
2012 RATES

Use these rate tables to compare rates for the plans you're interested in.

Rates are effective April 1 through June 15, 2012

IMPORTANT INFORMATION ABOUT OUR RATES

The rates shown in this brochure are our preferred rates. Please note that these rates are subject to change based on medical history, actual plan effective date, age of applicant(s), which family members are approved for coverage, geographic location, and/or scheduled rate adjustments.

What determines your rate

Your rate is based on the following:

- the plan you select
- the subscriber's age and gender (In a plan with family coverage, the subscriber is the oldest family member.)
- how many family members are covered

Rates are based on the subscriber's age on the 1st of the month of the selected effective date of coverage. If you add or drop an eligible dependent or if the subscriber progresses into a new age bracket, your monthly rate may change.

Finding your rate

After you've determined which plans you are interested in, you can use these charts to easily compare the rates.

- Find your individual or family category in the following charts (Female Single Subscriber, Male Subscriber + 2 Children, etc.).
- Next, look in the left-hand column to find the age of the subscriber.
- Read across the rows to easily compare rates for our plans.

OUR SERVICE AREA

Please check to see if you reside in our service area, based on your home address. All applicants must reside within the Kaiser Foundation Health Plan of Georgia service area. Make sure you live in one of the counties we serve: Barrow, Bartow, Butts, Carroll, Cherokee, Clayton, Cobb, Coweta, Dawson, DeKalb, Douglas, Fayette, Forsyth, Fulton, Gwinnett, Hall, Haralson, Heard, Henry, Lamar, Meriwether, Newton, Paulding, Pickens, Pike, Rockdale, Spalding, or Walton. Check for service availability in Clarke, Madison, Oconee, and Oglethorpe counties in 2012.

Effective dates

Rates are for effective dates April 1 through June 15, 2012. For newly enrolled members, your rate will remain the same until your annual renewal month, at which time it is subject to change. If you change plans, add a dependent, or turn 65, your rate may change before your renewal month.

Try different combinations

Each child 18 and under must be enrolled as a dependent on a parent's plan. However, family members do not all have to enroll in the same plan. This allows you to select different levels of coverage for different family members, depending on their needs.

Medicare-eligible subscribers

If you are 65+ years of age and Medicare eligible or are under age 65 and entitled to Medicare on the basis of Social Security disability, you may be eligible for lower rates under Kaiser Permanente Senior Advantage. Please call **1-800-232-4404** for more information.

Please note

To become a Kaiser Permanente for Individuals and Families (KPIF) member, you are subject to medical review. We'll send you a letter notifying you whether you have been approved for coverage. (Eligible applicants under age 19 must be accepted under federal law.) Please do not cancel your current coverage until then.

KPIF coverage will not begin until you receive a written notice of approval. We won't deposit your check or charge your credit card unless you're accepted for membership. If approved, your coverage will begin on the effective date indicated on the notice. Upon approval, you'll receive your Kaiser Permanente ID card.

MALE SINGLE SUBSCRIBER

Age range	Classic plans				Essential plans				Advantage plans				HSA plan
	1500	2500	3500	5000	1500	3000	5000	7500	2500	3500	5000	7500	5000
19-24	\$173	\$138	\$121	\$108	\$134	\$111	\$91	\$79	\$93	\$85	\$76	\$71	\$95
25-27	\$169	\$135	\$119	\$106	\$132	\$109	\$89	\$78	\$91	\$83	\$74	\$71	\$94
28-30	\$171	\$137	\$120	\$107	\$133	\$110	\$90	\$79	\$92	\$84	\$75	\$71	\$94
31-33	\$182	\$145	\$128	\$115	\$141	\$116	\$96	\$84	\$98	\$89	\$80	\$77	\$100
34-36	\$194	\$155	\$137	\$122	\$150	\$124	\$103	\$89	\$105	\$95	\$85	\$82	\$107
37-38	\$206	\$165	\$145	\$129	\$159	\$132	\$109	\$94	\$111	\$101	\$90	\$86	\$114
39-40	\$219	\$175	\$154	\$138	\$170	\$140	\$116	\$100	\$118	\$108	\$95	\$92	\$121
41-42	\$234	\$186	\$165	\$147	\$181	\$150	\$123	\$108	\$126	\$115	\$103	\$98	\$128
43-44	\$249	\$198	\$175	\$156	\$193	\$159	\$132	\$114	\$134	\$122	\$109	\$105	\$138
45-46	\$264	\$211	\$186	\$166	\$205	\$169	\$139	\$122	\$143	\$129	\$116	\$111	\$146
47-48	\$282	\$225	\$198	\$177	\$219	\$180	\$149	\$129	\$151	\$139	\$122	\$117	\$156
49-50	\$308	\$245	\$216	\$193	\$238	\$197	\$162	\$141	\$166	\$151	\$134	\$128	\$170
51-52	\$327	\$262	\$231	\$206	\$255	\$210	\$173	\$150	\$177	\$162	\$143	\$137	\$181
53	\$349	\$279	\$246	\$220	\$271	\$224	\$184	\$160	\$188	\$172	\$152	\$146	\$193
54	\$370	\$294	\$260	\$232	\$286	\$236	\$196	\$170	\$199	\$181	\$162	\$154	\$204
55	\$395	\$315	\$278	\$247	\$307	\$252	\$208	\$181	\$213	\$195	\$173	\$165	\$218
56	\$411	\$328	\$290	\$258	\$320	\$264	\$217	\$189	\$222	\$202	\$179	\$172	\$227
57	\$428	\$342	\$301	\$269	\$332	\$274	\$226	\$197	\$231	\$210	\$186	\$179	\$236
58	\$448	\$358	\$316	\$281	\$348	\$287	\$236	\$206	\$241	\$221	\$196	\$187	\$247
59	\$468	\$374	\$330	\$294	\$363	\$299	\$247	\$215	\$253	\$230	\$205	\$196	\$258
60	\$489	\$389	\$344	\$307	\$379	\$313	\$258	\$225	\$264	\$240	\$213	\$204	\$269
61	\$509	\$406	\$359	\$320	\$395	\$326	\$269	\$234	\$275	\$251	\$223	\$213	\$281
62	\$529	\$422	\$373	\$332	\$411	\$339	\$280	\$243	\$286	\$260	\$231	\$222	\$292
63	\$563	\$449	\$397	\$353	\$437	\$360	\$297	\$258	\$303	\$276	\$245	\$235	\$311
64	\$599	\$478	\$422	\$376	\$465	\$383	\$316	\$275	\$323	\$294	\$261	\$251	\$330

The rates shown above are our preferred rates. Please note that these rates are subject to change based on medical history, actual plan effective date, age of applicant(s), which family members are approved for coverage, geographic location, and/or scheduled rate adjustments.

