Find your rate

Apply on **buykp.org/apply** to have your rate calculated automatically.

How is your rate determined?

Your rate is based on:

- The plan you choose
- Where you live, based on your county and ZIP code
- Your age on your plan start date (effective date)
- If you add a dental plan for members of your family
- If you qualify for federal financial assistance. Visit **buykp.org/apply** or call us at **1-800-494-5314** (TTY **711**) to see if you may qualify.
- If you use tobacco

Interested in a family plan?

Find the rate for each family member, based on his or her age on the start date.

Family members include:

- You
- Your spouse/domestic partner
- All adult children 21 through 25
- Your 3 oldest children under 21

If you have more than 3 children under 21, you only need to pay for the 3 oldest. The other children under 21 will be covered at no charge.

Please check that your ZIP code is listed below. If it isn't, call us at **1-800-494-5314** for information on other rate areas.

Our Service Area	
Benton County	97321, 97330–31, 97333, 97339, 97361, 97370
Clackamas County	All ZIP codes
Columbia County	All ZIP codes
Hood River County	97014
Lane County	97401–5, 97408–9, 97419, 97424, 97426, 97431, 97437–8, 97440, 97446, 97448, 97451–2, 97454–6, 97461, 97475, 97477–8, 97487, 97489
Linn County	97321–22, 97333, 97335, 97346, 97348, 97352, 97355, 97358, 97360, 97374, 97377, 97383, 97389
Marion County	All ZIP codes
Multnomah County	All ZIP codes
Polk County	All ZIP codes
Washington County	All ZIP codes
Yamhill County	All ZIP codes

2024 Monthly rates

Benton, Lane, and Linn counties

Please note: These rates do not include the federal financial assistance you may be eligible to receive through the Oregon Health Insurance Marketplace. Rates for CSR plans will vary and are found on the Oregon Health Insurance Marketplace.

Non-Tobacco User Rates

Age on 2024 effective date	KP E KP OR Bronze 9100/75	KP E KP Oregon Standard Bronze Plan	KP E KP OR Bronze 7100/0% HSA	KP E KP OR Bronze 5500/50	KP E KP Oregon Standard Silver Plan	KP KP OR Silver 5000/50	KP KP OR Silver 4000/40 X	E KP OR Silver 4000/40
0-20	$191	$194	$200	$202	$262	$211	$220	$249
21-24	301	305	316	318	413	332	346	392
25	303	306	317	320	415	333	347	394
26	309	312	323	326	423	340	354	401
27	316	320	331	334	433	348	362	411
28	328	332	343	346	449	361	376	426
29	337	341	353	356	463	372	387	439
30	342	346	358	361	469	377	392	445
31	349	354	366	369	479	385	401	454
32	357	361	373	377	489	393	409	464
33	361	366	378	381	495	398	414	470
34	366	370	383	386	502	403	420	476
35	368	373	386	389	505	406	422	479
36	371	375	388	391	508	408	425	482
37	373	378	391	394	512	411	428	485
38	375	380	393	397	515	414	431	488
39	380	385	398	402	522	419	436	495
40	385	390	403	407	528	424	442	501
41	392	397	411	414	538	432	450	510
42	399	404	418	422	548	440	458	519
43	409	414	428	432	561	451	469	532
44	421	426	441	445	577	464	483	548
45	435	441	456	460	597	479	499	566
46	452	458	473	477	620	498	519	588
47	471	477	493	497	646	519	540	613
48	493	499	516	520	676	543	565	641
49	514	521	538	543	705	566	590	669
50	538	545	564	568	738	593	617	700
51	562	569	589	594	771	619	645	731
52	588	596	616	621	807	648	675	765
53	615	622	644	649	843	677	705	800
54	643	651	674	679	882	709	738	837
55	672	680	704	710	922	740	771	874
56	703	712	736	743	964	775	807	915
57	734	744	769	776	1,007	809	843	955
58	768	778	804	811	1,053	846	881	999
59	784	794	821	828	1,076	864	900	1,020
60	818	828	856	864	1,122	901	938	1,064
61	847	857	887	894	1,161	933	972	1,102
62	866	877	907	914	1,187	954	993	1,126
63	890	901	932	940	1,220	980	1,021	1,157
64+	903	915	948	954	1,239	996	1,038	1,176

2024 Monthly rates

Benton, Lane, and Linn counties

Please note: These rates do not include the federal financial assistance you may be eligible to receive through the Oregon Health Insurance Marketplace. Rates for CSR plans will vary and are found on the Oregon Health Insurance Marketplace.

