

Copayment plans

_	\$5 (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	\$521	\$1,456	\$1,432	\$2,026	<30	\$420	\$1,173	\$1,153	\$1,632	<30	\$382	\$1,067	\$1,049	\$1,485	
30–39	\$576	\$1,565	\$1,472	\$2,240	30–39	\$464	\$1,260	\$1,186	\$1,804	30–39	\$422	\$1,146	\$1,078	\$1,640	
40-49	\$743	\$1,709	\$1,412	\$2,256	40-49	\$598	\$1,376	\$1,136	\$1,816	40-49	\$544	\$1,252	\$1,034	\$1,652	
50-54	\$967	\$2,010	\$1,595	\$2,569	50-54	\$779	\$1,619	\$1,285	\$2,069	50-54	\$708	\$1,472	\$1,168	\$1,882	
55-59	\$1,222	\$2,566	\$1,827	\$2,951	55-59	\$984	\$2,066	\$1,471	\$2,376	55-59	\$895	\$1,880	\$1,338	\$2,162	
60-64	\$1,507	\$2,863	\$2,016	\$3,342	60-64	\$1,214	\$2,306	\$1,624	\$2,692	60-64	\$1,104	\$2,097	\$1,477	\$2,448	
65+	\$1,709	\$3,694	\$2,569	\$4,061	65+	\$1,377	\$2,975	\$2,070	\$3,270	65+	\$1,252	\$2,706	\$1,882	\$2,975	

	\$30	Copayme	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	\$349	\$976	\$959	\$1,358	<30	\$320	\$893	\$878	\$1,243
30–39	\$386	\$1,049	\$987	\$1,502	30–39	\$353	\$959	\$902	\$1,373
40-49	\$498	\$1,146	\$946	\$1,512	40-49	\$455	\$1,048	\$865	\$1,383
50-54	\$648	\$1,347	\$1,069	\$1,722	50-54	\$593	\$1,232	\$978	\$1,575
55–59	\$819	\$1,720	\$1,224	\$1,978	55-59	\$749	\$1,573	\$1,120	\$1,809
60–64	\$1,010	\$1,919	\$1,351	\$2,240	60-64	\$924	\$1,755	\$1,236	\$2,049
65+	\$1,146	\$2,477	\$1,723	\$2,723	65+	\$1,048	\$2,265	\$1,576	\$2,490

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	\$290	\$794	\$657	\$957	<30	\$266	\$728	\$602	\$877	<30	\$238	\$651	\$538	\$784		
30–39	\$343	\$916	\$692	\$1,072	30-39	\$314	\$839	\$634	\$982	30–39	\$281	\$750	\$567	\$878		
40-49	\$463	\$945	\$724	\$1,201	40-49	\$425	\$867	\$664	\$1,101	40-49	\$380	\$775	\$594	\$985		
50-54	\$619	\$1,285	\$848	\$1,423	50-54	\$567	\$1,177	\$776	\$1,303	50-54	\$507	\$1,053	\$694	\$1,166		
55–59	\$768	\$1,598	\$996	\$1,752	55-59	\$704	\$1,464	\$913	\$1,605	55–59	\$629	\$1,308	\$816	\$1,434		
60–64	\$985	\$1,971	\$1,218	\$2,181	60-64	\$902	\$1,805	\$1,115	\$1,997	60–64	\$807	\$1,615	\$997	\$1,787		
65+	\$1,195	\$2,724	\$1,418	\$2,858	65+	\$1,094	\$2,495	\$1,298	\$2,617	65+	\$978	\$2,230	\$1,161	\$2,339		

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)	
	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 Dedu	ctible Pla	n with HS،	A 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	\$271	\$743	\$614	\$895	<30	\$209	\$573	\$473	\$690	<30	\$185	\$507	\$419	\$611		
30–39	\$321	\$857	\$648	\$1,003	30–39	\$247	\$661	\$499	\$774	30–3	9 \$219	\$585	\$442	\$685		
40-49	\$434	\$885	\$679	\$1,124	40-49	\$334	\$682	\$523	\$867	40-4	9 \$296	\$604	\$463	\$767		
50-54	\$579	\$1,202	\$793	\$1,331	50-54	\$446	\$926	\$611	\$1,025	50-5	4 \$395	\$820	\$541	\$908		
55-59	\$719	\$1,495	\$932	\$1,639	55–59	\$554	\$1,152	\$718	\$1,263	55-5	9 \$490	\$1,019	\$635	\$1,117		
60-64	\$921	\$1,844	\$1,139	\$2,040	60-64	\$710	\$1,421	\$878	\$1,572	60-6	4 \$629	\$1,258	\$777	\$1,392		
65+	\$1,118	\$2,549	\$1,327	\$2,674	65+	\$862	\$1,965	\$1,023	\$2,061	65+	\$762	\$1,738	\$904	\$1,823		

