Rate Guide Summary



02/01/27 - 03/01/27

Print formatting is set for Legal Paper. Your print settings will need to be adjusted accordingly.

The Information Provided Herein, Including The Rating Information Is Provided To You On An "As Is" "As Available" Basis Without Warranty Of Any Kind, Express Or Implied. We Further Disclaim All Liability Related To The Information, Including Those Caused By Rating Discrepancies. Final Rates And Rating Areas Are Based Upon Actual Enrollment And Underwriting And Must Be Approved By The Applicable Insurance Carrier.

IMPORTANT NOTE: AN EMPLOYEE MUST RESIDE IN THE HEALTH PLAN'S SERVICE AREA TO BE ELIGIBLE FOR COVERAGE BY THAT HEALTH PLAN. RATING IS BASED ON THE EMPLOYER ZIP CODE/COUNTY.

County and ZIP Code rating areas may be found on the "County Service/Rate Area Index" and "ZIP Code/Service Detail by Rating Area" pages.

INSTRUCTIONS:

1) Use the Employee's resident ZIP Code/County to determine service area availability by referencing the "County Service/Rate Area Index" table and the "ZIP Code/Service Detail by Rating Area" for each Employee. Go to the correct area table to determine the health plans that offer services in the Employee's resident ZIP Code/County.

2) Use the Employer ZIP Code/County to determine the correct rate/service area table. Go to the correct rate/service area table to calculate the rates for each health plan available to the Employee.

3) Use the Employee's age and age of each dependent to determine the rate for each of them.

4) If the Employee has more than three (3) dependent children under the age of 21, premium rates are only charged for the three (3) oldest dependents under the age of 21.

4a) If the Employee has dependent children ages 21-25, premium rates are charges for each dependent based on age of dependent.

4b) Add the rates for the Employee and each applicable dependent to determine the total premium (example: (EE premium + premium for 3 oldest dependents age 0-20 + premium for each dependent age 21-25 = total premium).

Rate Guide Summary - CaliforniaChoice® County Service/Rate Area Index 02/01/27 - 03/01/27

Please refer to the ZIP Code/Service Detail by Rating Area page for ZIP code detail and exclusions

CaliforniaChoice
Your Health. Your Choice.®

THE INFORMATION PROVIDED HEREIN, INCLUDING THE RATING INFORMATION IS PROVIDED TO YOU ON AN "AS IS" "AS AVAILABLE" BASIS WITHOUT WARRANTY OF ANY KIND, EXPRESS OR IMPLIED. WE FURTHER DISCLAIM ALL LIABILITY RELATED TO THE INFORMATION, INCLUDING THOSE CAUSED BY RATING DISCREPANCIES. FINAL RATES AND RATING AREAS ARE BASED UPON ACTUAL ENROLLMENT AND UNDERWRITING AND MUST BE APPROVED BY THE APPLICABLE INSURANCE CARRIER.

Health Care Service Plan Rate Index

	Area 1	* ALPINE	* AMADOR	* BUTTE	* CALAVERAS	* COLUSA	* DEL NORTE	* GLENN	* HUMBOLDT	* LAKE	* LASSEN	* MENDOCINO	* MODOC	* NEVADA	* PLUMAS	* SHASTA	* SIERRA	* SISKIYOU	* SUTTER	* TEHAMA	* TRINITY	* TUOLUMNE	* YUBA
Anthem Blue Cross																							
CaliforniaCare HMO		R	SR	SR	SR	R	SR	R	SR	SR	R	SR	R	SR	R	R	R	R	SR	R	R	SR	SR
Priority Select HMO		R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R
Prudent Buyer - Small Group		SR	SR	SR	SR	SR	SR	SR	SR	SR	SR	SR	SR	SR	SR	SR	SR	SR	SR	SR	SR	SR	SR
Select HMO		R	R	R	R	R	R	R	R	R	R	R	R	SR	R	R	R	R	R	R	R	R	R
Select PPO		SR	SR	SR	SR	SR	SR	SR	SR	SR	SR	SR	SR	SR	SR	SR	SR	SR	SR	SR	SR	SR	SR
Vivity		R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R
Kaiser Permanente																							
Full		R	SR	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	SR	R	R	R	SR
Sharp Health Plan																							
Performance		R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R
Premier		R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R
Sutter Health Plan																							
Sutter Health Plan		R	SR	R	R	R	R	R	R	R	R	R	R	SR	R	R	R	R	SR	R	R	R	SR
UnitedHealthcare																							
Alliance																							
Harmony																							
SignatureValue														SR									
Western Health Advantage																							
Full		R	R	R	R	SR	R	R	SR	R	R	R	R	R	R	R	R	R	R	R	R	R	R

	Area 2	* MARIN	* NAPA	* SOLANO	* SONOMA	Area 3	* EL DORADO	* PLACER	* SACRAMENTO	* YOLO	Area 4	* SAN FRANCISCO	Area 5	* CONTRA COSTA	Area 6	* ALAMEDA	Area 7	* SANTA CLARA	Area 8	* SAN MATEO	Area 9	* MONTEREY	* SAN BENITO	* SANTA CRUZ
Anthem Blue Cross																								
CaliforniaCare HMO		SR	SR	SR	SR		SR	SR	SR	SR		SR		SR		SR		SR		SR		R	SR	SR
Priority Select HMO		R	R	R	R		R	R	R	R		R		R		R		R		R		R	R	R
Prudent Buyer - Small Group		SR	SR	SR	SR		SR	SR	SR	SR		SR		SR		SR		SR		SR		SR	SR	SR
Select HMO		R	R	R	R		R	SR	SR	SR		SR		SR		SR		SR		R		R	R	SR
Select PPO		SR	SR	SR	SR		SR	SR	SR	SR		SR		SR		SR		SR		SR		SR	SR	SR
Vivity		R	R	R	R		R	R	R	R		R		R		R		R		R		R	R	R
Kaiser Permanente																								
Full		SR	SR	SR	SR		SR	SR	SR	SR		SR		SR		SR		SR		SR		SR	R	SR
Sharp Health Plan																								
Performance		R	R	R	R		R	R	R	R		R		R		R		R		R		R	R	R
Premier		R	R	R	R		R	R	R	R		R		R		R		R		R		R	R	R
Sutter Health Plan																								
Sutter Health Plan		R	R	SR	SR		SR	SR	SR	SR		SR		SR		SR		SR		SR		R	R	SR
UnitedHealthcare																								
Alliance																								
Harmony																								
SignatureValue		SR		SR	SR		SR	SR	SR	SR		SR		SR		SR		SR		SR				SR
Western Health Advantage																								
Full		SR	SR	SR	SR		SR	SR	SR	SR		R		R		R		R		R		R	R	R

	Area 10	* MARIPOSA	* MERCED	* SAN JOAQUIN	* STANISLAUS	* TULARE	Area 11	* FRESNO	* KINGS	* MADERA	Area 12	* SAN LUIS OBISPO	* SANTA BARBARA	* VENTURA	Area 13	* IMPERIAL	* INYO	* MONO	Area 14	* KERN	Area 15	* LOS ANGELES	Area 16	* LOS ANGELES	Area 17	* RIVERSIDE	* SAN BERNARDINO	Area 18	* ORANGE	Area 19	* SAN DIEGO
Anthem Blue Cross																															
CaliforniaCare HMO		R	SR	SR	SR	SR		SR	SR	SR		SR	SR	SR		SR	R	R		SR		SR		SR		SR	SR		SR		SR
Priority Select HMO		R	R	R	R	R		R	R	R		SR	R	SR		R	R	R		SR		SR		SR		SR	SR		SR		SR
Prudent Buyer - Small Group		SR	SR	SR	SR	SR		SR	SR	SR		SR	SR	SR		SR	SR	SR		SR		SR		SR		SR	SR		SR		SR
Select HMO		R	SR	SR	SR	SR		SR	R	R		R	R	SR		SR	R	R		SR		SR		SR		SR	SR		SR		SR
Select PPO		SR	SR	SR	SR	SR		SR	SR	SR		SR	SR	SR		SR	SR	SR		SR		SR		SR		SR	SR		SR		SR
Vivity		R	R	R	R	R		R	R	R		R	R	SR		R	R	R		R		SR		SR		SR	SR		SR		R
Kaiser Permanente																															
Full		SR	R	SR	SR	SR		SR	SR	SR		R	R	SR		SR	R	R		SR		SR		SR		SR	SR		SR		SR
Sharp Health Plan																															
Performance		R	R	R	R	R		R	R	R		R	R	R		R	R	R		R		R		R		R	R		R		SR
Premier		R	R	R	R	R		R	R	R		R	R	R		R	R	R		R		R		R		R	R		R		SR
Sutter Health Plan																															
Sutter Health Plan		R	R	SR	SR	R		R	R	R		R	R	R		R	R	R		R		R		R		R	R		R		R
UnitedHealthcare																															
Alliance								SR	SR	SR		SR		SR						SR		SR		SR		SR	SR		SR		SR
Harmony																						SR		SR		SR	SR		SR		SR
SignatureValue			SR	SR	SR	SR		SR	SR	SR		SR	SR	SR		SR				SR		SR		SR		SR	SR		SR		SR
Western Health Advantage																															
Full		R	R	R	R	R		R	R	R		R	R	R		R	R	R		R		R		R		R	R		R		R

Health Care Service Plan Rate Index Legend	
SR	**Service/Rate Area**
R	**Rate Area Only**
Blank	**No Service/Rate**

(*) asterisk preceding a COUNTY name in the **Area** row indicates county contains multi-county ZIP Codes.

Rate Guide Summary - CaliforniaChoice® ZIP Code/Service Detail by Rating Area 02/01/27 - 03/01/27

INSTRUCTIONS: If the FULL county is not covered, exceptions/inclusions are listed below. Please refer to the *County Service/Rate Area Index* page for complete county listings.

THE INFORMATION PROVIDED HEREIN, INCLUDING THE RATING INFORMATION IS PROVIDED TO YOU ON AN "AS IS" "AS AVAILABLE" BASIS WITHOUT WARRANTY OF ANY KIND, EXPRESS OR IMPLIED. WE FURTHER DISCLAIM ALL LIABILITY RELATED TO THE INFORMATION, INCLUDING THOSE CAUSED BY RATING DISCREPANCIES. FINAL RATES AND RATING AREAS ARE BASED UPON ACTUAL ENROLLMENT AND UNDERWRITING AND MUST BE APPROVED BY THE APPLICABLE INSURANCE CARRIER.

Anthem Blue Cross - CaliforniaCare HMO

Area 1:	AMADOR except 95646; CALAVERAS 95225, 95228, 95252, 95254; HUMBOLDT except 95563, 95587; MENDOCINO except 95542; SUTTER except 95648; TUOLUMNE except 95230; YUBA 95692, 95901, 95918, 95961-95962, 95977
Area 2:	NAPA except 94589-94590, 95461; SOLANO except 94558; SONOMA except 94574, 95461
Area 3:	EL DORADO except 95666; PLACER except 95692; YOLO except 95620
Area 4:	SAN FRANCISCO except 94014
Area 5:	CONTRA COSTA except 94557, 94588, 94611
Area 6:	ALAMEDA except 94583, 95035, 95304
Area 7:	SANTA CLARA except 94028, 94539
Area 8:	SAN MATEO except 94112, 94134
Area 9:	SAN BENITO except 93925, 95020
Area 10:	SAN JOAQUIN except 94505; TULARE except 93230
Area 11:	FRESNO except 93603, 93647
Area 12:	SAN LUIS OBISPO except 93458
Area 13:	Service and Rates apply to all ZIP codes in this Area
Area 14:	KERN except 93219
Area 15:	LOS ANGELES Zips starting with 906-908, 910-912, 915, 917-918, 935 except 91709, 91786
Area 16:	LOS ANGELES Zips starting with 900-905, 913-914, 916, 923, 928, 932 except 90090, 90233, 91329, 91495-91496, 91611-91612
Area 17:	RIVERSIDE except 91708, 92225-92226, 92239, 92275, 92514; SAN BERNARDINO except 91752, 91792, 92242, 92267, 92280, 92304, 92310, 92320, 92364-92366, 92509, 93558, 93562, 93592
Area 18:	Service and Rates apply to all ZIP codes in this Area
Area 19:	Service and Rates apply to all ZIP codes in this Area

Anthem Blue Cross - Priority Select HMO

Area 1:	Rate Area Only, No Service
Area 2:	Rate Area Only, No Service
Area 3:	Rate Area Only, No Service
Area 4:	Rate Area Only, No Service
Area 5:	Rate Area Only, No Service
Area 6:	Rate Area Only, No Service
Area 7:	Rate Area Only, No Service
Area 8:	Rate Area Only, No Service
Area 9:	Rate Area Only, No Service
Area 10:	Rate Area Only, No Service
Area 11:	Rate Area Only, No Service
Area 12:	SAN LUIS OBISPO 93402, 93422, 93430, 93432-93433, 93435, 93442-93443, 93448-93449, 93451, 93465, 93483; VENTURA except 93043, 93225, 93252
Area 13:	Rate Area Only, No Service
Area 14:	KERN 93203, 93215-93216, 93220, 93241, 93250, 93263, 93280, 93301-93309, 93311-93314, 93380, 93383-93390, 93531, 93561, 93581
Area 15:	LOS ANGELES Zips starting with 906-908, 910-912, 915, 917-918, 935 except 90704, 90822, 91709, 91759, 91786, 93560
Area 16:	LOS ANGELES Zips starting with 900-905, 913-914, 916, 923, 928, 932 except 90090, 90233, 90264, 91310, 91329, 91361-91362, 91383, 91495-91496, 91611-91612, 93243
Area 17:	RIVERSIDE except 91708, 92028, 92225-92226, 92239, 92254, 92274-92275, 92324, 92399, 92514; SAN BERNARDINO except 91752, 91759, 91792, 92242, 92267, 92277-92278, 92280, 92285, 92301, 92304, 92309-92310, 92314, 92320, 92323, 92332, 92338, 92342, 92347, 92356, 92363-92366, 92386, 92509, 93516, 93555, 93558, 93562, 93592
Area 18:	Service and Rates apply to all ZIP codes in this Area
Area 19:	SAN DIEGO except 91905-91906, 91916, 91934, 91948, 91962-91963, 91980, 91987, 92004, 92036, 92066, 92070, 92086

Anthem Blue Cross - Prudent Buyer-Small Group

Area 1:	ALPINE except 95223; AMADOR except 95646; COLUSA except 95988; LASSEN except 96134; MENDOCINO except 95542; SUTTER except 95648; TEHAMA except 96007; TRINITY except 95543; TUOLUMNE except 95230; YUBA except 95930
Area 2:	NAPA except 94589-94590, 95461; SOLANO except 94558; SONOMA except 94574, 95461
Area 3:	EL DORADO except 95666; PLACER except 95692
Area 4:	SAN FRANCISCO except 94014
Area 5:	CONTRA COSTA except 94557, 94588, 94611
Area 6:	ALAMEDA except 94583, 95035, 95304
Area 7:	SANTA CLARA except 94028, 94539
Area 8:	SAN MATEO except 94112, 94134
Area 9:	SAN BENITO except 93925, 95020
Area 10:	MARIPOSA except 95369; SAN JOAQUIN except 94505; TULARE except 93230
Area 11:	FRESNO except 93603, 93647
Area 12:	SAN LUIS OBISPO except 93458
Area 13:	Service and Rates apply to all ZIP codes in this Area
Area 14:	KERN except 93219
Area 15:	LOS ANGELES Zips starting with 906-908, 910-912, 915, 917-918, 935 except 91786
Area 16:	LOS ANGELES Zips starting with 900-905, 913-914, 916, 923, 928, 932 except 90090, 90233, 91329, 91495-91496, 91611-91612
Area 17:	RIVERSIDE except 91708, 92275, 92514; SAN BERNARDINO except 91752, 92320, 92509, 93558
Area 18:	Service and Rates apply to all ZIP codes in this Area
Area 19:	Service and Rates apply to all ZIP codes in this Area

ANTHEM BLUE CROSS PRUDENT BUYER - SMALL GROUP PPO IS AVAILABLE OUT-OF-STATE

Anthem Blue Cross - Select HMO

Area 1:	NEVADA except 95728, 96111, 96160-96162
Area 2:	Rate Area Only, No Service
Area 3:	PLACER except 95692, 95715, 95724, 96140-96143, 96145-96146, 96148, 96161-96162
Area 4:	SAN FRANCISCO except 94014
Area 5:	CONTRA COSTA except 94557, 94588, 94611
Area 6:	ALAMEDA except 94583, 95035, 95304
Area 7:	SANTA CLARA except 94028, 94539
Area 8:	Rate Area Only, No Service
Area 9:	Service and Rates apply to all ZIP codes in this Area
Area 10:	SAN JOAQUIN except 94505; TULARE except 93230
Area 11:	FRESNO except 93603, 93633, 93647
Area 12:	Service and Rates apply to all ZIP codes in this Area
Area 13:	Service and Rates apply to all ZIP codes in this Area
Area 14:	KERN except 93219, 93461
Area 15:	LOS ANGELES Zips starting with 906-908, 910-912, 915, 917-918, 935 except 91709, 91786
Area 16:	LOS ANGELES Zips starting with 900-905, 913-914, 916, 923, 928, 932 except 90090, 90233, 91329, 91495-91496, 91611-91612
Area 17:	RIVERSIDE except 91708, 92225-92226, 92239, 92275, 92514; SAN BERNARDINO except 91752, 91759, 91792, 92320, 92363, 92365, 92509, 93558
Area 18:	Service and Rates apply to all ZIP codes in this Area
Area 19:	Service and Rates apply to all ZIP codes in this Area

Rate Guide Summary - CaliforniaChoice® ZIP Code/Service Detail by Rating Area 02/01/27 - 03/01/27

INSTRUCTIONS: If the FULL county is not covered, exceptions/inclusions are listed below. Please refer to the *County Service/Rate Area Index* page for complete county listings.

THE INFORMATION PROVIDED HEREIN, INCLUDING THE RATING INFORMATION IS PROVIDED TO YOU ON AN "AS IS" "AS AVAILABLE" BASIS WITHOUT WARRANTY OF ANY KIND, EXPRESS OR IMPLIED. WE FURTHER DISCLAIM ALL LIABILITY RELATED TO THE INFORMATION, INCLUDING THOSE CAUSED BY RATING DISCREPANCIES. FINAL RATES AND RATING AREAS ARE BASED UPON ACTUAL ENROLLMENT AND UNDERWRITING AND MUST BE APPROVED BY THE APPLICABLE INSURANCE CARRIER.

Anthem Blue Cross - Select PPO

Area 1:	ALPINE except 95223; AMADOR except 95646; COLUSA except 95988; LASSEN except 96134; MENDOCINO except 95542; SUTTER except 95648; TEHAMA except 96007; TRINITY except 95543; TUOLUMNE except 95230; YUBA except 95930
Area 2:	NAPA except 94589-94590, 95461; SOLANO except 94558; SONOMA except 94574, 95461
Area 3:	EL DORADO except 95666; PLACER except 95692
Area 4:	SAN FRANCISCO except 94014
Area 5:	CONTRA COSTA except 94557, 94588, 94611
Area 6:	ALAMEDA except 94583, 95035, 95304
Area 7:	SANTA CLARA except 94028, 94539
Area 8:	SAN MATEO except 94112, 94134
Area 9:	SAN BENITO except 93925, 95020
Area 10:	MARIPOSA except 95369; SAN JOAQUIN except 94505; TULARE except 93230
Area 11:	FRESNO except 93603, 93647
Area 12:	SAN LUIS OBISPO except 93458
Area 13:	Service and Rates apply to all ZIP codes in this Area
Area 14:	KERN except 93219
Area 15:	LOS ANGELES Zips starting with 906-908, 910-912, 915, 917-918, 935 except 91786
Area 16:	LOS ANGELES Zips starting with 900-905, 913-914, 916, 923, 928, 932 except 90090, 90233, 91329, 91495-91496, 91611-91612
Area 17:	RIVERSIDE except 91708, 92275, 92514; SAN BERNARDINO except 91752, 92320, 92509, 93558
Area 18:	Service and Rates apply to all ZIP codes in this Area
Area 19:	Service and Rates apply to all ZIP codes in this Area

ANTHEM BLUE CROSS - SELECT PPO IS AVAILABLE OUT-OF-STATE FOR GOLD PPO C AND GOLD PPO D

Anthem Blue Cross - Vivity

Area 1:	Rate Area Only, No Service
Area 2:	Rate Area Only, No Service
Area 3:	Rate Area Only, No Service
Area 4:	Rate Area Only, No Service
Area 5:	Rate Area Only, No Service
Area 6:	Rate Area Only, No Service
Area 7:	Rate Area Only, No Service
Area 8:	Rate Area Only, No Service
Area 9:	Rate Area Only, No Service
Area 10:	Rate Area Only, No Service
Area 11:	Rate Area Only, No Service
Area 12:	VENTURA 91319-91320, 91358-91362, 91377, 93010-93012, 93020-93021, 93062-93066, 93094, 93099
Area 13:	Rate Area Only, No Service
Area 14:	Rate Area Only, No Service
Area 15:	LOS ANGELES Zips starting with 906-908, 910-912, 915, 917-918, 935 except 90623, 90630-90631, 91709, 91759, 91786, 93510, 93532, 93534-93536, 93539, 93543-93544, 93550-93553, 93560, 93584, 93586, 93590-93591, 93599
Area 16:	LOS ANGELES Zips starting with 900-905, 913-914, 916, 923, 928, 932 except 90090, 90233, 91310, 91329, 91361-91362, 91384, 91390, 91495-91496, 91611-91612, 93243
Area 17:	RIVERSIDE 92882; SAN BERNARDINO 91709-91710, 91763, 91784-91786
Area 18:	Service and Rates apply to all ZIP codes in this Area
Area 19:	Rate Area Only, No Service

Kaiser Permanente - Full

Area 1:	AMADOR 95640, 95669; SUTTER 95626, 95645, 95659, 95668, 95674, 95676, 95692, 95837; YUBA 95692, 95903, 95961
Area 2:	MARIN except 94998; NAPA except 94589-94590, 95461; SOLANO except 94558; SONOMA except 94574, 95412, 95461, 95480, 95497
Area 3:	EL DORADO 95613-95614, 95619, 95623, 95633-95635, 95651, 95664, 95667, 95672, 95682, 95762; PLACER except 95631, 95692, 95701, 95713-95715, 95717, 95724, 96140-96143, 96145-96146, 96148, 96161-96162; SACRAMENTO except 94245, 94299; YOLO except 95606, 95627, 95637, 95653, 95679, 95912, 95937
Area 4:	SAN FRANCISCO except 94014
Area 5:	CONTRA COSTA except 94557, 94588, 94611
Area 6:	ALAMEDA except 94583, 95035, 95304
Area 7:	SANTA CLARA except 94028, 94539, 95023
Area 8:	SAN MATEO except 94112, 94134
Area 9:	MONTEREY 93901-93902, 93905-93907, 93912, 93915, 93933, 93955, 93962, 95004, 95012, 95039, 95076; SANTA CRUZ except 94060
Area 10:	MARIPOSA 93601, 93623, 93653; SAN JOAQUIN except 94505; TULARE 93238, 93261, 93618, 93631, 93646, 93654, 93666, 93673
Area 11:	FRESNO except 93210, 93234, 93245, 93603, 93605, 93608, 93620-93622, 93628, 93633-93634, 93640-93642, 93647, 93664; KINGS 93230, 93232, 93242, 93631, 93656; MADERA except 93610, 93620, 93622, 93630
Area 12:	VENTURA except 93013, 93023-93024, 93225
Area 13:	IMPERIAL 92274-92275
Area 14:	KERN except 93219, 93255, 93283, 93461, 93516, 93523-93524, 93527-93528, 93554-93556, 93558, 93596
Area 15:	LOS ANGELES Zips starting with 906-908, 910-912, 915, 917-918, 935 except 90704, 90834-90835, 90899, 91709, 91786
Area 16:	LOS ANGELES Zips starting with 900-905, 913-914, 916, 923, 928, 932 except 90090, 90140, 90205, 90233
Area 17:	RIVERSIDE except 91708, 92225-92226, 92239, 92275, 92536, 92539, 92549, 92561; SAN BERNARDINO except 91752, 91792, 92242, 92267, 92280, 92301, 92304, 92309-92312, 92320, 92323, 92327, 92332, 92338, 92342, 92347, 92356, 92363-92366, 92368, 92398, 92509, 93516, 93555, 93558, 93562, 93592
Area 18:	Service and Rates apply to all ZIP codes in this Area
Area 19:	SAN DIEGO except 91905-91906, 91934, 91948, 92004, 92036, 92066, 92070

Sharp Health Plan - Performance

Area 1:	Rate Area Only, No Service
Area 2:	Rate Area Only, No Service
Area 3:	Rate Area Only, No Service
Area 4:	Rate Area Only, No Service
Area 5:	Rate Area Only, No Service
Area 6:	Rate Area Only, No Service
Area 7:	Rate Area Only, No Service
Area 8:	Rate Area Only, No Service
Area 9:	Rate Area Only, No Service
Area 10:	Rate Area Only, No Service
Area 11:	Rate Area Only, No Service
Area 12:	Rate Area Only, No Service
Area 13:	Rate Area Only, No Service
Area 14:	Rate Area Only, No Service
Area 15:	Rate Area Only, No Service
Area 16:	Rate Area Only, No Service
Area 17:	Rate Area Only, No Service
Area 18:	Rate Area Only, No Service
Area 19:	SAN DIEGO except 91934, 92004, 92036, 92066

Rate Guide Summary - CaliforniaChoice® ZIP Code/Service Detail by Rating Area 02/01/27 - 03/01/27

INSTRUCTIONS: If the FULL county is not covered, exceptions/inclusions are listed below. Please refer to the *County Service/Rate Area Index* page for complete county listings.

