558	\$2,959	\$2,084	\$3,454			
65+	\$2,372	\$5,126	\$3,566	\$5,635	65+	\$1,890	\$4,084	\$2,841	\$4,490	65+	\$1,767	\$3,818	\$2,656	\$4,197			
	\$20 (Con avma	nt Plan		\$50 Consympt Blan												

	\$30 (Copayme	nt Plan		\$50 Copayment Plan						
Age	EE only	EE+S	EE+C	EE+S+C	Age	EE only	EE+S	EE+C	EE+S+C		
<30	\$488	\$1,364	\$1,341	\$1,898	<30	\$444	\$1,241	\$1,220	\$1,727		
30–39	\$540	\$1,467	\$1,380	\$2,100	30–39	\$491	\$1,334	\$1,255	\$1,909		
40–49	\$696	\$1,602	\$1,323	\$2,114	40-49	\$633	\$1,457	\$1,203	\$1,923		
50-54	\$906	\$1,884	\$1,494	\$2,408	50-54	\$824	\$1,713	\$1,359	\$2,190		
55–59	\$1,145	\$2,405	\$1,712	\$2,766	55–59	\$1,042	\$2,188	\$1,558	\$2,516		
60–64	\$1,413	\$2,684	\$1,890	\$3,133	60–64	\$1,285	\$2,441	\$1,719	\$2,850		
65+	\$1,602	\$3,462	\$2,408	\$3,806	65+	\$1,457	\$3,149	\$2,191	\$3,462		

Deductible HMO plans

\$3	30/\$1,000	Deductib	ole HMO F	Plan	\$	30/\$1,500	Deductib	ole HMO F	Plan	\$40/\$2,000 Deductible HMO Plan					
Age	EE only	EE+S	EE+C	EE+S+C	Age	EE only	EE+S	EE+C	EE+S+C	Age	EE only	EE+S	EE+C	EE+S+C	
<30	\$411	\$1,125	\$930	\$1,355	<30	\$360	\$985	\$814	\$1,187	<30	\$332	\$909	\$752	\$1,095	
30–39	\$485	\$1,296	\$979	\$1,517	30–39	\$425	\$1,135	\$858	\$1,329	30–39	\$392	\$1,048	\$792	\$1,227	
40–49	\$656	\$1,339	\$1,026	\$1,701	40–49	\$574	\$1,172	\$898	\$1,489	40-49	\$531	\$1,083	\$830	\$1,376	
50-54	\$876	\$1,819	\$1,200	\$2,014	50–54	\$767	\$1,593	\$1,050	\$1,763	50-54	\$709	\$1,472	\$971	\$1,629	
55–59	\$1,088	\$2,262	\$1,410	\$2,480	55–59	\$952	\$1,980	\$1,234	\$2,170	55–59	\$880	\$1,830	\$1,141	\$2,006	
60–64	\$1,394	\$2,790	\$1,723	\$3,087	60–64	\$1,220	\$2,442	\$1,508	\$2,702	60–64	\$1,127	\$2,256	\$1,393	\$2,496	
65+	\$1,691	\$3,855	\$2,007	\$4,044	65+	\$1,480	\$3,375	\$1,757	\$3,540	65+	\$1,367	\$3,118	\$1,622	\$3,271	

RATES APPLY TO GROUPS WITH GRANDFATHERED PLANS Grandfathered Plans are not available to New Groups Existing Groups are not allowed to add Grandfathered Plans Existing Groups are not allowed to change a current Grandfather Plan to a different Grandfathered Plan

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And is based on smalleness (subscriber	EE+C = eligible employee plus child(ren) (subscriber and child[ren] without spouse)
Age is based on employee/subscriber	EE+S+C = eligible employee plus spouse and child(ren) (subscriber and spouse and child[ren])

For effective dates January 1–December 1, 2023



Grandfathered Medical Plan Rates

HSA-qualified deductible HMO plans

\$0/\$2,	000 Dedu	ctible HM	IO Plan w	vith HSA	\$0/\$3,000 Deductible HMO Plan with HSA					\$30/\$3,000 Deductible HMO Plan with HSA					
Age	EE only	EE+S	EE+C	EE+S+C	Age	EE only	EE+S	EE+C	EE+S+C	Age	EE only	EE+S	EE+C	EE+S+C	
<30	\$358	\$981	\$811	\$1,182	<30	\$291	\$797	\$659	\$960	<30	\$258	\$706	\$584	\$851	
30–39	\$423	\$1,131	\$854	\$1,324	30–39	\$344	\$919	\$694	\$1,076	30–39	\$304	\$813	\$614	\$952	
40-49	\$572	\$1,168	\$895	\$1,484	40-49	\$465	\$949	\$727	\$1,206	40-49	\$412	\$840	\$644	\$1,067	
50-54	\$764	\$1,587	\$1,046	\$1,757	50-54	\$621	\$1,290	\$851	\$1,428	50-54	\$550	\$1,142	\$753	\$1,264	
55–59	\$949	\$1,973	\$1,230	\$2,163	55–59	\$771	\$1,604	\$1,000	\$1,758	55–59	\$683	\$1,420	\$885	\$1,556	
60–64	\$1,216	\$2,434	\$1,503	\$2,693	60–64	\$989	\$1,979	\$1,222	\$2,190	60–64	\$875	\$1,751	\$1,082	\$1,937	
65+	\$1,475	\$3,363	\$1,751	\$3,528	65+	\$1,199	\$2,734	\$1,423	\$2,868	65+	\$1,061	\$2,419	\$1,259	\$2,538	