FEMALE SINGLE SUBSCRIBER

Age range	Classic plans				Essential plans				Advantage plans				HSA plan
	1500	2500	3500	5000	1500	3000	5000	7500	2500	3500	5000	7500	5000
19-24	\$202	\$162	\$143	\$127	\$156	\$129	\$107	\$93	\$110	\$99	\$88	\$85	\$111
25-27	\$213	\$171	\$150	\$134	\$167	\$137	\$113	\$98	\$116	\$105	\$94	\$89	\$118
28-30	\$223	\$178	\$156	\$140	\$173	\$143	\$117	\$103	\$120	\$110	\$97	\$93	\$122
31-33	\$237	\$189	\$167	\$149	\$184	\$151	\$125	\$109	\$128	\$116	\$104	\$99	\$130
34-36	\$252	\$201	\$178	\$158	\$196	\$162	\$133	\$116	\$136	\$123	\$111	\$105	\$139
37-38	\$268	\$213	\$189	\$168	\$207	\$172	\$141	\$123	\$145	\$132	\$117	\$112	\$148
39-40	\$286	\$228	\$201	\$179	\$222	\$183	\$150	\$132	\$154	\$140	\$124	\$119	\$157
41-42	\$303	\$242	\$214	\$191	\$236	\$195	\$160	\$140	\$164	\$150	\$133	\$127	\$168
43-44	\$323	\$258	\$228	\$203	\$252	\$207	\$171	\$149	\$174	\$159	\$141	\$135	\$179
45-46	\$341	\$271	\$240	\$213	\$264	\$218	\$179	\$156	\$184	\$167	\$149	\$142	\$188
47-48	\$358	\$286	\$252	\$225	\$279	\$230	\$189	\$165	\$194	\$176	\$156	\$150	\$198
49-50	\$371	\$295	\$261	\$233	\$287	\$237	\$196	\$170	\$200	\$182	\$162	\$155	\$205
51-52	\$392	\$313	\$275	\$246	\$304	\$252	\$207	\$180	\$212	\$193	\$171	\$164	\$216
53	\$404	\$322	\$285	\$254	\$314	\$258	\$213	\$185	\$218	\$199	\$176	\$169	\$224
54	\$407	\$325	\$286	\$256	\$316	\$260	\$214	\$187	\$220	\$201	\$178	\$170	\$225
55	\$405	\$323	\$286	\$255	\$315	\$259	\$213	\$186	\$219	\$200	\$177	\$169	\$224
56	\$411	\$328	\$290	\$258	\$320	\$264	\$217	\$189	\$222	\$202	\$179	\$172	\$227
57	\$417	\$333	\$294	\$263	\$324	\$267	\$221	\$192	\$225	\$206	\$182	\$174	\$230
58	\$431	\$344	\$303	\$270	\$334	\$275	\$228	\$198	\$233	\$212	\$188	\$180	\$238
59	\$445	\$354	\$314	\$280	\$345	\$285	\$235	\$204	\$240	\$219	\$195	\$185	\$245
60	\$458	\$366	\$322	\$287	\$355	\$293	\$241	\$210	\$247	\$225	\$200	\$192	\$253
61	\$471	\$376	\$332	\$296	\$366	\$301	\$249	\$216	\$254	\$232	\$206	\$197	\$260
62	\$485	\$387	\$342	\$303	\$376	\$310	\$256	\$223	\$262	\$238	\$212	\$202	\$268
63	\$502	\$401	\$354	\$315	\$389	\$321	\$265	\$231	\$270	\$247	\$219	\$210	\$278
64	\$525	\$418	\$370	\$329	\$407	\$337	\$276	\$241	\$283	\$258	\$230	\$220	\$290

The rates shown above are our preferred rates. Please note that these rates are subject to change based on medical history, actual plan effective date, age of applicant(s), which family members are approved for coverage, geographic location, and/or scheduled rate adjustments.

MALE SUBSCRIBER + SPOUSE¹

Age range	Classic plans				Essential plans				Advantage plans				HSA plan
	1500	2500	3500	5000	1500	3000	5000	7500	2500	3500	5000	7500	5000
19-24	\$363	\$290	\$257	\$229	\$282	\$233	\$192	\$167	\$196	\$179	\$158	\$152	\$201
25-27	\$362	\$289	\$255	\$228	\$281	\$232	\$191	\$167	\$196	\$178	\$157	\$151	\$200
28-30	\$371	\$295	\$261	\$232	\$287	\$236	\$196	\$170	\$200	\$182	\$162	\$155	\$204
31-33	\$396	\$316	\$279	\$249	\$308	\$253	\$209	\$182	\$213	\$195	\$173	\$166	\$219
34-36	\$421	\$337	\$297	\$264	\$326	\$269	\$223	\$194	\$227	\$207	\$184	\$176	\$232
37-38	\$447	\$357	\$315	\$281	\$348	\$286	\$236	\$206	\$241	\$220	\$196	\$187	\$247
39-40	\$477	\$381	\$337	\$299	\$371	\$305	\$252	\$219	\$258	\$235	\$208	\$200	\$264
41-42	\$508	\$405	\$358	\$320	\$395	\$326	\$269	\$234	\$274	\$251	\$222	\$213	\$281
43-44	\$541	\$432	\$381	\$340	\$420	\$347	\$286	\$249	\$292	\$266	\$236	\$226	\$298
45-46	\$571	\$456	\$402	\$358	\$443	\$366	\$301	\$263	\$309	\$281	\$250	\$239	\$315
47-48	\$606	\$484	\$427	\$380	\$470	\$388	\$320	\$279	\$326	\$298	\$264	\$253	\$334
49-50	\$660	\$526	\$464	\$414	\$512	\$422	\$348	\$303	\$355	\$324	\$288	\$275	\$364
51-52	\$700	\$558	\$493	\$439	\$543	\$448	\$370	\$321	\$377	\$344	\$305	\$292	\$386
53	\$734	\$585	\$517	\$461	\$570	\$469	\$387	\$337	\$396	\$360	\$320	\$307	\$405
54	\$759	\$605	\$534	\$476	\$589	\$486	\$400	\$349	\$410	\$373	\$331	\$317	\$418
55	\$800	\$638	\$563	\$502	\$621	\$513	\$422	\$368	\$432	\$393	\$349	\$334	\$441
56	\$823	\$657	\$580	\$517	\$638	\$526	\$434	\$378	\$444	\$405	\$359	\$344	\$455
57	\$846	\$675	\$595	\$530	\$655	\$541	\$446	\$388	\$456	\$416	\$370	\$354	\$467
58	\$880	\$702	\$620	\$553	\$683	\$563	\$464	\$405	\$474	\$433	\$384	\$368	\$486
59	\$913	\$728	\$643	\$574	\$708	\$585	\$482	\$419	\$493	\$449	\$399	\$382	\$504
60	\$946	\$755	\$666	\$593	\$734	\$606	\$499	\$435	\$510	\$465	\$413	\$396	\$523
61	\$981	\$782	\$691	\$615	\$761	\$628	\$518	\$451	\$529	\$483	\$428	\$410	\$541
62	\$1,013	\$808	\$713	\$636	\$786	\$648	\$535	\$466	\$547	\$498	\$442	\$424	\$559
63	\$1,064	\$849	\$750	\$668	\$826	\$681	\$562	\$490	\$575	\$524	\$465	\$445	\$587
64	\$1,125	\$897	\$791	\$706	\$872	\$719	\$592	\$517	\$606	\$553	\$490	\$469	\$620

The rates shown above are our preferred rates. Please note that these rates are subject to change based on medical history, actual plan effective date, age of applicant(s), which family members are approved for coverage, geographic location, and/or scheduled rate adjustments.

¹The subscriber is the oldest family member applying for coverage.

FEMALE SUBSCRIBER + SPOUSE¹

Age range	Classic plans				Essential plans				Advantage plans				HSA plan
	1500	2500	3500	5000	1500	3000	5000	7500	2500	3500	5000	7500	5000
19-24	\$384	\$307	\$270	\$241	\$298	\$246	\$202	\$177	\$207	\$189	\$167	\$160	\$212
25-27	\$402	\$320	\$283	\$252	\$312	\$258	\$212	\$184	\$217	\$198	\$175	\$168	\$222
28-30	\$413	\$329	\$291	\$259	\$320	\$264	\$218	\$190	\$223	\$203	\$180	\$173	\$228
31-33	\$439	\$350	\$309	\$275	\$341	\$281	\$232	\$201	\$236	\$216	\$192	\$184	\$242
34-36	\$467	\$372	\$328	\$293	\$361	\$298	\$246	\$214	\$252	\$230	\$204	\$196	\$258
37-38	\$496	\$396	\$349	\$312	\$384	\$317	\$262	\$228	\$267	\$243	\$216	\$207	\$274
39-40	\$528	\$421	\$372	\$332	\$410	\$338	\$279	\$242	\$285	\$260	\$230	\$221	\$292
41-42	\$563	\$449	\$397	\$354	\$437	\$360	\$297	\$259	\$303	\$276	\$246	\$235	\$311
43-44	\$598	\$477	\$421	\$376	\$464	\$383	\$315	\$275	\$322	\$294	\$261	\$250	\$330
45-46	\$634	\$505	\$446	\$398	\$492	\$405	\$334	\$292	\$342	\$312	\$276	\$264	\$349
47-48	\$670	\$534	\$472	\$420	\$520	\$429	\$354	\$309	\$361	\$329	\$292	\$281	\$370
49-50	\$694	\$553	\$489	\$436	\$538	\$444	\$366	\$319	\$375	\$342	\$303	\$290	\$383
51-52	\$738	\$588	\$519	\$463	\$573	\$472	\$389	\$339	\$398	\$362	\$322	\$309	\$407
53	\$772	\$615	\$544	\$485	\$599	\$494	\$407	\$354	\$416	\$379	\$337	\$322	\$426
54	\$792	\$632	\$558	\$497	\$615	\$507	\$418	\$364	\$428	\$389	\$346	\$331	\$438
55	\$800	\$638	\$564	\$502	\$621	\$513	\$422	\$368	\$432	\$393	\$349	\$334	\$441
56	\$823	\$657	\$580	\$517	\$638	\$526	\$434	\$378	\$444	\$405	\$359	\$344	\$455
57	\$846	\$675	\$595	\$530	\$657	\$541	\$446	\$388	\$456	\$416	\$370	\$354	\$467
58	\$879	\$701	\$619	\$552	\$682	\$563	\$464	\$405	\$474	\$433	\$383	\$368	\$485
59	\$913	\$728	\$643	\$573	\$708	\$584	\$482	\$419	\$492	\$449	\$399	\$382	\$503
60	\$947	\$756	\$667	\$594	\$734	\$606	\$500	\$435	\$510	\$466	\$413	\$396	\$523
61	\$981	\$782	\$691	\$615	\$761	\$628	\$518	\$451	\$529	\$483	\$428	\$410	\$541
62	\$1,015	\$809	\$714	\$637	\$787	\$649	\$536	\$467	\$547	\$499	\$443	\$424	\$560
63	\$1,064	\$849	\$751	\$668	\$826	\$681	\$562	\$490	\$575	\$524	\$465	\$445	\$587
64	\$1,125	\$897	\$791	\$706	\$872	\$719	\$592	\$517	\$606	\$553	\$490	\$469	\$620