THE INFORMATION PROVIDED HEREIN, INCLUDING THE RATING INFORMATION IS PROVIDED TO YOU ON AN "AS IS" "AS AVAILABLE" BASIS WITHOUT WARRANTY OF ANY KIND, EXPRESS OR IMPLIED. WE FURTHER DISCLAIM ALL LIABILITY RELATED TO THE INFORMATION, INCLUDING THOSE CAUSED BY RATING DISCREPANCIES. FINAL RATES AND RATING AREAS ARE BASED UPON ACTUAL ENROLLMENT AND UNDERWRITING AND MUST BE APPROVED BY THE APPLICABLE INSURANCE CARRIER.

Sharp Health Plan - Premier

Area 1:	Rate Area Only, No Service
Area 2:	Rate Area Only, No Service
Area 3:	Rate Area Only, No Service
Area 4:	Rate Area Only, No Service
Area 5:	Rate Area Only, No Service
Area 6:	Rate Area Only, No Service
Area 7:	Rate Area Only, No Service
Area 8:	Rate Area Only, No Service
Area 9:	Rate Area Only, No Service
Area 10:	Rate Area Only, No Service
Area 11:	Rate Area Only, No Service
Area 12:	Rate Area Only, No Service
Area 13:	Rate Area Only, No Service
Area 14:	Rate Area Only, No Service
Area 15:	Rate Area Only, No Service
Area 16:	Rate Area Only, No Service
Area 17:	Rate Area Only, No Service
Area 18:	Rate Area Only, No Service
Area 19:	SAN DIEGO except 91934, 92003-92004, 92007-92011, 92013, 92018, 92023-92030, 92033, 92036, 92046, 92049, 92051-92052, 92054-92061, 92065-92066, 92068-92070, 92075, 92078-92079, 92081-92085, 92088, 92096

Sutter Health Plan - Sutter Health Plan

Area 1:	AMADOR except 95644, 95646, 95666, 95689; NEVADA 95949, 95602; SUTTER except 95648, 95948, 95953, 95957, 95982; YUBA except 95903, 95922, 95960, 95977
Area 2:	SOLANO except 94558; SONOMA except 94515, 94574, 94922-94923, 94926, 95412, 95416, 95431, 95433, 95461, 95480, 95487, 95497
Area 3:	EL DORADO 95614, 95635, 95651, 95664, 95672, 95682, 95762; PLACER except 95692, 95701, 95714-95715, 95717, 95724, 96140-96143, 96145-96146, 96148, 96161-96162; SACRAMENTO except 94207-94208, 94211, 94234, 94245, 94282, 94291, 94299, 95836
Area 4:	SAN FRANCISCO except 94014, 94160-94161
Area 5:	CONTRA COSTA except 94557, 94588, 94611
Area 6:	ALAMEDA except 94583, 94622, 94659-94660, 95035, 95304
Area 7:	SANTA CLARA except 94023, 94028, 94035, 94039, 94042, 94088, 94302, 94309, 94539, 94550, 95009, 95011, 95015, 95020-95021, 95023, 95026, 95031, 95036-95038, 95042, 95044, 95046, 95052, 95055-95056, 95071, 95101, 95103, 95106, 95108-95109, 95115, 95141, 95150-95161, 95164, 95170, 95172-95173, 95190-95191, 95193-95194, 95196
Area 8:	SAN MATEO except 94112, 94134
Area 9:	SANTA CRUZ except 94060
Area 10:	SAN JOAQUIN except 94505, 95297; STANISLAUS except 95397
Area 11:	Rate Area Only, No Service
Area 12:	Rate Area Only, No Service
Area 13:	Rate Area Only, No Service
Area 14:	Rate Area Only, No Service
Area 15:	Rate Area Only, No Service
Area 16:	Rate Area Only, No Service
Area 17:	Rate Area Only, No Service
Area 18:	Rate Area Only, No Service
Area 19:	Rate Area Only, No Service

Unitedhealthcare Of California - Alliance

Area 1:	No Rate or Service
Area 2:	No Rate or Service
Area 3:	No Rate or Service
Area 4:	No Rate or Service
Area 5:	No Rate or Service
Area 6:	No Rate or Service
Area 7:	No Rate or Service
Area 8:	No Rate or Service
Area 9:	No Rate or Service
Area 10:	No Rate or Service
Area 11:	FRESNO except 93245, 93603, 93618, 93620, 93633, 93647; KINGS except 93242, 93631, 93656; MADERA except 93602, 93620, 93622-93623, 93626, 93630, 93653, 93720
Area 12:	SAN LUIS OBISPO except 93252, 93426, 93454, 93458; VENTURA except 90265, 91304, 91307, 91311, 93013, 93225, 93252
Area 13:	No Rate or Service
Area 14:	KERN except 93219, 93461, 93536
Area 15:	LOS ANGELES Zips starting with 906-908, 910-912, 915, 917-918, 935 except 90623, 90630-90631, 90704, 91526, 91709, 91759, 91786, 93560
Area 16:	LOS ANGELES Zips starting with 900-905, 913-914, 916, 923, 928, 932 except 90140, 90205, 91329, 91361-91362, 91495-91496, 91611-91612, 93243
Area 17:	RIVERSIDE except 91708, 92028, 92225-92226, 92275, 92324, 92373, 92399, 92536, 92539, 92561; SAN BERNARDINO except 91752, 91759, 91766, 91792, 92242, 92252, 92256, 92267-92268, 92277-92278, 92280, 92285, 92304-92305, 92314-92315, 92317, 92320-92323, 92325, 92327, 92329, 92332-92333, 92338-92339, 92341-92342, 92347, 92352, 92358, 92363-92366, 92368, 92371-92372, 92378, 92382, 92385-92386, 92391, 92397-92398, 92509, 92880, 93516, 93555, 93558, 93562, 93592
Area 18:	ORANGE except 90638
Area 19:	SAN DIEGO except 91901, 91903, 91905-91906, 91916-91917, 91931, 91934, 91948, 91962-91963, 91980, 91987, 92004, 92036, 92066, 92070, 92086

Unitedhealthcare Of California - Harmony

Area 1:	No Rate or Service
Area 2:	No Rate or Service
Area 3:	No Rate or Service
Area 4:	No Rate or Service
Area 5:	No Rate or Service
Area 6:	No Rate or Service
Area 7:	No Rate or Service
Area 8:	No Rate or Service
Area 9:	No Rate or Service
Area 10:	No Rate or Service
Area 11:	No Rate or Service
Area 12:	No Rate or Service
Area 13:	No Rate or Service
Area 14:	No Rate or Service
Area 15:	LOS ANGELES Zips starting with 906-908, 910-912, 915, 917-918, 935 except 90623, 90630-90631, 90704, 91526, 91709, 91759, 91786, 93510, 93532, 93534-93536, 93539, 93543-93544, 93550-93553, 93560, 93563, 93584, 93586, 93590-93591, 93599
Area 16:	LOS ANGELES Zips starting with 900-905, 913-914, 916, 923, 928, 932 except 90140, 90205, 91329, 91361-91362, 91495-91496, 91611-91612, 93243
Area 17:	RIVERSIDE except 91708, 92028, 92225-92226, 92275, 92324, 92373, 92399; SAN BERNARDINO except 91752, 91766, 91792, 92242, 92267-92268, 92280, 92301, 92307-92312, 92314-92316, 92320, 92323, 92327, 92329, 92332-92333, 92338, 92340, 92342, 92344-92345, 92347, 92356, 92363-92366, 92368, 92371-92372, 92386, 92392-92395, 92397-92398, 92509, 92880, 93516, 93555, 93558, 93562, 93592
Area 18:	ORANGE except 90638
Area 19:	SAN DIEGO except 91905-91906, 91934, 91948, 91962-91963, 91980, 91987, 92004, 92036, 92066, 92086

Rate Guide Summary - CaliforniaChoice® ZIP Code/Service Detail by Rating Area 02/01/27 - 03/01/27

INSTRUCTIONS: If the FULL county is not covered, exceptions/inclusions are listed below. Please refer to the *County Service/Rate Area Index* page for complete county listings.

THE INFORMATION PROVIDED HEREIN, INCLUDING THE RATING INFORMATION IS PROVIDED TO YOU ON AN "AS IS" "AS AVAILABLE" BASIS WITHOUT WARRANTY OF ANY KIND, EXPRESS OR IMPLIED. WE FURTHER DISCLAIM ALL LIABILITY RELATED TO THE INFORMATION, INCLUDING THOSE CAUSED BY RATING DISCREPANCIES. FINAL RATES AND RATING AREAS ARE BASED UPON ACTUAL ENROLLMENT AND UNDERWRITING AND MUST BE APPROVED BY THE APPLICABLE INSURANCE CARRIER.

Unitedhealthcare Of California - SignatureValue	
Area 1:	NEVADA 95712, 95924, 95945-95946, 95949, 95959-95960, 95975
Area 2:	MARIN except 94952; SOLANO except 94503, 94558, 95616, 95618, 95690, 95694; SONOMA except 94515, 94574, 95461
Area 3:	EL DORADO 95613-95614, 95619, 95623, 95634, 95651, 95656, 95664, 95667, 95672, 95682, 95762; PLACER except 95610, 95626, 95668, 95692, 95724, 96140-96143, 96145-96146, 96148, 96161-96162; SACRAMENTO except 94207-94208, 94211, 94234, 94245, 94282, 94291, 94571, 95678; YOLO except 95615, 95620, 95912
Area 4:	SAN FRANCISCO except 94014, 94128
Area 5:	CONTRA COSTA except 94551, 94557, 94588, 94611, 94706-94708
Area 6:	ALAMEDA except 94505, 94514, 94583, 95035, 95304, 95377, 95391
Area 7:	SANTA CLARA except 94028, 94539, 94550, 95023, 95076
Area 8:	SAN MATEO except 94112, 94134, 94303
Area 9:	SANTA CRUZ except 94060, 95033
Area 10:	MERCED except 93610, 93622, 95316, 95360, 95380; SAN JOAQUIN except 94505, 94514, 95214, 95361, 95632, 95690; STANISLAUS except 95230, 95304, 95322, 95385; TULARE except 93212, 93215, 93230, 93238, 93527, 93631, 93641, 93646, 93654
Area 11:	FRESNO except 93245, 93603, 93618, 93620, 93633, 93647; KINGS except 93242, 93631, 93656; MADERA 93601, 93604, 93614, 93636, 93643-93645, 93669
Area 12:	SAN LUIS OBISPO except 93252, 93426, 93454, 93458; SANTA BARBARA except 93252; VENTURA except 90265, 91304, 91307, 91311, 93013, 93225, 93252
Area 13:	IMPERIAL except 92004, 92222, 92225, 92266, 92274, 92283
Area 14:	KERN except 93219, 93461, 93536
Area 15:	LOS ANGELES Zips starting with 906-908, 910-912, 915, 917-918, 935 except 90623, 90630-90631, 90704, 91526, 91709, 91759, 91786, 93560
Area 16:	LOS ANGELES Zips starting with 900-905, 913-914, 916, 923, 928, 932 except 90140, 90205, 91329, 91361-91362, 91495-91496, 91611-91612, 93243
Area 17:	RIVERSIDE except 91708, 92028, 92225-92226, 92275, 92324, 92373, 92399; SAN BERNARDINO except 91752, 91759, 91766, 91792, 92242, 92267, 92280, 92304, 92320, 92332, 92363, 92509, 92880, 93516, 93555, 93558, 93562, 93592
Area 18:	ORANGE except 90638
Area 19:	Service and Rates apply to all ZIP codes in this Area

Western Health Advantage - Full	
Area 1:	COLUSA 95912; HUMBOLDT except 95511, 95514, 95542, 95545, 95552-95556, 95558-95560, 95563, 95569, 95587, 95589
Area 2:	NAPA except 94589, 95461; SOLANO except 94558; SONOMA except 94574, 95461
Area 3:	EL DORADO except 95629, 95666, 95720-95721, 95735, 96142, 96150-96152, 96154-96158; PLACER except 95610, 95692, 95701, 95714-95715, 95717, 95724, 96140-96143, 96145-96146, 96148, 96161-96162; YOLO except 95620
Area 4:	Rate Area Only, No Service
Area 5:	Rate Area Only, No Service
Area 6:	Rate Area Only, No Service
Area 7:	Rate Area Only, No Service
Area 8:	Rate Area Only, No Service
Area 9:	Rate Area Only, No Service
Area 10:	Rate Area Only, No Service
Area 11:	Rate Area Only, No Service
Area 12:	Rate Area Only, No Service
Area 13:	Rate Area Only, No Service
Area 14:	Rate Area Only, No Service
Area 15:	Rate Area Only, No Service
Area 16:	Rate Area Only, No Service
Area 17:	Rate Area Only, No Service
Area 18:	Rate Area Only, No Service
Area 19:	Rate Area Only, No Service

USE EMPLOYER ZIP CODE FOR RATING | AREA 1 | 02/01/27 - 03/01/27

Bronze		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																																																	
Anthem Blue Cross	Prudent Buyer - Small Group	PPO A	419.70	457.01	471.27	485.54	500.90	516.26	532.17	548.63	548.63	548.63	548.63	550.82	561.80	574.96	596.36	613.92	622.70	635.86	649.03	657.26	666.04	670.43	674.81	679.20	683.59	692.37	701.15	714.32	726.93	744.49	766.44	792.22	822.95	857.51	897.01	935.96	979.85	1023.19	1070.93	1119.21	1171.33	1223.44	1279.95	1337.01	1397.91	1428.08	1488.98	1541.65	1576.21	1619.56	1645.89
Anthem Blue Cross	Select PPO	PPO B	399.54	435.06	448.64	462.22	476.84	491.47	506.61	522.28	522.28	522.28	522.28	524.37	534.81	547.35	567.72	584.43	592.79	605.32	617.86	625.69	634.05	638.23	642.40	646.58	650.76	659.12	667.47	680.01	692.02	708.73	729.63	754.17	783.42	816.32	853.93	891.01	932.79	974.05	1019.49	1065.45	1115.07	1164.68	1218.48	1272.80	1330.77	1359.49	1417.47	1467.61	1500.51	1541.77	1566.84
Anthem Blue Cross	Prudent Buyer - Small Group	PPO C	419.17	456.43	470.68	484.93	500.27	515.61	531.50	547.94	547.94	547.94	547.94	550.13	561.09	574.24	595.61	613.14	621.91	635.06	648.21	656.43	665.20	669.58	673.97	678.35	682.73	691.50	700.27	713.42	726.02	743.55	765.47	791.23	821.91	856.43	895.88	934.79	978.62	1021.91	1069.58	1117.80	1169.85	1221.91	1278.34	1335.33	1396.15	1426.29	1487.11	1539.71	1574.23	1617.52	1643.82
Anthem Blue Cross	Select PPO	PPO D	399.02	434.48	448.05	461.61	476.21	490.82	505.94	521.59	521.59	521.59	521.59	523.68	534.11	546.63	566.97	583.66	592.00	604.52	617.04	624.86	633.21	637.38	641.56	645.73	649.90	658.25	666.59	679.11	691.11	707.80	728.66	753.18	782.39	815.25	852.80	889.83	931.56	972.77	1018.14	1064.04	1113.59	1163.15	1216.87	1271.11	1329.01	1357.70	1415.60	1465.67	1498.53	1539.73	1564.77
Kaiser Permanente	Full	HMO A	327.98	355.87	366.53	377.19	388.67	385.89	397.78	410.08	410.08	410.08	410.08	411.72	419.92	429.76	445.76	458.88	465.44	475.28	485.13	491.28	497.84	501.12	504.40	507.68	510.96	517.52	524.08	533.93	543.36	556.48	572.88	592.16	615.12	640.96	670.48	699.60	732.40	764.80	800.48	836.56	875.52	914.48	956.72	999.37	1044.89	1067.44	1112.96	1152.33	1178.16	1210.56	1230.24
Kaiser Permanente	Full	HMO C	318.88	345.96	356.31	366.66	377.81	374.69	386.24	398.18	398.18	398.18	398.18	399.78	407.74	417.30	432.83	445.57	451.94	461.50	471.05	477.02	483.40	486.58	489.77	492.95	496.14	502.51	508.88	518.44	527.59	540.34	556.26	574.98	597.28	622.36	651.03	679.30	711.16	742.61	777.26	812.30	850.12	887.95	928.96	970.37	1014.57	1036.47	1080.67	1118.90	1143.98	1175.44	1194.54
Sharp Health Plan	Premier	HMO A	272.80	297.05	306.32	315.59	325.58	335.56	345.90	356.60	356.60	356.60	356.60	358.03	365.16	373.72	387.62	399.04	404.74	413.30	421.86	427.21	432.91	435.77	438.62	441.47	444.32	450.03	455.73	464.29	472.50	483.91	498.17	514.93	534.90	557.37	583.04	608.36	636.89	665.06	696.08	727.46	761.34	795.22	831.95	869.03	908.62	928.23	967.81	1002.05	1024.51	1052.68	1069.80
Sharp Health Plan	Performance	HMO B	291.24	317.12	327.02	336.92	347.58	358.24	369.28	380.70	380.70	380.70	380.70	382.22	389.84	398.97	413.82	426.00	432.09	441.23	450.37	456.08	462.17	465.22	468.26	471.31	474.35	480.44	486.53	495.67	504.43	516.61	531.84	549.73	571.05	595.03	622.44	649.47	679.93	710.01	743.13	776.63	812.79	848.96	888.17	927.77	970.02	990.96	1033.22	1069.77	1093.75	1123.83	1142.10
Sutter Health Plan	Sutter Health Plan	HMO A	338.58	368.68	380.19	391.70	404.09	416.48	429.32	442.60	442.60	442.60	442.60	444.36	453.22	463.84	481.10	495.26	502.34	512.97	523.59	530.23	537.31	540.85	544.39	547.93	551.47	558.55	565.64	576.26	586.44	600.60	618.30	639.11	663.89	691.77	723.64	755.07	790.47	825.44	863.94	902.89	944.94	986.98	1032.57	1078.60	1127.73	1152.07	1201.20	1243.69	1271.57	1306.54	1327.77
Sutter Health Plan	Sutter Health Plan	HMO B	338.75	368.86	380.38	391.89	404.29	416.69	429.53	442.82	442.82	442.82	442.82	444.58	453.44	464.07	481.34	495.51	502.59	513.22	523.85	530.49	537.57	541.12	544.66	548.20	551.74	558.83	565.91	576.54	586.73	600.90	618.61	639.42	664.22	692.12	724.00	755.44	790.86	825.85	864.37	903.34	945.41	987.47	1033.08	1079.13	1128.29	1152.64	1201.79	1244.30	1272.20	1307.18	1328.43
Western Health	Full	HMO B	363.66	395.98	408.34	420.70	434.01	447.32	461.11	475.37	475.37	475.37	475.37	477.27	486.78	498.19	516.73	531.94	539.55	550.95	562.36	569.49	577.10	580.90	584.71	588.51	592.31	599.92	607.52	618.93	629.87	645.08	664.09	686.44	713.06	743.00	777.23	810.98	849.01	886.57	927.92	969.76	1014.92	1060.08	1109.04	1158.48	1211.24	1237.39	1290.16	1335.79	1365.74	1403.29	1426.11
Western Health	Full	HMO C	379.54	413.28	426.18	439.08	452.97	466.86	481.25	496.14	496.14	496.14	496.14	498.12	508.04	519.95	539.30	555.18	563.11	575.02	586.93	594.37	602.31	606.28	610.25	614.22	618.19	626.12	634.06	645.97	657.38	673.26	693.10	716.42	744.20	775.46	811.18	846.41	886.10	925.29	968.46	1012.12	1059.25	1106.38	1157.48	1209.08	1264.15	1291.44	1346.51	1394.14	1425.40	1464.59	1488.41