Non-Tobacco User Rates

Age on 2024 effective date	KP	E	KP	KP	E	KP E	KP E	KP E
	KP OR Silver 3000/40 X	KP OR Silver 3000/40	KP OR Silver 3200/35% HSA	KP OR Silver 750/35 X	KP OR Silver 750/35	KP OR Gold 1750/20	KP Oregon Standard Gold Plan	KP OR Gold 0/15
0-20	$238	$270	$224	$247	$280	$263	$279	$287
21-24	375	425	354	389	440	415	439	452
25	377	427	355	390	442	417	441	454
26	384	435	362	398	451	425	449	463
27	393	446	370	407	461	435	460	474
28	408	462	384	422	479	451	477	492
29	420	476	396	435	493	464	491	506
30	426	483	401	441	500	471	498	514
31	435	493	410	450	510	481	509	524
32	444	503	418	460	521	491	519	535
33	450	509	424	466	528	497	526	542
34	456	516	429	472	535	504	533	549
35	459	520	432	475	538	507	536	553
36	462	523	435	478	542	510	540	556
37	465	526	438	481	545	514	543	560
38	468	530	440	484	549	517	547	564
39	474	537	446	490	556	524	554	571
40	480	543	452	497	563	530	561	578
41	489	554	460	506	573	540	571	589
42	497	563	468	515	583	550	582	599
43	509	577	480	527	598	563	596	614
44	524	594	494	543	615	580	613	632
45	542	614	510	561	636	599	634	653
46	563	638	530	583	660	622	658	679
47	587	665	553	607	688	649	686	707
48	614	695	578	635	720	678	718	740
49	640	726	603	663	751	708	749	772
50	670	760	631	694	786	741	784	808
51	700	793	659	725	821	774	819	844
52	733	830	690	759	860	810	857	883
53	766	868	721	793	898	846	895	923
54	801	908	755	830	940	886	937	966
55	837	948	788	867	982	925	979	1,009
56	876	992	825	907	1,027	968	1,024	1,056
57	915	1,036	862	947	1,073	1,011	1,070	1,103
58	956	1,084	901	990	1,122	1,057	1,118	1,153
59	977	1,107	920	1,012	1,146	1,080	1,143	1,178
60	1,019	1,154	959	1,055	1,195	1,126	1,191	1,228
61	1,055	1,195	993	1,092	1,237	1,166	1,233	1,271
62	1,078	1,222	1,016	1,116	1,265	1,192	1,261	1,300
63	1,108	1,255	1,044	1,147	1,300	1,225	1,296	1,336
64+	1,125	1,275	1,062	1,167	1,320	1,245	1,317	1,356

2024 Monthly rates

Benton, Lane, and Linn counties

Please note: These rates do not include the federal financial assistance you may be eligible to receive through the Oregon Health Insurance Marketplace. Rates for CSR plans will vary and are found on the Oregon Health Insurance Marketplace.

