

## **Copayment plans**

_	\$5 0	Copaymen	t 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	\$648	\$1,810	\$1,780	\$2,519	<30	\$516	\$1,442	\$1,418	\$2,007	<30	\$483	\$1,348	\$1,326	\$1,876	
30–39	\$716	\$1,945	\$1,830	\$2,784	30–39	\$570	\$1,549	\$1,457	\$2,217	30–39	\$533	\$1,449	\$1,363	\$2,074	
40-49	\$923	\$2,124	\$1,754	\$2,803	40-49	\$736	\$1,693	\$1,398	\$2,234	40-49	\$688	\$1,583	\$1,307	\$2,089	
50-54	\$1,202	\$2,498	\$1,982	\$3,193	50-54	\$958	\$1,991	\$1,580	\$2,545	50-54	\$895	\$1,861	\$1,476	\$2,379	
55-59	\$1,519	\$3,190	\$2,271	\$3,669	55-59	\$1,210	\$2,541	\$1,809	\$2,923	55-59	\$1,131	\$2,376	\$1,691	\$2,733	
60-64	\$1,873	\$3,558	\$2,505	\$4,154	60-64	\$1,492	\$2,835	\$1,996	\$3,309	60-64	\$1,395	\$2,650	\$1,866	\$3,094	
65+	\$2,124	\$4,591	\$3,193	\$5,047	65+	\$1,693	\$3,658	\$2,545	\$4,021	65+	\$1,583	\$3,420	\$2,380	\$3,760	

	\$30	Copayme	nt Plan			\$50	Copaymer	nt Plan	
٨٣٥	EE only	EE+S	EE+C	EE+S+C	Ago	EE only	EE+S	EE+C	EE+S+C
Age	EE Only	EETO	EETC	EETOTO	Age	EE Only	EETO	EETC	EETOTU
<30	\$438	\$1,223	\$1,202	\$1,702	<30	\$398	\$1,112	\$1,093	\$1,547
30–39	\$483	\$1,313	\$1,235	\$1,880	30–39	\$440	\$1,195	\$1,124	\$1,710
40-49	\$624	\$1,435	\$1,185	\$1,894	40-49	\$567	\$1,305	\$1,078	\$1,722
50-54	\$812	\$1,688	\$1,339	\$2,157	50-54	\$738	\$1,534	\$1,217	\$1,961
55–59	\$1,026	\$2,154	\$1,534	\$2,477	55-59	\$933	\$1,959	\$1,395	\$2,253
60-64	\$1,265	\$2,403	\$1,692	\$2,805	60-64	\$1,151	\$2,186	\$1,539	\$2,552
65+	\$1,435	\$3,101	\$2,157	\$3,409	65+	\$1,305	\$2,821	\$1,962	\$3,101

## **Deductible HMO plans**

	\$30/\$1,000	Deductib	le HMO P	lan		\$30/\$1,50	\$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	\$368	\$1,008	\$833	\$1,214	<30	\$322	\$882	\$729	\$1,063	<30	\$297	\$814	\$673	\$981				
30–39	\$435	\$1,162	\$878	\$1,360	30–39	\$380	\$1,016	\$768	\$1,190	30–39	\$351	\$939	\$709	\$1,099				
40-49	\$588	\$1,200	\$919	\$1,524	40-49	\$514	\$1,049	\$804	\$1,333	40-49	\$475	\$970	\$743	\$1,232				
50-54	\$785	\$1,630	\$1,075	\$1,804	50-54	\$687	\$1,426	\$941	\$1,579	50-54	\$635	\$1,318	\$870	\$1,459				
55–59	\$974	\$2,026	\$1,263	\$2,221	55–59	\$853	\$1,774	\$1,106	\$1,945	55–59	\$788	\$1,639	\$1,022	\$1,797				
60–64	\$1,249	\$2,499	\$1,544	\$2,765	60-64	\$1,093	\$2,188	\$1,351	\$2,421	60–64	\$1,010	\$2,021	\$1,248	\$2,236				
65+	\$1,514	\$3,453	\$1,797	\$3,622	65+	\$1,326	\$3,023	\$1,574	\$3,171	65+	\$1,225	\$2,793	\$1,454	\$2,930				

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) 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, 2024	•	Small Business