The rates shown above are our preferred rates. Please note that these rates are subject to change based on medical history, actual plan effective date, age of applicant(s), which family members are approved for coverage, geographic location, and/or scheduled rate adjustments.

¹The subscriber is the oldest family member applying for coverage.

MALE SUBSCRIBER + 1 CHILD¹

Age range	Classic plans				Essential plans				Advantage plans				HSA plan
	1500	2500	3500	5000	1500	3000	5000	7500	2500	3500	5000	7500	5000
19–24	\$375	\$299	\$264	\$235	\$291	\$240	\$198	\$173	\$202	\$184	\$164	\$156	\$207
25–27	\$368	\$293	\$259	\$230	\$286	\$235	\$194	\$169	\$198	\$180	\$160	\$153	\$203
28–30	\$369	\$294	\$260	\$231	\$286	\$235	\$195	\$169	\$199	\$181	\$162	\$154	\$203
31–33	\$380	\$303	\$268	\$239	\$295	\$243	\$201	\$175	\$205	\$187	\$167	\$159	\$210
34–36	\$392	\$313	\$275	\$246	\$303	\$251	\$207	\$180	\$211	\$193	\$171	\$164	\$216
37–38	\$404	\$322	\$285	\$253	\$314	\$258	\$213	\$185	\$218	\$199	\$176	\$169	\$224
39–40	\$417	\$332	\$294	\$262	\$324	\$267	\$220	\$192	\$225	\$205	\$182	\$174	\$230
41–42	\$433	\$345	\$304	\$271	\$335	\$276	\$228	\$199	\$233	\$213	\$188	\$180	\$238
43–44	\$446	\$356	\$315	\$281	\$347	\$286	\$235	\$205	\$241	\$220	\$196	\$186	\$246
45–46	\$462	\$369	\$326	\$290	\$359	\$296	\$244	\$213	\$250	\$228	\$201	\$194	\$255
47–48	\$479	\$383	\$338	\$301	\$372	\$308	\$253	\$221	\$258	\$235	\$209	\$201	\$264
49–50	\$510	\$407	\$359	\$320	\$396	\$326	\$269	\$235	\$275	\$252	\$223	\$213	\$282
51–52	\$530	\$422	\$374	\$332	\$411	\$340	\$281	\$243	\$286	\$261	\$231	\$222	\$292
53	\$553	\$440	\$388	\$347	\$428	\$354	\$292	\$254	\$298	\$271	\$241	\$231	\$304
54	\$572	\$456	\$403	\$359	\$444	\$366	\$302	\$263	\$309	\$281	\$250	\$239	\$316
55	\$603	\$480	\$424	\$378	\$468	\$385	\$318	\$276	\$325	\$296	\$263	\$252	\$332
56	\$619	\$494	\$436	\$388	\$479	\$396	\$326	\$285	\$333	\$304	\$270	\$258	\$342
57	\$636	\$507	\$447	\$400	\$493	\$407	\$335	\$292	\$343	\$313	\$278	\$265	\$351
58	\$655	\$524	\$462	\$411	\$508	\$419	\$346	\$301	\$354	\$322	\$286	\$274	\$362
59	\$676	\$539	\$476	\$425	\$524	\$433	\$356	\$311	\$364	\$332	\$295	\$283	\$373
60	\$696	\$555	\$490	\$437	\$541	\$445	\$368	\$320	\$376	\$343	\$303	\$291	\$384
61	\$717	\$572	\$504	\$450	\$556	\$459	\$378	\$329	\$386	\$352	\$313	\$299	\$396
62	\$737	\$587	\$519	\$462	\$572	\$471	\$388	\$339	\$398	\$362	\$321	\$309	\$406
63	\$770	\$615	\$542	\$484	\$598	\$493	\$406	\$354	\$415	\$379	\$337	\$322	\$426
64	\$807	\$643	\$568	\$506	\$626	\$516	\$426	\$371	\$435	\$397	\$352	\$337	\$445

The rates shown above are our preferred rates. Please note that these rates are subject to change based on medical history, actual plan effective date, age of applicant(s), which family members are approved for coverage, geographic location, and/or scheduled rate adjustments.

¹The subscriber is the oldest family member applying for coverage.

FEMALE SUBSCRIBER + 1 CHILD¹

Age range	Classic plans				Essential plans				Advantage plans				HSA plan
	1500	2500	3500	5000	1500	3000	5000	7500	2500	3500	5000	7500	5000
19-24	\$395	\$315	\$279	\$247	\$307	\$253	\$208	\$181	\$213	\$195	\$173	\$166	\$218
25-27	\$411	\$328	\$290	\$258	\$320	\$264	\$217	\$189	\$223	\$202	\$179	\$173	\$228
28-30	\$420	\$335	\$296	\$264	\$326	\$269	\$222	\$194	\$227	\$207	\$184	\$176	\$232
31-33	\$435	\$347	\$307	\$273	\$338	\$279	\$230	\$200	\$235	\$213	\$190	\$182	\$240
34-36	\$450	\$359	\$317	\$283	\$349	\$288	\$237	\$207	\$242	\$222	\$196	\$188	\$249
37-38	\$466	\$372	\$328	\$292	\$361	\$298	\$246	\$214	\$252	\$230	\$203	\$195	\$258
39-40	\$484	\$385	\$341	\$303	\$375	\$309	\$255	\$223	\$261	\$238	\$211	\$202	\$267
41-42	\$502	\$401	\$354	\$315	\$389	\$321	\$265	\$231	\$270	\$247	\$219	\$210	\$278
43-44	\$522	\$416	\$367	\$327	\$405	\$333	\$275	\$240	\$281	\$257	\$228	\$218	\$288
45-46	\$538	\$430	\$379	\$338	\$417	\$345	\$285	\$247	\$291	\$264	\$235	\$225	\$297
47-48	\$557	\$444	\$392	\$349	\$432	\$356	\$293	\$256	\$300	\$273	\$242	\$233	\$308
49-50	\$563	\$449	\$397	\$354	\$437	\$360	\$297	\$259	\$303	\$276	\$246	\$235	\$311
51-52	\$585	\$467	\$412	\$367	\$454	\$375	\$309	\$269	\$315	\$288	\$256	\$244	\$323
53	\$597	\$476	\$420	\$375	\$463	\$382	\$315	\$274	\$322	\$293	\$260	\$250	\$329
54	\$598	\$477	\$421	\$376	\$464	\$383	\$315	\$275	\$322	\$294	\$261	\$251	\$330
55	\$592	\$473	\$417	\$372	\$460	\$379	\$313	\$272	\$320	\$292	\$258	\$247	\$327
56	\$599	\$478	\$422	\$376	\$465	\$383	\$316	\$275	\$323	\$294	\$261	\$251	\$330
57	\$605	\$483	\$427	\$380	\$469	\$387	\$320	\$279	\$326	\$298	\$264	\$253	\$333
58	\$619	\$494	\$436	\$388	\$479	\$396	\$326	\$285	\$333	\$303	\$269	\$258	\$342
59	\$632	\$504	\$445	\$397	\$490	\$405	\$333	\$291	\$341	\$311	\$275	\$264	\$349
60	\$645	\$515	\$455	\$405	\$501	\$413	\$341	\$297	\$348	\$317	\$282	\$269	\$356
61	\$659	\$525	\$464	\$413	\$512	\$421	\$348	\$303	\$355	\$324	\$287	\$275	\$363
62	\$672	\$536	\$473	\$422	\$522	\$430	\$354	\$309	\$362	\$330	\$293	\$281	\$371
63	\$690	\$550	\$486	\$433	\$535	\$441	\$364	\$317	\$372	\$339	\$301	\$288	\$381
64	\$712	\$568	\$502	\$447	\$553	\$456	\$376	\$327	\$384	\$350	\$311	\$298	\$393

The rates shown above are our preferred rates. Please note that these rates are subject to change based on medical history, actual plan effective date, age of applicant(s), which family members are approved for coverage, geographic location, and/or scheduled rate adjustments.