Tobacco User Rates

Age on 2024 effective date	KP E KP OR Bronze 9100/75	KP E KP Oregon Standard Bronze Plan	KP E KP OR Bronze 7100/0% HSA	KP E KP OR Bronze 5500/50	KP E KP Oregon Standard Silver Plan	KP KP OR Silver 5000/50	KP KP OR Silver 4000/40 X	E KP OR Silver 4000/40
0-20	$191	$194	$200	$202	$262	$211	$220	$249
21-24	362	366	379	382	496	398	415	470
25	363	368	380	383	498	400	417	472
26	370	375	388	391	508	408	425	482
27	379	384	397	400	520	418	435	493
28	393	398	412	415	539	433	451	511
29	405	410	424	427	555	446	464	526
30	410	416	430	433	563	452	471	534
31	419	424	439	443	575	462	481	545
32	428	433	448	452	587	471	491	557
33	433	439	454	458	594	477	497	564
34	439	445	460	464	602	484	504	571
35	442	447	463	467	606	487	507	575
36	445	450	466	470	610	490	510	579
37	448	453	469	473	614	493	514	582
38	451	456	472	476	618	496	517	586
39	456	462	478	482	626	503	524	594
40	462	468	484	488	634	509	530	601
41	471	477	493	497	646	519	540	612
42	479	485	502	506	657	528	550	623
43	491	497	514	518	673	541	563	638
44	505	512	529	534	693	557	580	657
45	522	529	547	551	716	575	599	679
46	542	549	568	573	744	598	622	706
47	565	572	592	597	775	623	648	735
48	591	599	619	624	811	651	678	769
49	617	625	646	652	846	680	708	803
50	646	654	676	682	886	712	741	840
51	674	683	706	712	925	743	774	877
52	706	715	739	745	968	778	810	918
53	738	747	772	779	1,012	813	846	960
54	772	782	808	815	1,059	851	886	1,004
55	806	817	844	852	1,106	889	925	1,049
56	844	854	883	891	1,157	930	968	1,098
57	881	892	923	931	1,209	971	1,011	1,146
58	921	933	965	973	1,264	1,015	1,057	1,199
59	941	953	986	994	1,291	1,037	1,080	1,225
60	981	994	1,028	1,037	1,346	1,081	1,126	1,277
61	1,016	1,029	1,064	1,073	1,394	1,120	1,166	1,322
62	1,039	1,052	1,088	1,097	1,425	1,145	1,192	1,352
63	1,068	1,081	1,118	1,127	1,464	1,176	1,225	1,389
64+	1,086	1,098	1,137	1,146	1,488	1,194	1,245	1,410

2024 Monthly rates

Benton, Lane, and Linn counties

Please note: These rates do not include the federal financial assistance you may be eligible to receive through the Oregon Health Insurance Marketplace. Rates for CSR plans will vary and are found on the Oregon Health Insurance Marketplace.

Tobacco User Rates

Age on 2024 effective date	KP OR Silver 3000/40 X	E OR Silver 3000/40	KP OR Silver 3200/35% HSA	KP OR Silver 750/35 X	E OR Silver 750/35	KP E OR Gold 1750/20	KP E Oregon Standard Gold Plan	KP E OR Gold 0/15
0-20	$238	$270	$224	$247	$280	$263	$279	$287
21-24	450	510	424	466	528	498	527	543
25	452	512	426	468	531	500	529	545
26	461	523	434	478	541	510	539	556
27	472	535	445	489	554	522	552	569
28	490	555	461	507	574	541	573	590
29	504	571	475	522	591	557	589	608
30	511	579	482	529	600	565	598	616
31	522	591	492	540	612	577	610	629
32	533	604	502	552	625	589	623	642
33	540	611	508	559	633	597	631	650
34	547	620	515	566	641	604	639	659
35	550	624	518	570	646	608	644	663
36	554	628	522	574	650	612	648	668
37	558	632	525	577	654	616	652	672
38	561	636	529	581	658	620	656	676
39	568	644	535	588	667	628	665	685
40	576	652	542	596	675	636	673	694
41	586	664	552	607	688	648	686	707
42	597	676	562	618	700	660	698	719
43	611	693	576	633	717	676	715	737
44	629	713	593	651	738	696	736	758
45	650	737	613	673	763	719	761	784
46	676	765	636	699	793	747	790	814
47	704	798	663	729	826	778	823	849
48	736	834	694	762	864	814	861	888
49	768	871	724	796	901	849	899	926
50	804	911	758	833	944	889	941	970
51	840	952	791	870	985	929	982	1,013
52	879	996	828	910	1,031	972	1,028	1,060
53	919	1,041	865	951	1,078	1,016	1,075	1,108
54	962	1,090	906	996	1,128	1,063	1,125	1,159
55	1,004	1,138	946	1,040	1,178	1,110	1,175	1,211
56	1,051	1,191	990	1,088	1,233	1,162	1,229	1,267
57	1,098	1,244	1,034	1,136	1,288	1,213	1,284	1,323
58	1,148	1,300	1,081	1,188	1,346	1,269	1,342	1,383
59	1,172	1,328	1,104	1,214	1,375	1,296	1,371	1,413
60	1,222	1,385	1,151	1,266	1,434	1,351	1,430	1,473
61	1,266	1,434	1,192	1,310	1,485	1,399	1,480	1,526
62	1,294	1,466	1,219	1,340	1,518	1,431	1,513	1,560
63	1,329	1,506	1,252	1,377	1,560	1,470	1,555	1,603
64+	1,350	1,530	1,272	1,398	1,584	1,494	1,581	1,629

2024 Monthly rates

Marion and Polk counties

Please note: These rates do not include the federal financial assistance you may be eligible to receive through the Oregon Health Insurance Marketplace. Rates for CSR plans will vary and are found on the Oregon Health Insurance Marketplace.