Deductible HMO plans with HRA plans

\$30/\$	\$1,500 Ded	luctible HN	IO Plan w	ith HRA	11	\$30/\$	2,500 Ded	uctible HM	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	\$265	\$726	\$600	\$875		<30	\$235	\$644	\$532	\$776
30–39	\$313	\$837	\$632	\$980		30–39	\$278	\$743	\$561	\$870
40-49	\$424	\$865	\$663	\$1,099		40–49	\$376	\$767	\$588	\$974
50-54	\$566	\$1,175	\$775	\$1,301		50-54	\$502	\$1,042	\$687	\$1,153
55-59	\$702	\$1,460	\$910	\$1,600		55–59	\$623	\$1,295	\$808	\$1,420
60-64	\$900	\$1,801	\$1,112	\$1,993		60–64	\$798	\$1,597	\$986	\$1,767
65+	\$1,092	\$2,489	\$1,296	\$2,611		65+	\$968	\$2,207	\$1,149	\$2,315

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	\$550	\$1,537	\$1,511	\$2,139	<30	\$443	\$1,238	\$1,217	\$1,723	<30	\$403	\$1,126	\$1,107	\$1,567	
30–39	\$608	\$1,652	\$1,554	\$2,364	30–39	\$490	\$1,331	\$1,252	\$1,905	30–39	\$445	\$1,210	\$1,138	\$1,732	
40-49	\$784	\$1,804	\$1,490	\$2,381	40-49	\$632	\$1,453	\$1,200	\$1,918	40-49	\$574	\$1,321	\$1,091	\$1,744	
50-54	\$1,021	\$2,122	\$1,684	\$2,712	50-54	\$822	\$1,709	\$1,356	\$2,184	50-54	\$748	\$1,554	\$1,233	\$1,986	
55-59	\$1,290	\$2,709	\$1,928	\$3,116	55–59	\$1,039	\$2,182	\$1,553	\$2,510	55-59	\$945	\$1,984	\$1,413	\$2,282	
60-64	\$1,591	\$3,022	\$2,128	\$3,528	60–64	\$1,281	\$2,433	\$1,713	\$2,840	60-64	\$1,165	\$2,213	\$1,558	\$2,584	
65+	\$1,804	\$3,899	\$2,712	\$4,286	65+	\$1,453	\$3,140	\$2,184	\$3,452	65+	\$1,322	\$2,857	\$1,987	\$3,141	

	\$30	Copayme	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	\$369	\$1,030	\$1,013	\$1,433	<30	\$337	\$942	\$926	\$1,311
30–39	\$408	\$1,108	\$1,042	\$1,586	30–39	\$373	\$1,013	\$953	\$1,450
40-49	\$526	\$1,210	\$999	\$1,597	40–49	\$481	\$1,106	\$914	\$1,460
50-54	\$684	\$1,422	\$1,128	\$1,818	50-54	\$626	\$1,301	\$1,032	\$1,663
55–59	\$865	\$1,816	\$1,293	\$2,089	55–59	\$791	\$1,661	\$1,182	\$1,910
60-64	\$1,067	\$2,026	\$1,427	\$2,365	60–64	\$975	\$1,852	\$1,304	\$2,162
65+	\$1,210	\$2,614	\$1,819	\$2,874	65+	\$1,106	\$2,390	\$1,663	\$2,627

