

Grandfathered Medical Plan Rates

Copayment plans

\$5 Copayment Plan				
Age	EE only	EE+S	EE+C	EE+S+C
<30	\$589	\$1,645	\$1,618	\$2,289
30–39	\$651	\$1,768	\$1,663	\$2,531
40–49	\$839	\$1,931	\$1,594	\$2,549
50–54	\$1,093	\$2,271	\$1,802	\$2,903
55–59	\$1,381	\$2,900	\$2,064	\$3,335
60–64	\$1,703	\$3,235	\$2,278	\$3,776
65+	\$1,931	\$4,173	\$2,903	\$4,587

\$15 Copayment Plan				
Age	EE only	EE+S	EE+C	EE+S+C
<30	\$469	\$1,310	\$1,289	\$1,823
30–39	\$518	\$1,408	\$1,325	\$2,016
40–49	\$669	\$1,539	\$1,271	\$2,031
50–54	\$870	\$1,809	\$1,435	\$2,312
55–59	\$1,100	\$2,310	\$1,644	\$2,657
60–64	\$1,357	\$2,577	\$1,815	\$3,008
65+	\$1,539	\$3,326	\$2,314	\$3,656

\$20 Copayment Plan				
Age	EE only	EE+S	EE+C	EE+S+C
<30	\$439	\$1,226	\$1,205	\$1,706
30–39	\$485	\$1,317	\$1,239	\$1,885
40–49	\$625	\$1,438	\$1,188	\$1,898
50–54	\$814	\$1,692	\$1,342	\$2,163
55–59	\$1,029	\$2,160	\$1,538	\$2,484
60–64	\$1,269	\$2,410	\$1,697	\$2,813
65+	\$1,439	\$3,109	\$2,163	\$3,418

\$30 Copayment Plan				
Age	EE only	EE+S	EE+C	EE+S+C
<30	\$398	\$1,111	\$1,093	\$1,546
30–39	\$440	\$1,195	\$1,124	\$1,710
40–49	\$567	\$1,305	\$1,077	\$1,722
50–54	\$738	\$1,534	\$1,217	\$1,961
55–59	\$933	\$1,959	\$1,394	\$2,253
60–64	\$1,150	\$2,185	\$1,538	\$2,551
65+	\$1,304	\$2,819	\$1,961	\$3,099

\$50 Copayment Plan				
Age	EE only	EE+S	EE+C	EE+S+C
<30	\$362	\$1,011	\$994	\$1,407
30–39	\$400	\$1,086	\$1,022	\$1,555
40–49	\$516	\$1,187	\$980	\$1,566
50–54	\$671	\$1,395	\$1,107	\$1,783
55–59	\$848	\$1,781	\$1,268	\$2,048
60–64	\$1,046	\$1,987	\$1,399	\$2,320
65+	\$1,187	\$2,565	\$1,784	\$2,820

Deductible HMO plans

\$30/\$1,000 Deductible HMO Plan				
Age	EE only	EE+S	EE+C	EE+S+C
<30	\$334	\$915	\$757	\$1,103
30–39	\$395	\$1,056	\$797	\$1,236
40–49	\$534	\$1,090	\$835	\$1,385
50–54	\$713	\$1,481	\$977	\$1,640
55–59	\$886	\$1,842	\$1,149	\$2,019
60–64	\$1,135	\$2,272	\$1,403	\$2,514
65+	\$1,377	\$3,139	\$1,634	\$3,293

\$30/\$1,500 Deductible HMO Plan				
Age	EE only	EE+S	EE+C	EE+S+C
<30	\$293	\$802	\$663	\$966
30–39	\$346	\$924	\$698	\$1,082
40–49	\$468	\$955	\$732	\$1,213
50–54	\$625	\$1,297	\$856	\$1,436
55–59	\$776	\$1,613	\$1,006	\$1,768
60–64	\$994	\$1,989	\$1,229	\$2,201
65+	\$1,205	\$2,748	\$1,430	\$2,883