Non-Tobacco User Rates

Age on 2024 effective date	KP E KP OR Bronze 9100/75	KP E KP Oregon Standard Bronze Plan	KP E KP OR Bronze 7100/0% HSA	KP E KP OR Bronze 5500/50	KP E KP Oregon Standard Silver Plan	KP KP OR Silver 5000/50	KP KP OR Silver 4000/40 X	E KP OR Silver 4000/40
0-20	$183	$185	$191	$193	$250	$201	$209	$237
21-24	287	291	301	304	394	317	330	374
25	289	292	302	305	396	318	331	375
26	294	298	308	311	404	324	338	383
27	301	305	315	318	413	332	346	392
28	312	316	327	330	429	344	358	406
29	322	326	337	340	441	354	369	418
30	326	330	342	345	447	360	374	424
31	333	337	349	352	457	367	382	433
32	340	344	356	359	466	375	390	442
33	344	349	361	364	472	379	395	448
34	349	353	365	369	479	385	400	454
35	351	356	368	371	482	387	403	457
36	354	358	370	373	485	390	406	460
37	356	360	373	376	488	392	408	463
38	358	363	375	378	491	395	411	466
39	363	367	380	383	498	400	416	472
40	367	372	385	388	504	405	421	478
41	374	379	392	395	513	412	429	487
42	381	386	399	402	522	420	437	495
43	390	395	408	412	535	430	448	507
44	402	407	421	424	551	442	461	522
45	415	420	435	438	569	457	476	540
46	431	437	452	455	591	475	495	561
47	449	455	470	475	616	495	515	584
48	470	476	492	496	645	518	539	611
49	490	497	514	518	673	540	563	638
50	513	520	538	542	704	566	589	668
51	536	543	561	566	735	591	615	697
52	561	568	588	593	770	618	644	730
53	586	594	614	619	804	646	673	763
54	614	621	643	648	842	676	704	798
55	641	649	671	677	879	706	735	834
56	671	679	702	708	920	739	769	872
57	701	709	734	740	961	772	804	911
58	732	742	767	774	1,005	807	840	953
59	748	758	784	790	1,026	824	858	973
60	780	790	817	824	1,070	860	895	1,015
61	808	818	846	853	1,108	890	927	1,051
62	826	836	865	872	1,133	910	948	1,074
63	849	859	889	896	1,164	935	974	1,104
64+	861	873	903	912	1,182	951	990	1,122

2024 Monthly rates

Marion and Polk counties

Please note: These rates do not include the federal financial assistance you may be eligible to receive through the Oregon Health Insurance Marketplace. Rates for CSR plans will vary and are found on the Oregon Health Insurance Marketplace.

Non-Tobacco User Rates

Age on 2024 effective date	KP OR Silver 3000/40 X	E KP OR Silver 3000/40	KP OR Silver 3200/35% HSA	KP OR Silver 750/35 X	E KP OR Silver 750/35	KP E KP OR Gold 1750/20	KP E KP Oregon Standard Gold Plan	KP E KP OR Gold 0/15
0-20	$227	$258	$214	$235	$267	$251	$266	$274
21-24	358	406	337	371	420	396	419	432
25	359	407	339	372	422	397	420	433
26	367	415	345	380	430	405	429	442
27	375	425	353	388	440	415	439	452
28	389	441	367	403	457	430	455	469
29	401	454	377	415	470	443	469	483
30	406	460	383	421	477	449	475	490
31	415	470	391	430	487	459	485	500
32	424	480	399	439	497	468	495	511
33	429	486	404	444	503	474	502	517
34	435	492	409	450	510	481	508	524
35	437	496	412	453	513	484	512	527
36	440	499	415	456	517	487	515	531
37	443	502	417	459	520	490	518	534
38	446	505	420	462	523	493	522	538
39	452	512	426	468	530	500	528	545
40	458	518	431	474	537	506	535	552
41	466	528	439	483	547	515	545	562
42	474	538	447	491	557	524	555	572
43	486	550	458	503	570	537	568	586
44	500	567	471	518	587	553	585	603
45	517	586	487	535	607	572	605	623
46	537	609	506	556	630	594	628	647
47	560	634	527	579	657	619	654	675
48	585	663	551	606	687	647	685	706
49	611	692	575	632	717	675	714	736
50	639	725	602	662	750	707	748	771
51	668	757	629	691	783	738	781	805
52	699	792	658	724	820	773	817	842
53	730	828	688	756	857	807	854	880
54	764	866	720	791	897	845	894	921
55	798	905	752	827	937	883	934	962
56	835	946	787	865	980	923	977	1,007
57	872	989	822	903	1,024	965	1,020	1,052
58	912	1,034	859	945	1,070	1,009	1,067	1,100
59	932	1,056	878	965	1,093	1,030	1,090	1,123
60	972	1,101	915	1,006	1,140	1,074	1,136	1,171
61	1,006	1,140	948	1,042	1,180	1,112	1,177	1,213
62	1,029	1,165	969	1,065	1,207	1,137	1,203	1,240
63	1,057	1,198	996	1,094	1,240	1,168	1,236	1,274
64+	1,074	1,218	1,011	1,113	1,260	1,188	1,257	1,296