Silver		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																																																	
Anthem Blue Cross	Select HMO	HMO A	458.78	499.56	515.15	530.74	547.54	564.33	581.72	599.71	599.71	599.71	599.71	602.11	614.10	628.50	651.88	671.08	680.67	695.06	709.46	718.45	728.05	732.85	737.64	742.44	747.24	756.83	766.43	780.82	794.62	813.81	837.79	865.98	899.57	937.35	980.53	1023.11	1071.08	1118.46	1170.63	1223.41	1280.38	1337.35	1399.12	1461.49	1528.06	1561.05	1627.61	1685.19	1722.97	1770.34	1799.13
Anthem Blue Cross	CaliforniaCare HMO	HMO B	458.78	499.56	515.15	530.74	547.54	564.33	581.72	599.71	599.71	599.71	599.71	602.11	614.10	628.50	651.88	671.08	680.67	695.06	709.46	718.45	728.05	732.85	737.64	742.44	747.24	756.83	766.43	780.82	794.62	813.81	837.79	865.98	899.57	937.35	980.53	1023.11	1071.08	1118.46	1170.63	1223.41	1280.38	1337.35	1399.12	1461.49	1528.06	1561.05	1627.61	1685.19	1722.97	1770.34	1799.13
Anthem Blue Cross	CaliforniaCare HMO	HMO D	458.16	498.88	514.46	530.03	546.80	563.56	580.93	598.90	598.90	598.90	598.90	601.30	613.27	627.65	651.00	670.17	679.75	694.13	708.50	717.48	727.06	731.86	736.65	741.44	746.23	755.81	765.39	779.77	793.54	812.71	836.66	864.81	898.35	936.08	979.20	1021.72	1069.64	1116.95	1169.05	1221.76	1278.65	1335.55	1397.23	1459.52	1526.00	1558.94	1625.41	1682.91	1720.64	1767.95	1796.70
Anthem Blue Cross	Select PPO	PPO B	430.93	469.24	483.88	498.53	514.30	530.07	546.41	563.31	563.31	563.31	563.31	565.56	576.83	590.35	612.32	630.34	639.36	652.88	666.40	674.85	683.86	688.36	692.87	697.38	701.88	710.90	719.91	733.43	746.39	764.41	786.94	813.42	844.97	880.45	921.01	961.01	1006.07	1050.57	1099.58	1149.15	1202.67	1256.18	1314.20	1372.79	1435.31	1466.30	1528.82	1582.90	1618.39	1662.89	1689.93
Anthem Blue Cross	Prudent Buyer - Small Group	PPO C	452.67	492.90	508.29	523.67	540.24	556.81	573.97	591.72	591.72	591.72	591.72	594.09	605.92	620.12	643.20	662.13	671.60	685.80	700.00	708.88	718.35	723.08	727.82	732.55	737.28	746.75	756.22	770.42	784.03	802.96	826.63	854.44	887.58	924.86	967.46	1009.47	1056.81	1103.56	1155.04	1207.11	1263.32	1319.54	1380.48	1442.02	1507.70	1540.25	1605.93	1662.73	1700.01	1746.76	1775.16
Anthem Blue Cross	Prudent Buyer - Small Group	PPO D	438.91	477.93	492.84	507.76	523.82	539.89	556.53	573.74	573.74	573.74	573.74	576.03	587.51	601.28	623.66	642.02	651.19	664.96	678.73	687.34	696.52	701.11	705.70	710.29	714.88	724.06	733.24	747.01	760.21	778.57	801.51	828.48	860.61	896.76	938.06	978.80	1024.70	1070.03	1119.94	1170.43	1224.93	1279.44	1338.54	1398.20	1461.89	1493.45	1557.13	1612.21	1648.36	1693.68	1721.22
Anthem Blue Cross	Select PPO	PPO E	417.84	454.98	469.18	483.38	498.67	513.96	529.80	546.19	546.19	546.19	546.19	548.37	559.30	572.41	593.71	611.19	619.93	633.03	646.14	654.34	663.07	667.44	671.81	676.18	680.55	689.29	698.03	711.14	723.70	741.18	763.03	788.70	819.29	853.69	893.02	931.80	975.50	1018.64	1066.16	1114.23	1166.12	1218.00	1274.26	1331.07	1391.69	1421.73	1482.36	1534.79	1569.20	1612.35	1638.57
Anthem Blue Cross	Prudent Buyer - Small Group	PPO F	454.53	494.94	510.38	525.83	542.47	559.10	576.34	594.16	594.16	594.16	594.16	596.54	608.42	622.68	645.85	664.87	674.37	688.63	702.89	711.80	721.31	726.06	730.82	735.57	740.32	749.83	759.34	773.60	787.26	806.28	830.04	857.97	891.24	928.67	971.45	1013.64	1061.17	1108.11	1159.80	1212.09	1268.53	1324.98	1386.18	1447.97	1513.92	1546.60	1612.55	1669.59	1707.02	1753.96	1782.48
Kaiser Permanente	Full	HMO A	357.70	388.23	399.90	411.58	424.15	422.45	435.46	448.93	448.93	448.93	448.93	450.73	459.71	470.48	487.99	502.36	509.54	520.31	531.09	537.82	545.00	548.60	552.19	555.78	559.37	566.55	573.74	584.51	594.84	609.20	627.16	648.26	673.40	701.68	734.01	765.88	801.79	837.26	876.32	915.82	958.47	1001.12	1047.36	1094.05	1143.88	1168.57	1218.40	1261.50	1289.78	1325.25	1346.79
Kaiser Permanente	Full	HMO B	362.43	393.38	405.21	417.05	429.79	428.26	441.46	455.11	455.11	455.11	455.11	456.93	466.04	476.96	494.71	509.27	516.55	527.48	538.40	545.23	552.51	556.15	559.79	563.43	567.07	574.35	581.63	592.56	603.02	617.59	635.79	657.18	682.67	711.34	744.11	776.42	812.83	848.79	888.38	928.43	971.67	1014.90	1061.78	1109.11	1159.63	1184.66	1235.18	1278.87	1307.54	1343.49	1365.33
Kaiser Permanente	Full	HMO C	359.85	390.57	402.31	414.06	426.71	425.09	438.19	451.74	451.74	451.74	451.74	453.55	462.58	473.42	491.04	505.50	512.72	523.57	534.41	541.18	548.41	552.02	555.64	559.25	562.87	570.09	577.32	588.16	598.55	613.01	631.08	652.31	677.61	706.07	738.59	770.67	806.81	842.49	881.79	921.55	964.46	1007.38	1053.91	1100.89	1151.03	1175.88	1226.02	1269.39	1297.85	1333.53	1355.22
Kaiser Permanente	Full	HMO D	330.55	358.67	369.42	380.17	391.74	389.05	401.04	413.44	413.44	413.44	413.44	415.09	423.36	433.29	449.41	462.64	469.26	479.18	489.10	495.30	501.92	505.22	508.53	511.84	515.15	521.76	528.38	538.30	547.81	561.04	577.58	597.01	620.16	646.21	675.98	705.33	738.41	771.07	807.04	843.42	882.70	921.97	964.56	1007.56	1053.45	1076.19	1122.08	1161.77	1187.82	1220.48	1240.32
Kaiser Permanente	Full	HMO E	344.68	374.05	385.28	396.51	408.60	406.42	418.95	431.90	431.90	431.90	431.90	433.63	442.27	452.64	469.48	483.30	490.21	500.58	510.94	517.42	524.33	527.79	531.24	534.70	538.15	545.06	551.97	562.34	572.27	586.09	603.37	623.67	647.86	675.07	706.16	736.83	771.38	805.50	843.08	881.09	922.12	963.15	1007.63	1052.55	1100.49	1124.25	1172.19	1213.65	1240.86	1274.98	1295.70
Sharp Health Plan	Premier	HMO A	285.29	310.65	320.35	330.04	340.49	350.93	361.74	372.93	372.93	372.93	372.93	374.42	381.88	390.83	405.37	417.31	423.28	432.23	441.18	446.77	452.74	455.72	458.70	461.69	464.67	470.64	476.60	485.55	494.13	506.07	520.98	538.51	559.40	582.89	609.74	636.22	666.05	695.51	727.96	760.78	796.21	831.63	870.05	908.83	950.23	970.74	1012.13	1047.93	1071.43	1100.89	1118.79
Sharp Health Plan	Performance	HMO B	294.75	320.95	330.96	340.98	351.77	362.56	373.73	385.29	385.29	385.29	385.29	386.83	394.54	403.78	418.81	431.14	437.30	446.55	455.80	461.58	467.74	470.82	473.91	476.99	480.07	486.24	492.40	501.65	510.51	522.84	538.25	556.36	577.94	602.21	629.95	657.30	688.13	718.57	752.09	785.99	822.59	859.20	898.88	938.95	981.72	1002.91	1045.68	1082.66	1106.94	1137.38	1155.87
Sharp Health Plan	Premier	HMO C	268.76	292.65	301.78	310.92	320.76	330.59	340.78	351.32	351.32	351.32	351.32	352.73	359.75	368.18	381.88	393.13	398.75	407.18	415.61	420.88	426.50	429.31	432.12	434.93	437.74	443.37	448.99	457.42	465.50	476.74	490.79	507.31	526.98	549.11	574.41	599.35	627.46	655.21	685.78	716.69	750.07	783.44	819.63	856.17	895.16	914.49	953.48	987.21	1009.34	1037.10	1053.96
Sutter Health Plan	Sutter Health Plan	HMO B	413.90	450.70	464.76	478.83	493.98	509.13	524.82	541.06	541.06	541.06	541.06	543.22	554.04	567.02	588.12	605.44	614.09	627.08	640.06	648.18	656.84	661.17	665.49	669.82	674.15	682.81	691.46	704.45	716.89	734.21	755.85	781.28	811.58	845.66	884.62	923.03	966.32	1009.06	1056.13	1103.75	1155.15	1206.55	1262.27	1318.54	1378.60	1408.36	1468.42	1520.36	1554.44	1597.19	1623.15
Sutter Health Plan	Sutter Health Plan	HMO C	358.49	390.35	402.54	414.72	427.84	440.96	454.55	468.62	468.62	468.62	468.62	470.48	479.86	491.10	509.38	524.37	531.87	543.12	554.37	561.39	568.89	572.64	576.39	580.14	583.89	591.39	598.88	610.13	620.91	635.90	654.65	676.67	702.92	732.44	766.18	799.45	836.94	873.96	914.73	955.96	1000.48	1045.00	1093.27	1142.00	1194.02	1219.79	1271.81	1316.79	1346.32	1383.34	1405.82
UnitedHealthcare	SignatureValue	HMO A	619.46	674.52	695.58	716.63	739.30	761.97	785.46	809.75	809.75	809.75	809.75	812.99	829.18	848.62	880.20	906.11	919.07	938.50	957.93	970.08	983.04	989.51	995.99	1002.47	1008.95	1021.90	1034.86	1054.29	1072.92	1098.83	1131.22	1169.28	1214.63	1265.64	1323.94	1381.43	1446.21	1510.18	1580.63	1651.89	1728.82	1805.74	1889.15	1973.36	2063.24	2107.78	2197.66	2275.40	2326.41	2390.38	2429.25
Western Health	Full	HMO B	416.59	453.62	467.78	481.94	497.19	512.44	528.23	544.57	544.57	544.57	544.57	546.74	557.63	570.70	591.94	609.37	618.08	631.15	644.22	652.39	661.10	665.46	669.82	674.17	678.53	687.24	695.95	709.02	721.55	738.97	760.76	786.35	816.85	851.16	890.36	929.03	972.59	1015.61	1062.99	1110.91	1162.65	1214.38	1270.47	1327.11	1387.55	1417.50	1477.95	1530.23	1564.54	1607.56	1633.70
Western Health	Full	HMO C	393.68	428.68	442.06	455.44	469.84	484.25	499.18	514.62	514.62	514.62	514.62	516.67	526.97	539.32	559.39	575.86	584.09	596.44	608.79	616.51	624.74	628.86	632.98	637.09	641.21	649.45	657.68	670.03	681.87	698.33	718.92	743.11	771.92	804.35	841.40	877.94	919.10	959.76	1004.53	1049.82	1098.71	1147.59	1200.60	1254.12	1311.24	1339.55	1396.67	1446.07	1478.49	1519.15	1543.85
Western Health	Full	HMO D	379.81	413.57	426.48	439.39	453.29	467.19	481.59	496.49	496.49	496.49	496.49	498.47	508.40	520.32	539.68	555.57	563.51	575.43	587.34	594.79	602.73	606.71	610.68	614.65	618.62	626.57	634.51	646.43	657.84	673.73	693.59	716.93	744.73	776.01	811.76	847.01	886.72	925.95	969.14	1012.83	1060.00	1107.16	1158.30	1209.94	1265.05	1292.35	1347.46	1395.13	1426.41	1465.63	1489.46

Health Care Service Plan rates will vary by county

THE INFORMATION PROVIDED HEREIN, INCLUDING THE RATING INFORMATION IS PROVIDED ON TO YOU ON AN "AS IS" "AS AVAILABLE" BASIS WITHOUT WARRANTY OF ANY KIND, EXPRESS OR IMPLIED. WE FURTHER DISCLAIM ALL LIABILITY RELATED TO THE INFORMATION, INCLUDING THOSE CAUSED BY RATING DISCREPANCIES. FINAL RATES AND RATING AREAS ARE BASED UPON ACTUAL ENROLLMENT AND UNDERWRITING AND MUST BE APPROVED BY THE APPLICABLE INSURANCE CARRIER.

Continued

Gold		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																																																			
Anthem Blue Cross	Select HMO	HMO A	588.20	640.49	660.48	680.47	702.00	723.53	745.82	768.89	768.89	768.89	768.89	771.97	787.34	805.80	835.78	860.39	872.69	891.14	909.60	921.13	933.43	939.58	945.73	951.89	958.04	970.34	982.64	1001.09	1018.78	1043.38	1074.14	1110.28	1153.34	1201.78	1257.14	1311.73	1373.24	1433.98	1500.87	1568.54	1641.58	1714.62	1793.82	1873.78	1959.13	2001.42	2086.77	2160.58	2209.02	2269.76	2306.67
Anthem Blue Cross	CaliforniaCare HMO	HMO B	588.20	640.49	660.48	680.47	702.00	723.53	745.82	768.89	768.89	768.89	768.89	771.97	787.34	805.80	835.78	860.39	872.69	891.14	909.60	921.13	933.43	939.58	945.73	951.89	958.04	970.34	982.64	1001.09	1018.78	1043.38	1074.14	1110.28	1153.34	1201.78	1257.14	1311.73	1373.24	1433.98	1500.87	1568.54	1641.58	1714.62	1793.82	1873.78	1959.13	2001.42	2086.77	2160.58	2209.02	2269.76	2306.67
Anthem Blue Cross	Priority Select HMO	HMO C	433.32	471.84	486.56	501.29	517.15	533.01	549.44	566.43	566.43	566.43	566.43	568.70	580.02	593.62	615.71	633.84	642.90	656.49	670.09	678.58	687.65	692.18	696.71	701.24	705.77	714.83	723.90	737.49	750.52	768.65	791.30	817.92	849.65	885.33	926.11	966.33	1011.64	1056.39	1105.67	1155.52	1209.33	1263.14	1321.48	1380.39	1443.26	1474.42	1537.29	1591.67	1627.35	1672.10	1699.29
Anthem Blue Cross	Select PPO	PPO B	510.14	555.49	572.82	590.16	608.83	627.51	646.84	666.85	666.85	666.85	666.85	669.52	682.85	698.86	724.87	746.21	756.87	772.88	788.88	798.89	809.56	814.89	820.23	825.56	830.90	841.56	852.23	868.24	883.58	904.92	931.59	962.93	1000.28	1042.29	1090.30	1137.65	1190.99	1243.68	1301.69	1360.37	1423.72	1487.08	1555.76	1625.11	1699.13	1735.81	1809.83	1873.85	1915.86	1968.54	2000.55
Anthem Blue Cross	Select PPO	PPO C	526.34	573.12	591.01	608.90	628.16	647.43	667.38	688.02	688.02	688.02	688.02	690.77	704.53	721.04	747.88	769.89	780.90	797.42	813.93	824.25	835.26	840.76	846.26	851.77	857.27	868.28	879.29	895.80	911.63	933.64	961.16	993.50	1032.03	1075.38	1124.91	1173.76	1228.80	1283.16	1343.02	1403.56	1468.92	1534.28	1605.15	1676.70	1753.07	1790.92	1867.29	1933.34	1976.68	2031.04	2064.06
Anthem Blue Cross	Select PPO	PPO D	506.41	551.43	568.64	585.85	604.39	622.92	642.12	661.98	661.98	661.98	661.98	664.63	677.87	693.76	719.57	740.76	751.35	767.23	783.12	793.05	803.64	808.94	814.24	819.53	824.83	835.42	846.01	861.90	877.12	898.31	924.79	955.90	992.97	1034.67	1082.34	1129.34	1182.30	1234.59	1292.18	1350.44	1413.33	1476.22	1544.40	1613.25	1686.73	1723.13	1796.61	1860.16	1901.87	1954.16	1985.94
Anthem Blue Cross	Prudent Buyer - Small Group	PPO E	552.90	602.04	620.83	639.62	659.86	680.10	701.06	722.74	722.74	722.74	722.74	725.63	740.09	757.43	785.62	808.75	820.31	837.66	855.00	865.84	877.41	883.19	888.97	894.75	900.53	912.10	923.66	941.01	957.63	980.76	1009.67	1043.64	1084.11	1129.64	1181.68	1232.99	1290.81	1347.91	1410.79	1474.39	1543.05	1611.71	1686.15	1761.32	1841.54	1881.29	1961.52	2030.90	2076.43	2133.53	2168.22
Anthem Blue Cross	Prudent Buyer - Small Group	PPO H	532.02	579.31	597.39	615.47	634.95	654.42	674.59	695.45	695.45	695.45	695.45	698.23	712.14	728.83	755.95	778.21	789.34	806.03	822.72	833.15	844.28	849.84	855.40	860.97	866.53	877.66	888.79	905.48	921.47	943.73	971.54	1004.23	1043.18	1086.99	1137.06	1186.44	1242.07	1297.01	1357.52	1418.72	1484.79	1550.85	1622.48	1694.81	1772.01	1810.26	1887.45	1954.21	1998.03	2052.97	2086.35
Anthem Blue Cross	Prudent Buyer - Small Group	PPO I	539.85	587.84	606.19	624.54	644.29	664.05	684.52	705.69	705.69	705.69	705.69	708.51	722.63	739.56	767.09	789.67	800.96	817.89	834.83	845.42	856.71	862.35	868.00	873.64	879.29	890.58	901.87	918.81	935.04	957.62	985.85	1019.02	1058.54	1102.99	1153.80	1203.91	1260.36	1316.11	1377.51	1439.61	1506.65	1573.69	1646.37	1719.77	1798.10	1836.91	1915.24	1982.99	2027.45	2083.20	2117.07
Kaiser Permanente	Full	HMO B	430.15	467.12	481.26	495.39	510.61	511.56	527.33	543.64	543.64	543.64	543.64	545.81	556.69	569.73	590.94	608.33	617.03	630.08	643.12	651.28	659.98	664.33	668.68	673.02	677.37	686.07	694.77	707.82	720.32	737.72	759.46	785.01	815.46	849.71	888.85	927.45	970.94	1013.89	1061.18	1109.02	1160.67	1212.31	1268.31	1324.85	1385.19	1415.09	1475.44	1527.62	1561.87	1604.82	1630.92
Kaiser Permanente	Full	HMO C	442.58	480.66	495.21	509.77	525.45	526.85	543.09	559.89	559.89	559.89	559.89	562.13	573.32	586.76	608.60	626.51	635.47	648.91	662.35	670.74	679.70	684.18	688.66	693.14	697.62	706.58	715.53	728.97	741.85	759.77	782.16	808.48	839.83	875.10	915.41	955.17	999.96	1044.19	1092.90	1142.17	1195.36	1248.55	1306.21	1364.44	1426.59	1457.38	1519.53	1573.28	1608.55	1652.78	1679.67
Kaiser Permanente	Full	HMO D	417.81	453.68	467.39	481.11	495.88	496.38	511.67	527.50	527.50	527.50	527.50	529.61	540.16	552.82	573.39	590.27	598.71	611.37	624.03	631.94	640.38	644.60	648.82	653.04	657.26	665.70	674.14	686.80	698.93	715.81	736.91	761.71	791.25	824.48	862.46	899.91	942.11	983.78	1029.68	1076.10	1126.21	1176.32	1230.65	1285.51	1344.06	1373.08	1431.63	1482.27	1515.50	1557.17	1582.50
Kaiser Permanente	Full	HMO E	373.58	405.52	417.73	429.94	443.09	441.97	455.59	469.68	469.68	469.68	469.68	471.56	480.96	492.23	510.55	525.58	533.09	544.36	555.64	562.68	570.20	573.95	577.71	581.47	585.23	592.74	600.26	611.53	622.33	637.36	656.15	678.22	704.53	734.12	767.93	801.28	838.86	875.96	916.82	958.16	1002.78	1047.40	1095.77	1144.62	1196.76	1222.59	1274.72	1319.81	1349.40	1386.51	1409.04
Kaiser Permanente	Full	HMO F	426.56	463.21	477.22	491.23	506.32	507.15	522.77	538.94	538.94	538.94	538.94	541.10	551.88	564.81	585.83	603.08	611.70	624.63	637.57	645.65	654.28	658.59	662.90	667.21	671.52	680.15	688.77	701.70	714.10	731.35	752.90	778.23	808.41	842.37	881.17	919.44	962.55	1005.13	1052.02	1099.44	1150.64	1201.84	1257.35	1313.40	1373.23	1402.87	1462.69	1514.43	1548.38	1590.96	1616.82
Sharp Health Plan	Performance	HMO A	366.15	398.70	411.14	423.59	436.99	450.39	464.27	478.63	478.63	478.63	478.63	480.54	490.12	501.60	520.27	535.59	543.25	554.73	566.22	573.40	581.06	584.89	588.71	592.54	596.37	604.03	611.69	623.18	634.18	649.50	668.65	691.14	717.95	748.10	782.56	816.54	854.83	892.64	934.29	976.41	1021.88	1067.34	1116.64	1166.42	1219.55	1245.87	1299.00	1344.95	1375.10	1412.92	1435.89
Sharp Health Plan	Premier	HMO B	345.92	376.67	388.42	400.18	412.84	425.50	438.61	452.18	452.18	452.18	452.18	453.99	463.03	473.88	491.52	505.99	513.22	524.08	534.93	541.71	548.95	552.56	556.18	559.80	563.42	570.65	577.89	588.74	599.14	613.61	631.70	652.95	678.27	706.76	739.31	771.42	807.59	843.32	882.66	922.45	965.40	1008.36	1054.94	1101.96	1152.15	1177.02	1227.22	1270.63	1299.11	1334.84	1356.54
Sharp Health Plan	Performance	HMO D	377.08	410.59	423.41	436.23	450.03	463.83	478.12	492.91	492.91	492.91	492.91	494.88	504.74	516.57	535.79	551.57	559.45	571.28	583.11	590.51	598.39	602.34	606.28	610.22	614.17	622.05	629.94	641.77	653.11	668.88	688.60	711.76	739.37	770.42	805.91	840.90	880.34	919.28	962.16	1005.54	1052.36	1099.19	1149.96	1201.22	1255.93	1283.04	1337.76	1385.08	1416.13	1455.07	1478.73
Sutter Health Plan	Sutter Health Plan	HMO A	453.43	493.73	509.14	524.56	541.15	557.75	574.94	592.73	592.73	592.73	592.73	595.09	606.94	621.17	644.28	663.25	672.73	686.96	701.19	710.08	719.56	724.30	729.04	733.78	738.53	748.01	757.49	771.72	785.35	804.32	828.03	855.88	889.08	926.42	969.09	1011.18	1058.59	1105.42	1156.98	1209.14	1265.45	1321.76	1382.81	1444.45	1510.24	1542.84	1608.64	1665.54	1702.88	1749.70	1778.14
Sutter Health Plan	Sutter Health Plan	HMO B	486.35	529.58	546.11	562.64	580.44	598.24	616.68	635.76	635.76	635.76	635.76	638.29	651.01	666.27	691.06	711.41	721.58	736.84	752.09	761.63	771.80	776.89	781.97	787.06	792.15	802.32	812.49	827.75	842.37	862.71	888.14	918.02	953.63	993.68	1039.45	1084.59	1135.45	1185.68	1240.99	1296.93	1357.33	1417.72	1483.21	1549.33	1619.89	1654.86	1725.43	1786.46	1826.51	1876.74	1907.24
Sutter Health Plan	Sutter Health Plan	HMO C	413.21	449.94	463.99	478.03	493.15	508.28	523.94	540.16	540.16	540.16	540.16	542.31	553.11	566.07	587.14	604.43	613.07	626.03	638.99	647.10	655.74	660.06	664.38	668.70	673.02	681.67	690.31	703.27	715.70	732.98	754.59	779.97	810.22	844.25	883.14	921.49	964.70	1007.38	1054.37	1101.90	1153.22	1204.53	1260.16	1316.34	1376.30	1406.00	1465.96	1517.81	1551.84	1594.52	1620.43
UnitedHealthcare	SignatureValue	HMO A	678.20	738.49	761.54	784.59	809.41	834.23	859.94	886.54	886.54	886.54	886.54	890.09	907.82	929.09	963.67	992.04	1006.22	1027.50	1048.78	1062.07	1076.26	1083.35	1090.44	1097.54	1104.63	1118.81	1133.00	1154.28	1174.67	1203.03	1238.50	1280.16	1329.81	1385.66	1449.49	1512.44	1583.36	1653.40	1730.53	1808.54	1892.76	1976.98	2068.30	2160.50	2258.90	2307.66	2406.07	2491.18	2547.03	2617.07	2659.62
UnitedHealthcare	SignatureValue	HMO C	726.08	790.63	815.30	839.98	866.56	893.13	920.66	949.13	949.13	949.13	949.13	952.93	971.91	994.69	1031.70	1062.08	1077.26	1100.04	1122.82	1137.06	1152.24	1159.84	1167.43	1175.02	1182.62	1197.80	1212.99	1235.77	1257.60	1287.97	1325.93	1370.54	1423.70	1483.49	1551.83	1619.22	1695.15	1770.13	1852.70	1936.23	2026.39	2116.56	2214.32	2313.03	2418.38	2470.59	2575.94	2667.06	2726.85	2801.83	2847.39
UnitedHealthcare	SignatureValue	HMO F	751.02	817.78	843.31	868.83	896.32	923.81	952.28	981.73	981.73	981.73	981.73	985.66	1005.29	1028.85	1067.14	1098.56	1114.26	1137.83	1161.39	1176.11	1191.82	1199.67	1207.53	1215.38	1223.24	1238.94	1254.65	1278.21	1300.79	1332.21	1371.48	1417.62	1472.60	1534.44	1605.13	1674.83	1753.37	1830.93	1916.34	2002.73	2095.99	2189.26	2290.38	2392.48	2501.45	2555.44	2664.42	2758.66	2820.51	2898.07	2945.19
UnitedHealthcare	SignatureValue	HMO H	703.81	766.37	790.29	814.21	839.97	865.73	892.41	920.01	920.01	920.01	920.01	923.69	942.09	964.17	1000.05	1029.49	1044.21	1066.29	1088.37	1102.17	1116.89	1124.25	1131.61	1138.97	1146.33	1161.05	1175.77	1197.85	1219.01	1248.45	1285.25	1328.49	1380.02	1437.98	1504.22	1569.54	1643.14	1715.82	1795.86	1876.82	1964.22	2051.62	2146.38	2242.06	2344.19	2394.79	2496.91	2585.23	2643.19	2715.87	2760.03
Western Health	Full	HMO A	466.71	508.20	524.06	539.92	557.01	574.09	591.78	610.08	610.08	610.08	610.08	612.52	624.73	639.37	663.16	682.68	692.45	707.09	721.73	730.88	740.64	745.52	750.40	755.28	760.16	769.93	779.69	794.33	808.36	827.88	852.29	880.96	915.13	953.56	997.49	1040.80	1089.61	1137.81	1190.88	1244.57	1302.53	1360.49	1423.33	1486.77	1554.49	1588.05	1655.77	1714.34	1752.77	1800.97	1830.24
Western Health	Full	HMO B	489.75	533.28	549.92	566.57	584.49	602.42	620.99	640.19	640.19	640.19	640.19	642.75	655.56	670.92	695.89	716.37	726.62	741.98	757.35	766.95	777.19	782.31	787.44	792.56	797.68	807.92	818.16	833.53	848.25	868.74	894.35	924.44	960.29	1000.62	1046.71	1092.17	1143.38	1193.96	1249.65	1305.99	1366.81	1427.63	1493.57	1560.15	1631.21	1666.42	1737.48	1798.94	1839.27	1889.84	1920.57
Western Health	Full	HMO C	456.34	496.90	512.41	527.92	544.63	561.33	578.63	596.52	596.52	596.52	596.52	598.91	610.84	625.16	648.42	667.51	677.05	691.37	705.69	714.63	724.18	728.95	733.72	738.50	743.27	752.81	762.36	776.67	790.39	809.48	833.34	861.38	894.78	932.37	975.32	1017.67	1065.39	1112.52	1164.41	1216.91	1273.58	1330.25	1391.69	1453.73	1519.94	1552.75	1618.96	1676.23	1713.81	1760.94	1789.56
Western Health	Full	HMO D	439.39	478.45	493.38	508.31	524.40	540.48	557.14	574.37	574.37	574.37	574.37	576.66	588.15	601.94	624.34	642.72	651.91	665.69	679.48	688.09	697.28	701.88	706.47	711.07	715.66	724.85	734.04	747.83	761.04	779.42	802.39	829.39	861.55	897.74	939.09	979.87	1025.82	1071.19	1121.16	1171.71	1226.27	1280.84	1340.00	1399.73	1463.49	1495.08	1558.83	1613.97	1650.16	1695.53	1723.10