¹The subscriber is the oldest family member applying for coverage.

MALE SUBSCRIBER, SPOUSE, + 1 CHILD¹

Age range	Classic plans				Essential plans				Advantage plans				HSA plan
	1500	2500	3500	5000	1500	3000	5000	7500	2500	3500	5000	7500	5000
19-24	\$566	\$451	\$400	\$355	\$439	\$362	\$299	\$260	\$305	\$279	\$247	\$236	\$313
25-27	\$560	\$446	\$395	\$352	\$434	\$358	\$296	\$258	\$302	\$275	\$244	\$234	\$309
28-30	\$568	\$453	\$400	\$356	\$440	\$363	\$299	\$261	\$307	\$280	\$247	\$237	\$314
31-33	\$594	\$473	\$418	\$373	\$461	\$380	\$314	\$273	\$320	\$292	\$259	\$249	\$327
34-36	\$619	\$494	\$436	\$388	\$480	\$396	\$326	\$285	\$333	\$304	\$270	\$258	\$342
37-38	\$646	\$515	\$455	\$405	\$501	\$413	\$341	\$297	\$349	\$318	\$282	\$269	\$356
39-40	\$675	\$538	\$475	\$424	\$524	\$433	\$356	\$310	\$364	\$332	\$295	\$282	\$373
41-42	\$706	\$564	\$497	\$444	\$548	\$453	\$373	\$325	\$381	\$348	\$309	\$295	\$390
43-44	\$739	\$589	\$521	\$464	\$574	\$473	\$390	\$340	\$399	\$363	\$322	\$309	\$408
45-46	\$768	\$614	\$542	\$483	\$596	\$492	\$405	\$354	\$415	\$378	\$335	\$321	\$425
47-48	\$804	\$641	\$565	\$504	\$623	\$514	\$424	\$370	\$434	\$395	\$351	\$337	\$444
49-50	\$863	\$688	\$607	\$541	\$669	\$552	\$456	\$397	\$465	\$424	\$377	\$360	\$475
51-52	\$903	\$720	\$636	\$566	\$700	\$578	\$476	\$415	\$487	\$444	\$394	\$377	\$498
53	\$936	\$747	\$660	\$587	\$726	\$599	\$494	\$430	\$505	\$461	\$409	\$391	\$517
54	\$961	\$767	\$677	\$604	\$746	\$615	\$507	\$442	\$519	\$473	\$419	\$402	\$530
55	\$1,008	\$804	\$709	\$632	\$782	\$644	\$531	\$463	\$543	\$496	\$439	\$421	\$556
56	\$1,030	\$822	\$726	\$647	\$799	\$660	\$544	\$473	\$556	\$507	\$450	\$431	\$570
57	\$1,053	\$841	\$741	\$661	\$817	\$674	\$556	\$485	\$568	\$519	\$460	\$440	\$581
58	\$1,087	\$868	\$766	\$683	\$844	\$696	\$574	\$500	\$587	\$535	\$474	\$455	\$600
59	\$1,120	\$894	\$790	\$704	\$870	\$717	\$592	\$515	\$604	\$551	\$490	\$468	\$619
60	\$1,154	\$921	\$813	\$724	\$896	\$738	\$609	\$530	\$622	\$567	\$503	\$483	\$637
61	\$1,188	\$947	\$837	\$746	\$922	\$760	\$626	\$547	\$641	\$584	\$519	\$496	\$655
62	\$1,221	\$973	\$859	\$766	\$947	\$781	\$644	\$561	\$659	\$600	\$532	\$510	\$673
63	\$1,272	\$1,015	\$896	\$798	\$987	\$814	\$672	\$585	\$687	\$625	\$555	\$531	\$702
64	\$1,332	\$1,062	\$938	\$836	\$1,033	\$852	\$702	\$612	\$718	\$655	\$581	\$557	\$734

The rates shown above are our preferred rates. Please note that these rates are subject to change based on medical history, actual plan effective date, age of applicant(s), which family members are approved for coverage, geographic location, and/or scheduled rate adjustments.

¹The subscriber is the oldest family member applying for coverage.

FEMALE SUBSCRIBER, SPOUSE, + 1 CHILD¹

Age range	Classic plans				Essential plans				Advantage plans				HSA plan
	1500	2500	3500	5000	1500	3000	5000	7500	2500	3500	5000	7500	5000
19-24	\$577	\$461	\$406	\$362	\$447	\$370	\$304	\$265	\$311	\$284	\$252	\$241	\$319
25-27	\$600	\$478	\$422	\$377	\$465	\$383	\$316	\$275	\$323	\$295	\$262	\$251	\$331
28-30	\$611	\$488	\$431	\$383	\$474	\$391	\$322	\$281	\$329	\$300	\$267	\$256	\$337
31-33	\$638	\$507	\$448	\$400	\$495	\$408	\$337	\$292	\$343	\$314	\$279	\$266	\$352
34-36	\$665	\$530	\$468	\$417	\$516	\$426	\$351	\$305	\$358	\$326	\$290	\$278	\$367
37-38	\$694	\$553	\$489	\$436	\$538	\$444	\$366	\$319	\$374	\$342	\$303	\$290	\$383
39-40	\$726	\$579	\$512	\$456	\$563	\$465	\$383	\$333	\$391	\$357	\$317	\$303	\$401
41-42	\$762	\$608	\$536	\$478	\$591	\$487	\$402	\$350	\$411	\$375	\$332	\$318	\$420
43-44	\$796	\$635	\$560	\$500	\$617	\$509	\$420	\$366	\$429	\$391	\$348	\$332	\$439
45-46	\$832	\$664	\$586	\$522	\$645	\$532	\$439	\$383	\$448	\$409	\$363	\$348	\$459
47-48	\$869	\$693	\$611	\$545	\$673	\$555	\$458	\$400	\$468	\$427	\$379	\$362	\$479
49-50	\$887	\$707	\$624	\$557	\$689	\$567	\$468	\$408	\$478	\$436	\$387	\$371	\$490
51-52	\$931	\$742	\$655	\$584	\$723	\$595	\$491	\$428	\$502	\$458	\$406	\$388	\$514
53	\$965	\$769	\$679	\$606	\$749	\$617	\$508	\$443	\$520	\$474	\$421	\$403	\$532
54	\$984	\$785	\$693	\$617	\$763	\$630	\$519	\$451	\$530	\$484	\$429	\$411	\$543
55	\$988	\$788	\$695	\$620	\$766	\$632	\$521	\$454	\$532	\$486	\$431	\$412	\$545
56	\$1,011	\$806	\$711	\$634	\$784	\$646	\$533	\$464	\$545	\$496	\$441	\$422	\$558
57	\$1,033	\$824	\$728	\$649	\$802	\$661	\$546	\$474	\$558	\$507	\$451	\$432	\$570
58	\$1,068	\$851	\$751	\$670	\$827	\$683	\$563	\$490	\$575	\$524	\$466	\$445	\$588
59	\$1,101	\$877	\$775	\$691	\$853	\$704	\$581	\$505	\$593	\$541	\$479	\$460	\$607
60	\$1,135	\$905	\$798	\$711	\$880	\$726	\$599	\$521	\$612	\$558	\$495	\$473	\$626
61	\$1,168	\$932	\$822	\$733	\$906	\$748	\$616	\$536	\$630	\$575	\$509	\$488	\$644
62	\$1,202	\$959	\$847	\$755	\$932	\$769	\$635	\$553	\$648	\$591	\$524	\$502	\$664
63	\$1,252	\$999	\$881	\$786	\$972	\$801	\$661	\$575	\$675	\$615	\$547	\$524	\$691
64	\$1,312	\$1,046	\$924	\$823	\$1,017	\$839	\$692	\$603	\$707	\$644	\$573	\$548	\$724

The rates shown above are our preferred rates. Please note that these rates are subject to change based on medical history, actual plan effective date, age of applicant(s), which family members are approved for coverage, geographic location, and/or scheduled rate adjustments.