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	\$306	\$838	\$693	\$1,010	<30	\$281	\$769	\$635	\$926	<30	\$251	\$687	\$568	\$828		
30–39	\$362	\$967	\$730	\$1,132	30–39	\$331	\$885	\$669	\$1,036	30–39	\$296	\$792	\$598	\$927		
40-49	\$489	\$998	\$765	\$1,268	40-49	\$448	\$914	\$701	\$1,161	40-49	\$401	\$818	\$627	\$1,039		
50-54	\$653	\$1,356	\$894	\$1,501	50-54	\$598	\$1,242	\$819	\$1,375	50-54	\$535	\$1,111	\$733	\$1,230		
55–59	\$811	\$1,687	\$1,051	\$1,849	55–59	\$743	\$1,545	\$963	\$1,694	55–59	\$664	\$1,381	\$861	\$1,514		
60-64	\$1,040	\$2,081	\$1,285	\$2,303	60-64	\$952	\$1,905	\$1,177	\$2,108	60–64	\$851	\$1,703	\$1,052	\$1,884		
65+	\$1,261	\$2,875	\$1,497	\$3,016	65+	\$1,155	\$2,634	\$1,371	\$2,763	65+	\$1,033	\$2,355	\$1,226	\$2,470		

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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 child(ren) (subscriber and child(ren) (subscriber and spouse and child[ren])	
For effective dates January 1–December 1, 2024		Small Business

fective dates January 1–December 1, 2024



HSA-qualified deductible HMO plans

\$0/\$	2,000 Dedi	uctible HM	IO Plan wi	th HSA	\$0/\$3	,200 Dedu	ctible Pla	n with HS	A 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	\$286	\$784	\$648	\$945	<30	\$221	\$605	\$500	\$729	<30	\$195	\$535	\$442	\$645	
30–39	\$338	\$904	\$683	\$1,058	30–39	\$261	\$697	\$527	\$816	30–3	9 \$231	\$617	\$466	\$722	
40-49	\$458	\$934	\$716	\$1,187	40-49	\$353	\$720	\$552	\$915	40-4	9 \$312	\$637	\$488	\$809	
50-54	\$611	\$1,269	\$837	\$1,405	50-54	\$471	\$978	\$645	\$1,083	50-5	4 \$417	\$866	\$571	\$959	
55–59	\$759	\$1,578	\$984	\$1,730	55–59	\$585	\$1,217	\$758	\$1,334	55-5	9 \$518	\$1,077	\$671	\$1,181	
60–64	\$973	\$1,947	\$1,203	\$2,154	60–64	\$750	\$1,501	\$927	\$1,661	60-6	4 \$663	\$1,327	\$820	\$1,468	
65+	\$1,180	\$2,690	\$1,400	\$2,822	65+	\$910	\$2,074	\$1,080	\$2,176	65+	\$805	\$1,835	\$955	\$1,925	

Deductible HMO plans with HRA plans

\$30/\$	\$1,500 Ded	luctible HM	IO Plan w	ith HRA	\$30/\$	2,500 Ded	uctible HN	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	\$280	\$767	\$634	\$924	<30	\$248	\$680	\$562	\$819
30–39	\$331	\$884	\$668	\$1,035	30–39	\$293	\$783	\$592	\$917
40-49	\$447	\$912	\$699	\$1,159	40–49	\$397	\$810	\$621	\$1,029
50-54	\$597	\$1,239	\$818	\$1,372	50-54	\$530	\$1,100	\$726	\$1,218
55-59	\$741	\$1,541	\$961	\$1,689	55–59	\$657	\$1,367	\$852	\$1,498
60-64	\$950	\$1,901	\$1,174	\$2,103	60–64	\$843	\$1,687	\$1,042	\$1,867
65+	\$1,152	\$2,627	\$1,367	\$2,756	65+	\$1,022	\$2,330	\$1,213	\$2,444

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	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	\$579	\$1,618	\$1,591	\$2,252	<30	\$466	\$1,302	\$1,281	\$1,812	<30	\$424	\$1,185	\$1,165	\$1,649	
30–39	\$640	\$1,739	\$1,636	\$2,489	30–39	\$515	\$1,400	\$1,317	\$2,004	30–39	\$469	\$1,274	\$1,198	\$1,823	
40-49	\$825	\$1,899	\$1,568	\$2,506	40–49	\$665	\$1,530	\$1,263	\$2,019	40-49	\$605	\$1,392	\$1,149	\$1,837	
50-54	\$1,074	\$2,233	\$1,771	\$2,854	50-54	\$865	\$1,798	\$1,427	\$2,298	50-54	\$787	\$1,636	\$1,298	\$2,091	
55-59	\$1,358	\$2,852	\$2,030	\$3,280	55-59	\$1,094	\$2,297	\$1,635	\$2,642	55-59	\$995	\$2,089	\$1,487	\$2,403	
60-64	\$1,675	\$3,181	\$2,240	\$3,713	60-64	\$1,349	\$2,562	\$1,804	\$2,991	60-64	\$1,227	\$2,330	\$1,641	\$2,720	
65+	\$1,899	\$4,104	\$2,855	\$4,512	65+	\$1,529	\$3,305	\$2,299	\$3,633	65+	\$1,391	\$3,006	\$2,091	\$3,305	