Platinum		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																																																			
Anthem Blue Cross	Select HMO	HMO A	638.18	694.91	716.59	738.28	761.64	785.00	809.19	834.22	834.22	834.22	834.22	837.56	854.24	874.26	906.80	933.49	946.84	966.86	986.88	999.40	1012.74	1019.42	1026.09	1032.76	1039.44	1052.79	1066.13	1086.15	1105.34	1132.04	1165.41	1204.61	1251.33	1303.89	1363.95	1423.18	1489.92	1555.82	1628.40	1701.81	1781.06	1860.31	1946.24	2032.99	2125.59	2171.47	2264.07	2344.16	2396.71	2462.62	2502.66
Anthem Blue Cross	Vivity	HMO B	637.12	693.76	715.41	737.06	760.38	783.70	807.85	832.84	832.84	832.84	832.84	836.17	852.83	872.82	905.30	931.95	945.27	965.26	985.25	997.74	1011.07	1017.73	1024.39	1031.06	1037.72	1051.04	1064.37	1084.36	1103.51	1130.16	1163.48	1202.62	1249.26	1301.73	1361.69	1420.83	1487.45	1553.25	1625.70	1698.99	1778.11	1857.23	1943.02	2029.63	2122.08	2167.88	2260.33	2340.28	2392.75	2458.54	2498.52
Anthem Blue Cross	Vivity	HMO C	623.84	679.29	700.50	721.70	744.53	767.37	791.02	815.48	815.48	815.48	815.48	818.74	835.05	854.62	886.43	912.52	925.57	945.14	964.71	976.95	989.99	996.52	1003.04	1009.56	1016.09	1029.14	1042.18	1061.75	1080.51	1106.61	1139.23	1177.55	1223.22	1274.60	1333.31	1391.21	1456.45	1520.87	1591.82	1663.58	1741.05	1818.52	1902.51	1987.32	2077.84	2122.69	2213.21	2291.50	2342.87	2407.30	2446.44
Anthem Blue Cross	CaliforniaCare HMO	HMO D	638.03	694.75	716.43	738.12	761.47	784.82	809.01	834.03	834.03	834.03	834.03	837.37	854.05	874.06	906.59	933.28	946.62	966.64	986.66	999.17	1012.51	1019.18	1025.86	1032.53	1039.20	1052.55	1065.89	1085.91	1105.09	1131.78	1165.14	1204.34	1251.05	1303.59	1363.64	1422.86	1489.58	1555.47	1628.03	1701.42	1780.65	1859.89	1945.79	2032.53	2125.11	2170.98	2263.56	2343.62	2396.17	2462.06	2502.09
Anthem Blue Cross	Prudent Buyer - Small Group	PPO B	623.80	679.24	700.45	721.65	744.48	767.31	790.96	815.42	815.42	815.42	815.42	818.68	834.99	854.56	886.36	912.45	925.50	945.07	964.64	976.87	989.92	996.44	1002.97	1009.49	1016.01	1029.06	1042.11	1061.68	1080.43	1106.52	1139.14	1177.47	1223.13	1274.50	1333.21	1391.11	1456.34	1520.76	1591.70	1663.46	1740.92	1818.39	1902.37	1987.18	2077.69	2122.54	2213.05	2291.33	2342.70	2407.12	2446.26
Kaiser Permanente	Full	HMO A	476.42	517.50	533.21	548.91	565.83	568.47	585.99	604.12	604.12	604.12	604.12	606.53	618.61	633.11	656.67	676.01	685.67	700.17	714.67	723.73	733.40	738.23	743.06	747.90	752.73	762.39	772.06	786.56	800.45	819.79	843.95	872.34	906.17	944.23	987.73	1030.62	1078.95	1126.68	1179.23	1232.40	1289.79	1347.18	1409.40	1472.23	1539.29	1572.51	1639.57	1697.57	1735.62	1783.35	1812.36
Kaiser Permanente	Full	HMO B	463.94	503.91	519.20	534.48	550.94	553.13	570.17	587.81	587.81	587.81	587.81	590.16	601.92	616.02	638.95	657.76	667.16	681.27	695.38	704.19	713.60	718.30	723.00	727.71	732.41	741.81	751.22	765.33	778.85	797.66	821.17	848.80	881.71	918.74	961.07	1002.80	1049.83	1096.26	1147.40	1199.13	1254.97	1310.81	1371.36	1432.49	1497.74	1530.07	1595.31	1651.74	1688.77	1735.21	1763.43
Kaiser Permanente	Full	HMO C	445.59	483.93	498.59	513.24	529.03	530.55	546.90	563.81	563.81	563.81	563.81	566.07	577.34	590.88	612.86	630.91	639.93	653.46	666.99	675.45	684.47	688.98	693.49	698.00	702.51	711.53	720.55	734.08	747.05	765.09	787.65	814.15	845.72	881.24	921.83	961.86	1006.97	1051.51	1100.56	1150.18	1203.74	1257.30	1315.37	1374.01	1436.59	1467.60	1530.19	1584.31	1619.83	1664.37	1691.43
Sharp Health Plan	Premier	HMO A	387.44	421.88	435.05	448.22	462.40	476.58	491.27	506.46	506.46	506.46	506.46	508.49	518.62	530.77	550.52	566.73	574.83	586.99	599.14	606.74	614.84	618.89	622.95	627.00	631.05	639.15	647.26	659.41	671.06	687.27	707.52	731.33	759.69	791.60	828.06	864.02	904.54	944.55	988.61	1033.18	1081.29	1129.41	1181.57	1234.24	1290.46	1318.32	1374.53	1423.15	1455.06	1495.07	1519.38
Sharp Health Plan	Performance	HMO B	415.31	452.23	466.34	480.46	495.66	510.86	526.60	542.89	542.89	542.89	542.89	545.06	555.92	568.95	590.12	607.49	616.18	629.21	642.24	650.38	659.07	663.41	667.75	672.10	676.44	685.13	693.81	706.84	719.33	736.70	758.42	783.93	814.34	848.54	887.63	926.17	969.60	1012.49	1059.72	1107.50	1159.07	1210.64	1266.56	1323.02	1383.28	1413.14	1473.40	1525.52	1559.72	1602.61	1628.67
Sharp Health Plan	Premier	HMO C	388.91	423.48	436.70	449.92	464.15	478.39	493.13	508.38	508.38	508.38	508.38	510.41	520.58	532.78	552.61	568.88	577.01	589.21	601.41	609.04	617.17	621.24	625.31	629.37	633.44	641.58	649.71	661.91	673.60	689.87	710.21	734.10	762.57	794.60	831.20	867.30	907.97	948.13	992.36	1037.10	1085.39	1133.69	1186.05	1238.92	1295.35	1323.31	1379.74	1428.55	1460.58	1500.74	1525.14
Sutter Health Plan	Sutter Health Plan	HMO A	528.24	575.20	593.15	611.10	630.44	649.77	669.80	690.52	690.52	690.52	690.52	693.27	707.08	723.66	750.59	772.68	783.73	800.30	816.88	827.23	838.28	843.81	849.33	854.85	860.38	871.43	882.47	899.05	914.93	937.03	964.65	997.10	1035.77	1079.27	1128.99	1178.01	1233.25	1287.81	1347.88	1408.64	1474.24	1539.84	1610.96	1682.78	1759.43	1797.40	1874.05	1940.34	1983.84	2038.39	2071.53
UnitedHealthcare	SignatureValue	HMO A	753.57	820.55	846.17	871.78	899.36	926.94	955.51	985.06	985.06	985.06	985.06	989.00	1008.70	1032.34	1070.76	1102.28	1118.04	1141.68	1165.33	1180.10	1195.86	1203.74	1211.62	1219.50	1227.38	1243.15	1258.91	1282.55	1305.20	1336.73	1376.13	1422.43	1477.59	1539.65	1610.57	1680.51	1759.32	1837.14	1922.84	2009.52	2103.10	2196.68	2298.14	2400.59	2509.93	2564.11	2673.45	2768.02	2830.08	2907.90	2955.18
UnitedHealthcare	SignatureValue	HMO B	816.19	888.74	916.48	944.22	974.10	1003.97	1034.91	1066.92	1066.92	1066.92	1066.92	1071.19	1092.53	1118.13	1159.74	1193.88	1210.95	1236.56	1262.17	1278.17	1295.24	1303.78	1312.31	1320.85	1329.38	1346.45	1363.52	1389.13	1413.67	1447.81	1490.49	1540.63	1600.38	1667.60	1744.41	1820.17	1905.52	1989.81	2082.63	2176.52	2277.87	2379.23	2489.12	2600.08	2718.51	2777.19	2895.62	2998.05	3065.26	3149.55	3200.76
UnitedHealthcare	SignatureValue	HMO D	783.28	852.90	879.52	906.14	934.81	963.48	993.17	1023.89	1023.89	1023.89	1023.89	1027.99	1048.46	1073.04	1112.97	1145.73	1162.12	1186.69	1211.26	1226.62	1243.00	1251.19	1259.38	1267.58	1275.77	1292.15	1308.53	1333.10	1356.65	1389.42	1430.37	1478.50	1535.84	1600.34	1674.06	1746.76	1828.67	1909.55	1998.63	2088.74	2186.01	2283.27	2388.74	2495.22	2608.87	2665.19	2778.84	2877.13	2941.64	3022.52	3071.67
UnitedHealthcare	SignatureValue	HMO E	803.23	874.63	901.92	929.22	958.62	988.02	1018.47	1049.97	1049.97	1049.97	1049.97	1054.17	1075.17	1100.37	1141.32	1174.92	1191.72	1216.92	1242.11	1257.86	1274.66	1283.06	1291.46	1299.86	1308.26	1325.06	1341.86	1367.06	1391.21	1424.81	1466.81	1516.16	1574.96	1641.10	1716.70	1791.25	1875.25	1958.19	2049.54	2141.94	2241.69	2341.43	2449.58	2558.78	2675.32	2733.07	2849.62	2950.42	3016.56	3099.51	3149.91
Western Health	Full	HMO B	533.47	580.89	599.03	617.16	636.68	656.21	676.43	697.35	697.35	697.35	697.35	700.14	714.09	730.82	758.02	780.34	791.49	808.23	824.97	835.43	846.59	852.16	857.74	863.32	868.90	880.06	891.22	907.95	923.99	946.31	974.20	1006.98	1046.03	1089.96	1140.17	1189.68	1245.47	1300.56	1361.23	1422.60	1488.85	1555.09	1626.92	1699.45	1776.85	1815.21	1892.61	1959.56	2003.49	2058.58	2092.05
Western Health	Full	HMO C	528.11	575.05	593.00	610.95	630.28	649.61	669.63	690.34	690.34	690.34	690.34	693.10	706.91	723.48	750.40	772.49	783.54	800.10	816.67	827.03	838.07	843.60	849.12	854.64	860.16	871.21	882.25	898.82	914.70	936.79	964.40	996.85	1035.51	1079.00	1128.71	1177.72	1232.95	1287.48	1347.54	1408.29	1473.88	1539.46	1610.56	1682.36	1758.99	1796.95	1873.58	1939.85	1983.35	2037.88	2071.02
Western Health	Full	HMO D	498.79	543.12	560.08	577.03	595.29	613.54	632.45	652.01	652.01	652.01	652.01	654.62	667.66	683.31	708.74	729.60	740.03	755.68	771.33	781.11	791.54	796.76	801.97	807.19	812.40	822.84	833.27	848.92	863.91	884.78	910.86	941.50	978.02	1019.09	1066.04	1112.33	1164.49	1216.00	1272.72	1330.10	1392.04	1453.98	1521.14	1588.95	1661.32	1697.18	1769.56	1832.15	1873.23	1924.73	1956.03

Health Care Service Plan rates will vary by county

THE INFORMATION PROVIDED HEREIN, INCLUDING THE RATING INFORMATION IS PROVIDED ON TO YOU ON AN “AS IS” “AS AVAILABLE” BASIS WITHOUT WARRANTY OF ANY KIND, EXPRESS OR IMPLIED. WE FURTHER DISCLAIM ALL LIABILITY RELATED TO THE INFORMATION, INCLUDING THOSE CAUSED BY RATING DISCREPANCIES. FINAL RATES AND RATING AREAS ARE BASED UPON ACTUAL ENROLLMENT AND UNDERWRITING AND MUST BE APPROVED BY THE APPLICABLE INSURANCE CARRIER.

USE EMPLOYER ZIP CODE FOR RATING

AREA 2

02/01/27 - 03/01/27

Bronze		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																																																
Anthem Blue Cross	Prudent Buyer - Small Group	PPO A	476.65	519.02	535.22	551.42	568.86	586.31	604.38	623.07	623.07	623.07	623.07	625.56	638.02	652.98	677.28	697.22	707.18	722.14	737.09	746.44	756.41	761.39	766.38	771.36	776.35	786.31	796.28	811.24	825.57	845.51	870.43	899.71	934.61	973.86	1018.72	1062.96	1112.80	1162.03	1216.23	1271.06	1330.25	1389.45	1453.62	1518.42	1587.58	1621.85	1691.01	1750.83	1790.08	1839.30	1869.21
Anthem Blue Cross	Select PPO	PPO B	463.62	504.83	520.59	536.35	553.31	570.28	587.86	606.04	606.04	606.04	606.04	608.46	620.58	635.13	658.77	678.16	687.86	702.40	716.95	726.04	735.73	740.58	745.43	750.28	755.13	764.82	774.52	789.06	803.00	822.40	846.64	875.12	909.06	947.24	990.88	1033.90	1082.39	1130.26	1182.99	1236.32	1293.90	1351.47	1413.89	1476.92	1544.19	1577.52	1644.79	1702.97	1741.15	1789.03	1818.12
Anthem Blue Cross	Prudent Buyer - Small Group	PPO C	476.09	518.41	534.59	550.77	568.20	585.62	603.67	622.34	622.34	622.34	622.34	624.83	637.28	652.21	676.48	696.40	706.36	721.29	736.23	745.56	755.52	760.50	765.48	770.46	775.44	785.39	795.35	810.29	824.60	844.52	869.41	898.66	933.51	972.72	1017.53	1061.71	1111.50	1160.66	1214.81	1269.57	1328.70	1387.82	1451.92	1516.64	1585.72	1619.95	1689.03	1748.78	1787.98	1837.15	1867.02
Anthem Blue Cross	Select PPO	PPO D	463.01	504.16	519.90	535.64	552.58	569.53	587.08	605.24	605.24	605.24	605.24	607.66	619.77	634.29	657.90	677.26	686.95	701.47	716.00	725.08	734.76	739.60	744.45	749.29	754.13	763.81	773.50	788.02	801.94	821.31	845.52	873.97	907.86	945.99	989.57	1032.54	1080.96	1128.77	1181.43	1234.69	1292.19	1349.69	1412.02	1474.97	1542.15	1575.44	1642.62	1700.72	1738.85	1786.67	1815.72
Kaiser Permanente	Full	HMO A	344.49	373.85	385.07	396.29	408.38	406.20	418.71	431.66	431.66	431.66	431.66	433.39	442.02	452.38	469.22	483.03	489.94	500.30	510.66	517.13	524.04	527.49	530.95	534.40	537.85	544.76	551.67	562.03	571.95	585.77	603.03	623.32	647.50	674.69	705.77	736.42	770.95	805.05	842.61	880.59	921.60	962.61	1007.07	1051.97	1099.88	1123.62	1171.54	1212.98	1240.17	1274.27	1294.98
Kaiser Permanente	Full	HMO C	334.91	363.41	374.31	385.21	396.95	394.41	406.57	419.14	419.14	419.14	419.14	420.82	429.20	439.26	455.61	469.02	475.73	485.78	495.84	502.13	508.84	512.19	515.54	518.90	522.25	528.96	535.66	545.72	555.36	568.77	585.54	605.24	628.71	655.12	685.30	715.05	748.59	781.70	818.16	855.05	894.87	934.68	977.86	1021.45	1067.97	1091.02	1137.55	1177.79	1204.19	1237.30	1257.42
Sharp Health Plan	Premier	HMO A	272.80	297.05	306.32	315.59	325.58	335.56	345.90	356.60	356.60	356.60	356.60	358.03	365.16	373.72	387.62	399.04	404.74	413.30	421.86	427.21	432.91	435.77	438.62	441.47	444.32	450.03	455.73	464.29	472.50	483.91	498.17	514.93	534.90	557.37	583.04	608.36	636.89	665.06	696.08	727.46	761.34	795.22	831.95	869.03	908.62	928.23	967.81	1002.05	1024.51	1052.68	1069.80
Sharp Health Plan	Performance	HMO B	291.24	317.12	327.02	336.92	347.58	358.24	369.28	380.70	380.70	380.70	380.70	382.22	389.84	398.97	413.82	426.00	432.09	441.23	450.37	456.08	462.17	465.22	468.26	471.31	474.35	480.44	486.53	495.67	504.43	516.61	531.84	549.73	571.05	595.03	622.44	649.47	679.93	710.01	743.13	776.63	812.79	848.96	888.17	927.77	970.02	990.96	1033.22	1069.77	1093.75	1123.83	1142.10
Sutter Health Plan	Sutter Health Plan	HMO A	364.96	397.40	409.81	422.21	435.57	448.93	462.76	477.09	477.09	477.09	477.09	478.98	488.53	499.98	518.58	533.85	541.48	552.93	564.38	571.54	579.17	582.99	586.80	590.62	594.44	602.07	609.70	621.15	632.13	647.39	666.48	688.90	715.61	745.67	780.02	813.89	852.06	889.75	931.25	973.24	1018.56	1063.88	1113.02	1162.64	1215.59	1241.83	1294.79	1340.58	1370.64	1408.33	1431.22
Sutter Health Plan	Sutter Health Plan	HMO B	365.14	397.60	410.01	422.42	435.79	449.15	462.99	477.32	477.32	477.32	477.32	479.22	488.77	500.22	518.84	534.11	541.75	553.20	564.66	571.82	579.46	583.28	587.09	590.91	594.73	602.37	610.00	621.46	632.44	647.71	666.81	689.24	715.97	746.04	780.41	814.29	852.48	890.19	931.71	973.72	1019.06	1064.41	1113.57	1163.21	1216.19	1242.44	1295.43	1341.25	1371.32	1409.03	1431.93
Western Health	Full	HMO B	312.15	339.90	350.50	361.11	372.54	383.96	395.80	408.04	408.04	408.04	408.04	409.67	417.83	427.62	443.54	456.59	463.12	472.92	482.71	488.83	495.36	498.62	501.89	505.15	508.42	514.94	521.47	531.27	540.65	553.71	570.03	589.21	612.06	637.76	667.14	696.11	728.76	760.99	796.49	832.40	871.16	909.93	951.95	994.39	1039.68	1062.12	1107.42	1146.59	1172.29	1204.53	1224.12
Western Health	Full	HMO C	325.54	354.48	365.54	376.61	388.52	400.44	412.78	425.55	425.55	425.55	425.55	427.25	435.76	445.97	462.57	476.19	483.00	493.21	503.42	509.81	516.61	520.02	523.42	526.83	530.23	537.04	543.85	554.06	563.85	577.47	594.49	614.49	638.32	665.13	695.77	725.98	760.03	793.64	830.67	868.12	908.54	948.97	992.80	1037.06	1084.29	1107.70	1154.93	1195.79	1222.60	1256.21	1276.64