2024 Monthly rates

Marion and Polk counties

Please note: These rates do not include the federal financial assistance you may be eligible to receive through the Oregon Health Insurance Marketplace. Rates for CSR plans will vary and are found on the Oregon Health Insurance Marketplace.

Tobacco User Rates

Age on 2024 effective date	KP E KP OR Bronze 9100/75	KP E KP Oregon Standard Bronze Plan	KP E KP OR Bronze 7100/0% HSA	KP E KP OR Bronze 5500/50	KP E KP Oregon Standard Silver Plan	KP KP OR Silver 5000/50	KP KP OR Silver 4000/40 X	E KP OR Silver 4000/40
0-20	$183	$185	$191	$193	$250	$201	$209	$237
21-24	345	349	361	364	473	380	396	449
25	346	351	363	366	475	382	397	451
26	353	358	370	373	484	389	405	460
27	362	366	379	382	496	398	415	470
28	375	380	393	396	514	413	430	488
29	386	391	404	408	529	425	443	502
30	392	396	410	413	537	431	449	509
31	400	405	419	422	548	441	459	520
32	408	413	427	431	560	450	468	531
33	413	418	433	436	567	455	474	538
34	419	424	439	442	574	461	480	545
35	422	427	441	445	578	464	484	548
36	424	430	444	448	582	468	487	552
37	427	432	447	451	586	471	490	556
38	430	435	450	454	590	474	493	559
39	435	441	456	460	597	480	499	566
40	441	446	462	466	605	486	506	573
41	449	455	470	474	616	495	515	584
42	457	463	479	483	627	504	524	595
43	468	474	490	494	642	516	537	609
44	482	488	505	509	661	531	553	627
45	498	504	522	526	683	549	571	648
46	517	524	542	546	710	570	594	673
47	539	546	565	569	739	594	619	701
48	564	571	591	596	774	621	647	734
49	589	596	616	622	807	648	675	766
50	616	624	645	651	845	679	707	801
51	643	651	674	679	882	709	738	837
52	673	682	705	711	924	742	773	876
53	704	713	737	743	965	775	807	915
54	737	746	771	778	1,010	811	845	958
55	769	779	806	812	1,055	848	883	1,001
56	805	815	843	850	1,104	887	923	1,047
57	841	851	880	888	1,153	926	964	1,094
58	879	890	920	928	1,206	968	1,008	1,143
59	898	909	940	948	1,232	989	1,030	1,168
60	936	948	980	989	1,284	1,032	1,074	1,218
61	969	982	1,015	1,024	1,329	1,068	1,112	1,261
62	991	1,004	1,038	1,047	1,359	1,092	1,137	1,289
63	1,018	1,031	1,066	1,075	1,397	1,122	1,168	1,325
64+	1,035	1,047	1,083	1,092	1,419	1,140	1,188	1,347

2024 Monthly rates

Marion and Polk counties

Please note: These rates do not include the federal financial assistance you may be eligible to receive through the Oregon Health Insurance Marketplace. Rates for CSR plans will vary and are found on the Oregon Health Insurance Marketplace.