Deductible HMO plans with HRA plans

\$30/\$1	,500 Dedu	uctible HI	MO Plan v	with HRA	\$30/\$2	,500 Dedi	uctible HI	MO Plan v	vith HRA
		== . 0	==.0	==			== . 0	==.0	==
Age	EE only	EE+S	EE+C	EE+S+C	Age	EE only	EE+S	EE+C	EE+S+C
<30	\$374	\$1,024	\$846	\$1,234	<30	\$335	\$917	\$758	\$1,105
30–39	\$442	\$1,181	\$892	\$1,382	30–39	\$395	\$1,056	\$798	\$1,236
40–49	\$597	\$1,219	\$934	\$1,549	40-49	\$535	\$1,091	\$837	\$1,386
50-54	\$798	\$1,656	\$1,093	\$1,833	50-54	\$714	\$1,482	\$978	\$1,641
55–59	\$990	\$2,059	\$1,284	\$2,257	55–59	\$886	\$1,843	\$1,149	\$2,020
60-64	\$1,269	\$2,540	\$1,569	\$2,810	60–64	\$1,136	\$2,273	\$1,404	\$2,515
65+	\$1,539	\$3,509	\$1,826	\$3,681	65+	\$1,378	\$3,142	\$1,635	\$3,296

RATES APPLY TO GROUPS WITH GRANDFATHERED PLANS Grandfathered Plans are not available to New Groups Existing Groups are not allowed to add Grandfathered Plans Existing Groups are not allowed to change a current Grandfather Plan to a different Grandfathered Plan

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Grandfathered Medical Plan Rates

Copayment plans

	\$5 Copayment Plan				\$15 Copayment Plan						\$20 Copayment Plan					
Age	EE only	EE+S	EE+C	EE+S+C	Age	EE only	EE+S	EE+C	EE+S+C	Age	EE only	EE+S	EE+C	EE+S+C		
<30	\$758	\$2,117	\$2,082	\$2,946	<30	\$604	\$1,687	\$1,659	\$2,347	<30	\$564	\$1,576	\$1,550	\$2,193		
30–39	\$837	\$2,274	\$2,140	\$3,255	30–39	\$667	\$1,812	\$1,705	\$2,594	30–39	\$624	\$1,695	\$1,594	\$2,426		
40–49	\$1,080	\$2,485	\$2,052	\$3,279	40–49	\$860	\$1,979	\$1,634	\$2,612	40–49	\$805	\$1,851	\$1,529	\$2,443		
50-54	\$1,406	\$2,922	\$2,318	\$3,735	50-54	\$1,120	\$2,328	\$1,847	\$2,976	50-54	\$1,047	\$2,176	\$1,727	\$2,782		
55–59	\$1,776	\$3,730	\$2,655	\$4,290	55–59	\$1,415	\$2,972	\$2,115	\$3,418	55–59	\$1,323	\$2,779	\$1,978	\$3,196		
60–64	\$2,191	\$4,162	\$2,930	\$4,859	60–64	\$1,746	\$3,316	\$2,335	\$3,871	60–64	\$1,632	\$3,100	\$2,183	\$3,619		
65+	\$2,485	\$5,370	\$3,736	\$5,903	65+	\$1,980	\$4,279	\$2,977	\$4,704	65+	\$1,851	\$4,000	\$2,783	\$4,397		
	\$20 (Consuma	nt Plan			\$50 C	`opavmo	nt Plan								

	\$3U (copayme	nt Plan			\$50 C	copayme	nt Plan	
Age	EE only	EE+S	EE+C	EE+S+C	Age	EE only	EE+S	EE+C	EE+S+C
<30	\$512	\$1,430	\$1,406	\$1,990	<30	\$466	\$1,301	\$1,279	\$1,810
30–39	\$565	\$1,536	\$1,445	\$2,199	30–39	\$514	\$1,397	\$1,314	\$2,000
40–49	\$729	\$1,678	\$1,386	\$2,215	40–49	\$664	\$1,527	\$1,261	\$2,015
50-54	\$949	\$1,973	\$1,565	\$2,522	50-54	\$864	\$1,796	\$1,425	\$2,295
55–59	\$1,200	\$2,520	\$1,794	\$2,898	55–59	\$1,092	\$2,293	\$1,632	\$2,637
60–64	\$1,480	\$2,811	\$1,979	\$3,281	60-64	\$1,346	\$2,557	\$1,800	\$2,985
65+	\$1,678	\$3,627	\$2,523	\$3,987	65+	\$1,527	\$3,300	\$2,295	\$3,628