Silver		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																																																	
Anthem Blue Cross	Select HMO	HMO A	440.17	479.29	494.25	509.21	525.32	541.43	558.12	575.38	575.38	575.38	575.38	577.68	589.19	603.00	625.44	643.85	653.06	666.87	680.67	689.31	698.51	703.11	707.72	712.32	716.92	726.13	735.34	749.14	762.38	780.79	803.81	830.85	863.07	899.32	940.75	981.60	1027.63	1073.08	1123.14	1173.78	1228.44	1283.10	1342.36	1402.20	1466.07	1497.71	1561.58	1616.82	1653.07	1698.52	1726.14
Anthem Blue Cross	CaliforniaCare HMO	HMO B	440.17	479.29	494.25	509.21	525.32	541.43	558.12	575.38	575.38	575.38	575.38	577.68	589.19	603.00	625.44	643.85	653.06	666.87	680.67	689.31	698.51	703.11	707.72	712.32	716.92	726.13	735.34	749.14	762.38	780.79	803.81	830.85	863.07	899.32	940.75	981.60	1027.63	1073.08	1123.14	1173.78	1228.44	1283.10	1342.36	1402.20	1466.07	1497.71	1561.58	1616.82	1653.07	1698.52	1726.14
Anthem Blue Cross	CaliforniaCare HMO	HMO D	439.61	478.69	493.63	508.57	524.66	540.76	557.42	574.66	574.66	574.66	574.66	576.96	588.45	602.24	624.66	643.04	652.24	666.03	679.82	688.44	697.64	702.23	706.83	711.43	716.03	725.22	734.42	748.21	761.42	779.81	802.80	829.81	861.99	898.19	939.57	980.37	1026.34	1071.74	1121.74	1172.31	1226.90	1281.49	1340.68	1400.45	1464.23	1495.84	1559.63	1614.79	1651.00	1696.40	1723.98
Anthem Blue Cross	Select PPO	PPO B	500.04	544.49	561.49	578.48	596.78	615.08	634.04	653.65	653.65	653.65	653.65	656.26	669.34	685.03	710.52	731.43	741.89	757.58	773.27	783.07	793.53	798.76	803.99	809.22	814.45	824.91	835.36	851.05	866.09	887.00	913.15	943.87	980.48	1021.65	1068.72	1115.13	1167.42	1219.06	1275.92	1333.45	1395.54	1457.64	1524.97	1592.95	1665.50	1701.45	1774.01	1836.76	1877.94	1929.57	1960.95
Anthem Blue Cross	Prudent Buyer - Small Group	PPO C	514.12	559.82	577.29	594.76	613.58	632.40	651.89	672.05	672.05	672.05	672.05	674.74	688.18	704.31	730.52	752.02	762.78	778.91	795.04	805.12	815.87	821.25	826.62	832.00	837.37	848.13	858.88	875.01	890.47	911.97	938.85	970.44	1008.08	1050.41	1098.80	1146.52	1200.28	1253.37	1311.84	1370.98	1434.83	1498.67	1567.89	1637.79	1712.38	1749.35	1823.94	1888.46	1930.80	1983.89	2016.15
Anthem Blue Cross	Prudent Buyer - Small Group	PPO D	498.49	542.80	559.74	576.68	594.93	613.17	632.07	651.62	651.62	651.62	651.62	654.23	667.26	682.90	708.31	729.16	739.59	755.23	770.87	780.64	791.07	796.28	801.49	806.71	811.92	822.34	832.77	848.41	863.40	884.25	910.31	940.94	977.43	1018.48	1065.40	1111.66	1163.79	1215.27	1271.96	1329.30	1391.21	1453.11	1520.23	1588.00	1660.33	1696.17	1768.50	1831.05	1872.10	1923.58	1954.86
Anthem Blue Cross	Select PPO	PPO E	484.85	527.95	544.43	560.90	578.65	596.40	614.78	633.79	633.79	633.79	633.79	636.33	649.00	664.21	688.93	709.21	719.35	734.56	749.77	759.28	769.42	774.49	779.56	784.63	789.70	799.84	809.98	825.19	839.77	860.05	885.40	915.19	950.69	990.61	1036.25	1081.25	1131.95	1182.02	1237.16	1292.93	1353.14	1413.35	1478.63	1544.55	1614.90	1649.76	1720.11	1780.95	1820.88	1870.95	1901.37
Anthem Blue Cross	Prudent Buyer - Small Group	PPO F	516.23	562.12	579.66	597.21	616.10	635.00	654.57	674.81	674.81	674.81	674.81	677.51	691.01	707.20	733.52	755.11	765.91	782.10	798.30	808.42	819.22	824.62	830.02	835.41	840.81	851.61	862.41	878.60	894.12	915.72	942.71	974.43	1012.22	1054.73	1103.31	1151.23	1205.21	1258.52	1317.23	1376.61	1440.72	1504.83	1574.33	1644.51	1719.42	1756.53	1831.43	1896.22	1938.73	1992.04	2024.43
Kaiser Permanente	Full	HMO A	375.78	407.91	420.20	432.49	445.72	444.68	458.38	472.56	472.56	472.56	472.56	474.45	483.90	495.24	513.67	528.80	536.36	547.70	559.04	566.13	573.69	577.47	581.25	585.03	588.81	596.37	603.93	615.27	626.14	641.27	660.17	682.38	708.84	738.61	772.64	806.19	843.99	881.33	922.44	964.02	1008.92	1053.81	1102.48	1151.63	1204.09	1230.08	1282.53	1327.90	1357.67	1395.00	1417.68
Kaiser Permanente	Full	HMO B	380.76	413.33	425.79	438.24	451.66	450.80	464.69	479.07	479.07	479.07	479.07	480.98	490.56	502.06	520.75	536.08	543.74	555.24	566.74	573.92	581.59	585.42	589.25	593.08	596.92	604.58	612.25	623.74	634.76	650.09	669.26	691.77	718.60	748.78	783.27	817.29	855.61	893.46	935.14	977.30	1022.81	1068.32	1117.66	1167.48	1220.66	1247.01	1300.19	1346.18	1376.36	1414.20	1437.21
Kaiser Permanente	Full	HMO C	378.04	410.37	422.74	435.10	448.41	447.46	461.25	475.51	475.51	475.51	475.51	477.42	486.93	498.34	516.88	532.10	539.71	551.12	562.53	569.67	577.27	581.08	584.88	588.69	592.49	600.10	607.71	619.12	630.06	645.27	664.29	686.64	713.27	743.23	777.47	811.23	849.27	886.83	928.20	970.05	1015.22	1060.40	1109.38	1158.83	1211.61	1237.76	1290.55	1336.20	1366.15	1403.72	1426.53
Kaiser Permanente	Full	HMO D	347.20	376.79	388.11	399.42	411.61	409.52	422.14	435.20	435.20	435.20	435.20	436.94	445.65	456.09	473.06	486.99	493.95	504.40	514.84	521.37	528.33	531.82	535.30	538.78	542.26	549.22	556.19	566.63	576.64	590.57	607.98	628.43	652.80	680.22	711.55	742.45	777.27	811.65	849.51	887.81	929.15	970.50	1015.32	1060.58	1108.89	1132.83	1181.13	1222.91	1250.33	1284.71	1305.60
Kaiser Permanente	Full	HMO E	362.07	392.98	404.80	416.62	429.35	427.81	441.00	454.64	454.64	454.64	454.64	456.46	465.55	476.46	494.19	508.74	516.01	526.92	537.84	544.65	551.93	555.57	559.20	562.84	566.48	573.75	581.03	591.94	602.39	616.94	635.13	656.50	681.96	710.60	743.33	775.61	811.98	847.90	887.45	927.46	970.65	1013.84	1060.67	1107.95	1158.41	1183.42	1233.88	1277.53	1306.17	1342.09	1363.92
Sharp Health Plan	Premier	HMO A	285.29	310.65	320.35	330.04	340.49	350.93	361.74	372.93	372.93	372.93	372.93	374.42	381.88	390.83	405.37	417.31	423.28	432.23	441.18	446.77	452.74	455.72	458.70	461.69	464.67	470.64	476.60	485.55	494.13	506.07	520.98	538.51	559.40	582.89	609.74	636.22	666.05	695.51	727.96	760.78	796.21	831.63	870.05	908.83	950.23	970.74	1012.13	1047.93	1071.43	1100.89	1118.79
Sharp Health Plan	Performance	HMO B	294.75	320.95	330.96	340.98	351.77	362.56	373.73	385.29	385.29	385.29	385.29	386.83	394.54	403.78	418.81	431.14	437.30	446.55	455.80	461.58	467.74	470.82	473.91	476.99	480.07	486.24	492.40	501.65	510.51	522.84	538.25	556.36	577.94	602.21	629.95	657.30	688.13	718.57	752.09	785.99	822.59	859.20	898.88	938.95	981.72	1002.91	1045.68	1082.66	1106.94	1137.38	1155.87
Sharp Health Plan	Premier	HMO C	268.76	292.65	301.78	310.92	320.76	330.59	340.78	351.32	351.32	351.32	351.32	352.73	359.75	368.18	381.88	393.13	398.75	407.18	415.61	420.88	426.50	429.31	432.12	434.93	437.74	443.37	448.99	457.42	465.50	476.74	490.79	507.31	526.98	549.11	574.41	599.35	627.46	655.21	685.78	716.69	750.07	783.44	819.63	856.17	895.16	914.49	953.48	987.21	1009.34	1037.10	1053.96
Sutter Health Plan	Sutter Health Plan	HMO B	446.15	485.81	500.97	516.14	532.47	548.80	565.71	583.22	583.22	583.22	583.22	585.54	597.20	611.20	633.94	652.61	661.94	675.93	689.93	698.68	708.01	712.68	717.34	722.01	726.67	736.00	745.34	759.33	772.75	791.41	814.74	842.15	874.81	911.55	953.54	994.95	1041.60	1087.68	1138.42	1189.74	1245.14	1300.55	1360.62	1421.27	1486.01	1518.08	1582.82	1638.81	1675.55	1721.62	1749.61
Sutter Health Plan	Sutter Health Plan	HMO C	386.42	420.76	433.90	447.03	461.17	475.32	489.97	505.13	505.13	505.13	505.13	507.14	517.24	529.36	549.06	565.23	573.31	585.43	597.56	605.13	613.21	617.26	621.30	625.34	629.38	637.46	645.54	657.67	669.28	685.45	705.65	729.39	757.68	789.50	825.87	861.73	902.14	942.05	985.99	1030.44	1078.43	1126.42	1178.44	1230.98	1287.04	1314.83	1370.89	1419.38	1451.21	1491.11	1515.35
UnitedHealthcare	SignatureValue	HMO A	596.39	649.40	669.67	689.94	711.77	733.59	756.20	779.59	779.59	779.59	779.59	782.71	798.30	817.01	847.41	872.36	884.83	903.54	922.25	933.95	946.42	952.66	958.90	965.13	971.37	983.84	996.32	1015.03	1032.96	1057.90	1089.09	1125.73	1169.39	1218.50	1274.63	1329.98	1392.35	1453.94	1521.76	1590.36	1664.42	1738.49	1818.78	1899.86	1986.40	2029.27	2115.81	2190.65	2239.76	2301.35	2338.77
Western Health	Full	HMO B	363.57	395.89	408.24	420.60	433.91	447.21	461.00	475.25	475.25	475.25	475.25	477.15	486.66	498.06	516.60	531.81	539.41	550.82	562.22	569.35	576.96	580.76	584.56	588.36	592.16	599.77	607.37	618.78	629.71	644.92	663.93	686.27	712.88	742.82	777.04	810.78	848.80	886.35	927.69	969.52	1014.66	1059.81	1108.76	1158.19	1210.94	1237.08	1289.84	1335.46	1365.40	1402.95	1425.75
Western Health	Full	HMO C	343.19	373.70	385.36	397.03	409.59	422.15	435.16	448.62	448.62	448.62	448.62	450.41	459.39	470.15	487.65	502.01	509.18	519.95	530.72	537.45	544.63	548.21	551.80	555.39	558.98	566.16	573.34	584.10	594.42	608.78	626.72	647.81	672.93	701.19	733.49	765.35	801.24	836.68	875.71	915.19	957.80	1000.42	1046.63	1093.29	1143.08	1167.76	1217.56	1260.62	1288.89	1324.33	1345.86
Western Health	Full	HMO D	330.90	360.31	371.56	382.81	394.92	407.03	419.57	432.55	432.55	432.55	432.55	434.28	442.93	453.31	470.18	484.02	490.94	501.32	511.70	518.19	525.11	528.57	532.03	535.49	538.96	545.88	552.80	563.18	573.13	586.97	604.27	624.60	648.82	676.07	707.22	737.93	772.53	806.70	844.33	882.40	923.49	964.58	1009.13	1054.12	1102.13	1125.92	1173.94	1215.46	1242.71	1276.88	1297.64

Health Care Service Plan rates will vary by county

THE INFORMATION PROVIDED HEREIN, INCLUDING THE RATING INFORMATION IS PROVIDED ON TO YOU ON AN "AS IS" "AS AVAILABLE" BASIS WITHOUT WARRANTY OF ANY KIND, EXPRESS OR IMPLIED. WE FURTHER DISCLAIM ALL LIABILITY RELATED TO THE INFORMATION, INCLUDING THOSE CAUSED BY RATING DISCREPANCIES. FINAL RATES AND RATING AREAS ARE BASED UPON ACTUAL ENROLLMENT AND UNDERWRITING AND MUST BE APPROVED BY THE APPLICABLE INSURANCE CARRIER.

Continued

Gold		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26
CARRIER	NETWORK	PLAN													
Anthem Blue Cross	Select HMO	HMO A	564.35	614.51	633.69	652.87	673.53	694.19	715.58	737.71	737.71	737.71	737.71	740.66	755.42
Anthem Blue Cross	CaliforniaCare HMO	HMO B	564.35	614.51	633.69	652.87	673.53	694.19	715.58	737.71	737.71	737.71	737.71	740.66	755.42
Anthem Blue Cross	Priority Select HMO	HMO C	426.92	464.86	479.37	493.88	509.51	525.13	541.32	558.06	558.06	558.06	558.06	560.29	571.45
Anthem Blue Cross	Select PPO	PPO B	591.96	644.58	664.69	684.81	706.48	728.15	750.59	773.80	773.80	773.80	773.80	776.90	792.37
Anthem Blue Cross	Select PPO	PPO C	610.75	665.03	685.79	706.55	728.90	751.26	774.41	798.36	798.36	798.36	798.36	801.55	817.52
Anthem Blue Cross	Select PPO	PPO D	587.63	639.87	659.84	679.81	701.32	722.83	745.11	768.15	768.15	768.15	768.15	771.22	786.59
Anthem Blue Cross	Prudent Buyer - Small Group	PPO E	627.93	683.75	705.09	726.43	749.42	772.40	796.21	820.83	820.83	820.83	820.83	824.11	840.53
Anthem Blue Cross	Prudent Buyer - Small Group	PPO H	604.20	657.91	678.45	698.98	721.10	743.21	766.12	789.81	789.81	789.81	789.81	792.97	808.77
Anthem Blue Cross	Prudent Buyer - Small Group	PPO I	613.13	667.63	688.47	709.31	731.75	754.19	777.44	801.48	801.48	801.48	801.48	804.69	820.72
Kaiser Permanente	Full	HMO B	452.04	490.96	505.83	520.71	536.74	538.49	555.08	572.25	572.25	572.25	572.25	574.54	585.99
Kaiser Permanente	Full	HMO C	465.13	505.20	520.52	535.85	552.35	554.58	571.67	589.35	589.35	589.35	589.35	591.71	603.50
Kaiser Permanente	Full	HMO D	439.04	476.80	491.24	505.68	521.22	522.50	538.60	555.26	555.26	555.26	555.26	557.48	568.59
Kaiser Permanente	Full	HMO E	392.49	426.11	438.96	451.82	465.66	465.23	479.57	494.40	494.40	494.40	494.40	496.38	506.27
Kaiser Permanente	Full	HMO F	448.26	486.84	501.59	516.34	532.22	533.84	550.29	567.31	567.31	567.31	567.31	569.58	580.92
Sharp Health Plan	Performance	HMO A	366.15	398.70	411.14	423.59	436.99	450.39	464.27	478.63	478.63	478.63	478.63	480.54	490.12
Sharp Health Plan	Premier	HMO B	345.92	376.67	388.42	400.18	412.84	425.50	438.61	452.18	452.18	452.18	452.18	453.99	463.03
Sharp Health Plan	Performance	HMO D	377.08	410.59	423.41	436.23	450.03	463.83	478.12	492.91	492.91	492.91	492.91	494.88	504.74
Sutter Health Plan	Sutter Health Plan	HMO A	488.76	532.20	548.81	565.42	583.31	601.20	619.73	638.91	638.91	638.91	638.91	641.45	654.23
Sutter Health Plan	Sutter Health Plan	HMO B	524.24	570.84	588.66	606.47	625.66	644.85	664.72	685.29	685.29	685.29	685.29	688.02	701.73
Sutter Health Plan	Sutter Health Plan	HMO C	445.41	485.00	500.14	515.27	531.58	547.88	564.76	582.24	582.24	582.24	582.24	584.56	596.20
UnitedHealthcare	SignatureValue	HMO A	652.94	710.97	733.17	755.36	779.25	803.15	827.90	853.51	853.51	853.51	853.51	856.92	873.99
UnitedHealthcare	SignatureValue	HMO C	699.03	761.17	784.93	808.69	834.27	859.86	886.36	913.77	913.77	913.77	913.77	917.43	935.70
UnitedHealthcare	SignatureValue	HMO F	723.05	787.32	811.89	836.47	862.93	889.40	916.81	945.16	945.16	945.16	945.16	948.94	967.84
UnitedHealthcare	SignatureValue	HMO H	677.59	737.82	760.85	783.88	808.68	833.48	859.17	885.74	885.74	885.74	885.74	889.28	907.00
Western Health	Full	HMO A	407.91	444.17	458.03	471.90	486.83	501.76	517.22	533.22	533.22	533.22	533.22	535.35	546.01
Western Health	Full	HMO B	426.96	464.91	479.42	493.93	509.56	525.19	541.37	558.12	558.12	558.12	558.12	560.35	571.51
Western Health	Full	HMO C	398.43	433.84	447.38	460.92	475.51	490.09	505.19	520.82	520.82	520.82	520.82	522.90	533.32
Western Health	Full	HMO D	383.78	417.89	430.94	443.98	458.03	472.08	486.62	501.67	501.67	501.67	501.67	503.68	513.71

Gold		AGE -->	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45
CARRIER	NETWORK	PLAN																			
Anthem Blue Cross	Select HMO	HMO A	773.12	801.89	825.50	837.30	855.01	872.71	883.78	895.58	901.48	907.38	913.28	919.19	930.99	942.79	960.50	977.47	1001.07	1030.58	1065.25
Anthem Blue Cross	CaliforniaCare HMO	HMO B	773.12	801.89	825.50	837.30	855.01	872.71	883.78	895.58	901.48	907.38	913.28	919.19	930.99	942.79	960.50	977.47	1001.07	1030.58	1065.25
Anthem Blue Cross	Priority Select HMO	HMO C	584.85	606.61	624.47	633.40	646.79	660.18	668.56	677.48	681.95	686.41	690.88	695.34	704.27	713.20	726.59	739.43	757.29	779.61	805.84
Anthem Blue Cross	Select PPO	PPO B	810.94	841.12	865.88	878.26	896.83	915.41	927.01	939.39	945.58	951.77	957.96	964.15	976.54	988.92	1007.49	1025.29	1050.05	1081.00	1117.37
Anthem Blue Cross	Select PPO	PPO C	836.68	867.82	893.36	906.14	925.30	944.46	956.44	969.21	975.60	981.98	988.37	994.76	1007.53	1020.30	1039.46	1057.83	1083.37	1115.31	1152.83
Anthem Blue Cross	Select PPO	PPO D	805.02	834.98	859.56	871.85	890.29	908.72	920.24	932.53	938.68	944.82	950.97	957.11	969.41	981.70	1000.13	1017.80	1042.38	1073.11	1109.21
Anthem Blue Cross	Prudent Buyer - Small Group	PPO E	860.23	892.24	918.51	931.64	951.34	971.04	983.35	996.49	1003.05	1009.62	1016.19	1022.75	1035.89	1049.02	1068.72	1087.60	1113.87	1146.70	1185.28
Anthem Blue Cross	Prudent Buyer - Small Group	PPO H	827.72	858.52	883.80	896.43	915.39	934.35	946.19	958.83	965.15	971.47	977.78	984.10	996.74	1009.38	1028.33	1046.50	1071.77	1103.36	1140.49
Anthem Blue Cross	Prudent Buyer - Small Group	PPO I	839.95	871.21	896.86	909.68	928.92	948.15	960.17	973.00	979.41	985.82	992.23	998.64	1011.47	1024.29	1043.53	1061.96	1087.61	1119.67	1157.34
Kaiser Permanente	Full	HMO B	599.72	622.04	640.35	649.51	663.24	676.97	685.56	694.71	699.29	703.87	708.45	713.03	722.18	731.34	745.07	758.23	776.55	799.44	826.33
Kaiser Permanente	Full	HMO C	617.64	640.63	659.49	668.92	683.06	697.21	706.05	715.48	720.19	724.91	729.62	734.33	743.76	753.19	767.34	780.89	799.75	823.33	851.03
Kaiser Permanente	Full	HMO D	581.91	603.57	621.34	630.22	643.55	656.87	665.20	674.09	678.53	682.97	687.41	691.85	700.74	709.62	722.95	735.72	753.49	775.70	801.80
Kaiser Permanente	Full	HMO E	518.14	537.42	553.24	561.15	573.02	584.88	592.30	600.21	604.16	608.12	612.07	616.03	623.94	631.85	643.71	655.09	670.91	690.68	713.92
Kaiser Permanente	Full	HMO F	594.54	616.66	634.82	643.89	657.51	671.13	679.64	688.71	693.25	697.79	702.33	706.87	715.94	725.02	738.64	751.68	769.84	792.53	819.19
Sharp Health Plan	Performance	HMO A	501.60	520.27	535.59	543.25	554.73	566.22	573.40	581.06	584.89	588.71	592.54	596.37	604.03	611.69	623.18	634.18	649.50	668.65	691.14
Sharp Health Plan	Premier	HMO B	473.88	491.52	505.99	513.22	524.08	534.93	541.71	548.95	552.56	556.18	559.80	563.42	570.65	577.89	588.74	599.14	613.61	631.70	652.95
Sharp Health Plan	Performance	HMO D	516.57	535.79	551.57	559.45	571.28	583.11	590.51	598.39	602.34	606.28	610.22	614.17	622.05	629.94	641.77	653.11	668.88	688.60	711.76
Sutter Health Plan	Sutter Health Plan	HMO A	669.56	694.48	714.92	725.15	740.48	755.81	765.40	775.62	780.73	785.84	790.95	796.06	806.29	816.51	831.84	846.54	866.98	892.54	922.57
Sutter Health Plan	Sutter Health Plan	HMO B	718.18	744.90	766.83	777.80	794.24	810.69	820.97	831.93	837.41	842.90	848.38	853.86	864.83	875.79	892.24	908.00	929.93	957.34	989.55
Sutter Health Plan	Sutter Health Plan	HMO C	610.18	632.88	651.52	660.83	674.80	688.78	697.51	706.83	711.49	716.14	720.80	725.46	734.77	744.09	758.06	771.46	790.09	813.38	840.74
UnitedHealthcare	SignatureValue	HMO A	894.48	927.77	955.08	968.73	989.22	1009.70	1022.50	1036.16	1042.99	1049.82	1056.65	1063.47	1077.13	1090.79	1111.27	1130.90	1158.21	1192.35	1232.47
UnitedHealthcare	SignatureValue	HMO C	957.63	993.27	1022.51	1037.13	1059.06	1080.99	1094.70	1109.32	1116.63	1123.94	1131.25	1138.56	1153.18	1167.80	1189.73	1210.75	1239.99	1276.54	1319.48
UnitedHealthcare	SignatureValue	HMO F	990.53	1027.39	1057.63	1072.76	1095.44	1118.12	1132.30	1147.42	1154.99	1162.55	1170.11	1177.67	1192.79	1207.91	1230.60	1252.34	1282.58	1320.39	1364.81
UnitedHealthcare	SignatureValue	HMO H	928.26	962.80	991.14	1005.31	1026.57	1047.83	1061.12	1075.29	1082.37	1089.46	1096.55	1103.63	1117.80	1131.98	1153.23	1173.61	1201.95	1237.38	1279.01
Western Health	Full	HMO A	558.81	579.61	596.67	605.20	618.00	630.80	638.79	647.33	651.59	655.86	660.12	664.39	672.92	681.45	694.25	706.51	723.57	744.90	769.96
Western Health	Full	HMO B	584.91	606.67	624.53	633.46	646.86	660.25	668.62	677.55	682.02	686.48	690.95	695.41	704.34	713.27	726.67	739.51	757.36	779.69	805.92
Western Health	Full	HMO C	545.82	566.13	582.80	591.13	603.63	616.13	623.94	632.27	636.44	640.61	644.77	648.94	657.27	665.61	678.11	690.09	706.75	727.58	752.06
Western Health	Full	HMO D	525.75	545.32	561.37	569.40	581.44	593.48	601.01	609.03	613.05	617.06	621.07	625.09	633.11	641.14	653.18	664.72	680.77	700.84	724.42