For effective dates January 1–December 1, 2024



#### HSA-qualified deductible HMO plans

\$0/\$	2,000 Dedi	uctible HM	O Plan wi	th HSA	\$0/\$3,200 Deductible Plan with HSA Option						\$30/\$3,200 Deductible Plan with HSA Option					
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	\$321	\$879	\$727	\$1,059	<30	\$261	\$715	\$591	\$861	<30	\$231	\$632	\$523	\$762		
30–39	\$379	\$1,013	\$765	\$1,186	30-39	\$308	\$823	\$622	\$964	30-3	<b>9</b> \$273	\$729	\$551	\$853		
40-49	\$513	\$1,047	\$802	\$1,330	40-49	\$417	\$851	\$652	\$1,081	40-4	<b>9</b> \$369	\$753	\$577	\$957		
50-54	\$685	\$1,422	\$938	\$1,574	50-54	\$557	\$1,156	\$763	\$1,280	50-5	<b>4</b> \$492	\$1,022	\$674	\$1,131		
55-59	\$850	\$1,768	\$1,102	\$1,938	55-59	\$691	\$1,437	\$896	\$1,575	55-5	<b>9</b> \$611	\$1,271	\$792	\$1,393		
60-64	\$1,089	\$2,180	\$1,346	\$2,412	60-64	\$885	\$1,772	\$1,094	\$1,961	60–6	<b>4</b> \$783	\$1,568	\$968	\$1,735		
65+	\$1,321	\$3,013	\$1,568	\$3,161	65+	\$1,074	\$2,449	\$1,275	\$2,569	65+	\$950	\$2,167	\$1,128	\$2,273		

## Deductible HMO plans with HRA plans

\$30/\$	51,500 Ded	uctible HM	/IO Plan w	ith HRA	11	\$30/\$	2,500 Ded	uctible HM	IO Plan w	ith HRA
-					11	-				
Age	EE only	EE+S	EE+C	EE+S+C		Age	EE only	EE+S	EE+C	EE+S+C
<30	\$335	\$917	\$758	\$1,105		<30	\$300	\$821	\$679	\$989
30–39	\$396	\$1,058	\$799	\$1,238		30–39	\$354	\$946	\$715	\$1,108
40-49	\$535	\$1,092	\$837	\$1,387		40–49	\$479	\$977	\$749	\$1,241
50-54	\$714	\$1,483	\$978	\$1,642		50-54	\$639	\$1,327	\$875	\$1,469
55-59	\$887	\$1,844	\$1,150	\$2,021		55–59	\$794	\$1,651	\$1,029	\$1,810
60-64	\$1,137	\$2,275	\$1,405	\$2,517		60–64	\$1,017	\$2,036	\$1,257	\$2,253
65+	\$1,379	\$3,144	\$1,636	\$3,298		65+	\$1,234	\$2,814	\$1,465	\$2,952

Employee/Dependent Codes Age is based on employee/subscriber	EE only = eligible employee only (subscriber) EE+S = eligible employee plus spouse (subscriber and spouse) 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, 2024		Small Business



## **Copayment plans**

_	\$5 C	Copaymen	t 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	\$684	\$1,910	\$1,878	\$2,658	<30	\$545	\$1,522	\$1,497	\$2,118	<30	\$509	\$1,422	\$1,399	\$1,979	
30–39	\$756	\$2,053	\$1,932	\$2,938	30–39	\$602	\$1,636	\$1,539	\$2,342	30–39	\$563	\$1,529	\$1,439	\$2,189	
40-49	\$975	\$2,243	\$1,852	\$2,960	40-49	\$777	\$1,787	\$1,476	\$2,358	40-49	\$726	\$1,670	\$1,379	\$2,204	
50-54	\$1,269	\$2,637	\$2,093	\$3,371	50-54	\$1,011	\$2,101	\$1,667	\$2,686	50-54	\$945	\$1,964	\$1,559	\$2,511	
55-59	\$1,603	\$3,366	\$2,396	\$3,871	55-59	\$1,277	\$2,682	\$1,909	\$3,085	55-59	\$1,194	\$2,508	\$1,785	\$2,885	
60-64	\$1,977	\$3,755	\$2,644	\$4,384	60-64	\$1,575	\$2,992	\$2,107	\$3,493	60-64	\$1,473	\$2,798	\$1,970	\$3,266	
65+	\$2,242	\$4,846	\$3,371	\$5,327	65+	\$1,787	\$3,861	\$2,686	\$4,244	65+	\$1,671	\$3,611	\$2,512	\$3,970	