	\$30	Copayme	nt Plan			\$50 Copayment Plan								
		EE . O	FF : 0	55.0.0		FF	FF : 0	FF · 0	FF . 0 . 0					
Age	EE only	EE+S	EE+C	EE+S+C	Age	EE only	EE+S	EE+C	EE+S+C					
<30	\$388	\$1,084	\$1,066	\$1,509	<30	\$355	\$992	\$975	\$1,380					
30–39	\$429	\$1,166	\$1,097	\$1,669	30–39	\$392	\$1,066	\$1,002	\$1,526					
40-49	\$553	\$1,273	\$1,051	\$1,680	40-49	\$506	\$1,164	\$961	\$1,536					
50-54	\$720	\$1,497	\$1,188	\$1,914	50-54	\$659	\$1,370	\$1,087	\$1,751					
55–59	\$910	\$1,911	\$1,360	\$2,198	55–59	\$833	\$1,749	\$1,245	\$2,011					
60-64	\$1,123	\$2,133	\$1,502	\$2,490	60–64	\$1,027	\$1,951	\$1,373	\$2,277					
65+	\$1,273	\$2,751	\$1,914	\$3,024	65+	\$1,164	\$2,516	\$1,750	\$2,766					

Deductible HMO plans

	\$30/\$1,000	Deductib	le HMO P	lan		\$30/\$1,50	0 Deductib	le HMO PI	an	\$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	\$322	\$882	\$729	\$1,063	<30	\$295	\$808	\$668	\$974	<30	\$264	\$723	\$598	\$871	
30–39	\$381	\$1,018	\$769	\$1,192	30–39	\$349	\$932	\$704	\$1,091	30–39	\$312	\$834	\$630	\$976	
40-49	\$515	\$1,051	\$805	\$1,335	40-49	\$472	\$963	\$738	\$1,223	40-49	\$422	\$861	\$660	\$1,094	
50-54	\$688	\$1,428	\$942	\$1,581	50-54	\$630	\$1,308	\$863	\$1,448	50-54	\$563	\$1,169	\$771	\$1,294	
55–59	\$854	\$1,776	\$1,107	\$1,947	55-59	\$782	\$1,626	\$1,014	\$1,782	55–59	\$699	\$1,454	\$906	\$1,594	
60–64	\$1,094	\$2,190	\$1,352	\$2,423	60-64	\$1,002	\$2,006	\$1,239	\$2,220	60-64	\$896	\$1,793	\$1,108	\$1,984	
65+	\$1,327	\$3,026	\$1,575	\$3,174	65+	\$1,216	\$2,772	\$1,443	\$2,908	65+	\$1,087	\$2,478	\$1,290	\$2,600	

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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 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	\$302	\$826	\$683	\$995	<30	\$233	\$637	\$527	\$768	<30	\$206	\$564	\$466	\$679		
30–39	\$356	\$952	\$719	\$1,115	30-39	\$275	\$734	\$555	\$859	30–3	9 \$243	\$650	\$491	\$761		
40-49	\$482	\$983	\$754	\$1,249	40-49	\$371	\$758	\$581	\$963	40-4	9 \$329	\$671	\$514	\$852		
50-54	\$643	\$1,335	\$881	\$1,478	50-54	\$496	\$1,030	\$679	\$1,140	50-5	4 \$439	\$911	\$601	\$1,009		
55-59	\$799	\$1,661	\$1,036	\$1,821	55-59	\$616	\$1,281	\$799	\$1,404	55–5	9 \$545	\$1,133	\$707	\$1,242		
60-64	\$1,024	\$2,049	\$1,266	\$2,267	60-64	\$789	\$1,579	\$975	\$1,747	60–6	4 \$698	\$1,397	\$863	\$1,546		
65+	\$1,242	\$2,832	\$1,474	\$2,971	65+	\$957	\$2,183	\$1,136	\$2,290	65+	\$847	\$1,931	\$1,005	\$2,026		