Gold		AGE -->	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																			
Anthem Blue Cross	Select HMO	HMO A	1106.57	1153.04	1206.16	1258.53	1317.55	1375.83	1440.01	1504.93	1575.01	1645.09	1721.08	1797.80	1879.69	1920.26	2002.14	2072.97	2119.44	2177.72	2213.13
Anthem Blue Cross	CaliforniaCare HMO	HMO B	1106.57	1153.04	1206.16	1258.53	1317.55	1375.83	1440.01	1504.93	1575.01	1645.09	1721.08	1797.80	1879.69	1920.26	2002.14	2072.97	2119.44	2177.72	2213.13
Anthem Blue Cross	Priority Select HMO	HMO C	837.09	872.25	912.43	952.05	996.70	1040.78	1089.33	1138.44	1191.46	1244.47	1301.95	1359.99	1421.94	1452.63	1514.57	1568.15	1603.31	1647.39	1674.18
Anthem Blue Cross	Select PPO	PPO B	1160.70	1209.45	1265.16	1320.10	1382.01	1443.14	1510.46	1578.55	1652.06	1725.57	1805.28	1885.75	1971.64	2014.20	2100.09	2174.38	2223.13	2284.26	2321.40
Anthem Blue Cross	Select PPO	PPO C	1197.54	1247.84	1305.32	1362.00	1425.87	1488.94	1558.40	1628.65	1704.50	1780.34	1862.57	1945.60	2034.22	2078.13	2166.75	2243.39	2293.69	2356.76	2395.08
Anthem Blue Cross	Select PPO	PPO D	1152.23	1200.62	1255.93	1310.46	1371.92	1432.60	1499.43	1567.03	1640.00	1712.97	1792.09	1871.98	1957.25	1999.49	2084.76	2158.50	2206.89	2267.58	2304.45
Anthem Blue Cross	Prudent Buyer - Small Group	PPO E	1231.25	1282.96	1342.06	1400.34	1466.00	1530.85	1602.26	1674.49	1752.47	1830.45	1915.00	2000.36	2091.47	2136.62	2227.73	2306.53	2358.24	2423.09	2462.49
Anthem Blue Cross	Prudent Buyer - Small Group	PPO H	1184.72	1234.47	1291.34	1347.42	1410.60	1473.00	1541.71	1611.21	1686.24	1761.28	1842.63	1924.77	2012.44	2055.88	2143.54	2219.37	2269.12	2331.52	2369.43
Anthem Blue Cross	Prudent Buyer - Small Group	PPO I	1202.22	1252.71	1310.42	1367.32	1431.44	1494.76	1564.49	1635.02	1711.16	1787.30	1869.85	1953.21	2042.17	2086.25	2175.22	2252.16	2302.65	2365.97	2404.44
Kaiser Permanente	Full	HMO B	858.38	894.43	935.63	976.26	1022.04	1067.25	1117.03	1167.39	1221.76	1276.12	1335.06	1394.58	1458.10	1489.57	1553.09	1608.03	1644.08	1689.29	1716.75
Kaiser Permanente	Full	HMO C	884.03	921.16	963.59	1005.44	1052.59	1099.14	1150.42	1202.28	1258.27	1314.26	1374.96	1436.25	1501.67	1534.09	1599.51	1656.08	1693.21	1739.77	1768.05
Kaiser Permanente	Full	HMO D	832.89	867.87	907.85	947.27	991.70	1035.56	1083.87	1132.73	1185.48	1238.23	1295.42	1353.17	1414.80	1445.34	1506.98	1560.28	1595.26	1639.13	1665.78
Kaiser Permanente	Full	HMO E	741.61	772.75	808.35	843.45	883.01	922.06	965.08	1008.59	1055.55	1102.52	1153.45	1204.86	1259.74	1286.94	1341.81	1389.28	1420.42	1459.48	1483.20
Kaiser Permanente	Full	HMO F	850.96	886.70	927.55	967.83	1013.21	1058.03	1107.39	1157.31	1211.20	1265.10	1323.53	1382.53	1445.50	1476.70	1539.67	1594.14	1629.88	1674.69	1701.93
Sharp Health Plan	Performance	HMO A	717.95	748.10	782.56	816.54	854.83	892.64	934.29	976.41	1021.88	1067.34	1116.64	1166.42	1219.55	1245.87	1299.00	1344.95	1375.10	1412.92	1435.89
Sharp Health Plan	Premier	HMO B	678.27	706.76	739.31	771.42	807.59	843.32	882.66	922.45	965.40	1008.36	1054.94	1101.96	1152.15	1177.02	1227.22	1270.63	1299.11	1334.84	1356.54
Sharp Health Plan	Performance	HMO D	739.37	770.42	805.91	840.90	880.34	919.28	962.16	1005.54	1052.36	1099.19	1149.96	1201.22	1255.93	1283.04	1337.76	1385.08	1416.13	1455.07	1478.73
Sutter Health Plan	Sutter Health Plan	HMO A	958.34	998.59	1044.60	1089.96	1141.07	1191.54	1247.13	1303.35	1364.04	1424.74	1490.54	1556.99	1627.91	1663.05	1733.96	1795.30	1835.55	1886.02	1916.68
Sutter Health Plan	Sutter Health Plan	HMO B	1027.92	1071.10	1120.44	1169.09	1223.91	1278.05	1337.67	1397.98	1463.08	1528.18	1598.76	1670.03	1746.10	1783.79	1859.86	1925.64	1968.82	2022.95	2055.84
Sutter Health Plan	Sutter Health Plan	HMO C	873.35	910.03	951.95	993.28	1039.86	1085.86	1136.51	1187.75	1243.06	1298.37	1358.34	1418.90	1483.52	1515.55	1580.17	1636.07	1672.75	1718.74	1746.68
UnitedHealthcare	SignatureValue	HMO A	1280.27	1334.04	1395.49	1456.09	1524.37	1591.80	1666.05	1741.16	1822.24	1903.33	1991.24	2080.00	2174.74	2221.69	2316.43	2398.36	2452.13	2519.56	2560.53
UnitedHealthcare	SignatureValue	HMO C	1370.66	1428.22	1494.01	1558.89	1631.99	1704.18	1783.68	1864.09	1950.90	2037.71	2131.83	2226.86	2328.29	2378.54	2479.97	2567.69	2625.26	2697.45	2741.31
UnitedHealthcare	SignatureValue	HMO F	1417.74	1477.29	1545.34	1612.44	1688.06	1762.72	1844.95	1928.13	2017.92	2107.71	2205.06	2303.35	2408.27	2460.25	2565.16	2655.90	2715.44	2790.11	2835.48
UnitedHealthcare	SignatureValue	HMO H	1328.61	1384.41	1448.18	1511.07	1581.93	1651.91	1728.96	1806.91	1891.05	1975.20	2066.43	2158.55	2256.87	2305.58	2403.90	2488.93	2544.73	2614.70	2657.22
Western Health	Full	HMO A	799.82	833.42	871.81	909.67	952.32	994.45	1040.84	1087.76	1138.42	1189.07	1243.99	1299.45	1358.64	1387.96	1447.15	1498.34	1531.93	1574.06	1599.65
Western Health	Full	HMO B	837.18	872.34	912.52	952.15	996.80	1040.89	1089.44	1138.56	1191.58	1244.60	1302.09	1360.13	1422.08	1452.78	1514.73	1568.31	1603.47	1647.56	1674.35
Western Health	Full	HMO C	781.23	814.04	851.54	888.52	930.18	971.33	1016.64	1062.47	1111.95	1161.43	1215.07	1269.24	1327.05	1355.69	1413.50	1463.50	1496.31	1537.46	1562.46
Western Health	Full	HMO D	752.51	784.12	820.24	855.86	895.99	935.62	979.27	1023.41	1071.07	1118.73	1170.41	1222.58	1278.27	1305.86	1361.54	1409.70	1441.31	1480.94	1505.01

Platinum		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26
CARRIER	NETWORK	PLAN													
Anthem Blue Cross	Select HMO	HMO A	612.24	666.67	687.47	708.28	730.69	753.10	776.31	800.32	800.32	800.32	800.32	803.52	819.53
Anthem Blue Cross	Vivity	HMO B	611.30	665.64	686.42	707.19	729.57	751.94	775.12	799.09	799.09	799.09	799.09	802.29	818.27
Anthem Blue Cross	Vivity	HMO C	598.55	651.76	672.10	692.44	714.35	736.26	758.95	782.42	782.42	782.42	782.42	785.55	801.20
Anthem Blue Cross	CaliforniaCare HMO	HMO D	612.14	666.55	687.35	708.16	730.56	752.97	776.17	800.18	800.18	800.18	800.18	803.38	819.38
Anthem Blue Cross	Prudent Buyer - Small Group	PPO B	708.48	771.46	795.54	819.62	845.55	871.48	898.34	926.12	926.12	926.12	926.12	929.82	948.35
Kaiser Permanente	Full	HMO A	500.74	543.98	560.52	577.05	594.86	598.39	616.83	635.91	635.91	635.91	635.91	638.45	651.17
Kaiser Permanente	Full	HMO B	487.61	529.69	545.77	561.86	579.18	582.24	600.18	618.75	618.75	618.75	618.75	621.22	633.60
Kaiser Permanente	Full	HMO C	468.29	508.64	524.08	539.51	556.12	558.47	575.68	593.49	593.49	593.49	593.49	595.86	607.73
Sharp Health Plan	Premier	HMO A	387.44	421.88	435.05	448.22	462.40	476.58	491.27	506.46	506.46	506.46	506.46	508.49	518.62
Sharp Health Plan	Performance	HMO B	415.31	452.23	466.34	480.46	495.66	510.86	526.60	542.89	542.89	542.89	542.89	545.06	555.92
Sharp Health Plan	Premier	HMO C	388.91	423.48	436.70	449.92	464.15	478.39	493.13	508.38	508.38	508.38	508.38	510.41	520.58
Sutter Health Plan	Sutter Health Plan	HMO A	569.40	620.01	639.36	658.71	679.55	700.40	721.98	744.32	744.32	744.32	744.32	747.29	762.17
UnitedHealthcare	SignatureValue	HMO A	725.50	789.99	814.65	839.31	865.86	892.42	919.92	948.37	948.37	948.37	948.37	952.16	971.13
UnitedHealthcare	SignatureValue	HMO B	785.79	855.63	882.34	909.05	937.81	966.57	996.35	1027.17	1027.17	1027.17	1027.17	1031.28	1051.82
UnitedHealthcare	SignatureValue	HMO D	754.10	821.13	846.76	872.39	899.99	927.59	956.18	985.75	985.75	985.75	985.75	989.69	1009.41
UnitedHealthcare	SignatureValue	HMO E	773.31	842.05	868.33	894.61	922.92	951.22	980.53	1010.86	1010.86	1010.86	1010.86	1014.90	1035.12
Western Health	Full	HMO B	465.27	506.62	522.44	538.25	555.28	572.31	589.95	608.19	608.19	608.19	608.19	610.63	622.79
Western Health	Full	HMO C	460.56	501.50	517.15	532.80	549.66	566.52	583.98	602.04	602.04	602.04	602.04	604.44	616.49
Western Health	Full	HMO D	435.03	473.70	488.48	503.27	519.19	535.12	551.61	568.67	568.67	568.67	568.67	570.94	582.31

Platinum		AGE -->	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45
CARRIER	NETWORK	PLAN																			
Anthem Blue Cross	Select HMO	HMO A	838.74	869.95	895.56	908.36	927.57	946.78	958.78	971.59	977.99	984.39	990.80	997.20	1010.00	1022.81	1042.02	1060.42	1086.03	1118.05	1155.66
Anthem Blue Cross	Vivity	HMO B	837.45	868.61	894.18	906.97	926.15	945.32	957.31	970.10	976.49	982.88	989.27	995.67	1008.45	1021.24	1040.42	1058.79	1084.37	1116.33	1153.89
Anthem Blue Cross	Vivity	HMO C	819.98	850.49	875.53	888.05	906.82	925.60	937.34	949.86	956.12	962.38	968.64	974.90	987.41	999.93	1018.71	1036.71	1061.74	1093.04	1129.81
Anthem Blue Cross	CaliforniaCare HMO	HMO D	838.59	869.80	895.40	908.20	927.41	946.61	958.62	971.42	977.82	984.22	990.62	997.02	1009.83	1022.63	1041.83	1060.24	1085.84	1117.85	1155.46
Anthem Blue Cross	Prudent Buyer - Small Group	PPO B	970.57	1006.69	1036.33	1051.15	1073.37	1095.60	1109.49	1124.31	1131.72	1139.13	1146.54	1153.95	1168.76	1183.58	1205.81	1227.11	1256.74	1293.79	1337.32
Kaiser Permanente	Full	HMO A	666.44	691.24	711.58	721.76	737.02	752.28	761.82	772.00	777.08	782.17	787.26	792.35	802.52	812.69	827.96	842.58	862.93	888.37	918.26
Kaiser Permanente	Full	HMO B	648.45	672.58	692.38	702.28	717.13	731.98	741.26	751.16	756.11	761.06	766.01	770.96	780.86	790.76	805.61	819.84	839.64	864.39	893.47
Kaiser Permanente	Full	HMO C	621.97	645.12	664.11	673.61	687.85	702.10	711.00	720.49	725.24	729.99	734.74	739.48	748.98	758.48	772.72	786.37	805.36	829.10	857.00
Sharp Health Plan	Premier	HMO A	530.77	550.52	566.73	574.83	586.99	599.14	606.74	614.84	618.89	622.95	627.00	631.05	639.15	647.26	659.41	671.06	687.27	707.52	731.33
Sharp Health Plan	Performance	HMO B	568.95	590.12	607.49	616.18	629.21	642.24	650.38	659.07	663.41	667.75	672.10	676.44	685.13	693.81	706.84	719.33	736.70	758.42	783.93
Sharp Health Plan	Premier	HMO C	532.78	552.61	568.88	577.01	589.21	601.41	609.04	617.17	621.24	625.31	629.37	633.44	641.58	649.71	661.91	673.60	689.87	710.21	734.10
Sutter Health Plan	Sutter Health Plan	HMO A	780.04	809.06	832.88	844.79	862.65	880.52	891.68	903.59	909.55	915.50	921.46	927.41	939.32	951.23	969.09	986.21	1010.03	1039.80	1074.78
UnitedHealthcare	SignatureValue	HMO A	993.89	1030.88	1061.23	1076.40	1099.16	1121.92	1136.15	1151.32	1158.91	1166.50	1174.08	1181.67	1196.84	1212.02	1234.78	1256.59	1286.94	1324.87	1369.45
UnitedHealthcare	SignatureValue	HMO B	1076.47	1116.53	1149.40	1165.84	1190.49	1215.14	1230.55	1246.98	1255.20	1263.42	1271.64	1279.85	1296.29	1312.72	1337.38	1361.00	1393.87	1434.96	1483.23
UnitedHealthcare	SignatureValue	HMO D	1033.07	1071.51	1103.05	1118.83	1142.48	1166.14	1180.93	1196.70	1204.59	1212.47	1220.36	1228.24	1244.02	1259.79	1283.45	1306.12	1337.66	1377.09	1423.42
UnitedHealthcare	SignatureValue	HMO E	1059.38	1098.80	1131.15	1147.33	1171.59	1195.85	1211.01	1227.18	1235.27	1243.36	1251.44	1259.53	1275.71	1291.88	1316.14	1339.39	1371.74	1412.17	1459.68
Western Health	Full	HMO B	637.39	661.11	680.57	690.30	704.90	719.49	728.61	738.35	743.21	748.08	752.94	757.81	767.54	777.27	791.87	805.86	825.32	849.65	878.23
Western Health	Full	HMO C	630.93	654.41	673.68	683.31	697.76	712.21	721.24	730.87	735.69	740.50	745.32	750.14	759.77	769.40	783.85	797.70	816.96	841.04	869.34
Western Health	Full	HMO D	595.96	618.14	636.34	645.44	659.08	672.73	681.26	690.36	694.91	699.46	704.01	708.56	717.66	726.76	740.40	753.48	771.68	794.43	821.15

Platinum		AGE -->	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																			
Anthem Blue Cross	Select HMO	HMO A	1200.48	1250.90	1308.52	1365.35	1429.37	1492.60	1562.22	1632.65	1708.68	1784.71	1867.15	1950.38	2039.22	2083.23	2172.07	2248.90	2299.32	2362.54	2400.96
Anthem Blue Cross	Vivity	HMO B	1198.64	1248.98	1306.51	1363.25	1427.17	1490.30	1559.82	1630.14	1706.06	1781.97	1864.28	1947.38	2036.08	2080.03	2168.73	2245.44	2295.79	2358.91	2397.27
Anthem Blue Cross	Vivity	HMO C	1173.63	1222.92	1279.26	1334.81	1397.40	1459.21	1527.28	1596.14	1670.47	1744.80	1825.39	1906.76	1993.61	2036.64	2123.49	2198.60	2247.89	2309.70	2347.26
Anthem Blue Cross	CaliforniaCare HMO	HMO D	1200.27	1250.68	1308.29	1365.11	1429.12	1492.34	1561.95	1632.37	1708.38	1784.40	1866.82	1950.04	2038.86	2082.87	2171.69	2248.51	2298.92	2362.13	2400.54
Anthem Blue Cross	Prudent Buyer - Small Group	PPO B	1389.18	1447.53	1514.21	1579.96	1654.05	1727.21	1807.79	1889.28	1977.27	2065.25	2160.64	2256.95	2359.75	2410.69	2513.49	2602.40	2660.74	2733.91	2778.36
Kaiser Permanente	Full	HMO A	953.87	993.93	1039.72	1084.86	1135.74	1185.97	1241.30	1297.26	1357.67	1418.08	1483.58	1549.72	1620.30	1655.28	1725.86	1786.91	1826.97	1877.21	1907.73
Kaiser Permanente	Full	HMO B	928.12	967.10	1011.65	1055.58	1105.08	1153.96	1207.79	1262.24	1321.02	1379.80	1443.53	1507.88	1576.56	1610.60	1679.28	1738.68	1777.66	1826.54	1856.25
Kaiser Permanente	Full	HMO C	890.23	927.62	970.35	1012.49	1059.97	1106.85	1158.49	1210.71	1267.09	1323.48	1384.61	1446.33	1512.20	1544.85	1610.72	1667.70	1705.09	1751.97	1780.47
Sharp Health Plan	Premier	HMO A	759.69	791.60	828.06	864.02	904.54	944.55	988.61	1033.18	1081.29	1129.41	1181.57	1234.24	1290.46	1318.32	1374.53	1423.15	1455.06	1495.07	1519.38
Sharp Health Plan	Performance	HMO B	814.34	848.54	887.63	926.17	969.60	1012.49	1059.72	1107.50	1159.07	1210.64	1266.56	1323.02	1383.28	1413.14	1473.40	1525.52	1559.72	1602.61	1628.67
Sharp Health Plan	Premier	HMO C	762.57	794.60	831.20	867.30	907.97	948.13	992.36	1037.10	1085.39	1133.69	1186.05	1238.92	1295.35	1323.31	1379.74	1428.55	1460.58	1500.74	1525.14
Sutter Health Plan	Sutter Health Plan	HMO A	1116.46	1163.36	1216.95	1269.79	1329.34	1388.14	1452.89	1518.39	1589.10	1659.81	1736.47	1813.88	1896.50	1937.44	2020.06	2091.51	2138.40	2197.20	2232.92
UnitedHealthcare	SignatureValue	HMO A	1422.56	1482.30	1550.58	1617.92	1693.79	1768.71	1851.22	1934.67	2024.77	2114.87	2212.55	2311.18	2416.45	2468.61	2573.88	2664.92	2724.67	2799.59	2845.11
UnitedHealthcare	SignatureValue	HMO B	1540.76	1605.47	1679.42	1752.35	1834.53	1915.67	2005.04	2095.43	2193.01	2290.59	2396.39	2503.21	2617.23	2673.72	2787.74	2886.35	2951.06	3032.21	3081.51
UnitedHealthcare	SignatureValue	HMO D	1478.63	1540.73	1611.70	1681.69	1760.55	1838.42	1924.18	2010.93	2104.58	2198.22	2299.75	2402.27	2511.69	2565.91	2675.33	2769.96	2832.06	2909.93	2957.25
UnitedHealthcare	SignatureValue	HMO E	1516.29	1579.97	1652.76	1724.53	1805.40	1885.25	1973.20	2062.15	2158.19	2254.22	2358.34	2463.47	2575.67	2631.27	2743.47	2840.52	2904.20	2984.06	3032.58
Western Health	Full	HMO B	912.29	950.61	994.39	1037.58	1086.23	1134.28	1187.19	1240.71	1298.49	1356.27	1418.91	1482.17	1549.67	1583.13	1650.63	1709.02	1747.34	1795.38	1824.57
Western Health	Full	HMO C	903.05	940.98	984.33	1027.07	1075.24	1122.80	1175.17	1228.15	1285.35	1342.54	1404.55	1467.16	1533.99	1567.10	1633.93	1691.72	1729.65	1777.21	1806.11
Western Health	Full	HMO D	853.00	888.83	929.77	970.15	1015.64	1060.56	1110.04	1160.08	1214.10	1268.13	1326.70	1385.84	1448.96	1480.24	1543.36	1597.95	1633.78	1678.70	1706.00

Health Care Service Plan rates will vary by county

THE INFORMATION PROVIDED HEREIN, INCLUDING THE RATING INFORMATION IS PROVIDED ON TO YOU ON AN “AS IS” “AS AVAILABLE” BASIS WITHOUT WARRANTY OF ANY KIND, EXPRESS OR IMPLIED. WE FURTHER DISCLAIM ALL LIABILITY RELATED TO THE INFORMATION, INCLUDING THOSE CAUSED BY RATING DISCREPANCIES. FINAL RATES AND RATING AREAS ARE BASED UPON ACTUAL ENROLLMENT AND UNDERWRITING AND MUST BE APPROVED BY THE APPLICABLE INSURANCE CARRIER.