	\$30	Copaymer	nt Plan			\$50	Copaymer	nt Plan	
Age	EE only	EE+S	EE+C	EE+S+C	Age	EE only	EE+S	EE+C	EE+S+C
<30	\$462	\$1,290	\$1,269	\$1,795	<30	\$420	\$1,173	\$1,154	\$1,633
30–39	\$510	\$1,386	\$1,304	\$1,984	30–39	\$464	\$1,261	\$1,186	\$1,805
40-49	\$658	\$1,514	\$1,250	\$1,998	40-49	\$599	\$1,378	\$1,138	\$1,819
50-54	\$857	\$1,781	\$1,413	\$2,277	50-54	\$779	\$1,620	\$1,285	\$2,071
55-59	\$1,083	\$2,274	\$1,619	\$2,615	55-59	\$985	\$2,069	\$1,472	\$2,380
60-64	\$1,336	\$2,537	\$1,787	\$2,962	60-64	\$1,215	\$2,308	\$1,625	\$2,694
65+	\$1,515	\$3,274	\$2,277	\$3,599	65+	\$1,378	\$2,978	\$2,072	\$3,274

## **Deductible HMO plans**

	\$30/\$1,000	Deductib	le HMO P	lan	\$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	\$388	\$1,063	\$879	\$1,281	<30	\$340	\$931	\$770	\$1,122	<30	\$314	\$860	\$711	\$1,036		
30–39	\$459	\$1,226	\$926	\$1,435	30–39	\$402	\$1,074	\$811	\$1,257	30–39	\$371	\$991	\$749	\$1,160		
40-49	\$620	\$1,266	\$970	\$1,608	40-49	\$543	\$1,108	\$849	\$1,408	40–49	\$502	\$1,024	\$785	\$1,301		
50-54	\$828	\$1,719	\$1,134	\$1,903	50-54	\$725	\$1,505	\$993	\$1,666	50-54	\$670	\$1,391	\$918	\$1,540		
55–59	\$1,028	\$2,138	\$1,333	\$2,344	55–59	\$900	\$1,872	\$1,167	\$2,052	55–59	\$832	\$1,730	\$1,079	\$1,896		
60–64	\$1,318	\$2,638	\$1,629	\$2,919	60–64	\$1,154	\$2,309	\$1,426	\$2,555	60–64	\$1,066	\$2,133	\$1,318	\$2,360		
65+	\$1,599	\$3,645	\$1,898	\$3,824	65+	\$1,400	\$3,192	\$1,661	\$3,348	65+	\$1,293	\$2,948	\$1,534	\$3,093		

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) 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, 2024		Small Business



#### HSA-qualified deductible HMO plans

\$0/\$	2,000 Dedi	uctible HM	O Plan wi	th HSA	\$0/\$3,200 Deductible Plan with HSA Option						\$30/\$3,200 Deductible Plan with HSA Option						
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	\$339	\$928	\$767	\$1,118	<30	\$275	\$754	\$623	\$909	<30	\$244	\$668	\$552	\$805			
30–39	\$400	\$1,069	\$808	\$1,252	30–39	\$325	\$869	\$656	\$1,017	30–3	9 \$288	\$769	\$581	\$900			
40-49	\$541	\$1,104	\$846	\$1,403	40-49	\$440	\$898	\$688	\$1,141	40-4	<b>9</b> \$389	\$794	\$609	\$1,009			
50-54	\$723	\$1,501	\$990	\$1,662	50-54	\$587	\$1,219	\$804	\$1,350	50-5	<b>4</b> \$520	\$1,079	\$712	\$1,195			
55–59	\$897	\$1,866	\$1,163	\$2,045	55-59	\$729	\$1,516	\$945	\$1,662	55–5	<b>9</b> \$645	\$1,342	\$836	\$1,471			
60–64	\$1,150	\$2,301	\$1,422	\$2,546	60-64	\$935	\$1,871	\$1,156	\$2,070	60–6	4 \$827	\$1,655	\$1,022	\$1,831			
65+	\$1,395	\$3,181	\$1,656	\$3,337	65+	\$1,134	\$2,585	\$1,346	\$2,712	65+	\$1,003	\$2,287	\$1,190	\$2,399			