Deductible HMO plans with HRA plans

\$30/\$	\$1,500 Ded	luctible HN	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	\$295	\$807	\$667	\$972	<30	\$261	\$715	\$591	\$862		
30–39	\$348	\$930	\$702	\$1,089	30–39	\$309	\$825	\$623	\$966		
40-49	\$471	\$961	\$736	\$1,221	40–49	\$417	\$851	\$652	\$1,081		
50-54	\$628	\$1,304	\$860	\$1,444	50-54	\$557	\$1,157	\$763	\$1,281		
55-59	\$780	\$1,622	\$1,011	\$1,778	55–59	\$692	\$1,439	\$897	\$1,577		
60–64	\$1,000	\$2,001	\$1,236	\$2,214	60–64	\$887	\$1,775	\$1,096	\$1,964		
65+	\$1,213	\$2,766	\$1,440	\$2,902	65+	\$1,076	\$2,453	\$1,277	\$2,573		

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	opaymen	t 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	\$608	\$1,698	\$1,670	\$2,363	<30	\$490	\$1,368	\$1,345	\$1,904	<30	\$445	\$1,244	\$1,223	\$1,731
30–39	\$672	\$1,826	\$1,717	\$2,613	30–39	\$541	\$1,470	\$1,383	\$2,104	30–39	\$492	\$1,337	\$1,258	\$1,914
40-49	\$867	\$1,994	\$1,647	\$2,632	40-49	\$698	\$1,606	\$1,326	\$2,119	40-49	\$635	\$1,461	\$1,206	\$1,928
50-54	\$1,128	\$2,345	\$1,860	\$2,997	50-54	\$908	\$1,888	\$1,498	\$2,413	50-54	\$826	\$1,717	\$1,363	\$2,195
55-59	\$1,426	\$2,994	\$2,131	\$3,443	55–59	\$1,148	\$2,411	\$1,716	\$2,773	55-59	\$1,044	\$2,193	\$1,561	\$2,522
60-64	\$1,758	\$3,340	\$2,351	\$3,899	60–64	\$1,416	\$2,690	\$1,894	\$3,140	60-64	\$1,288	\$2,447	\$1,723	\$2,857
65+	\$1,994	\$4,309	\$2,998	\$4,737	65+	\$1,606	\$3,471	\$2,414	\$3,816	65+	\$1,461	\$3,157	\$2,196	\$3,471

	\$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	\$408	\$1,139	\$1,120	\$1,585	<30	\$373	\$1,042	\$1,024	\$1,450			
30–39	\$450	\$1,223	\$1,151	\$1,751	30–39	\$412	\$1,119	\$1,053	\$1,602			
40-49	\$581	\$1,337	\$1,104	\$1,764	40-49	\$531	\$1,222	\$1,009	\$1,613			
50-54	\$756	\$1,572	\$1,247	\$2,009	50-54	\$692	\$1,438	\$1,141	\$1,838			
55-59	\$956	\$2,007	\$1,429	\$2,308	55–59	\$874	\$1,835	\$1,307	\$2,111			
60-64	\$1,179	\$2,239	\$1,577	\$2,614	60-64	\$1,078	\$2,048	\$1,442	\$2,391			
65+	\$1,337	\$2,889	\$2,010	\$3,176	65+	\$1,223	\$2,643	\$1,838	\$2,905			

Deductible HMO plans

	\$30/\$1,000	Deductib	le HMO P	lan		\$30/\$1,50	0 Deductib	le HMO PI	an	\$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	\$338	\$926	\$766	\$1,116	<30	\$310	\$849	\$702	\$1,023	<30	\$277	\$759	\$627	\$915	
30–39	\$400	\$1,069	\$807	\$1,251	30–39	\$366	\$979	\$739	\$1,146	30–39	\$327	\$875	\$661	\$1,024	
40-49	\$541	\$1,104	\$846	\$1,402	40-49	\$495	\$1,011	\$774	\$1,284	40-49	\$443	\$904	\$693	\$1,148	
50-54	\$722	\$1,499	\$989	\$1,659	50-54	\$661	\$1,373	\$905	\$1,520	50-54	\$591	\$1,227	\$810	\$1,358	
55–59	\$897	\$1,865	\$1,163	\$2,044	55–59	\$821	\$1,707	\$1,064	\$1,871	55–59	\$734	\$1,527	\$952	\$1,674	
60–64	\$1,149	\$2,299	\$1,420	\$2,544	60-64	\$1,052	\$2,106	\$1,300	\$2,330	60-64	\$941	\$1,883	\$1,163	\$2,084	
65+	\$1,394	\$3,178	\$1,654	\$3,334	65+	\$1,277	\$2,911	\$1,515	\$3,054	65+	\$1,141	\$2,602	\$1,354	\$2,730	