¹The subscriber is the oldest family member applying for coverage.

MALE SUBSCRIBER + 2 CHILDREN¹

Age range	Classic plans				Essential plans				Advantage plans				HSA plan
	1500	2500	3500	5000	1500	3000	5000	7500	2500	3500	5000	7500	5000
19–24	\$578	\$462	\$407	\$362	\$448	\$371	\$304	\$265	\$312	\$285	\$252	\$241	\$319
25–27	\$565	\$451	\$399	\$354	\$439	\$361	\$298	\$260	\$304	\$279	\$247	\$236	\$313
28–30	\$566	\$451	\$400	\$355	\$439	\$362	\$298	\$260	\$305	\$279	\$247	\$236	\$313
31–33	\$579	\$462	\$407	\$363	\$449	\$371	\$305	\$266	\$312	\$285	\$252	\$241	\$320
34–36	\$590	\$470	\$415	\$371	\$458	\$377	\$311	\$271	\$318	\$290	\$258	\$246	\$326
37–38	\$602	\$479	\$424	\$377	\$467	\$385	\$318	\$276	\$325	\$296	\$263	\$252	\$332
39–40	\$615	\$491	\$434	\$386	\$477	\$394	\$325	\$283	\$332	\$303	\$269	\$258	\$340
41–42	\$631	\$502	\$444	\$396	\$490	\$404	\$332	\$290	\$340	\$310	\$275	\$264	\$348
43–44	\$644	\$514	\$454	\$405	\$500	\$412	\$340	\$296	\$348	\$317	\$281	\$269	\$355
45–46	\$660	\$527	\$465	\$414	\$513	\$422	\$349	\$303	\$356	\$325	\$288	\$275	\$364
47–48	\$677	\$541	\$477	\$426	\$525	\$434	\$357	\$312	\$366	\$332	\$296	\$283	\$374
49–50	\$713	\$570	\$502	\$447	\$553	\$456	\$377	\$327	\$384	\$350	\$311	\$298	\$394
51–52	\$734	\$585	\$517	\$461	\$570	\$469	\$387	\$337	\$396	\$360	\$320	\$307	\$405
53	\$755	\$603	\$531	\$473	\$586	\$484	\$399	\$347	\$407	\$371	\$329	\$315	\$417
54	\$775	\$618	\$546	\$486	\$602	\$496	\$409	\$356	\$417	\$381	\$338	\$324	\$428
55	\$810	\$646	\$570	\$508	\$629	\$519	\$428	\$372	\$437	\$399	\$354	\$339	\$447
56	\$826	\$660	\$582	\$519	\$641	\$529	\$436	\$380	\$445	\$406	\$360	\$346	\$456
57	\$843	\$672	\$593	\$530	\$654	\$539	\$445	\$388	\$455	\$415	\$368	\$353	\$466
58	\$864	\$689	\$609	\$542	\$670	\$553	\$456	\$397	\$466	\$425	\$377	\$360	\$476
59	\$883	\$705	\$622	\$554	\$685	\$565	\$467	\$406	\$476	\$434	\$385	\$370	\$488
60	\$904	\$722	\$637	\$567	\$701	\$579	\$477	\$415	\$488	\$445	\$395	\$377	\$499
61	\$925	\$737	\$650	\$581	\$717	\$592	\$488	\$425	\$498	\$455	\$404	\$386	\$510
62	\$944	\$753	\$666	\$592	\$733	\$604	\$498	\$434	\$509	\$464	\$412	\$395	\$521
63	\$978	\$780	\$689	\$614	\$758	\$626	\$516	\$449	\$527	\$480	\$427	\$409	\$539
64	\$1,014	\$809	\$714	\$637	\$787	\$649	\$535	\$466	\$547	\$498	\$442	\$424	\$559

The rates shown above are our preferred rates. Please note that these rates are subject to change based on medical history, actual plan effective date, age of applicant(s), which family members are approved for coverage, geographic location, and/or scheduled rate adjustments.

¹The subscriber is the oldest family member applying for coverage.

FEMALE SUBSCRIBER + 2 CHILDREN¹

Age range	Classic plans				Essential plans				Advantage plans				HSA plan
	1500	2500	3500	5000	1500	3000	5000	7500	2500	3500	5000	7500	5000
19-24	\$588	\$469	\$414	\$370	\$456	\$377	\$310	\$270	\$317	\$289	\$257	\$246	\$325
25-27	\$610	\$487	\$429	\$383	\$473	\$390	\$322	\$281	\$329	\$299	\$266	\$255	\$337
28-30	\$619	\$494	\$436	\$388	\$479	\$396	\$326	\$285	\$333	\$303	\$269	\$258	\$342
31-33	\$633	\$505	\$445	\$398	\$491	\$405	\$334	\$291	\$342	\$312	\$276	\$264	\$349
34-36	\$648	\$517	\$456	\$407	\$502	\$415	\$343	\$298	\$349	\$319	\$283	\$270	\$358
37-38	\$665	\$530	\$468	\$417	\$516	\$425	\$350	\$305	\$358	\$326	\$290	\$278	\$367
39-40	\$681	\$544	\$479	\$428	\$529	\$436	\$360	\$314	\$368	\$335	\$298	\$285	\$377
41-42	\$700	\$558	\$493	\$439	\$544	\$448	\$370	\$322	\$377	\$344	\$305	\$292	\$386
43-44	\$720	\$574	\$507	\$451	\$558	\$461	\$380	\$331	\$388	\$354	\$315	\$300	\$397
45-46	\$736	\$587	\$519	\$462	\$572	\$471	\$388	\$339	\$398	\$362	\$321	\$309	\$406
47-48	\$755	\$602	\$531	\$473	\$586	\$483	\$399	\$347	\$407	\$371	\$329	\$315	\$417
49-50	\$757	\$604	\$532	\$474	\$587	\$485	\$400	\$348	\$408	\$372	\$330	\$316	\$417
51-52	\$779	\$621	\$548	\$489	\$604	\$498	\$411	\$357	\$419	\$383	\$340	\$325	\$429
53	\$790	\$630	\$556	\$496	\$613	\$505	\$417	\$362	\$426	\$388	\$345	\$330	\$436
54	\$790	\$630	\$556	\$496	\$612	\$505	\$417	\$362	\$426	\$388	\$344	\$330	\$436
55	\$780	\$622	\$549	\$490	\$605	\$499	\$411	\$358	\$420	\$383	\$341	\$326	\$431
56	\$786	\$626	\$553	\$494	\$610	\$503	\$415	\$361	\$424	\$386	\$343	\$328	\$434
57	\$792	\$632	\$558	\$497	\$615	\$507	\$418	\$364	\$428	\$389	\$346	\$331	\$438
58	\$807	\$643	\$567	\$506	\$625	\$516	\$426	\$371	\$434	\$397	\$352	\$337	\$445
59	\$819	\$653	\$577	\$514	\$636	\$524	\$433	\$377	\$442	\$403	\$357	\$343	\$451
60	\$833	\$665	\$587	\$523	\$646	\$533	\$439	\$383	\$449	\$410	\$363	\$348	\$460
61	\$846	\$675	\$596	\$531	\$657	\$541	\$446	\$388	\$456	\$416	\$370	\$354	\$467
62	\$859	\$685	\$605	\$539	\$667	\$550	\$454	\$395	\$463	\$422	\$375	\$359	\$474
63	\$877	\$700	\$617	\$551	\$680	\$561	\$463	\$403	\$473	\$431	\$383	\$367	\$485
64	\$900	\$718	\$634	\$564	\$698	\$576	\$474	\$413	\$485	\$442	\$393	\$377	\$496

The rates shown above are our preferred rates. Please note that these rates are subject to change based on medical history, actual plan effective date, age of applicant(s), which family members are approved for coverage, geographic location, and/or scheduled rate adjustments.

¹The subscriber is the oldest family member applying for coverage.