\$40/\$2,000 Deductible HMO Plan				
Age	EE only	EE+S	EE+C	EE+S+C
<30	\$270	\$740	\$612	\$892
30–39	\$319	\$853	\$644	\$999
40–49	\$432	\$882	\$676	\$1,121
50–54	\$577	\$1,198	\$790	\$1,326
55–59	\$716	\$1,489	\$928	\$1,632
60–64	\$918	\$1,837	\$1,135	\$2,033
65+	\$1,114	\$2,539	\$1,322	\$2,663

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

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, 2023

Small Business

Grandfathered Medical Plan Rates

HSA-qualified deductible HMO plans

\$0/\$2,000 Deductible HMO Plan with 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	\$292	\$799	\$661	\$963	<30	\$237	\$649	\$537	\$782	<30	\$210	\$575	\$475	\$693
30–39	\$345	\$921	\$696	\$1,078	30–39	\$280	\$749	\$565	\$877	30–39	\$248	\$663	\$500	\$776
40–49	\$466	\$951	\$729	\$1,208	40–49	\$379	\$773	\$593	\$982	40–49	\$335	\$684	\$524	\$869
50–54	\$622	\$1,292	\$852	\$1,430	50–54	\$506	\$1,050	\$693	\$1,162	50–54	\$448	\$930	\$613	\$1,029
55–59	\$773	\$1,607	\$1,002	\$1,762	55–59	\$628	\$1,306	\$814	\$1,432	55–59	\$556	\$1,156	\$721	\$1,267
60–64	\$990	\$1,982	\$1,224	\$2,193	60–64	\$805	\$1,611	\$995	\$1,783	60–64	\$712	\$1,425	\$880	\$1,577
65+	\$1,201	\$2,739	\$1,425	\$2,873	65+	\$976	\$2,226	\$1,158	\$2,335	65+	\$864	\$1,970	\$1,025	\$2,067

Deductible HMO plans with HRA plans

\$30/\$1,500 Deductible HMO Plan with 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	\$304	\$833	\$689	\$1,004	<30	\$272	\$746	\$616	\$899
30–39	\$360	\$961	\$726	\$1,125	30–39	\$322	\$860	\$650	\$1,007
40–49	\$486	\$992	\$760	\$1,260	40–49	\$435	\$888	\$681	\$1,128
50–54	\$649	\$1,348	\$889	\$1,492	50–54	\$581	\$1,207	\$796	\$1,336
55–59	\$806	\$1,676	\$1,045	\$1,837	55–59	\$722	\$1,501	\$936	\$1,645
60–64	\$1,033	\$2,068	\$1,277	\$2,288	60–64	\$925	\$1,851	\$1,143	\$2,048
65+	\$1,253	\$2,857	\$1,487	\$2,997	65+	\$1,122	\$2,558	\$1,332	\$2,683

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

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])

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	\$622	\$1,737	\$1,708	\$2,417	<30	\$495	\$1,383	\$1,360	\$1,925	<30	\$463	\$1,293	\$1,272	\$1,800
30–39	\$687	\$1,866	\$1,756	\$2,671	30–39	\$547	\$1,487	\$1,399	\$2,128	30–39	\$512	\$1,391	\$1,308	\$1,991
40–49	\$886	\$2,039	\$1,683	\$2,691	40–49	\$706	\$1,624	\$1,341	\$2,143	40–49	\$660	\$1,519	\$1,254	\$2,005
50–54	\$1,153	\$2,397	\$1,902	\$3,064	50–54	\$919	\$1,910	\$1,516	\$2,441	50–54	\$859	\$1,786	\$1,417	\$2,283
55–59	\$1,457	\$3,060	\$2,178	\$3,519	55–59	\$1,161	\$2,438	\$1,736	\$2,804	55–59	\$1,086	\$2,280	\$1,623	\$2,622
60–64	\$1,797	\$3,414	\$2,403	\$3,985	60–64	\$1,432	\$2,720	\$1,915	\$3,175	60–64	\$1,339	\$2,543	\$1,791	\$2,969
65+	\$2,039	\$4,406	\$3,065	\$4,844	65+	\$1,624	\$3,510	\$2,442	\$3,859	65+	\$1,519	\$3,282	\$2,283	\$3,608