Tobacco User Rates

Age on 2024 effective date	KP OR Silver 3000/40 X	E OR Silver 3000/40	KP OR Silver 3200/35% HSA	KP OR Silver 750/35 X	E OR Silver 750/35	KP E OR Gold 1750/20	KP E Oregon Standard Gold Plan	KP E OR Gold 0/15
0-20	$227	$258	$214	$235	$267	$251	$266	$274
21-24	430	487	405	445	504	475	502	518
25	431	489	406	447	506	477	504	520
26	440	498	414	455	516	486	515	530
27	450	510	424	466	528	498	527	543
28	467	529	440	484	548	516	546	563
29	481	545	453	498	564	532	562	580
30	488	553	459	505	572	539	570	588
31	498	564	469	516	584	551	582	600
32	508	576	479	526	596	562	594	613
33	515	583	485	533	604	569	602	620
34	522	591	491	540	612	577	610	629
35	525	595	495	544	616	580	614	633
36	528	599	498	547	620	584	618	637
37	532	603	501	551	624	588	622	641
38	535	607	504	554	628	592	626	645
39	542	614	511	561	636	599	634	654
40	549	622	517	568	644	607	642	662
41	559	634	527	579	656	618	654	674
42	569	645	536	589	668	629	666	686
43	583	661	549	604	684	645	682	703
44	600	680	565	621	704	664	702	723
45	620	703	584	642	728	686	726	748
46	644	730	607	667	756	712	754	777
47	671	761	633	695	788	742	785	809
48	702	796	662	727	824	777	822	847
49	733	830	690	759	860	810	857	884
50	767	869	723	794	900	848	897	925
51	801	908	755	830	940	886	937	966
52	839	950	790	868	984	927	981	1,011
53	876	993	826	907	1,028	969	1,025	1,056
54	917	1,039	864	950	1,076	1,014	1,073	1,106
55	958	1,086	902	992	1,124	1,059	1,120	1,155
56	1,002	1,136	944	1,038	1,176	1,108	1,172	1,208
57	1,047	1,186	986	1,084	1,228	1,158	1,224	1,262
58	1,095	1,240	1,031	1,133	1,284	1,210	1,280	1,320
59	1,118	1,267	1,053	1,158	1,312	1,236	1,308	1,348
60	1,166	1,321	1,098	1,207	1,368	1,289	1,364	1,406
61	1,207	1,368	1,137	1,250	1,416	1,335	1,412	1,455
62	1,234	1,399	1,163	1,278	1,448	1,365	1,444	1,488
63	1,268	1,437	1,195	1,313	1,488	1,402	1,483	1,529
64+	1,290	1,461	1,215	1,335	1,512	1,425	1,506	1,554

2024 Monthly rates

All other service area counties

Please note: These rates do not include the federal financial assistance you may be eligible to receive through the Oregon Health Insurance Marketplace. Rates for CSR plans will vary and are found on the Oregon Health Insurance Marketplace.

Non-Tobacco User Rates								
Age on 2024 effective date	KP E KP OR Bronze 9100/75	KP E KP Oregon Standard Bronze Plan	KP E KP OR Bronze 7100/0% HSA	KP E KP OR Bronze 5500/50	KP E KP Oregon Standard Silver Plan	KP KP OR Silver 5000/50	KP KP OR Silver 4000/40 X	E KP OR Silver 4000/40
0-20	$176	$179	$185	$186	$242	$194	$202	$229
21-24	278	281	291	293	381	306	319	361
25	279	282	292	295	382	307	320	363
26	284	288	298	300	390	313	326	370
27	291	295	305	307	399	321	334	379
28	302	306	316	319	414	333	346	393
29	311	315	325	328	426	342	357	404
30	315	319	330	333	432	347	362	410
31	322	326	337	340	442	355	369	419
32	329	333	344	347	451	362	377	427
33	333	337	348	351	456	367	382	433
34	337	341	353	356	462	372	387	439
35	339	344	355	358	466	374	389	442
36	342	346	358	361	469	376	392	444
37	344	348	360	363	472	379	394	447
38	346	350	362	365	475	381	397	450
39	351	355	367	370	481	386	402	456
40	355	359	372	375	487	391	407	462
41	362	366	379	382	496	398	415	470
42	368	373	385	389	505	405	422	479
43	377	382	395	398	517	415	432	490
44	388	393	406	410	532	428	445	505
45	401	406	420	424	550	442	460	522
46	417	422	436	440	571	459	478	542
47	434	440	455	458	595	478	498	565
48	454	460	476	480	623	500	521	591
49	474	480	496	500	650	522	544	616
50	496	502	519	524	680	547	569	645
51	518	525	542	547	710	571	594	674
52	542	549	568	573	744	597	622	705
53	567	574	593	598	777	624	650	737
54	593	600	621	626	813	653	680	771
55	619	627	649	654	849	682	711	806
56	648	656	679	684	889	714	743	843
57	677	685	709	715	928	746	777	881
58	708	717	741	747	971	780	812	921
59	723	732	757	764	992	797	829	940
60	754	763	789	796	1,034	831	865	981
61	780	790	817	824	1,070	860	895	1,015
62	798	808	836	843	1,094	879	915	1,038
63	820	830	859	866	1,125	903	941	1,067
64+	834	843	873	879	1,143	918	957	1,083