MALE SUBSCRIBER, SPOUSE, + 2 CHILDREN¹

Age range	Classic plans				Essential plans				Advantage plans				HSA plan
	1500	2500	3500	5000	1500	3000	5000	7500	2500	3500	5000	7500	5000
19-24	\$769	\$614	\$542	\$484	\$597	\$493	\$406	\$354	\$415	\$378	\$337	\$321	\$425
25-27	\$758	\$605	\$534	\$476	\$588	\$485	\$400	\$349	\$409	\$373	\$331	\$317	\$418
28-30	\$766	\$611	\$539	\$480	\$594	\$490	\$405	\$352	\$413	\$377	\$334	\$320	\$422
31-33	\$792	\$632	\$558	\$497	\$615	\$507	\$417	\$364	\$428	\$389	\$346	\$331	\$437
34-36	\$817	\$651	\$575	\$513	\$634	\$523	\$431	\$376	\$440	\$402	\$356	\$342	\$451
37-38	\$844	\$673	\$594	\$530	\$655	\$541	\$445	\$388	\$456	\$415	\$369	\$353	\$466
39-40	\$873	\$697	\$615	\$548	\$677	\$558	\$461	\$401	\$471	\$429	\$381	\$366	\$482
41-42	\$905	\$722	\$638	\$568	\$702	\$579	\$477	\$416	\$488	\$445	\$395	\$378	\$499
43-44	\$938	\$748	\$660	\$588	\$728	\$600	\$495	\$431	\$505	\$461	\$409	\$391	\$518
45-46	\$967	\$771	\$681	\$607	\$751	\$619	\$510	\$445	\$522	\$475	\$422	\$405	\$534
47-48	\$1,001	\$799	\$706	\$629	\$778	\$641	\$529	\$461	\$541	\$492	\$437	\$418	\$553
49-50	\$1,064	\$849	\$751	\$668	\$826	\$681	\$562	\$490	\$575	\$524	\$465	\$445	\$587
51-52	\$1,106	\$881	\$779	\$694	\$858	\$707	\$583	\$507	\$596	\$544	\$483	\$462	\$610
53	\$1,139	\$908	\$802	\$714	\$883	\$728	\$601	\$524	\$614	\$559	\$497	\$476	\$629
54	\$1,165	\$929	\$820	\$731	\$904	\$745	\$615	\$535	\$628	\$573	\$507	\$487	\$643
55	\$1,216	\$969	\$855	\$762	\$943	\$778	\$641	\$558	\$655	\$597	\$530	\$507	\$671
56	\$1,238	\$988	\$872	\$777	\$961	\$792	\$653	\$570	\$668	\$609	\$541	\$518	\$683
57	\$1,261	\$1,006	\$887	\$791	\$978	\$808	\$666	\$580	\$680	\$620	\$551	\$527	\$696
58	\$1,295	\$1,033	\$912	\$813	\$1,005	\$828	\$683	\$595	\$699	\$637	\$564	\$541	\$714
59	\$1,329	\$1,059	\$936	\$834	\$1,030	\$850	\$701	\$610	\$717	\$653	\$580	\$555	\$733
60	\$1,362	\$1,085	\$959	\$854	\$1,057	\$871	\$719	\$626	\$734	\$670	\$594	\$570	\$751
61	\$1,396	\$1,113	\$983	\$876	\$1,083	\$893	\$736	\$642	\$753	\$687	\$609	\$583	\$770
62	\$1,428	\$1,139	\$1,006	\$897	\$1,108	\$914	\$754	\$657	\$770	\$702	\$623	\$597	\$788
63	\$1,480	\$1,180	\$1,042	\$929	\$1,148	\$947	\$781	\$680	\$798	\$728	\$646	\$618	\$817
64	\$1,539	\$1,227	\$1,084	\$966	\$1,194	\$985	\$813	\$707	\$830	\$757	\$672	\$643	\$849

The rates shown above are our preferred rates. Please note that these rates are subject to change based on medical history, actual plan effective date, age of applicant(s), which family members are approved for coverage, geographic location, and/or scheduled rate adjustments.

¹The subscriber is the oldest family member applying for coverage.

FEMALE SUBSCRIBER, SPOUSE, + 2 CHILDREN¹

Age range	Classic plans				Essential plans				Advantage plans				HSA plan
	1500	2500	3500	5000	1500	3000	5000	7500	2500	3500	5000	7500	5000
19-24	\$769	\$614	\$542	\$484	\$597	\$493	\$406	\$354	\$415	\$378	\$337	\$321	\$425
25-27	\$797	\$637	\$562	\$501	\$619	\$510	\$421	\$367	\$430	\$392	\$349	\$333	\$440
28-30	\$809	\$645	\$570	\$507	\$628	\$518	\$428	\$372	\$436	\$398	\$353	\$338	\$446
31-33	\$836	\$666	\$588	\$524	\$648	\$534	\$440	\$383	\$450	\$411	\$364	\$349	\$462
34-36	\$864	\$689	\$608	\$542	\$670	\$553	\$456	\$397	\$466	\$425	\$377	\$360	\$476
37-38	\$893	\$711	\$629	\$560	\$693	\$571	\$471	\$410	\$482	\$439	\$389	\$373	\$492
39-40	\$925	\$737	\$650	\$580	\$717	\$591	\$488	\$425	\$498	\$455	\$404	\$386	\$510
41-42	\$960	\$765	\$676	\$603	\$745	\$614	\$506	\$441	\$518	\$472	\$418	\$401	\$530
43-44	\$994	\$792	\$700	\$623	\$771	\$636	\$524	\$457	\$536	\$489	\$434	\$415	\$548
45-46	\$1,029	\$821	\$725	\$646	\$799	\$660	\$544	\$473	\$555	\$506	\$449	\$431	\$568
47-48	\$1,067	\$850	\$751	\$669	\$827	\$682	\$563	\$490	\$575	\$524	\$465	\$445	\$588
49-50	\$1,080	\$862	\$760	\$677	\$838	\$691	\$570	\$496	\$582	\$530	\$471	\$451	\$596
51-52	\$1,123	\$896	\$791	\$705	\$871	\$719	\$592	\$517	\$606	\$553	\$490	\$469	\$620
53	\$1,158	\$923	\$815	\$727	\$898	\$740	\$611	\$532	\$624	\$570	\$505	\$484	\$639
54	\$1,175	\$938	\$827	\$737	\$911	\$752	\$620	\$541	\$634	\$578	\$513	\$491	\$649
55	\$1,175	\$937	\$827	\$737	\$911	\$752	\$620	\$541	\$634	\$578	\$513	\$491	\$649
56	\$1,198	\$955	\$843	\$752	\$929	\$766	\$632	\$551	\$646	\$588	\$523	\$501	\$661
57	\$1,221	\$973	\$859	\$766	\$947	\$781	\$644	\$561	\$659	\$601	\$532	\$510	\$674
58	\$1,255	\$1,000	\$883	\$787	\$972	\$803	\$662	\$576	\$677	\$616	\$547	\$524	\$693
59	\$1,288	\$1,027	\$907	\$808	\$999	\$824	\$679	\$592	\$694	\$633	\$562	\$538	\$711
60	\$1,322	\$1,054	\$931	\$830	\$1,025	\$846	\$698	\$608	\$712	\$649	\$577	\$553	\$729
61	\$1,355	\$1,081	\$955	\$851	\$1,051	\$867	\$716	\$622	\$731	\$666	\$591	\$566	\$748
62	\$1,390	\$1,108	\$979	\$872	\$1,078	\$889	\$733	\$638	\$750	\$683	\$607	\$581	\$767
63	\$1,440	\$1,148	\$1,014	\$904	\$1,117	\$921	\$760	\$662	\$777	\$707	\$629	\$602	\$795
64	\$1,499	\$1,195	\$1,055	\$940	\$1,163	\$959	\$791	\$689	\$808	\$737	\$654	\$626	\$827

The rates shown above are our preferred rates. Please note that these rates are subject to change based on medical history, actual plan effective date, age of applicant(s), which family members are approved for coverage, geographic location, and/or scheduled rate adjustments.

¹The subscriber is the oldest family member applying for coverage.