\$30 Copayment 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	\$420	\$1,173	\$1,153	\$1,632	<30	\$382	\$1,067	\$1,049	\$1,485
30–39	\$464	\$1,261	\$1,186	\$1,805	30–39	\$422	\$1,147	\$1,079	\$1,642
40–49	\$598	\$1,376	\$1,137	\$1,816	40–49	\$544	\$1,252	\$1,034	\$1,653
50–54	\$779	\$1,619	\$1,285	\$2,069	50–54	\$709	\$1,473	\$1,169	\$1,883
55–59	\$984	\$2,067	\$1,471	\$2,377	55–59	\$896	\$1,881	\$1,339	\$2,163
60–64	\$1,214	\$2,306	\$1,624	\$2,692	60–64	\$1,104	\$2,097	\$1,477	\$2,448
65+	\$1,377	\$2,976	\$2,070	\$3,272	65+	\$1,253	\$2,707	\$1,884	\$2,976

Deductible HMO plans

\$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	\$353	\$967	\$799	\$1,165	<30	\$309	\$846	\$700	\$1,019	<30	\$285	\$781	\$646	\$941
30–39	\$417	\$1,114	\$842	\$1,304	30–39	\$365	\$976	\$737	\$1,143	30–39	\$337	\$901	\$680	\$1,055
40–49	\$564	\$1,151	\$882	\$1,462	40–49	\$494	\$1,008	\$772	\$1,281	40–49	\$456	\$931	\$713	\$1,183
50–54	\$753	\$1,563	\$1,031	\$1,730	50–54	\$659	\$1,369	\$903	\$1,516	50–54	\$609	\$1,264	\$834	\$1,399
55–59	\$935	\$1,944	\$1,212	\$2,131	55–59	\$819	\$1,703	\$1,062	\$1,867	55–59	\$756	\$1,572	\$980	\$1,723
60–64	\$1,198	\$2,398	\$1,481	\$2,653	60–64	\$1,049	\$2,099	\$1,297	\$2,323	60–64	\$969	\$1,939	\$1,198	\$2,146
65+	\$1,453	\$3,313	\$1,724	\$3,475	65+	\$1,272	\$2,901	\$1,510	\$3,043	65+	\$1,175	\$2,680	\$1,395	\$2,811

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Grandfathered Medical Plan Rates

HSA-qualified deductible HMO plans

\$0/\$2,000 Deductible HMO Plan with 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	\$308	\$843	\$697	\$1,016	<30	\$250	\$685	\$566	\$825	<30	\$221	\$606	\$501	\$730
30–39	\$364	\$973	\$735	\$1,139	30–39	\$296	\$791	\$597	\$926	30–39	\$262	\$700	\$529	\$819
40–49	\$492	\$1,004	\$770	\$1,276	40–49	\$400	\$816	\$626	\$1,037	40–49	\$354	\$722	\$554	\$917
50–54	\$657	\$1,364	\$900	\$1,510	50–54	\$534	\$1,109	\$731	\$1,228	50–54	\$473	\$982	\$648	\$1,087
55–59	\$816	\$1,697	\$1,058	\$1,860	55–59	\$663	\$1,379	\$860	\$1,512	55–59	\$587	\$1,220	\$761	\$1,337
60–64	\$1,045	\$2,092	\$1,292	\$2,315	60–64	\$850	\$1,701	\$1,051	\$1,882	60–64	\$752	\$1,505	\$930	\$1,665
65+	\$1,268	\$2,891	\$1,505	\$3,033	65+	\$1,031	\$2,350	\$1,223	\$2,465	65+	\$912	\$2,079	\$1,082	\$2,181

Deductible HMO plans with HRA plans

\$30/\$1,500 Deductible HMO Plan with 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	\$321	\$880	\$727	\$1,060	<30	\$288	\$788	\$651	\$949
30–39	\$380	\$1,015	\$767	\$1,188	30–39	\$340	\$908	\$686	\$1,063
40–49	\$513	\$1,047	\$803	\$1,330	40–49	\$459	\$937	\$718	\$1,191
50–54	\$685	\$1,423	\$938	\$1,575	50–54	\$614	\$1,274	\$841	\$1,410
55–59	\$851	\$1,770	\$1,103	\$1,940	55–59	\$762	\$1,584	\$988	\$1,736
60–64	\$1,091	\$2,183	\$1,349	\$2,415	60–64	\$976	\$1,954	\$1,207	\$2,162
65+	\$1,323	\$3,016	\$1,570	\$3,164	65+	\$1,184	\$2,700	\$1,405	\$2,832