## Deductible HMO plans with HRA plans

\$30/\$	51,500 Ded	uctible HM	/IO Plan w	ith HRA	\$30/\$	2,500 Ded	uctible HM	IO Plan w	vith HRA
-					-				
Age	EE only	EE+S	EE+C	EE+S+C	Age	EE only	EE+S	EE+C	EE+S+C
<30	\$353	\$968	\$800	\$1,166	<30	\$316	\$866	\$716	\$1,044
30–39	\$418	\$1,116	\$843	\$1,306	30–39	\$374	\$999	\$755	\$1,169
40-49	\$565	\$1,153	\$883	\$1,465	40–49	\$505	\$1,031	\$790	\$1,310
50-54	\$754	\$1,565	\$1,033	\$1,733	50-54	\$675	\$1,401	\$924	\$1,551
55-59	\$936	\$1,947	\$1,214	\$2,134	55–59	\$838	\$1,743	\$1,086	\$1,911
60-64	\$1,200	\$2,401	\$1,483	\$2,657	60–64	\$1,074	\$2,149	\$1,328	\$2,378
65+	\$1,455	\$3,318	\$1,727	\$3,481	65+	\$1,303	\$2,971	\$1,546	\$3,117

Employee/Dependent Codes Age is based on employee/subscriber	EE only = eligible employee only (subscriber) EE+S = eligible employee plus spouse (subscriber and spouse) 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, 2024		Small Business



## **Copayment plans**

_	\$5 0	Copaymen	t 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	\$720	\$2,011	\$1,977	\$2,798	<30	\$573	\$1,601	\$1,575	\$2,228	<30	\$536	\$1,498	\$1,473	\$2,085		
30–39	\$795	\$2,161	\$2,032	\$3,093	30–39	\$634	\$1,722	\$1,620	\$2,465	30–39	\$592	\$1,609	\$1,514	\$2,303		
40-49	\$1,026	\$2,360	\$1,949	\$3,115	40-49	\$817	\$1,880	\$1,553	\$2,481	40-49	\$764	\$1,758	\$1,452	\$2,320		
50-54	\$1,335	\$2,775	\$2,202	\$3,547	50-54	\$1,064	\$2,212	\$1,755	\$2,827	50-54	\$995	\$2,068	\$1,641	\$2,643		
55-59	\$1,688	\$3,544	\$2,523	\$4,076	55–59	\$1,345	\$2,824	\$2,010	\$3,248	55-59	\$1,257	\$2,640	\$1,879	\$3,036		
60-64	\$2,081	\$3,953	\$2,783	\$4,615	60–64	\$1,658	\$3,150	\$2,218	\$3,677	60-64	\$1,550	\$2,945	\$2,073	\$3,438		
65+	\$2,360	\$5,101	\$3,548	\$5,608	65+	\$1,881	\$4,065	\$2,828	\$4,469	65+	\$1,758	\$3,800	\$2,643	\$4,177		

	\$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	\$486	\$1,358	\$1,335	\$1,890	<30	\$442	\$1,235	\$1,215	\$1,719			
30–39	\$537	\$1,459	\$1,373	\$2,089	30–39	\$489	\$1,328	\$1,249	\$1,901			
40-49	\$693	\$1,594	\$1,317	\$2,104	40-49	\$630	\$1,450	\$1,197	\$1,914			
50-54	\$902	\$1,875	\$1,488	\$2,397	50-54	\$820	\$1,705	\$1,353	\$2,179			
55–59	\$1,140	\$2,394	\$1,704	\$2,753	55-59	\$1,037	\$2,178	\$1,550	\$2,505			
60-64	\$1,406	\$2,671	\$1,880	\$3,118	60-64	\$1,279	\$2,429	\$1,710	\$2,836			
65+	\$1,594	\$3,445	\$2,397	\$3,787	65+	\$1,450	\$3,134	\$2,180	\$3,445			

## **Deductible HMO plans**

	\$30/\$1,000	Deductib	le HMO P	lan		\$30/\$1,50	0 Deductib	le HMO PI	\$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	\$409	\$1,120	\$925	\$1,349	<30	\$358	\$980	\$810	\$1,181	<30	\$331	\$906	\$749	\$1,092
30–39	\$483	\$1,291	\$975	\$1,511	30–39	\$423	\$1,130	\$854	\$1,323	30–39	\$390	\$1,043	\$788	\$1,221
40-49	\$653	\$1,333	\$1,021	\$1,693	40-49	\$572	\$1,167	\$894	\$1,483	40-49	\$528	\$1,078	\$826	\$1,370
50-54	\$872	\$1,810	\$1,194	\$2,004	50-54	\$763	\$1,585	\$1,045	\$1,755	50-54	\$705	\$1,464	\$966	\$1,621
55–59	\$1,083	\$2,252	\$1,404	\$2,468	55-59	\$948	\$1,971	\$1,229	\$2,161	55–59	\$876	\$1,821	\$1,136	\$1,996
60–64	\$1,387	\$2,776	\$1,715	\$3,072	60-64	\$1,215	\$2,431	\$1,502	\$2,690	60–64	\$1,122	\$2,246	\$1,387	\$2,485
65+	\$1,683	\$3,837	\$1,997	\$4,025	65+	\$1,473	\$3,359	\$1,748	\$3,524	65+	\$1,361	\$3,103	\$1,615	\$3,255