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	IO 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	\$317	\$868	\$717	\$1,046	<30	\$244	\$669	\$553	\$806	<30	\$216	\$592	\$489	\$713		
30–39	\$374	\$1,000	\$755	\$1,171	30–39	\$288	\$770	\$582	\$902	30–3	9 \$255	\$682	\$515	\$798		
40-49	\$506	\$1,033	\$791	\$1,312	40-49	\$390	\$796	\$610	\$1,011	40-4	9 \$345	\$704	\$540	\$895		
50-54	\$676	\$1,403	\$926	\$1,553	50-54	\$521	\$1,082	\$713	\$1,198	50-5	4 \$461	\$957	\$631	\$1,059		
55-59	\$839	\$1,744	\$1,088	\$1,912	55-59	\$647	\$1,345	\$839	\$1,474	55-5	9 \$572	\$1,190	\$742	\$1,304		
60–64	\$1,075	\$2,151	\$1,329	\$2,380	60–64	\$829	\$1,659	\$1,025	\$1,836	60-6	4 \$733	\$1,467	\$906	\$1,623		
65+	\$1,304	\$2,973	\$1,548	\$3,119	65+	\$1,005	\$2,292	\$1,193	\$2,404	65+	\$889	\$2,028	\$1,055	\$2,127		

Deductible HMO plans with HRA plans

\$30/\$	\$1,500 Ded	luctible HN	IO Plan w	ith HRA		\$30/\$	2,500 Ded	uctible HM	IO Plan w	ith HRA
					U					
Age	EE only	EE+S	EE+C	EE+S+C		Age	EE only	EE+S	EE+C	EE+S+C
<30	\$309	\$847	\$700	\$1,021		<30	\$274	\$751	\$621	\$905
30–39	\$365	\$976	\$737	\$1,143		30–39	\$324	\$866	\$654	\$1,014
40-49	\$494	\$1,008	\$773	\$1,281		40–49	\$438	\$894	\$685	\$1,136
50-54	\$660	\$1,370	\$904	\$1,517		50-54	\$585	\$1,215	\$801	\$1,345
55–59	\$819	\$1,703	\$1,062	\$1,867		55–59	\$727	\$1,511	\$942	\$1,656
60–64	\$1,050	\$2,101	\$1,298	\$2,325		60–64	\$931	\$1,864	\$1,151	\$2,062
65+	\$1,273	\$2,903	\$1,511	\$3,045		65+	\$1,130	\$2,576	\$1,341	\$2,702

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 (Copaymen	t 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	\$637	\$1,779	\$1,750	\$2,476	<30	\$513	\$1,433	\$1,409	\$1,994	<30	\$467	\$1,304	\$1,282	\$1,814
30–39	\$704	\$1,913	\$1,799	\$2,738	30–39	\$567	\$1,540	\$1,449	\$2,204	30–39	\$516	\$1,401	\$1,318	\$2,005
40-49	\$908	\$2,089	\$1,725	\$2,757	40-49	\$731	\$1,682	\$1,389	\$2,220	40-49	\$665	\$1,530	\$1,264	\$2,019
50-54	\$1,182	\$2,457	\$1,949	\$3,140	50-54	\$952	\$1,979	\$1,570	\$2,529	50-54	\$866	\$1,800	\$1,428	\$2,301
55–59	\$1,494	\$3,137	\$2,233	\$3,608	55–59	\$1,203	\$2,526	\$1,798	\$2,905	55-59	\$1,094	\$2,298	\$1,635	\$2,643
60-64	\$1,842	\$3,499	\$2,464	\$4,085	60–64	\$1,483	\$2,817	\$1,984	\$3,289	60-64	\$1,349	\$2,563	\$1,804	\$2,992
65+	\$2,089	\$4,515	\$3,141	\$4,963	65+	\$1,682	\$3,635	\$2,529	\$3,996	65+	\$1,530	\$3,307	\$2,300	\$3,635