USE EMPLOYER ZIP CODE FOR RATING

AREA 3

02/01/27 - 03/01/27

Bronze		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																																																	
Anthem Blue Cross	Prudent Buyer - Small Group	PPO A	493.50	537.37	554.14	570.91	588.98	607.04	625.75	645.10	645.10	645.10	645.10	647.68	660.58	676.06	701.22	721.87	732.19	747.67	763.15	772.83	783.15	788.31	793.47	798.63	803.79	814.12	824.44	839.92	854.76	875.40	901.20	931.52	967.65	1008.29	1054.74	1100.54	1152.15	1203.11	1259.24	1316.00	1377.29	1438.57	1505.02	1572.11	1643.71	1679.20	1750.80	1812.73	1853.37	1904.34	1935.30
Anthem Blue Cross	Select PPO	PPO B	482.31	525.18	541.57	557.97	575.62	593.27	611.56	630.47	630.47	630.47	630.47	632.99	645.60	660.73	685.32	705.50	715.58	730.71	745.85	755.30	765.39	770.43	775.48	780.52	785.57	795.65	805.74	820.87	835.37	855.55	880.77	910.40	945.71	985.42	1030.82	1075.58	1126.02	1175.83	1230.68	1286.16	1346.05	1405.95	1470.89	1536.46	1606.44	1641.11	1711.10	1771.62	1811.34	1861.15	1891.41
Anthem Blue Cross	Prudent Buyer - Small Group	PPO C	492.87	536.68	553.43	570.18	588.22	606.26	624.94	644.27	644.27	644.27	644.27	646.85	659.73	675.19	700.32	720.94	731.25	746.71	762.17	771.84	782.14	787.30	792.45	797.61	802.76	813.07	823.38	838.84	853.66	874.27	900.05	930.33	966.41	1006.99	1053.38	1099.12	1150.67	1201.56	1257.62	1314.31	1375.52	1436.72	1503.08	1570.09	1641.60	1677.03	1748.55	1810.40	1850.99	1901.89	1932.81
Anthem Blue Cross	Select PPO	PPO D	481.68	524.50	540.87	557.24	574.87	592.50	610.76	629.65	629.65	629.65	629.65	632.17	644.76	659.87	684.43	704.58	714.65	729.76	744.88	754.32	764.40	769.43	774.47	779.51	784.54	794.62	804.69	819.80	834.29	854.44	879.62	909.21	944.48	984.14	1029.48	1074.18	1124.55	1174.30	1229.08	1284.49	1344.30	1404.12	1468.97	1534.46	1604.35	1638.98	1708.87	1769.32	1808.98	1858.73	1888.95
Kaiser Permanente	Full	HMO A	319.27	346.38	356.74	367.11	378.27	375.17	386.73	398.69	398.69	398.69	398.69	400.28	408.26	417.83	433.38	446.13	452.51	462.08	471.65	477.63	484.01	487.20	490.39	493.58	496.77	503.15	509.53	519.09	528.26	541.02	556.97	575.71	598.03	623.15	651.86	680.16	712.06	743.56	778.24	813.33	851.20	889.08	930.14	971.61	1015.86	1037.79	1082.04	1120.32	1145.44	1176.93	1196.07
Kaiser Permanente	Full	HMO C	310.42	336.74	346.81	356.87	367.71	364.28	375.51	387.12	387.12	387.12	387.12	388.67	396.41	405.71	420.80	433.19	439.39	448.68	457.97	463.77	469.97	473.06	476.16	479.26	482.36	488.55	494.74	504.03	512.94	525.33	540.81	559.01	580.69	605.07	632.95	660.43	691.40	721.99	755.66	789.73	826.51	863.29	903.16	943.42	986.39	1007.68	1050.65	1087.82	1112.21	1142.79	1161.36
Sharp Health Plan	Premier	HMO A	272.80	297.05	306.32	315.59	325.58	335.56	345.90	356.60	356.60	356.60	356.60	358.03	365.16	373.72	387.62	399.04	404.74	413.30	421.86	427.21	432.91	435.77	438.62	441.47	444.32	450.03	455.73	464.29	472.50	483.91	498.17	514.93	534.90	557.37	583.04	608.36	636.89	665.06	696.08	727.46	761.34	795.22	831.95	869.03	908.62	928.23	967.81	1002.05	1024.51	1052.68	1069.80
Sharp Health Plan	Performance	HMO B	291.24	317.12	327.02	336.92	347.58	358.24	369.28	380.70	380.70	380.70	380.70	382.22	389.84	398.97	413.82	426.00	432.09	441.23	450.37	456.08	462.17	465.22	468.26	471.31	474.35	480.44	486.53	495.67	504.43	516.61	531.84	549.73	571.05	595.03	622.44	649.47	679.93	710.01	743.13	776.63	812.79	848.96	888.17	927.77	970.02	990.96	1033.22	1069.77	1093.75	1123.83	1142.10
Sutter Health Plan	Sutter Health Plan	HMO A	310.91	338.55	349.12	359.68	371.06	382.44	394.23	406.43	406.43	406.43	406.43	408.05	416.17	425.93	441.78	454.78	461.29	471.04	480.80	486.89	493.39	496.65	499.90	503.15	506.40	512.90	519.41	529.16	538.51	551.51	567.77	586.87	609.63	635.24	664.50	693.35	725.87	757.97	793.33	829.10	867.71	906.32	948.18	990.45	1035.56	1057.91	1103.03	1142.04	1167.65	1199.75	1219.25
Sutter Health Plan	Sutter Health Plan	HMO B	311.07	338.72	349.29	359.86	371.25	382.63	394.42	406.63	406.63	406.63	406.63	408.25	416.38	426.14	442.00	455.01	461.52	471.27	481.03	487.13	493.64	496.89	500.14	503.40	506.65	513.16	519.66	529.42	538.77	551.79	568.05	587.16	609.93	635.55	664.83	693.70	726.23	758.35	793.73	829.51	868.14	906.77	948.65	990.94	1036.07	1058.44	1103.57	1142.61	1168.22	1200.35	1219.85
Western Health	Full	HMO B	316.71	344.87	355.63	366.39	377.99	389.58	401.59	414.01	414.01	414.01	414.01	415.66	423.94	433.88	450.02	463.27	469.90	479.83	489.77	495.98	502.60	505.91	509.23	512.54	515.85	522.47	529.10	539.03	548.56	561.81	578.37	597.82	621.01	647.09	676.90	706.29	739.41	772.12	808.14	844.57	883.90	923.23	965.87	1008.93	1054.89	1077.66	1123.61	1163.36	1189.44	1222.14	1242.02
Western Health	Full	HMO C	330.55	359.93	371.17	382.40	394.50	406.60	419.13	432.09	432.09	432.09	432.09	433.82	442.46	452.83	469.68	483.51	490.42	500.79	511.16	517.64	524.56	528.01	531.47	534.93	538.38	545.30	552.21	562.58	572.52	586.35	603.63	623.94	648.13	675.36	706.47	737.15	771.71	805.85	843.44	881.46	922.51	963.56	1008.07	1053.00	1100.97	1124.73	1172.69	1214.17	1241.39	1275.53	1296.27

Silver		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																																																	
Anthem Blue Cross	Select HMO	HMO A	493.96	537.87	554.66	571.44	589.52	607.60	626.33	645.70	645.70	645.70	645.70	648.28	661.20	676.69	701.88	722.54	732.87	748.37	763.86	773.55	783.88	789.05	794.21	799.38	804.54	814.87	825.20	840.70	855.55	876.21	902.04	932.39	968.55	1009.23	1055.72	1101.56	1153.22	1204.23	1260.41	1317.23	1378.57	1439.91	1506.42	1573.57	1645.24	1680.76	1752.43	1814.42	1855.10	1906.11	1937.10
Anthem Blue Cross	CaliforniaCare HMO	HMO B	515.42	561.23	578.75	596.27	615.13	634.00	653.54	673.75	673.75	673.75	673.75	676.45	689.92	706.09	732.37	753.93	764.71	780.88	797.05	807.15	817.93	823.32	828.71	834.10	839.49	850.27	861.05	877.22	892.72	914.28	941.23	972.90	1010.63	1053.07	1101.58	1149.42	1203.32	1256.54	1315.16	1374.45	1438.46	1502.46	1571.86	1641.93	1716.72	1753.77	1828.56	1893.24	1935.68	1988.91	2021.25
Anthem Blue Cross	CaliforniaCare HMO	HMO D	514.78	560.54	578.04	595.53	614.38	633.22	652.73	672.92	672.92	672.92	672.92	675.61	689.07	705.22	731.46	753.00	763.76	779.91	796.06	806.16	816.92	822.31	827.69	833.07	838.46	849.23	859.99	876.14	891.62	913.15	940.07	971.70	1009.38	1051.77	1100.22	1148.00	1201.84	1255.00	1313.54	1372.76	1436.68	1500.61	1569.92	1639.91	1714.60	1751.61	1826.30	1890.91	1933.30	1986.46	2018.76
Anthem Blue Cross	Select PPO	PPO B	520.20	566.44	584.12	601.80	620.84	639.88	659.60	680.00	680.00	680.00	680.00	682.72	696.32	712.64	739.16	760.92	771.80	788.12	804.44	814.64	825.52	830.96	836.40	841.84	847.28	858.16	869.04	885.36	901.00	922.76	949.96	981.92	1020.00	1062.84	1111.80	1160.08	1214.48	1268.20	1327.36	1387.20	1451.80	1516.40	1586.44	1657.16	1732.64	1770.04	1845.52	1910.80	1953.64	2007.36	2040.00
Anthem Blue Cross	Prudent Buyer - Small Group	PPO C	532.26	579.57	597.66	615.75	635.23	654.71	674.89	695.76	695.76	695.76	695.76	698.54	712.46	729.16	756.29	778.56	789.69	806.39	823.08	833.52	844.65	850.22	855.78	861.35	866.92	878.05	889.18	905.88	921.88	944.15	971.98	1004.68	1043.64	1087.47	1137.57	1186.97	1242.63	1297.59	1358.12	1419.35	1485.45	1551.54	1623.21	1695.57	1772.80	1811.06	1888.29	1955.09	1998.92	2053.88	2087.28
Anthem Blue Cross	Prudent Buyer - Small Group	PPO D	516.11	561.98	579.52	597.07	615.96	634.85	654.41	674.65	674.65	674.65	674.65	677.35	690.84	707.03	733.34	754.93	765.73	781.92	798.11	808.23	819.03	824.42	829.82	835.22	840.61	851.41	862.20	878.39	893.91	915.50	942.49	974.19	1011.98	1054.48	1103.05	1150.95	1204.92	1258.22	1316.92	1376.29	1440.38	1504.47	1573.96	1644.12	1719.01	1756.11	1831.00	1895.77	1938.27	1991.57	2023.95
Anthem Blue Cross	Select PPO	PPO E	504.40	549.24	566.38	583.52	601.99	620.45	639.57	659.35	659.35	659.35	659.35	661.99	675.17	691.00	716.71	737.81	748.36	764.19	780.01	789.90	800.45	805.73	811.00	816.28	821.55	832.10	842.65	858.47	873.64	894.74	921.11	952.10	989.03	1030.56	1078.04	1124.85	1177.60	1229.69	1287.05	1345.07	1407.71	1470.35	1538.26	1606.84	1680.02	1716.29	1789.48	1852.77	1894.31	1946.40	1978.05
Anthem Blue Cross	Prudent Buyer - Small Group	PPO F	534.45	581.96	600.12	618.29	637.85	657.41	677.67	698.63	698.63	698.63	698.63	701.42	715.40	732.16	759.41	781.77	792.95	809.71	826.48	836.96	848.14	853.73	859.31	864.90	870.49	881.67	892.85	909.62	925.68	948.04	975.99	1008.82	1047.95	1091.96	1142.26	1191.86	1247.75	1302.94	1363.73	1425.21	1491.58	1557.94	1629.90	1702.56	1780.11	1818.53	1896.08	1963.15	2007.16	2062.36	2095.89
Kaiser Permanente	Full	HMO A	348.16	377.84	389.19	400.54	412.76	410.71	423.37	436.46	436.46	436.46	436.46	438.21	446.94	457.41	474.43	488.40	495.39	505.86	516.34	522.88	529.87	533.36	536.85	540.34	543.83	550.82	557.80	568.27	578.31	592.28	609.74	630.25	654.69	682.19	713.62	744.61	779.52	814.00	851.97	890.38	931.85	973.31	1018.27	1063.66	1112.11	1136.11	1184.56	1226.46	1253.96	1288.44	1309.38
Kaiser Permanente	Full	HMO B	352.76	382.85	394.35	405.86	418.25	416.37	429.20	442.47	442.47	442.47	442.47	444.24	453.09	463.71	480.97	495.13	502.20	512.82	523.44	530.08	537.16	540.70	544.24	547.78	551.32	558.40	565.48	576.10	586.27	600.43	618.13	638.93	663.71	691.58	723.44	754.86	790.25	825.21	863.70	902.64	944.68	986.71	1032.29	1078.30	1127.42	1151.75	1200.87	1243.34	1271.22	1306.17	1327.41
Kaiser Permanente	Full	HMO C	350.25	380.12	391.53	402.95	415.25	413.28	426.01	439.19	439.19	439.19	439.19	440.95	449.73	460.27	477.40	491.45	498.48	509.02	519.56	526.15	533.18	536.69	540.20	543.72	547.23	554.26	561.29	571.83	581.93	595.98	613.55	634.19	658.79	686.45	718.08	749.26	784.39	819.09	857.30	895.95	937.67	979.39	1024.63	1070.31	1119.06	1143.21	1191.96	1234.13	1261.79	1296.49	1317.57
Kaiser Permanente	Full	HMO D	321.77	349.10	359.55	370.00	381.26	378.24	389.90	401.96	401.96	401.96	401.96	403.56	411.60	421.25	436.93	449.79	456.22	465.87	475.51	481.54	487.97	491.19	494.41	497.62	500.84	507.27	513.70	523.35	532.59	545.45	561.53	580.42	602.93	628.26	657.20	685.74	717.89	749.65	784.62	819.99	858.18	896.36	937.76	979.57	1024.18	1046.29	1090.91	1129.50	1154.82	1186.57	1205.88
Kaiser Permanente	Full	HMO E	335.50	364.05	374.97	385.89	397.65	395.13	407.31	419.91	419.91	419.91	419.91	421.59	429.99	440.06	456.44	469.88	476.60	486.67	496.75	503.05	509.77	513.13	516.49	519.85	523.20	529.92	536.64	546.72	556.38	569.81	586.61	606.35	629.86	656.32	686.55	716.36	749.95	783.13	819.66	856.61	896.50	936.39	979.64	1023.31	1069.92	1093.02	1139.63	1179.94	1206.39	1239.57	1259.73
Sharp Health Plan	Premier	HMO A	285.29	310.65	320.35	330.04	340.49	350.93	361.74	372.93	372.93	372.93	372.93	374.42	381.88	390.83	405.37	417.31	423.28	432.23	441.18	446.77	452.74	455.72	458.70	461.69	464.67	470.64	476.60	485.55	494.13	506.07	520.98	538.51	559.40	582.89	609.74	636.22	666.05	695.51	727.96	760.78	796.21	831.63	870.05	908.83	950.23	970.74	1012.13	1047.93	1071.43	1100.89	1118.79
Sharp Health Plan	Performance	HMO B	294.75	320.95	330.96	340.98	351.77	362.56	373.73	385.29	385.29	385.29	385.29	386.83	394.54	403.78	418.81	431.14	437.30	446.55	455.80	461.58	467.74	470.82	473.91	476.99	480.07	486.24	492.40	501.65	510.51	522.84	538.25	556.36	577.94	602.21	629.95	657.30	688.13	718.57	752.09	785.99	822.59	859.20	898.88	938.95	981.72	1002.91	1045.68	1082.66	1106.94	1137.38	1155.87
Sharp Health Plan	Premier	HMO C	268.76	292.65	301.78	310.92	320.76	330.59	340.78	351.32	351.32	351.32	351.32	352.73	359.75	368.18	381.88	393.13	398.75	407.18	415.61	420.88	426.50	429.31	432.12	434.93	437.74	443.37	448.99	457.42	465.50	476.74	490.79	507.31	526.98	549.11	574.41	599.35	627.46	655.21	685.78	716.69	750.07	783.44	819.63	856.17	895.16	914.49	953.48	987.21	1009.34	1037.10	1053.96
Sutter Health Plan	Sutter Health Plan	HMO B	380.08	413.86	426.78	439.70	453.61	467.52	481.93	496.84	496.84	496.84	496.84	498.82	508.76	520.68	540.06	555.95	563.90	575.83	587.75	595.20	603.15	607.13	611.10	615.08	619.05	627.00	634.95	646.87	658.30	674.20	694.07	717.42	745.25	776.55	812.32	847.59	887.34	926.59	969.82	1013.54	1060.74	1107.93	1159.11	1210.78	1265.93	1293.25	1348.40	1396.10	1427.40	1466.65	1490.49
Sutter Health Plan	Sutter Health Plan	HMO C	329.19	358.45	369.64	380.82	392.87	404.92	417.40	430.32	430.32	430.32	430.32	432.03	440.64	450.97	467.75	481.52	488.40	498.73	509.06	515.51	522.40	525.84	529.28	532.72	536.17	543.05	549.94	560.26	570.16	583.93	601.14	621.37	645.47	672.58	703.56	734.11	768.53	802.53	839.97	877.83	918.71	959.59	1003.91	1048.67	1096.43	1120.10	1167.86	1209.17	1236.28	1270.28	1290.92
UnitedHealthcare	SignatureValue	HMO A	566.66	617.03	636.29	655.55	676.29	697.03	718.51	740.73	740.73	740.73	740.73	743.69	758.51	776.29	805.17	828.88	840.73	858.51	876.28	887.39	899.25	905.17	911.10	917.02	922.95	934.80	946.65	964.43	981.47	1005.17	1034.80	1069.61	1111.10	1157.76	1211.09	1263.69	1322.94	1381.46	1445.90	1511.09	1581.46	1651.83	1728.12	1805.16	1887.38	1928.12	2010.34	2081.45	2128.12	2186.63	2222.19
Western Health	Full	HMO B	362.81	395.06	407.40	419.73	433.01	446.29	460.04	474.27	474.27	474.27	474.27	476.16	485.65	497.03	515.53	530.71	538.29	549.68	561.06	568.17	575.76	579.56	583.35	587.14	590.94	598.53	606.11	617.50	628.40	643.58	662.55	684.84	711.40	741.28	775.43	809.10	847.04	884.51	925.77	967.51	1012.56	1057.62	1106.47	1155.79	1208.43	1234.52	1287.16	1332.69	1362.57	1400.04	1422.80
Western Health	Full	HMO C	342.86	373.34	384.99	396.64	409.19	421.74	434.74	448.18	448.18	448.18	448.18	449.98	458.94	469.70	487.18	501.52	508.69	519.45	530.20	536.93	544.10	547.68	551.27	554.85	558.44	565.61	572.78	583.54	593.84	608.19	626.11	647.18	672.28	700.51	732.78	764.60	800.46	835.86	874.86	914.30	956.87	999.45	1045.62	1092.23	1141.97	1166.63	1216.37	1259.40	1287.64	1323.04	1344.54
Western Health	Full	HMO D	330.78	360.19	371.43	382.67	394.78	406.88	419.42	432.40	432.40	432.40	432.40	434.12	442.77	453.15	470.01	483.85	490.77	501.15	511.52	518.01	524.93	528.39	531.85	535.31	538.76	545.68	552.60	562.98	572.92	586.76	604.06	624.38	648.59	675.83	706.97	737.67	772.26	806.42	844.04	882.09	923.16	964.24	1008.78	1053.75	1101.74	1125.52	1173.52	1215.03	1242.27	1276.43	1297.19

Health Care Service Plan rates will vary by county

THE INFORMATION PROVIDED HEREIN, INCLUDING THE RATING INFORMATION IS PROVIDED ON TO YOU ON AN "AS IS" "AS AVAILABLE" BASIS WITHOUT WARRANTY OF ANY KIND, EXPRESS OR IMPLIED. WE FURTHER DISCLAIM ALL LIABILITY RELATED TO THE INFORMATION, INCLUDING THOSE CAUSED BY RATING DISCREPANCIES. FINAL RATES AND RATING AREAS ARE BASED UPON ACTUAL ENROLLMENT AND UNDERWRITING AND MUST BE APPROVED BY THE APPLICABLE INSURANCE CARRIER.