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Age is based on employee/subscriber	EE+S+C = eligible employee plus spouse and child(ren) (subscriber and spouse and child[ren])	
For officiative datas, lanuary 1, December 1, 2021	-	Small Business

For effective dates January 1–December 1, 2024



#### HSA-qualified deductible HMO plans

\$0/\$	2,000 Dedi	uctible HM	O Plan wi	ith HSA	\$0/\$3,200 Deductible Plan with HSA Option						\$30/\$3,200 Deductible Plan with HSA Option					
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	\$357	\$977	\$808	\$1,177	<30	\$290	\$794	\$656	\$957	<30	\$256	\$702	\$580	\$846		
30–39	\$421	\$1,126	\$850	\$1,318	30-39	\$342	\$915	\$691	\$1,071	30–3	<b>9</b> \$303	\$810	\$612	\$948		
40-49	\$570	\$1,163	\$891	\$1,477	40-49	\$463	\$945	\$724	\$1,201	40-4	<b>9</b> \$410	\$836	\$641	\$1,062		
50-54	\$761	\$1,580	\$1,042	\$1,749	50-54	\$618	\$1,283	\$846	\$1,420	50-5	<b>4</b> \$547	\$1,136	\$749	\$1,258		
55-59	\$945	\$1,965	\$1,225	\$2,154	55-59	\$768	\$1,597	\$996	\$1,751	55-5	<b>9</b> \$679	\$1,412	\$880	\$1,548		
60-64	\$1,210	\$2,422	\$1,496	\$2,680	60-64	\$984	\$1,969	\$1,216	\$2,179	60-6	<b>4</b> \$871	\$1,743	\$1,077	\$1,929		
65+	\$1,468	\$3,348	\$1,742	\$3,512	65+	\$1,193	\$2,721	\$1,416	\$2,854	65+	\$1,056	\$2,408	\$1,253	\$2,526		

### Deductible HMO plans with HRA plans

\$30/\$	\$1,500 Ded	luctible HN	IO Plan w	ith HRA		\$30/\$	2,500 Ded	uctible HN	IO Plan w	vith HRA
A	FF and a	55.0	55.0	55.0.0	IJ		FF and a	FF : 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	\$372	\$1,019	\$842	\$1,228		<30	\$333	\$912	\$754	\$1,099
30–39	\$439	\$1,174	\$887	\$1,374		30–39	\$393	\$1,051	\$794	\$1,230
40-49	\$594	\$1,213	\$929	\$1,541		40–49	\$532	\$1,086	\$832	\$1,380
50-54	\$794	\$1,648	\$1,087	\$1,824		50-54	\$711	\$1,476	\$974	\$1,634
55-59	\$985	\$2,049	\$1,277	\$2,246		55–59	\$882	\$1,834	\$1,144	\$2,010
60-64	\$1,263	\$2,528	\$1,561	\$2,797		60-64	\$1,130	\$2,262	\$1,397	\$2,503
65+	\$1,532	\$3,493	\$1,818	\$3,664		65+	\$1,371	\$3,126	\$1,627	\$3,279

Employee/Dependent Codes Age is based on employee/subscriber	EE only = eligible employee only (subscriber) EE+S = eligible employee plus spouse (subscriber and spouse) 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, 2024		Small Business



## **Copayment plans**

_	\$5 0	Copaymen	t 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	\$756	\$2,111	\$2,076	\$2,938	<30	\$602	\$1,682	\$1,654	\$2,341	<30	\$563	\$1,573	\$1,547	\$2,189		
30–39	\$835	\$2,269	\$2,134	\$3,248	30–39	\$665	\$1,807	\$1,700	\$2,587	30–39	\$622	\$1,690	\$1,590	\$2,419		
40-49	\$1,077	\$2,478	\$2,046	\$3,270	40-49	\$858	\$1,974	\$1,630	\$2,605	40-49	\$802	\$1,846	\$1,524	\$2,436		
50-54	\$1,402	\$2,914	\$2,312	\$3,725	50-54	\$1,117	\$2,322	\$1,842	\$2,968	50-54	\$1,044	\$2,171	\$1,722	\$2,775		
55–59	\$1,772	\$3,721	\$2,649	\$4,280	55–59	\$1,412	\$2,965	\$2,111	\$3,410	55-59	\$1,320	\$2,772	\$1,973	\$3,188		
60–64	\$2,185	\$4,151	\$2,922	\$4,846	60–64	\$1,741	\$3,307	\$2,329	\$3,861	60-64	\$1,628	\$3,092	\$2,177	\$3,610		
65+	\$2,478	\$5,356	\$3,726	\$5,888	65+	\$1,975	\$4,268	\$2,969	\$4,692	65+	\$1,846	\$3,990	\$2,775	\$4,386		