RATES APPLY TO GROUPS WITH GRANDFATHERED PLANS

Grandfathered Plans are not available to New Groups

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Employee/Dependent Codes

Age is based on employee/subscriber

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EE+C = eligible employee plus child(ren) (subscriber and child[ren] without spouse)

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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	\$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

\$30 Copayment 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

\$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	\$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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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

HSA-qualified deductible HMO plans

\$0/\$2,000 Deductible HMO Plan with 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	\$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 Deductible HMO Plan with 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	\$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

RATES APPLY TO GROUPS WITH GRANDFATHERED PLANS

Grandfathered Plans are not available to New Groups

Existing Groups are not allowed to add Grandfathered Plans

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Employee/Dependent Codes

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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	\$687	\$1,919	\$1,887	\$2,671	<30	\$547	\$1,529	\$1,503	\$2,128	<30	\$512	\$1,430	\$1,406	\$1,990
30–39	\$759	\$2,062	\$1,940	\$2,952	30–39	\$605	\$1,644	\$1,546	\$2,353	30–39	\$566	\$1,537	\$1,446	\$2,200
40–49	\$979	\$2,253	\$1,860	\$2,973	40–49	\$780	\$1,795	\$1,482	\$2,369	40–49	\$730	\$1,679	\$1,387	\$2,216
50–54	\$1,275	\$2,650	\$2,102	\$3,387	50–54	\$1,016	\$2,111	\$1,675	\$2,698	50–54	\$950	\$1,974	\$1,566	\$2,523
55–59	\$1,611	\$3,383	\$2,408	\$3,891	55–59	\$1,284	\$2,696	\$1,919	\$3,101	55–59	\$1,200	\$2,520	\$1,794	\$2,898
60–64	\$1,987	\$3,774	\$2,657	\$4,406	60–64	\$1,583	\$3,007	\$2,117	\$3,510	60–64	\$1,480	\$2,811	\$1,979	\$3,282
65+	\$2,253	\$4,869	\$3,387	\$5,353	65+	\$1,795	\$3,879	\$2,699	\$4,264	65+	\$1,679	\$3,628	\$2,524	\$3,988

\$30 Copayment 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	\$464	\$1,296	\$1,275	\$1,804	<30	\$422	\$1,179	\$1,159	\$1,641
30–39	\$513	\$1,393	\$1,311	\$1,994	30–39	\$466	\$1,267	\$1,192	\$1,814
40–49	\$661	\$1,521	\$1,256	\$2,008	40–49	\$602	\$1,385	\$1,144	\$1,828
50–54	\$861	\$1,790	\$1,420	\$2,288	50–54	\$783	\$1,628	\$1,291	\$2,081
55–59	\$1,088	\$2,285	\$1,626	\$2,628	55–59	\$990	\$2,079	\$1,480	\$2,391
60–64	\$1,342	\$2,549	\$1,795	\$2,976	60–64	\$1,221	\$2,319	\$1,633	\$2,707
65+	\$1,522	\$3,289	\$2,288	\$3,616	65+	\$1,384	\$2,991	\$2,081	\$3,288

Deductible HMO plans

\$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	\$390	\$1,068	\$883	\$1,287	<30	\$342	\$936	\$774	\$1,128	<30	\$316	\$865	\$715	\$1,042
30–39	\$461	\$1,232	\$930	\$1,442	30–39	\$403	\$1,078	\$814	\$1,262	30–39	\$373	\$996	\$753	\$1,166
40–49	\$623	\$1,272	\$975	\$1,616	40–49	\$546	\$1,114	\$854	\$1,415	40–49	\$504	\$1,029	\$788	\$1,307
50–54	\$832	\$1,728	\$1,140	\$1,913	50–54	\$729	\$1,513	\$998	\$1,675	50–54	\$673	\$1,397	\$922	\$1,547
55–59	\$1,033	\$2,148	\$1,339	\$2,355	55–59	\$905	\$1,882	\$1,173	\$2,063	55–59	\$836	\$1,738	\$1,084	\$1,905
60–64	\$1,324	\$2,650	\$1,637	\$2,932	60–64	\$1,159	\$2,320	\$1,433	\$2,567	60–64	\$1,071	\$2,143	\$1,324	\$2,371
65+	\$1,606	\$3,662	\$1,906	\$3,842	65+	\$1,406	\$3,206	\$1,669	\$3,363	65+	\$1,299	\$2,962	\$1,542	\$3,107