2024 Monthly rates

All other service area counties

Please note: These rates do not include the federal financial assistance you may be eligible to receive through the Oregon Health Insurance Marketplace. Rates for CSR plans will vary and are found on the Oregon Health Insurance Marketplace.

Non-Tobacco User Rates								
Age on 2024 effective date	KP OR Silver 3000/40 X	E KP OR Silver 3000/40	KP OR Silver 3200/35% HSA	KP OR Silver 750/35 X	E KP OR Silver 750/35	KP E KP OR Gold 1750/20	KP E KP Oregon Standard Gold Plan	KP E KP OR Gold 0/15
0-20	$220	$249	$207	$227	$258	$243	$257	$265
21-24	346	392	326	358	406	382	405	417
25	347	394	327	360	407	384	406	419
26	354	401	334	367	416	392	414	427
27	363	411	341	375	425	401	424	437
28	376	426	354	389	441	416	440	453
29	387	439	365	401	454	428	453	467
30	393	445	370	407	461	434	459	473
31	401	454	378	415	470	443	469	483
32	409	464	385	424	480	452	479	493
33	414	470	390	429	486	458	485	500
34	420	476	396	435	493	464	491	506
35	423	479	398	438	496	467	494	510
36	425	482	401	441	499	470	498	513
37	428	485	403	443	502	473	501	516
38	431	488	406	446	506	477	504	520
39	437	495	411	452	512	483	511	526
40	442	501	416	458	519	489	517	533
41	450	510	424	466	528	498	527	543
42	458	519	432	475	538	507	536	552
43	469	532	442	486	551	519	549	566
44	483	548	455	500	567	534	565	583
45	499	566	470	517	586	552	584	602
46	519	588	489	537	609	574	607	625
47	541	613	509	560	634	598	632	652
48	566	641	533	586	664	625	661	682
49	590	669	556	611	692	652	690	711
50	618	700	582	640	725	683	723	745
51	645	731	608	668	757	713	754	778
52	675	765	636	699	792	747	790	814
53	706	800	665	731	828	780	825	851
54	738	837	696	765	866	817	864	890
55	771	874	727	799	905	853	902	930
56	807	914	760	836	947	892	944	973
57	843	955	794	873	989	932	986	1,016
58	881	999	830	913	1,034	974	1,031	1,062
59	900	1,020	848	932	1,056	995	1,053	1,085
60	939	1,064	884	972	1,101	1,038	1,098	1,132
61	972	1,101	916	1,006	1,140	1,075	1,137	1,172
62	994	1,126	936	1,029	1,166	1,099	1,162	1,198
63	1,021	1,157	962	1,057	1,198	1,129	1,194	1,231
64+	1,038	1,176	978	1,074	1,218	1,146	1,215	1,251