	\$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	\$510	\$1,425	\$1,402	\$1,983	<30	\$464	\$1,297	\$1,275	\$1,805			
30–39	\$564	\$1,532	\$1,442	\$2,193	30-3	<b>9</b> \$513	\$1,394	\$1,311	\$1,995			
40-49	\$728	\$1,674	\$1,383	\$2,209	40-4	<b>9</b> \$662	\$1,523	\$1,258	\$2,010			
50-54	\$947	\$1,968	\$1,562	\$2,516	50-5	<b>4</b> \$861	\$1,790	\$1,420	\$2,288			
55–59	\$1,197	\$2,513	\$1,789	\$2,890	55-5	<b>9</b> \$1,089	\$2,287	\$1,628	\$2,630			
60-64	\$1,476	\$2,804	\$1,974	\$3,273	60-6	<b>4</b> \$1,343	\$2,551	\$1,796	\$2,978			
65+	\$1,674	\$3,618	\$2,517	\$3,977	65+	\$1,523	\$3,291	\$2,290	\$3,618			

## **Deductible HMO plans**

	\$30/\$1,000	Deductib	le HMO P	lan	\$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	\$429	\$1,175	\$971	\$1,416	<30	\$376	\$1,029	\$851	\$1,240	<30	\$347	\$950	\$786	\$1,145		
30–39	\$507	\$1,355	\$1,023	\$1,586	30–39	\$444	\$1,186	\$896	\$1,388	30–39	\$410	\$1,096	\$828	\$1,283		
40-49	\$686	\$1,400	\$1,073	\$1,778	40-49	\$600	\$1,225	\$939	\$1,556	40–49	\$554	\$1,131	\$867	\$1,437		
50-54	\$916	\$1,901	\$1,254	\$2,104	50-54	\$802	\$1,665	\$1,098	\$1,843	50-54	\$740	\$1,537	\$1,014	\$1,702		
55–59	\$1,137	\$2,364	\$1,474	\$2,591	55–59	\$995	\$2,069	\$1,290	\$2,268	55–59	\$919	\$1,911	\$1,192	\$2,095		
60–64	\$1,457	\$2,916	\$1,801	\$3,226	60–64	\$1,275	\$2,552	\$1,576	\$2,824	60–64	\$1,178	\$2,358	\$1,456	\$2,609		
65+	\$1,767	\$4,029	\$2,097	\$4,227	65+	\$1,547	\$3,527	\$1,836	\$3,700	65+	\$1,429	\$3,258	\$1,696	\$3,418		

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) 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, 2024		Small Business

For effective dates January 1–December 1, 2024



#### HSA-qualified deductible HMO plans

\$0/\$	2,000 Dedi	uctible HM	O Plan wi	th HSA	\$0/\$3,200 Deductible Plan with HSA Option						\$30/\$3,200 Deductible Plan with HSA Option					
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	\$374	\$1,025	\$847	\$1,235	<30	\$304	\$833	\$689	\$1,004	<30	\$269	\$737	\$609	\$888		
30–39	\$442	\$1,182	\$893	\$1,384	30–39	\$359	\$960	\$725	\$1,124	30–3	<b>9</b> \$318	\$850	\$642	\$995		
40-49	\$598	\$1,221	\$935	\$1,551	40-49	\$486	\$992	\$760	\$1,260	40-4	<b>9</b> \$430	\$878	\$673	\$1,115		
50-54	\$799	\$1,659	\$1,094	\$1,837	50-54	\$649	\$1,348	\$889	\$1,492	50-5	4 \$575	\$1,193	\$787	\$1,321		
55–59	\$992	\$2,063	\$1,286	\$2,261	55-59	\$806	\$1,676	\$1,045	\$1,837	55–5	<b>9</b> \$713	\$1,483	\$924	\$1,626		
60–64	\$1,271	\$2,544	\$1,571	\$2,815	60-64	\$1,033	\$2,067	\$1,277	\$2,287	60–6	<b>4</b> \$914	\$1,829	\$1,130	\$2,024		
65+	\$1,542	\$3,515	\$1,830	\$3,687	65+	\$1,253	\$2,857	\$1,487	\$2,997	65+	\$1,109	\$2,528	\$1,316	\$2,652		