MALE SUBSCRIBER + 3 OR MORE CHILDREN¹

Age range	Classic plans				Essential plans				Advantage plans				HSA plan
	1500	2500	3500	5000	1500	3000	5000	7500	2500	3500	5000	7500	5000
19-24	\$881	\$703	\$621	\$553	\$683	\$564	\$465	\$405	\$475	\$434	\$384	\$369	\$486
25-27	\$862	\$688	\$607	\$541	\$668	\$552	\$455	\$396	\$465	\$424	\$376	\$360	\$475
28-30	\$863	\$688	\$607	\$541	\$669	\$552	\$456	\$396	\$465	\$424	\$377	\$360	\$475
31-33	\$875	\$698	\$615	\$549	\$678	\$559	\$462	\$402	\$472	\$430	\$382	\$366	\$483
34-36	\$885	\$706	\$623	\$556	\$687	\$566	\$468	\$407	\$477	\$435	\$386	\$371	\$489
37-38	\$898	\$716	\$632	\$563	\$696	\$575	\$473	\$412	\$485	\$441	\$391	\$375	\$496
39-40	\$911	\$727	\$642	\$572	\$706	\$583	\$480	\$418	\$491	\$448	\$398	\$381	\$502
41-42	\$927	\$739	\$652	\$581	\$719	\$592	\$489	\$426	\$499	\$456	\$405	\$387	\$512
43-44	\$940	\$751	\$662	\$590	\$729	\$602	\$496	\$432	\$507	\$462	\$411	\$393	\$519
45-46	\$956	\$762	\$673	\$600	\$741	\$612	\$504	\$439	\$516	\$470	\$417	\$400	\$528
47-48	\$973	\$777	\$685	\$611	\$755	\$622	\$514	\$447	\$524	\$478	\$425	\$407	\$536
49-50	\$1,016	\$811	\$716	\$638	\$788	\$649	\$536	\$467	\$548	\$499	\$443	\$425	\$560
51-52	\$1,035	\$826	\$729	\$650	\$804	\$663	\$547	\$476	\$558	\$509	\$451	\$434	\$572
53	\$1,057	\$844	\$745	\$664	\$820	\$677	\$558	\$486	\$571	\$520	\$462	\$442	\$584
54	\$1,078	\$859	\$759	\$676	\$836	\$689	\$568	\$495	\$581	\$530	\$470	\$450	\$594
55	\$1,119	\$893	\$789	\$703	\$869	\$717	\$591	\$515	\$604	\$551	\$489	\$468	\$618
56	\$1,136	\$906	\$800	\$713	\$881	\$728	\$600	\$522	\$613	\$558	\$496	\$474	\$626
57	\$1,153	\$921	\$813	\$724	\$895	\$738	\$609	\$530	\$621	\$567	\$503	\$482	\$637
58	\$1,173	\$936	\$826	\$736	\$910	\$751	\$619	\$539	\$633	\$577	\$513	\$490	\$648
59	\$1,193	\$952	\$841	\$750	\$927	\$763	\$630	\$548	\$643	\$587	\$521	\$499	\$659
60	\$1,215	\$968	\$854	\$762	\$942	\$777	\$641	\$558	\$655	\$597	\$530	\$507	\$670
61	\$1,234	\$984	\$870	\$775	\$958	\$790	\$651	\$567	\$666	\$607	\$538	\$516	\$681
62	\$1,255	\$1,000	\$883	\$787	\$972	\$803	\$662	\$576	\$677	\$616	\$547	\$524	\$693
63	\$1,288	\$1,027	\$907	\$808	\$999	\$824	\$679	\$592	\$694	\$633	\$562	\$538	\$711
64	\$1,323	\$1,056	\$932	\$830	\$1,027	\$847	\$699	\$609	\$713	\$650	\$578	\$553	\$731

The rates shown above are our preferred rates. Please note that these rates are subject to change based on medical history, actual plan effective date, age of applicant(s), which family members are approved for coverage, geographic location, and/or scheduled rate adjustments.

¹The subscriber is the oldest family member applying for coverage.

FEMALE SUBSCRIBER + 3 OR MORE CHILDREN¹

Age range	Classic plans				Essential plans				Advantage plans				HSA plan
	1500	2500	3500	5000	1500	3000	5000	7500	2500	3500	5000	7500	5000
19-24	\$876	\$699	\$617	\$550	\$680	\$560	\$462	\$403	\$473	\$431	\$383	\$366	\$484
25-27	\$905	\$723	\$638	\$568	\$702	\$580	\$478	\$416	\$489	\$445	\$395	\$378	\$500
28-30	\$914	\$729	\$643	\$574	\$709	\$585	\$483	\$420	\$493	\$449	\$400	\$382	\$504
31-33	\$929	\$740	\$654	\$583	\$721	\$594	\$490	\$428	\$501	\$457	\$405	\$388	\$513
34-36	\$944	\$753	\$665	\$592	\$732	\$604	\$498	\$434	\$508	\$464	\$411	\$395	\$521
37-38	\$961	\$766	\$676	\$603	\$745	\$615	\$507	\$441	\$518	\$472	\$418	\$401	\$530
39-40	\$977	\$779	\$689	\$614	\$758	\$625	\$516	\$449	\$527	\$480	\$427	\$408	\$539
41-42	\$996	\$795	\$701	\$625	\$773	\$638	\$525	\$458	\$537	\$490	\$435	\$416	\$550
43-44	\$1,015	\$810	\$714	\$638	\$787	\$649	\$536	\$467	\$547	\$499	\$443	\$424	\$560
45-46	\$1,032	\$823	\$727	\$648	\$801	\$660	\$545	\$474	\$557	\$507	\$451	\$432	\$570
47-48	\$1,051	\$838	\$740	\$660	\$815	\$672	\$554	\$483	\$566	\$517	\$458	\$439	\$580
49-50	\$1,044	\$833	\$735	\$655	\$810	\$668	\$551	\$479	\$563	\$513	\$456	\$436	\$576
51-52	\$1,067	\$850	\$751	\$669	\$827	\$682	\$562	\$490	\$575	\$524	\$465	\$445	\$588
53	\$1,078	\$859	\$759	\$676	\$836	\$690	\$568	\$496	\$581	\$530	\$470	\$450	\$594
54	\$1,075	\$857	\$757	\$675	\$834	\$689	\$567	\$494	\$580	\$529	\$469	\$449	\$593
55	\$1,060	\$846	\$746	\$666	\$822	\$678	\$559	\$487	\$572	\$521	\$462	\$443	\$585
56	\$1,067	\$850	\$751	\$669	\$827	\$682	\$562	\$490	\$575	\$524	\$465	\$445	\$588
57	\$1,073	\$855	\$756	\$673	\$832	\$687	\$565	\$493	\$579	\$527	\$468	\$448	\$592
58	\$1,085	\$866	\$764	\$681	\$842	\$695	\$573	\$499	\$586	\$534	\$473	\$454	\$599
59	\$1,099	\$876	\$774	\$690	\$853	\$703	\$580	\$505	\$592	\$541	\$479	\$460	\$607
60	\$1,113	\$887	\$784	\$699	\$864	\$711	\$587	\$512	\$600	\$547	\$486	\$465	\$614
61	\$1,126	\$898	\$793	\$706	\$874	\$721	\$594	\$518	\$607	\$553	\$491	\$470	\$621
62	\$1,139	\$909	\$802	\$716	\$884	\$729	\$602	\$524	\$615	\$560	\$497	\$476	\$629
63	\$1,157	\$923	\$814	\$726	\$898	\$740	\$610	\$531	\$624	\$570	\$505	\$484	\$638
64	\$1,179	\$941	\$830	\$740	\$915	\$755	\$622	\$542	\$637	\$580	\$515	\$493	\$651

The rates shown above are our preferred rates. Please note that these rates are subject to change based on medical history, actual plan effective date, age of applicant(s), which family members are approved for coverage, geographic location, and/or scheduled rate adjustments.

¹The subscriber is the oldest family member applying for coverage.