2024 Monthly rates

All other service area counties

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Tobacco User Rates								
Age on 2024 effective date	KP E KP OR Bronze 9100/75	KP E KP Oregon Standard Bronze Plan	KP E KP OR Bronze 7100/0% HSA	KP E KP OR Bronze 5500/50	KP E KP Oregon Standard Silver Plan	KP KP OR Silver 5000/50	KP KP OR Silver 4000/40 X	E KP OR Silver 4000/40
0-20	$176	$179	$185	$186	$242	$194	$202	$229
21-24	333	337	349	352	457	367	382	434
25	335	339	350	353	459	369	384	435
26	341	346	357	360	468	376	392	444
27	349	354	366	369	479	385	401	454
28	362	367	379	383	497	399	416	471
29	373	378	391	394	512	411	428	485
30	378	383	396	400	519	417	434	492
31	386	391	404	408	530	426	443	503
32	394	399	413	416	541	434	452	513
33	399	404	418	422	548	440	458	519
34	405	410	424	427	555	446	464	526
35	407	412	426	430	559	449	467	530
36	410	415	429	433	562	452	470	533
37	413	418	432	436	566	455	473	537
38	415	421	435	439	570	458	476	540
39	421	426	440	444	577	463	483	547
40	426	431	446	450	584	469	489	554
41	434	439	454	458	595	478	498	565
42	442	447	462	466	606	487	507	574
43	452	458	474	478	620	498	519	588
44	466	471	488	492	639	513	534	606
45	481	487	504	508	660	530	552	626
46	500	506	523	528	686	551	574	650
47	521	527	545	550	714	574	598	678
48	545	552	571	576	747	600	625	709
49	569	576	595	601	780	627	652	740
50	595	603	623	629	816	656	683	774
51	622	629	651	656	853	685	713	809
52	651	659	681	687	892	717	746	846
53	680	688	712	718	933	749	780	884
54	712	721	745	752	976	784	816	926
55	743	753	778	785	1,019	819	853	967
56	778	787	814	821	1,066	857	892	1,012
57	812	822	851	858	1,114	895	932	1,057
58	849	860	889	897	1,165	936	974	1,105
59	868	878	908	916	1,190	956	995	1,129
60	905	916	947	955	1,241	997	1,038	1,177
61	937	948	981	989	1,285	1,032	1,074	1,218
62	958	970	1,003	1,011	1,313	1,055	1,099	1,246
63	984	996	1,030	1,039	1,349	1,084	1,129	1,280
64+	999	1,011	1,047	1,056	1,371	1,101	1,146	1,302

2024 Monthly rates

All other service area counties

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Tobacco User Rates								
Age on 2024 effective date	KP OR Silver 3000/40 X	E KP OR Silver 3000/40	KP OR Silver 3200/35% HSA	KP OR Silver 750/35 X	E KP OR Silver 750/35	KP E KP OR Gold 1750/20	KP E KP Oregon Standard Gold Plan	KP E KP OR Gold 0/15
0-20	$220	$249	$207	$227	$258	$243	$257	$265
21-24	415	470	391	430	487	459	485	500
25	417	472	393	431	489	461	487	502
26	425	482	400	440	499	470	497	512
27	435	493	410	450	510	481	509	524
28	451	511	425	467	529	499	528	544
29	464	526	438	481	545	514	543	560
30	471	534	444	488	553	521	551	568
31	481	545	453	498	564	532	563	580
32	491	556	463	508	576	543	574	592
33	497	563	468	515	583	550	582	599
34	504	571	475	522	591	557	589	607
35	507	575	478	525	595	561	593	611
36	511	579	481	529	599	564	597	615
37	514	582	484	532	603	568	601	619
38	517	586	487	536	607	572	605	623
39	524	594	493	542	615	579	613	631
40	530	601	500	549	622	587	620	639
41	540	612	509	560	634	598	632	651
42	550	623	518	569	645	608	643	663
43	563	638	531	583	661	623	659	679
44	580	657	546	600	680	641	678	699
45	599	679	565	621	703	663	701	723
46	623	706	586	645	730	688	728	751
47	649	735	611	672	761	717	759	782
48	679	769	639	703	796	750	794	818
49	708	802	667	733	831	783	828	854
50	741	840	698	768	870	820	867	894
51	774	877	729	802	908	856	905	933
52	810	918	763	839	951	896	948	977
53	847	959	798	877	993	936	990	1,021
54	886	1,004	835	918	1,040	980	1,036	1,068
55	926	1,049	872	958	1,086	1,023	1,083	1,116
56	968	1,097	912	1,003	1,136	1,071	1,133	1,167
57	1,012	1,146	953	1,047	1,187	1,118	1,183	1,219
58	1,058	1,198	996	1,095	1,241	1,169	1,237	1,275
59	1,080	1,224	1,018	1,119	1,268	1,195	1,264	1,302
60	1,127	1,277	1,061	1,166	1,322	1,246	1,318	1,358
61	1,166	1,322	1,099	1,208	1,368	1,290	1,364	1,406
62	1,193	1,351	1,123	1,235	1,399	1,319	1,395	1,438
63	1,225	1,388	1,154	1,269	1,438	1,355	1,433	1,477
64+	1,245	1,410	1,173	1,290	1,461	1,377	1,455	1,500

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