## Deductible HMO plans with HRA plans

\$30/\$	51,500 Ded	luctible HM	/IO Plan w	ith HRA		\$30/\$	2,500 Ded	uctible H	IO Plan w	vith HRA
					11	_				
Age	EE only	EE+S	EE+C	EE+S+C		Age	EE only	EE+S	EE+C	EE+S+C
<30	\$391	\$1,070	\$885	\$1,289		<30	\$350	\$958	\$792	\$1,154
30–39	\$461	\$1,233	\$931	\$1,444		30–39	\$413	\$1,104	\$834	\$1,292
40-49	\$624	\$1,274	\$976	\$1,618		40–49	\$559	\$1,140	\$874	\$1,448
50-54	\$833	\$1,730	\$1,141	\$1,915		50-54	\$746	\$1,549	\$1,022	\$1,715
55-59	\$1,035	\$2,152	\$1,342	\$2,359		55–59	\$926	\$1,926	\$1,201	\$2,111
60-64	\$1,326	\$2,654	\$1,639	\$2,937		60–64	\$1,187	\$2,376	\$1,467	\$2,629
65+	\$1,608	\$3,667	\$1,908	\$3,847		65+	\$1,440	\$3,283	\$1,709	\$3,444

Employee/Dependent Codes	EE only = eligible employee only (subscriber) EE+S = eligible employee plus spouse (subscriber and spouse) 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, 2024		Small Business



## **Copayment plans**

	\$5 Copayment Plan					\$15	Copaymer	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	\$792	\$2,212	\$2,175	\$3,078	<30	\$631	\$1,762	\$1,733	\$2,452	<30	\$590	\$1,648	\$1,620	\$2,293
30–39	\$875	\$2,377	\$2,236	\$3,402	30–39	\$697	\$1,894	\$1,782	\$2,711	30–39	\$652	\$1,771	\$1,666	\$2,535
40-49	\$1,129	\$2,597	\$2,145	\$3,427	40-49	\$899	\$2,069	\$1,708	\$2,730	40-49	\$841	\$1,935	\$1,598	\$2,553
50-54	\$1,469	\$3,053	\$2,423	\$3,902	50-54	\$1,170	\$2,432	\$1,930	\$3,109	50-54	\$1,094	\$2,274	\$1,804	\$2,907
55-59	\$1,856	\$3,898	\$2,775	\$4,483	55-59	\$1,479	\$3,106	\$2,211	\$3,572	55-59	\$1,383	\$2,904	\$2,067	\$3,340
60-64	\$2,289	\$4,348	\$3,061	\$5,076	60–64	\$1,824	\$3,465	\$2,439	\$4,045	60-64	\$1,706	\$3,240	\$2,281	\$3,782
65+	\$2,596	\$5,611	\$3,903	\$6,168	65+	\$2,069	\$4,471	\$3,110	\$4,915	65+	\$1,934	\$4,180	\$2,908	\$4,595

	\$30	Copaymer	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	\$535	\$1,494	\$1,469	\$2,079	<30	\$486	\$1,358	\$1,336	\$1,890			
30–39	\$591	\$1,606	\$1,510	\$2,299	30–39	\$538	\$1,461	\$1,374	\$2,091			
40–49	\$762	\$1,754	\$1,448	\$2,315	40-49	\$693	\$1,595	\$1,317	\$2,105			
50-54	\$992	\$2,062	\$1,636	\$2,636	50-54	\$903	\$1,876	\$1,489	\$2,398			
55–59	\$1,254	\$2,633	\$1,874	\$3,028	55–59	\$1,141	\$2,396	\$1,705	\$2,756			
60-64	\$1,546	\$2,937	\$2,068	\$3,429	60–64	\$1,407	\$2,672	\$1,882	\$3,119			
65+	\$1,754	\$3,790	\$2,637	\$4,166	65+	\$1,595	\$3,447	\$2,398	\$3,789			