Deductible HMO plans

\$3	\$30/\$1,000 Deductible HMO Plan				\$30/\$1,500 Deductible HMO Plan						\$40/\$2,000 Deductible HMO Plan					
Age	EE only	EE+S	EE+C	EE+S+C	Age	EE only	EE+S	EE+C	EE+S+C	Age	EE only	EE+S	EE+C	EE+S+C		
<30	\$430	\$1,178	\$974	\$1,419	<30	\$377	\$1,032	\$853	\$1,243	<30	\$348	\$953	\$788	\$1,148		
30–39	\$508	\$1,358	\$1,026	\$1,590	30–39	\$445	\$1,189	\$898	\$1,392	30–39	\$411	\$1,098	\$830	\$1,286		
40–49	\$687	\$1,402	\$1,075	\$1,781	40–49	\$602	\$1,228	\$941	\$1,560	40–49	\$556	\$1,135	\$870	\$1,442		
50-54	\$918	\$1,906	\$1,257	\$2,110	50-54	\$804	\$1,669	\$1,101	\$1,848	50-54	\$742	\$1,541	\$1,016	\$1,706		
55–59	\$1,140	\$2,370	\$1,478	\$2,598	55–59	\$998	\$2,075	\$1,294	\$2,275	55–59	\$922	\$1,917	\$1,195	\$2,101		
60–64	\$1,460	\$2,922	\$1,805	\$3,233	60–64	\$1,279	\$2,559	\$1,581	\$2,832	60-64	\$1,181	\$2,364	\$1,460	\$2,616		
65+	\$1,771	\$4,038	\$2,102	\$4,236	65+	\$1,551	\$3,536	\$1,841	\$3,709	65+	\$1,433	\$3,267	\$1,701	\$3,427		

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For effective dates January 1–December 1, 2023



Grandfathered Medical Plan Rates

HSA-qualified deductible HMO plans

\$0/\$2,	000 Dedu	ctible HN	IO Plan w	vith HSA	\$0/\$3,000 Deductible HMO Plan with HSA					\$30/\$3,000 Deductible HMO Plan with HSA					
Age	EE only	EE+S	EE+C	EE+S+C	Age	EE only	EE+S	EE+C	EE+S+C	Age	EE only	EE+S	EE+C	EE+S+C	
<30	\$375	\$1,028	\$849	\$1,239	<30	\$305	\$835	\$691	\$1,006	<30	\$270	\$739	\$611	\$891	
30–39	\$443	\$1,185	\$895	\$1,387	30–39	\$360	\$963	\$727	\$1,127	30–39	\$319	\$852	\$644	\$997	
40-49	\$600	\$1,224	\$938	\$1,555	40-49	\$487	\$994	\$762	\$1,263	40-49	\$431	\$880	\$674	\$1,118	
50-54	\$801	\$1,663	\$1,097	\$1,841	50-54	\$651	\$1,351	\$891	\$1,496	50-54	\$576	\$1,196	\$789	\$1,324	
55–59	\$994	\$2,067	\$1,289	\$2,266	55–59	\$808	\$1,680	\$1,048	\$1,842	55–59	\$715	\$1,487	\$927	\$1,630	
60–64	\$1,274	\$2,550	\$1,575	\$2,822	60–64	\$1,036	\$2,073	\$1,281	\$2,294	60–64	\$916	\$1,834	\$1,132	\$2,029	
65+	\$1,545	\$3,523	\$1,834	\$3,696	65+	\$1,256	\$2,864	\$1,491	\$3,004	65+	\$1,111	\$2,534	\$1,319	\$2,658	

Deductible HMO plans with HRA plans

\$30/\$1	,500 Dedu	uctible HI	MO Plan v	with HRA	\$30/\$2	2,500 Ded	uctible HI	MO Plan v	with HRA
Age	EE only	EE+S	EE+C	EE+S+C	Age	EE only	EE+S	EE+C	EE+S+C
<30	\$392	\$1,073	\$887	\$1,293	<30	\$351	\$961	\$794	\$1,158
30–39	\$463	\$1,237	\$934	\$1,448	30–39	\$414	\$1,107	\$836	\$1,296
40–49	\$626	\$1,277	\$979	\$1,622	40-49	\$560	\$1,143	\$876	\$1,452
50-54	\$836	\$1,735	\$1,145	\$1,921	50-54	\$748	\$1,553	\$1,024	\$1,719
55–59	\$1,037	\$2,157	\$1,345	\$2,364	55–59	\$929	\$1,931	\$1,204	\$2,117
60-64	\$1,329	\$2,660	\$1,643	\$2,943	60-64	\$1,190	\$2,382	\$1,471	\$2,636
65+	\$1,612	\$3,676	\$1,913	\$3,856	65+	\$1,443	\$3,291	\$1,713	\$3,452

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