	\$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	\$427	\$1,193	\$1,173	\$1,660	<30	\$391	\$1,091	\$1,073	\$1,518			
30–39	\$472	\$1,282	\$1,206	\$1,835	30–39	\$432	\$1,173	\$1,104	\$1,679			
40–49	\$609	\$1,401	\$1,157	\$1,849	40-49	\$557	\$1,281	\$1,058	\$1,691			
50-54	\$792	\$1,647	\$1,306	\$2,105	50-54	\$725	\$1,507	\$1,195	\$1,926			
55–59	\$1,001	\$2,102	\$1,497	\$2,418	55–59	\$916	\$1,923	\$1,369	\$2,212			
60-64	\$1,235	\$2,346	\$1,652	\$2,739	60-64	\$1,129	\$2,145	\$1,510	\$2,504			
65+	\$1,401	\$3,027	\$2,106	\$3,328	65+	\$1,281	\$2,768	\$1,926	\$3,043			

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	\$355	\$972	\$803	\$1,171	<30	\$325	\$890	\$735	\$1,072	<30	\$290	\$795	\$657	\$958
30–39	\$419	\$1,120	\$846	\$1,311	30–39	\$384	\$1,026	\$775	\$1,201	30–39	\$343	\$917	\$692	\$1,073
40-49	\$566	\$1,156	\$886	\$1,469	40-49	\$519	\$1,059	\$812	\$1,345	40-49	\$464	\$947	\$726	\$1,203
50-54	\$757	\$1,571	\$1,037	\$1,739	50-54	\$693	\$1,439	\$949	\$1,593	50-54	\$620	\$1,287	\$849	\$1,425
55–59	\$939	\$1,953	\$1,217	\$2,141	55-59	\$860	\$1,789	\$1,115	\$1,961	55–59	\$769	\$1,599	\$997	\$1,753
60–64	\$1,204	\$2,409	\$1,488	\$2,666	60-64	\$1,103	\$2,207	\$1,363	\$2,442	60-64	\$986	\$1,973	\$1,219	\$2,183
65+	\$1,460	\$3,329	\$1,733	\$3,492	65+	\$1,337	\$3,049	\$1,587	\$3,199	65+	\$1,196	\$2,727	\$1,419	\$2,861

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	\$332	\$909	\$751	\$1,095	<30	\$256	\$701	\$579	\$845	<30	\$226	\$620	\$512	\$747		
30–39	\$392	\$1,047	\$791	\$1,226	30-39	\$302	\$807	\$610	\$945	30-3	9 \$267	\$714	\$539	\$836		
40-49	\$530	\$1,082	\$829	\$1,375	40-49	\$409	\$834	\$639	\$1,060	40-4	9 \$362	\$738	\$566	\$938		
50-54	\$708	\$1,470	\$970	\$1,627	50-54	\$546	\$1,133	\$748	\$1,254	50-5	4 \$483	\$1,003	\$661	\$1,110		
55–59	\$879	\$1,828	\$1,139	\$2,004	55-59	\$678	\$1,409	\$879	\$1,544	55-5	9 \$599	\$1,246	\$777	\$1,366		
60–64	\$1,126	\$2,254	\$1,392	\$2,494	60-64	\$868	\$1,737	\$1,073	\$1,922	60–6	4 \$768	\$1,537	\$949	\$1,701		
65+	\$1,366	\$3,114	\$1,621	\$3,267	65+	\$1,053	\$2,401	\$1,250	\$2,519	65+	\$932	\$2,125	\$1,106	\$2,229		

Deductible HMO plans with HRA plans

\$30/\$	\$1,500 Ded	luctible HN	IO Plan w	ith HRA	\$30/\$	2,500 Ded	uctible HM	IO Plan w	ith HRA
Age	EE only	EE+S	EE+C	EE+S+C	Age	EE only	EE+S	EE+C	EE+S+C
<30	\$324	\$887	\$733	\$1,069	<30	\$287	\$787	\$650	\$948
30–39	\$383	\$1,023	\$773	\$1,198	30–39	\$340	\$908	\$686	\$1,063
40-49	\$518	\$1,057	\$810	\$1,343	40–49	\$459	\$937	\$718	\$1,190
50-54	\$691	\$1,435	\$946	\$1,589	50-54	\$613	\$1,273	\$840	\$1,409
55-59	\$858	\$1,784	\$1,112	\$1,956	55–59	\$761	\$1,583	\$987	\$1,735
60–64	\$1,100	\$2,201	\$1,360	\$2,435	60–64	\$976	\$1,953	\$1,206	\$2,161
65+	\$1,334	\$3,042	\$1,583	\$3,191	65+	\$1,183	\$2,698	\$1,404	\$2,830

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