## **Deductible HMO plans**

	\$30/\$1,000	Deductib	le HMO P	lan		\$30/\$1,50	0 Deductib	le HMO PI	\$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	\$450	\$1,232	\$1,018	\$1,484	<30	\$394	\$1,078	\$891	\$1,299	<30	\$364	\$996	\$823	\$1,200
30–39	\$531	\$1,419	\$1,072	\$1,661	30–39	\$465	\$1,243	\$939	\$1,455	30–39	\$430	\$1,148	\$868	\$1,344
40-49	\$718	\$1,465	\$1,123	\$1,861	40-49	\$629	\$1,283	\$984	\$1,630	40–49	\$581	\$1,186	\$909	\$1,507
50-54	\$959	\$1,991	\$1,313	\$2,204	50-54	\$840	\$1,744	\$1,150	\$1,931	50-54	\$776	\$1,611	\$1,063	\$1,783
55–59	\$1,191	\$2,476	\$1,544	\$2,714	55–59	\$1,043	\$2,168	\$1,352	\$2,377	55–59	\$963	\$2,003	\$1,249	\$2,196
60–64	\$1,526	\$3,054	\$1,886	\$3,379	60–64	\$1,336	\$2,674	\$1,651	\$2,959	60–64	\$1,234	\$2,470	\$1,525	\$2,733
65+	\$1,851	\$4,221	\$2,197	\$4,428	65+	\$1,621	\$3,696	\$1,924	\$3,877	65+	\$1,497	\$3,413	\$1,777	\$3,580

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) 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 2024	•	Small Business

For effective dates January 1–December 1, 2024



#### HSA-qualified deductible HMO plans

\$0/\$	2,000 Dedi	uctible HM	O Plan wi	ith HSA	\$0/\$3,200 Deductible Plan with HSA Option						\$30/\$3,200 Deductible Plan with HSA Option					
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	\$392	\$1,074	\$888	\$1,294	<30	\$319	\$873	\$722	\$1,052	<30	\$282	\$772	\$638	\$930		
30–39	\$463	\$1,238	\$935	\$1,449	30–39	\$377	\$1,007	\$761	\$1,179	30–3	9 \$333	\$890	\$672	\$1,042		
40-49	\$627	\$1,279	\$980	\$1,625	40-49	\$509	\$1,039	\$796	\$1,320	40-4	<b>9</b> \$451	\$920	\$705	\$1,169		
50-54	\$837	\$1,738	\$1,146	\$1,924	50-54	\$680	\$1,412	\$931	\$1,563	50-5	<b>4</b> \$602	\$1,250	\$824	\$1,384		
55–59	\$1,039	\$2,161	\$1,347	\$2,369	55-59	\$844	\$1,756	\$1,094	\$1,925	55-5	<b>9</b> \$747	\$1,554	\$969	\$1,703		
60-64	\$1,332	\$2,665	\$1,646	\$2,949	60-64	\$1,082	\$2,166	\$1,338	\$2,397	60-6	<b>4</b> \$958	\$1,917	\$1,184	\$2,121		
65+	\$1,615	\$3,682	\$1,917	\$3,863	65+	\$1,313	\$2,993	\$1,558	\$3,140	65+	\$1,162	\$2,649	\$1,379	\$2,779		

## Deductible HMO plans with HRA plans

\$30/\$	\$1,500 Ded	luctible HM	/IO Plan w	ith HRA	\$30/\$2,500 Deductible HMO Plan with HRA							
Age	EE only	EE+S	EE+C	EE+S+C	Age	EE only	EE+S	EE+C	EE+S+C			
<30	\$409	\$1,121	\$926	\$1,351	<30	\$366	\$1,003	\$829	\$1,209			
30–39	\$483	\$1,292	\$975	\$1,513	30–39	\$433	\$1,157	\$874	\$1,354			
40-49	\$654	\$1,334	\$1,023	\$1,695	40–49	\$585	\$1,194	\$915	\$1,517			
50-54	\$873	\$1,813	\$1,196	\$2,007	50–54	\$782	\$1,623	\$1,071	\$1,797			
55-59	\$1,084	\$2,254	\$1,405	\$2,471	55–59	\$970	\$2,017	\$1,258	\$2,211			
60-64	\$1,389	\$2,780	\$1,717	\$3,076	60–64	\$1,244	\$2,489	\$1,538	\$2,754			
65+	\$1,685	\$3,842	\$2,000	\$4,030	65+	\$1,508	\$3,439	\$1,790	\$3,608			

Employee/Dependent Codes Age is based on employee/subscriber	EE only = eligible employee only (subscriber) EE+S = eligible employee plus spouse (subscriber and spouse) 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, 2024		Small Business