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

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])

Grandfathered Medical Plan Rates

HSA-qualified deductible HMO plans

\$0/\$2,000 Deductible HMO Plan with 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	\$340	\$932	\$770	\$1,123	<30	\$277	\$758	\$627	\$913	<30	\$245	\$671	\$554	\$808
30–39	\$402	\$1,075	\$812	\$1,258	30–39	\$327	\$874	\$660	\$1,023	30–39	\$289	\$773	\$584	\$905
40–49	\$544	\$1,110	\$851	\$1,410	40–49	\$442	\$902	\$691	\$1,146	40–49	\$391	\$798	\$612	\$1,014
50–54	\$726	\$1,508	\$994	\$1,669	50–54	\$590	\$1,225	\$808	\$1,356	50–54	\$522	\$1,084	\$715	\$1,200
55–59	\$902	\$1,875	\$1,169	\$2,055	55–59	\$733	\$1,524	\$950	\$1,671	55–59	\$648	\$1,348	\$840	\$1,478
60–64	\$1,155	\$2,312	\$1,428	\$2,558	60–64	\$939	\$1,879	\$1,161	\$2,079	60–64	\$831	\$1,663	\$1,027	\$1,840
65+	\$1,401	\$3,195	\$1,663	\$3,352	65+	\$1,139	\$2,597	\$1,352	\$2,724	65+	\$1,008	\$2,298	\$1,196	\$2,411

Deductible HMO plans with HRA plans

\$30/\$1,500 Deductible HMO Plan with 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	\$355	\$972	\$804	\$1,171	<30	\$318	\$871	\$720	\$1,049
30–39	\$420	\$1,122	\$847	\$1,313	30–39	\$376	\$1,004	\$759	\$1,175
40–49	\$567	\$1,157	\$887	\$1,470	40–49	\$508	\$1,037	\$794	\$1,317
50–54	\$758	\$1,573	\$1,038	\$1,741	50–54	\$678	\$1,408	\$929	\$1,559
55–59	\$941	\$1,956	\$1,220	\$2,144	55–59	\$842	\$1,751	\$1,092	\$1,919
60–64	\$1,205	\$2,412	\$1,490	\$2,669	60–64	\$1,079	\$2,160	\$1,334	\$2,390
65+	\$1,462	\$3,334	\$1,735	\$3,497	65+	\$1,309	\$2,985	\$1,553	\$3,131

RATES APPLY TO GROUPS WITH GRANDFATHERED PLANS

Grandfathered Plans are not available to New Groups

Existing Groups are not allowed to add Grandfathered Plans

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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])

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	\$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 Copayment 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 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	\$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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EE+S+C = eligible employee plus spouse and child(ren) (subscriber and spouse and child[ren])

For effective dates January 1–December 1, 2023

Small Business

Grandfathered Medical Plan Rates

HSA-qualified deductible HMO plans

\$0/\$2,000 Deductible HMO Plan with 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	\$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	30–39	\$303	\$810	\$612	\$948
40–49	\$570	\$1,163	\$891	\$1,477	40–49	\$463	\$945	\$724	\$1,201	40–49	\$410	\$836	\$641	\$1,062
50–54	\$761	\$1,580	\$1,042	\$1,749	50–54	\$618	\$1,283	\$846	\$1,420	50–54	\$547	\$1,136	\$749	\$1,258
55–59	\$945	\$1,965	\$1,225	\$2,154	55–59	\$768	\$1,597	\$996	\$1,751	55–59	\$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	60–64	\$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 Deductible HMO Plan with 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	\$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

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EE+S+C = eligible employee plus spouse and child(ren) (subscriber and spouse and child[ren])