MALE SUBSCRIBER, SPOUSE, + 3 OR MORE CHILDREN¹

Age range	Classic plans				Essential plans				Advantage plans				HSA plan
	1500	2500	3500	5000	1500	3000	5000	7500	2500	3500	5000	7500	5000
19-24	\$1,067	\$850	\$751	\$669	\$827	\$682	\$563	\$490	\$575	\$524	\$465	\$445	\$588
25-27	\$1,048	\$836	\$738	\$658	\$813	\$671	\$553	\$482	\$564	\$515	\$457	\$438	\$578
28-30	\$1,055	\$842	\$742	\$662	\$819	\$675	\$557	\$485	\$570	\$519	\$461	\$441	\$582
31-33	\$1,081	\$863	\$762	\$678	\$839	\$693	\$571	\$497	\$583	\$531	\$472	\$451	\$597
34-36	\$1,106	\$882	\$779	\$694	\$858	\$707	\$584	\$507	\$596	\$544	\$483	\$462	\$610
37-38	\$1,133	\$904	\$797	\$711	\$879	\$725	\$598	\$521	\$611	\$557	\$495	\$473	\$625
39-40	\$1,163	\$927	\$819	\$729	\$902	\$745	\$614	\$534	\$626	\$572	\$507	\$486	\$642
41-42	\$1,194	\$953	\$842	\$750	\$927	\$764	\$631	\$549	\$644	\$587	\$521	\$499	\$660
43-44	\$1,227	\$978	\$864	\$769	\$952	\$785	\$647	\$564	\$661	\$604	\$535	\$513	\$677
45-46	\$1,256	\$1,001	\$884	\$788	\$974	\$804	\$663	\$577	\$677	\$617	\$548	\$525	\$694
47-48	\$1,290	\$1,029	\$909	\$810	\$1,001	\$825	\$681	\$592	\$696	\$635	\$563	\$539	\$712
49-50	\$1,362	\$1,085	\$959	\$854	\$1,056	\$871	\$718	\$625	\$734	\$669	\$593	\$570	\$751
51-52	\$1,402	\$1,118	\$987	\$880	\$1,087	\$897	\$740	\$644	\$756	\$689	\$612	\$586	\$773
53	\$1,435	\$1,144	\$1,011	\$901	\$1,113	\$918	\$757	\$660	\$774	\$706	\$626	\$600	\$791
54	\$1,460	\$1,165	\$1,029	\$916	\$1,133	\$934	\$770	\$671	\$787	\$718	\$638	\$610	\$807
55	\$1,518	\$1,210	\$1,069	\$953	\$1,177	\$971	\$801	\$698	\$819	\$746	\$663	\$635	\$838
56	\$1,541	\$1,229	\$1,085	\$967	\$1,196	\$986	\$813	\$708	\$830	\$757	\$672	\$644	\$850
57	\$1,565	\$1,248	\$1,102	\$982	\$1,214	\$1,000	\$825	\$719	\$843	\$768	\$683	\$654	\$864
58	\$1,598	\$1,275	\$1,125	\$1,003	\$1,239	\$1,023	\$843	\$734	\$862	\$785	\$698	\$668	\$881
59	\$1,632	\$1,301	\$1,148	\$1,024	\$1,266	\$1,044	\$860	\$750	\$880	\$802	\$711	\$682	\$900
60	\$1,664	\$1,329	\$1,172	\$1,045	\$1,291	\$1,066	\$878	\$765	\$898	\$819	\$727	\$696	\$918
61	\$1,698	\$1,355	\$1,196	\$1,067	\$1,318	\$1,087	\$897	\$781	\$915	\$836	\$741	\$710	\$938
62	\$1,731	\$1,380	\$1,220	\$1,086	\$1,343	\$1,108	\$913	\$796	\$933	\$851	\$756	\$723	\$955
63	\$1,783	\$1,422	\$1,255	\$1,119	\$1,383	\$1,141	\$941	\$819	\$961	\$876	\$779	\$745	\$984
64	\$1,842	\$1,469	\$1,297	\$1,157	\$1,429	\$1,178	\$972	\$847	\$994	\$905	\$804	\$769	\$1,017

The rates shown above are our preferred rates. Please note that these rates are subject to change based on medical history, actual plan effective date, age of applicant(s), which family members are approved for coverage, geographic location, and/or scheduled rate adjustments.

¹The subscriber is the oldest family member applying for coverage.

FEMALE SUBSCRIBER, SPOUSE, + 3 OR MORE CHILDREN¹

Age range	Classic plans				Essential plans				Advantage plans				HSA plan
	1500	2500	3500	5000	1500	3000	5000	7500	2500	3500	5000	7500	5000
19-24	\$1,051	\$839	\$740	\$660	\$816	\$673	\$555	\$484	\$567	\$518	\$459	\$439	\$581
25-27	\$1,086	\$867	\$765	\$682	\$843	\$695	\$574	\$499	\$586	\$534	\$474	\$455	\$600
28-30	\$1,099	\$876	\$773	\$689	\$852	\$703	\$580	\$505	\$592	\$541	\$479	\$459	\$606
31-33	\$1,125	\$897	\$791	\$706	\$872	\$720	\$593	\$517	\$607	\$553	\$490	\$470	\$621
34-36	\$1,152	\$920	\$812	\$723	\$894	\$737	\$608	\$530	\$621	\$566	\$502	\$482	\$636
37-38	\$1,181	\$942	\$832	\$741	\$916	\$756	\$623	\$543	\$638	\$581	\$516	\$494	\$652
39-40	\$1,214	\$967	\$854	\$762	\$941	\$777	\$640	\$558	\$654	\$596	\$530	\$507	\$670
41-42	\$1,249	\$996	\$879	\$784	\$969	\$799	\$660	\$574	\$673	\$614	\$545	\$522	\$689
43-44	\$1,283	\$1,023	\$904	\$806	\$995	\$821	\$677	\$589	\$692	\$631	\$559	\$536	\$708
45-46	\$1,319	\$1,052	\$929	\$828	\$1,023	\$844	\$696	\$606	\$711	\$649	\$575	\$552	\$728
47-48	\$1,355	\$1,081	\$955	\$850	\$1,051	\$867	\$716	\$622	\$731	\$666	\$591	\$566	\$748
49-50	\$1,362	\$1,085	\$959	\$854	\$1,056	\$871	\$718	\$625	\$734	\$669	\$593	\$570	\$751
51-52	\$1,405	\$1,120	\$989	\$881	\$1,090	\$899	\$741	\$645	\$757	\$691	\$613	\$587	\$776
53	\$1,439	\$1,148	\$1,013	\$904	\$1,116	\$921	\$759	\$661	\$776	\$707	\$628	\$602	\$794
54	\$1,454	\$1,160	\$1,024	\$913	\$1,129	\$931	\$767	\$668	\$785	\$716	\$635	\$608	\$803
55	\$1,449	\$1,156	\$1,020	\$909	\$1,125	\$927	\$764	\$666	\$781	\$711	\$632	\$605	\$799
56	\$1,471	\$1,173	\$1,035	\$924	\$1,142	\$941	\$777	\$676	\$793	\$723	\$642	\$615	\$812
57	\$1,494	\$1,192	\$1,052	\$938	\$1,159	\$956	\$789	\$687	\$806	\$734	\$652	\$624	\$825
58	\$1,527	\$1,219	\$1,076	\$959	\$1,186	\$978	\$807	\$702	\$824	\$751	\$667	\$638	\$843
59	\$1,561	\$1,245	\$1,100	\$980	\$1,210	\$999	\$824	\$717	\$842	\$768	\$681	\$652	\$862
60	\$1,595	\$1,273	\$1,123	\$1,001	\$1,238	\$1,021	\$842	\$733	\$860	\$785	\$696	\$667	\$881
61	\$1,629	\$1,300	\$1,147	\$1,023	\$1,263	\$1,042	\$859	\$749	\$878	\$801	\$711	\$680	\$899
62	\$1,663	\$1,326	\$1,171	\$1,044	\$1,290	\$1,064	\$877	\$764	\$897	\$818	\$726	\$695	\$917
63	\$1,714	\$1,367	\$1,206	\$1,075	\$1,329	\$1,097	\$904	\$787	\$924	\$842	\$748	\$717	\$945
64	\$1,772	\$1,414	\$1,248	\$1,113	\$1,374	\$1,134	\$935	\$814	\$956	\$871	\$773	\$740	\$978

The rates shown above are our preferred rates. Please note that these rates are subject to change based on medical history, actual plan effective date, age of applicant(s), which family members are approved for coverage, geographic location, and/or scheduled rate adjustments.

¹The subscriber is the oldest family member applying for coverage.

Kaiser Permanente for Individuals and Families

Visit **buykp.org/apply**,
call **1-800-494-5314**,
or contact your broker.

Nine Piedmont Center
3495 Piedmont Road, NE
Atlanta, GA 30305
©2012 Kaiser Foundation Health Plan of Georgia, Inc.