Continued

Gold		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	**NETWORK**	**PLAN**																																																			
Anthem Blue Cross	**Select HMO**	**HMO A**	633.30	689.59	711.11	732.64	755.82	779.00	803.00	827.84	827.84	827.84	827.84	831.15	847.71	867.58	899.86	926.35	939.60	959.47	979.33	991.75	1005.00	1011.62	1018.24	1024.87	1031.49	1044.73	1057.98	1077.85	1096.89	1123.38	1156.49	1195.40	1241.76	1293.91	1353.52	1412.30	1478.52	1543.92	1615.94	1688.79	1767.44	1846.08	1931.35	2017.45	2109.34	2154.87	2246.76	2326.23	2378.38	2443.78	2483.52
Anthem Blue Cross	**CaliforniaCare HMO**	**HMO B**	660.81	719.55	742.00	764.46	788.65	812.84	837.89	863.80	863.80	863.80	863.80	867.26	884.53	905.26	938.95	966.59	980.41	1001.14	1021.88	1034.83	1048.65	1055.56	1062.47	1069.38	1076.29	1090.12	1103.94	1124.67	1144.54	1172.18	1206.73	1247.33	1295.70	1350.12	1412.31	1473.64	1542.75	1610.99	1686.14	1762.15	1844.21	1926.27	2015.25	2105.08	2200.96	2248.47	2344.35	2427.28	2481.70	2549.94	2591.40
Anthem Blue Cross	**Priority Select HMO**	**HMO C**	390.44	425.15	438.42	451.69	465.98	480.27	495.07	510.38	510.38	510.38	510.38	512.42	522.63	534.88	554.78	571.12	579.28	591.53	603.78	611.44	619.60	623.68	627.77	631.85	635.93	644.10	652.27	664.51	676.25	692.59	713.00	736.99	765.57	797.72	834.47	870.71	911.54	951.86	996.26	1041.18	1089.66	1138.15	1190.72	1243.80	1300.45	1328.52	1385.17	1434.17	1466.32	1506.64	1531.14
Anthem Blue Cross	**Select PPO**	**PPO B**	615.83	670.57	691.50	712.43	734.97	757.51	780.85	805.00	805.00	805.00	805.00	808.22	824.32	843.64	875.04	900.80	913.68	933.00	952.32	964.39	977.27	983.71	990.15	996.59	1003.03	1015.91	1028.79	1048.11	1066.63	1092.39	1124.59	1162.42	1207.50	1258.22	1316.18	1373.33	1437.73	1501.33	1571.36	1642.20	1718.68	1795.15	1878.07	1961.79	2051.14	2095.42	2184.77	2262.05	2312.77	2376.36	2415.00
Anthem Blue Cross	**Select PPO**	**PPO C**	635.38	691.86	713.45	735.05	758.30	781.56	805.64	830.56	830.56	830.56	830.56	833.88	850.49	870.43	902.82	929.40	942.69	962.62	982.55	995.01	1008.30	1014.94	1021.59	1028.23	1034.88	1048.17	1061.46	1081.39	1100.49	1127.07	1160.29	1199.33	1245.84	1298.17	1357.97	1416.94	1483.38	1548.99	1621.25	1694.34	1773.25	1852.15	1937.70	2024.07	2116.27	2161.95	2254.14	2333.87	2386.20	2451.81	2491.68
Anthem Blue Cross	**Select PPO**	**PPO D**	611.33	665.67	686.44	707.22	729.60	751.97	775.15	799.12	799.12	799.12	799.12	802.32	818.30	837.48	868.64	894.22	907.00	926.18	945.36	957.35	970.13	976.52	982.92	989.31	995.70	1008.49	1021.28	1040.45	1058.83	1084.41	1116.37	1153.93	1198.68	1249.02	1306.56	1363.30	1427.23	1490.36	1559.88	1630.20	1706.12	1782.04	1864.35	1947.46	2036.16	2080.11	2168.81	2245.53	2295.87	2359.00	2397.36
Anthem Blue Cross	**Prudent Buyer - Small Group**	**PPO E**	650.14	707.93	730.03	752.13	775.92	799.72	824.36	849.86	849.86	849.86	849.86	853.26	870.26	890.65	923.80	950.99	964.59	984.99	1005.38	1018.13	1031.73	1038.53	1045.33	1052.13	1058.93	1072.52	1086.12	1106.52	1126.06	1153.26	1187.25	1227.20	1274.79	1328.33	1389.52	1449.86	1517.85	1584.99	1658.93	1733.71	1814.45	1895.19	1982.72	2071.11	2165.44	2212.19	2306.52	2388.11	2441.65	2508.79	2549.58
Anthem Blue Cross	**Prudent Buyer - Small Group**	**PPO H**	625.57	681.18	702.44	723.70	746.60	769.49	793.21	817.74	817.74	817.74	817.74	821.01	837.37	856.99	888.88	915.05	928.13	947.76	967.39	979.65	992.74	999.28	1005.82	1012.36	1018.90	1031.99	1045.07	1064.70	1083.51	1109.67	1142.38	1180.82	1226.61	1278.13	1337.00	1395.06	1460.48	1525.09	1596.23	1668.19	1745.87	1823.56	1907.79	1992.83	2083.60	2128.58	2219.35	2297.85	2349.37	2413.97	2453.22
Anthem Blue Cross	**Prudent Buyer - Small Group**	**PPO I**	634.80	691.22	712.80	734.37	757.61	780.84	804.91	829.80	829.80	829.80	829.80	833.12	849.72	869.63	901.99	928.55	941.82	961.74	981.65	994.10	1007.38	1014.02	1020.65	1027.29	1033.93	1047.21	1060.48	1080.40	1099.49	1126.04	1159.23	1198.23	1244.70	1296.98	1356.72	1415.64	1482.02	1547.58	1619.77	1692.79	1771.62	1850.45	1935.92	2022.22	2114.33	2159.97	2252.08	2331.74	2384.02	2449.57	2489.40
Kaiser Permanente	**Full**	**HMO B**	418.60	454.54	468.28	482.03	496.82	497.35	512.68	528.54	528.54	528.54	528.54	530.65	541.22	553.91	574.52	591.43	599.89	612.58	625.26	633.19	641.64	645.87	650.10	654.33	658.56	667.01	675.47	688.16	700.31	717.23	738.37	763.21	792.81	826.10	864.16	901.69	943.97	985.72	1031.71	1078.22	1128.43	1178.64	1233.08	1288.05	1346.71	1375.78	1434.45	1485.19	1518.49	1560.24	1585.62
Kaiser Permanente	**Full**	**HMO C**	430.69	467.70	481.85	496.01	511.25	512.22	528.00	544.33	544.33	544.33	544.33	546.51	557.40	570.46	591.69	609.11	617.82	630.88	643.95	652.11	660.82	665.18	669.53	673.89	678.24	686.95	695.66	708.72	721.24	738.66	760.43	786.02	816.50	850.79	889.99	928.63	972.18	1015.18	1062.54	1110.44	1162.15	1213.86	1269.93	1326.54	1386.96	1416.90	1477.32	1529.58	1563.87	1606.87	1632.99
Kaiser Permanente	**Full**	**HMO D**	406.60	441.47	454.80	468.14	482.50	482.59	497.46	512.85	512.85	512.85	512.85	514.90	525.15	537.46	557.46	573.87	582.08	594.39	606.70	614.39	622.59	626.70	630.80	634.90	639.00	647.21	655.42	667.72	679.52	695.93	716.44	740.55	769.27	801.58	838.50	874.91	915.94	956.46	1001.07	1046.20	1094.92	1143.64	1196.47	1249.80	1306.73	1334.94	1391.86	1441.09	1473.40	1513.92	1538.55
Kaiser Permanente	**Full**	**HMO E**	363.60	394.65	406.52	418.39	431.18	429.70	442.94	456.64	456.64	456.64	456.64	458.46	467.60	478.56	496.37	510.98	518.28	529.24	540.20	547.05	554.36	558.01	561.66	565.32	568.97	576.28	583.58	594.54	605.04	619.66	637.92	659.38	684.96	713.72	746.60	779.02	815.55	851.63	891.36	931.54	974.92	1018.30	1065.34	1112.83	1163.51	1188.63	1239.31	1283.15	1311.92	1347.99	1369.92
Kaiser Permanente	**Full**	**HMO F**	415.11	450.74	464.36	477.99	492.66	493.06	508.25	523.97	523.97	523.97	523.97	526.07	536.55	549.12	569.56	586.32	594.71	607.28	619.86	627.72	636.10	640.29	644.49	648.68	652.87	661.25	669.64	682.21	694.26	711.03	731.99	756.62	785.96	818.97	856.69	893.90	935.81	977.21	1022.79	1068.90	1118.68	1168.46	1222.43	1276.92	1335.08	1363.90	1422.06	1472.36	1505.37	1546.77	1571.91
Sharp Health Plan	**Performance**	**HMO A**	366.15	398.70	411.14	423.59	436.99	450.39	464.27	478.63	478.63	478.63	478.63	480.54	490.12	501.60	520.27	535.59	543.25	554.73	566.22	573.40	581.06	584.89	588.71	592.54	596.37	604.03	611.69	623.18	634.18	649.50	668.65	691.14	717.95	748.10	782.56	816.54	854.83	892.64	934.29	976.41	1021.88	1067.34	1116.64	1166.42	1219.55	1245.87	1299.00	1344.95	1375.10	1412.92	1435.89
Sharp Health Plan	**Premier**	**HMO B**	345.92	376.67	388.42	400.18	412.84	425.50	438.61	452.18	452.18	452.18	452.18	453.99	463.03	473.88	491.52	505.99	513.22	524.08	534.93	541.71	548.95	552.56	556.18	559.80	563.42	570.65	577.89	588.74	599.14	613.61	631.70	652.95	678.27	706.76	739.31	771.42	807.59	843.32	882.66	922.45	965.40	1008.36	1054.94	1101.96	1152.15	1177.02	1227.22	1270.63	1299.11	1334.84	1356.54
Sharp Health Plan	**Performance**	**HMO D**	377.08	410.59	423.41	436.23	450.03	463.83	478.12	492.91	492.91	492.91	492.91	494.88	504.74	516.57	535.79	551.57	559.45	571.28	583.11	590.51	598.39	602.34	606.28	610.22	614.17	622.05	629.94	641.77	653.11	668.88	688.60	711.76	739.37	770.42	805.91	840.90	880.34	919.28	962.16	1005.54	1052.36	1099.19	1149.96	1201.22	1255.93	1283.04	1337.76	1385.08	1416.13	1455.07	1478.73
Sutter Health Plan	**Sutter Health Plan**	**HMO A**	416.37	453.38	467.53	481.68	496.92	512.16	527.95	544.28	544.28	544.28	544.28	546.45	557.34	570.40	591.63	609.04	617.75	630.81	643.88	652.04	660.75	665.10	669.46	673.81	678.17	686.87	695.58	708.65	721.16	738.58	760.35	785.93	816.41	850.70	889.89	928.53	972.07	1015.07	1062.42	1110.32	1162.03	1213.73	1269.79	1326.40	1386.81	1416.75	1477.16	1529.41	1563.70	1606.70	1632.81
Sutter Health Plan	**Sutter Health Plan**	**HMO B**	446.60	486.30	501.48	516.66	533.00	549.35	566.28	583.80	583.80	583.80	583.80	586.13	597.80	611.81	634.58	653.26	662.60	676.61	690.62	699.38	708.72	713.39	718.06	722.73	727.40	736.74	746.08	760.10	773.52	792.20	815.56	842.99	875.69	912.47	954.50	995.95	1042.65	1088.77	1139.56	1190.93	1246.39	1301.85	1361.98	1422.70	1487.50	1519.61	1584.41	1640.45	1677.23	1723.35	1751.36
Sutter Health Plan	**Sutter Health Plan**	**HMO C**	379.44	413.17	426.07	438.96	452.85	466.74	481.12	496.01	496.01	496.01	496.01	497.99	507.91	519.81	539.15	555.03	562.96	574.87	586.77	594.21	602.15	606.11	610.08	614.05	618.02	625.95	633.89	645.79	657.20	673.07	692.91	716.23	744.00	775.25	810.96	846.18	885.86	925.04	968.19	1011.84	1058.96	1106.08	1157.17	1208.76	1263.81	1291.09	1346.15	1393.76	1425.01	1464.20	1487.99
UnitedHealthcare	**SignatureValue**	**HMO A**	620.40	675.55	696.63	717.72	740.42	763.13	786.65	810.98	810.98	810.98	810.98	814.22	830.44	849.91	881.54	907.49	920.46	939.93	959.39	971.55	984.53	991.02	997.51	1003.99	1010.48	1023.46	1036.43	1055.90	1074.55	1100.50	1132.94	1171.06	1216.47	1267.56	1325.95	1383.53	1448.41	1512.48	1583.03	1654.40	1731.44	1808.49	1892.02	1976.36	2066.38	2110.98	2201.00	2278.85	2329.95	2394.01	2432.94
UnitedHealthcare	**SignatureValue**	**HMO C**	664.20	723.24	745.81	768.38	792.69	817.00	842.18	868.23	868.23	868.23	868.23	871.70	889.07	909.91	943.77	971.55	985.44	1006.28	1027.12	1040.14	1054.03	1060.98	1067.92	1074.87	1081.81	1095.71	1109.60	1130.44	1150.40	1178.19	1212.92	1253.72	1302.35	1357.04	1419.56	1481.20	1550.66	1619.25	1694.78	1771.19	1853.67	1936.15	2025.58	2115.88	2212.25	2260.00	2356.38	2439.73	2494.42	2563.01	2604.69
UnitedHealthcare	**SignatureValue**	**HMO F**	687.01	748.08	771.42	794.77	819.92	845.07	871.11	898.05	898.05	898.05	898.05	901.64	919.60	941.16	976.18	1004.92	1019.29	1040.84	1062.39	1075.86	1090.23	1097.42	1104.60	1111.79	1118.97	1133.34	1147.71	1169.26	1189.92	1218.65	1254.58	1296.78	1347.08	1403.65	1468.31	1532.07	1603.92	1674.86	1752.99	1832.02	1917.34	2002.65	2095.15	2188.55	2288.23	2337.62	2437.31	2523.52	2580.10	2651.04	2694.15
UnitedHealthcare	**SignatureValue**	**HMO H**	643.82	701.04	722.93	744.81	768.37	791.94	816.34	841.59	841.59	841.59	841.59	844.96	861.79	881.99	914.81	941.74	955.20	975.40	995.60	1008.22	1021.69	1028.42	1035.16	1041.89	1048.62	1062.09	1075.55	1095.75	1115.11	1142.04	1175.70	1215.26	1262.39	1315.41	1376.00	1435.75	1503.08	1569.57	1642.78	1716.84	1796.79	1876.75	1963.43	2050.95	2144.37	2190.66	2284.08	2364.87	2417.89	2484.37	2524.77
Western Health	**Full**	**HMO A**	406.47	442.60	456.41	470.23	485.10	499.98	515.39	531.33	531.33	531.33	531.33	533.45	544.08	556.83	577.55	594.56	603.06	615.81	628.56	636.53	645.03	649.28	653.53	657.78	662.04	670.54	679.04	691.79	704.01	721.01	742.27	767.24	796.99	830.47	868.72	906.45	948.95	990.93	1037.15	1083.91	1134.39	1184.86	1239.59	1294.85	1353.83	1383.05	1442.03	1493.03	1526.51	1568.48	1593.99
Western Health	**Full**	**HMO B**	426.53	464.44	478.93	493.43	509.04	524.65	540.82	557.55	557.55	557.55	557.55	559.78	570.93	584.31	606.06	623.90	632.82	646.20	659.58	667.94	676.86	681.33	685.79	690.25	694.71	703.63	712.55	725.93	738.75	756.59	778.90	805.10	836.32	871.45	911.59	951.18	995.78	1039.83	1088.34	1137.40	1190.37	1243.34	1300.76	1358.75	1420.64	1451.30	1513.19	1566.71	1601.84	1645.89	1672.65
Western Health	**Full**	**HMO C**	397.43	432.76	446.27	459.77	474.32	488.87	503.93	519.52	519.52	519.52	519.52	521.60	531.99	544.46	564.72	581.34	589.65	602.12	614.59	622.38	630.70	634.85	639.01	643.16	647.32	655.63	663.94	676.41	688.36	704.99	725.77	750.18	779.28	812.01	849.41	886.30	927.86	968.90	1014.10	1059.82	1109.17	1158.53	1212.04	1266.07	1323.73	1352.31	1409.97	1459.85	1492.58	1533.62	1558.56
Western Health	**Full**	**HMO D**	382.67	416.69	429.69	442.70	456.70	470.71	485.22	500.22	500.22	500.22	500.22	502.22	512.23	524.23	543.74	559.75	567.75	579.76	591.76	599.27	607.27	611.27	615.27	619.28	623.28	631.28	639.28	651.29	662.79	678.80	698.81	722.32	750.33	781.85	817.86	853.38	893.40	932.91	976.43	1020.45	1067.97	1115.50	1167.02	1219.04	1274.57	1302.08	1357.60	1405.62	1437.14	1476.66	1500.66

Platinum		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	**NETWORK**	**PLAN**																																																			
Anthem Blue Cross	**Select HMO**	**HMO A**	687.05	748.12	771.47	794.82	819.97	845.11	871.16	898.10	898.10	898.10	898.10	901.69	919.65	941.21	976.23	1004.97	1019.34	1040.90	1062.45	1075.92	1090.29	1097.48	1104.66	1111.85	1119.03	1133.40	1147.77	1169.33	1189.98	1218.72	1254.65	1296.86	1347.15	1403.73	1468.39	1532.16	1604.01	1674.96	1753.09	1832.12	1917.44	2002.76	2095.27	2188.67	2288.36	2337.75	2437.44	2523.66	2580.24	2651.19	2694.30
Anthem Blue Cross	**Vivity**	**HMO B**	715.83	779.45	803.78	828.11	854.31	880.51	907.65	935.72	935.72	935.72	935.72	939.46	958.18	980.63	1017.13	1047.07	1062.04	1084.50	1106.96	1120.99	1135.96	1143.45	1150.94	1158.42	1165.91	1180.88	1195.85	1218.31	1239.83	1269.77	1307.20	1351.18	1403.58	1462.53	1529.90	1596.34	1671.20	1745.12	1826.53	1908.87	1997.76	2086.66	2183.03	2280.35	2384.21	2435.68	2539.54	2629.37	2688.32	2762.25	2807.16
Anthem Blue Cross	**Vivity**	**HMO C**	700.89	763.19	787.02	810.84	836.49	862.14	888.71	916.20	916.20	916.20	916.20	919.86	938.19	960.18	995.91	1025.23	1039.89	1061.88	1083.86	1097.61	1112.27	1119.60	1126.93	1134.26	1141.59	1156.24	1170.90	1192.89	1213.97	1243.28	1279.93	1322.99	1374.30	1432.02	1497.99	1563.04	1636.33	1708.71	1788.42	1869.05	1956.09	2043.13	2137.49	2232.78	2334.48	2384.87	2486.57	2574.52	2632.24	2704.62	2748.60
Anthem Blue Cross	**CaliforniaCare HMO**	**HMO D**	716.81	780.52	804.88	829.25	855.48	881.72	908.89	937.00	937.00	937.00	937.00	940.75	959.49	981.98	1018.52	1048.50	1063.50	1085.98	1108.47	1122.53	1137.52	1145.01	1152.51	1160.01	1167.50	1182.49	1197.49	1219.97	1241.53	1271.51	1308.99	1353.03	1405.50	1464.53	1532.00	1598.52	1673.48	1747.51	1829.02	1911.48	2000.50	2089.51	2186.02	2283.47	2387.48	2439.01	2543.02	2632.97	2692.00	2766.02	2811.00
Anthem Blue Cross	**Prudent Buyer - Small Group**	**PPO B**	733.47	798.67	823.60	848.53	875.38	902.22	930.03	958.79	958.79	958.79	958.79	962.63	981.80	1004.81	1042.20	1072.89	1088.23	1111.24	1134.25	1148.63	1163.97	1171.64	1179.31	1186.98	1194.65	1209.99	1225.33	1248.34	1270.40	1301.08	1339.43	1384.49	1438.19	1498.59	1567.62	1635.70	1712.40	1788.14	1871.56	1955.93	2047.02	2138.10	2236.86	2336.57	2443.00	2495.73	2602.16	2694.20	2754.60	2830.35	2876.37
Kaiser Permanente	**Full**	**HMO A**	463.58	503.52	518.79	534.06	550.51	552.68	569.71	587.33	587.33	587.33	587.33	589.68	601.43	615.53	638.43	657.23	666.62	680.72	694.82	703.63	713.02	717.72	722.42	727.12	731.82	741.22	750.61	764.71	778.22	797.01	820.51	848.11	881.00	918.00	960.29	1001.99	1048.98	1095.38	1146.48	1198.16	1253.96	1309.76	1370.25	1431.33	1496.53	1528.83	1594.03	1650.41	1687.41	1733.81	1761.99
Kaiser Permanente	**Full**	**HMO B**	451.45	490.31	505.17	520.03	536.03	537.76	554.34	571.48	571.48	571.48	571.48	573.77	585.20	598.91	621.20	639.49	648.63	662.35	676.06	684.63	693.78	698.35	702.92	707.49	712.06	721.21	730.35	744.07	757.21	775.50	798.36	825.22	857.22	893.22	934.37	974.95	1020.66	1065.81	1115.53	1165.82	1220.11	1274.40	1333.26	1392.70	1456.13	1487.56	1551.00	1605.86	1641.86	1687.01	1714.44
Kaiser Permanente	**Full**	**HMO C**	433.61	470.88	485.13	499.38	514.73	515.81	531.71	548.15	548.15	548.15	548.15	550.34	561.31	574.46	595.84	613.38	622.15	635.31	648.46	656.69	665.46	669.84	674.23	678.61	683.00	691.77	700.54	713.69	726.30	743.84	765.77	791.53	822.23	856.76	896.23	935.15	979.00	1022.30	1069.99	1118.23	1170.30	1222.38	1278.84	1335.84	1396.69	1426.84	1487.68	1540.30	1574.84	1618.14	1644.45
Sharp Health Plan	**Premier**	**HMO A**	387.44	421.88	435.05	448.22	462.40	476.58	491.27	506.46	506.46	506.46	506.46	508.49	518.62	530.77	550.52	566.73	574.83	586.99	599.14	606.74	614.84	618.89	622.95	627.00	631.05	639.15	647.26	659.41	671.06	687.27	707.52	731.33	759.69	791.60	828.06	864.02	904.54	944.55	988.61	1033.18	1081.29	1129.41	1181.57	1234.24	1290.46	1318.32	1374.53	1423.15	1455.06	1495.07	1519.38
Sharp Health Plan	**Performance**	**HMO B**	415.31	452.23	466.34	480.46	495.66	510.86	526.60	542.89	542.89	542.89	542.89	545.06	555.92	568.95	590.12	607.49	616.18	629.21	642.24	650.38	659.07	663.41	667.75	672.10	676.44	685.13	693.81	706.84	719.33	736.70	758.42	783.93	814.34	848.54	887.63	926.17	969.60	1012.49	1059.72	1107.50	1159.07	1210.64	1266.56	1323.02	1383.28	1413.14	1473.40	1525.52	1559.72	1602.61	1628.67
Sharp Health Plan	**Premier**	**HMO C**	388.91	423.48	436.70	449.92	464.15	478.39	493.13	508.38	508.38	508.38	508.38	510.41	520.58	532.78	552.61	568.88	577.01	589.21	601.41	609.04	617.17	621.24	625.31	629.37	633.44	641.58	649.71	661.91	673.60	689.87	710.21	734.10	762.57	794.60	831.20	867.30	907.97	948.13	992.36	1037.10	1085.39	1133.69	1186.05	1238.92	1295.35	1323.31	1379.74	1428.55	1460.58	1500.74	1525.14
Sutter Health Plan	**Sutter Health Plan**	**HMO A**	485.07	528.19	544.67	561.16	578.91	596.67	615.05	634.09	634.09	634.09	634.09	636.61	649.29	664.51	689.24	709.53	719.68	734.89	750.11	759.62	769.77	774.84	779.91	784.99	790.06	800.20	810.35	825.57	840.15	860.44	885.80	915.61	951.11	991.06	1036.72	1081.73	1132.46	1182.55	1237.72	1293.52	1353.75	1413.99	1479.30	1545.24	1615.63	1650.50	1720.88	1781.75	1821.70	1871.79	1902.22
UnitedHealthcare	**SignatureValue**	**HMO A**	689.34	750.62	774.04	797.47	822.70	847.94	874.07	901.10	901.10	901.10	901.10	904.70	922.73	944.35	979.50	1008.33	1022.75	1044.37	1066.00	1079.52	1093.94	1101.14	1108.35	1115.56	1122.77	1137.19	1151.61	1173.23	1193.96	1222.79	1258.84	1301.19	1351.65	1408.42	1473.30	1537.28	1609.36	1680.55	1758.95	1838.24	1923.85	2009.45	2102.27	2195.98	2296.00	2345.56	2445.59	2532.09	2588.86	2660.05	2703.30
UnitedHealthcare	**SignatureValue**	**HMO B**	746.62	812.99	838.37	863.74	891.07	918.40	946.70	975.98	975.98	975.98	975.98	979.88	999.40	1022.83	1060.89	1092.12	1107.74	1131.16	1154.58	1169.22	1184.84	1192.65	1200.46	1208.26	1216.07	1231.69	1247.30	1270.73	1293.17	1324.40	1363.44	1409.32	1463.97	1525.46	1595.73	1665.02	1743.10	1820.20	1905.11	1991.00	2083.72	2176.44	2276.96	2378.46	2486.80	2540.48	2648.81	2742.50	2803.99	2881.09	2927.94
UnitedHealthcare	**SignatureValue**	**HMO D**	716.51	780.20	804.56	828.91	855.13	881.36	908.52	936.62	936.62	936.62	936.62	940.37	959.10	981.58	1018.11	1048.08	1063.06	1085.54	1108.02	1122.07	1137.06	1144.55	1152.04	1159.54	1167.03	1182.01	1197.00	1219.48	1241.02	1270.99	1308.46	1352.48	1404.93	1463.94	1531.37	1597.87	1672.80	1746.80	1828.28	1910.70	1999.68	2088.66	2185.13	2282.54	2386.51	2438.02	2541.99	2631.90	2690.91	2764.90	2809.86
UnitedHealthcare	**SignatureValue**	**HMO E**	734.76	800.07	825.04	850.02	876.91	903.80	931.66	960.47	960.47	960.47	960.47	964.31	983.52	1006.57	1044.03	1074.77	1090.13	1113.18	1136.24	1150.64	1166.01	1173.69	1181.38	1189.06	1196.75	1212.11	1227.48	1250.53	1272.62	1303.36	1341.78	1386.92	1440.71	1501.21	1570.37	1638.56	1715.40	1791.28	1874.84	1959.36	2050.60	2141.85	2240.78	2340.67	2447.28	2500.10	2606.72	2698.92	2759.43	2835.31	2881.41
Western Health	**Full**	**HMO B**	464.61	505.91	521.70	537.49	554.49	571.50	589.11	607.33	607.33	607.33	607.33	609.76	621.91	636.48	660.17	679.60	689.32	703.90	718.47	727.58	737.30	742.16	747.02	751.88	756.73	766.45	776.17	790.75	804.71	824.15	848.44	876.99	911.00	949.26	992.99	1036.11	1084.69	1132.67	1185.51	1238.96	1296.65	1354.35	1416.90	1480.07	1547.48	1580.88	1648.30	1706.60	1744.86	1792.84	1821.99
Western Health	**Full**	**HMO C**	459.94	500.82	516.45	532.08	548.92	565.75	583.19	601.22	601.22	601.22	601.22	603.63	615.65	630.08	653.53	672.77	682.39	696.82	711.25	720.27	729.89	734.70	739.51	744.32	749.13	758.75	768.36	782.79	796.62	815.86	839.91	868.17	901.84	939.71	983.00	1025.69	1073.79	1121.28	1173.59	1226.50	1283.61	1340.73	1402.66	1465.18	1531.92	1564.99	1631.72	1689.44	1727.32	1774.81	1803.66
Western Health	**Full**	**HMO D**	434.40	473.01	487.78	502.54	518.44	534.34	550.81	567.84	567.84	567.84	567.84	570.11	581.47	595.10	617.24	635.42	644.50	658.13	671.76	680.28	689.36	693.90	698.45	702.99	707.53	716.62	725.70	739.33	752.39	770.56	793.28	819.96	851.76	887.54	928.42	968.74	1014.17	1059.03	1108.43	1158.40	1212.34	1266.29	1324.78	1383.83	1446.86	1478.09	1541.12	1595.64	1631.41	1676.27	1703.52

Health Care Service Plan rates will vary by county

THE INFORMATION PROVIDED HEREIN, INCLUDING THE RATING INFORMATION IS PROVIDED ON TO YOU ON AN “AS IS” “AS AVAILABLE” BASIS WITHOUT WARRANTY OF ANY KIND, EXPRESS OR IMPLIED. WE FURTHER DISCLAIM ALL LIABILITY RELATED TO THE INFORMATION, INCLUDING THOSE CAUSED BY RATING DISCREPANCIES. FINAL RATES AND RATING AREAS ARE BASED UPON ACTUAL ENROLLMENT AND UNDERWRITING AND MUST BE APPROVED BY THE APPLICABLE INSURANCE CARRIER.

USE EMPLOYER ZIP CODE FOR RATING

AREA 4

02/01/27 - 03/01/27

Bronze		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																																																	
Anthem Blue Cross	Prudent Buyer - Small Group	PPO A	482.67	525.57	541.98	558.38	576.05	593.71	612.01	630.94	630.94	630.94	630.94	633.46	646.08	661.23	685.83	706.02	716.12	731.26	746.40	755.87	765.96	771.01	776.06	781.10	786.15	796.25	806.34	821.48	836.00	856.19	881.42	911.08	946.41	986.16	1031.59	1076.38	1126.86	1176.70	1231.59	1287.12	1347.06	1407.00	1471.98	1537.60	1607.64	1642.34	1712.37	1772.94	1812.69	1862.53	1892.82
Anthem Blue Cross	Select PPO	PPO B	482.67	525.57	541.98	558.38	576.05	593.71	612.01	630.94	630.94	630.94	630.94	633.46	646.08	661.23	685.83	706.02	716.12	731.26	746.40	755.87	765.96	771.01	776.06	781.10	786.15	796.25	806.34	821.48	836.00	856.19	881.42	911.08	946.41	986.16	1031.59	1076.38	1126.86	1176.70	1231.59	1287.12	1347.06	1407.00	1471.98	1537.60	1607.64	1642.34	1712.37	1772.94	1812.69	1862.53	1892.82
Anthem Blue Cross	Prudent Buyer - Small Group	PPO C	482.03	524.88	541.26	557.65	575.29	592.93	611.21	630.11	630.11	630.11	630.11	632.63	645.23	660.36	684.93	705.09	715.17	730.30	745.42	754.87	764.95	769.99	775.04	780.08	785.12	795.20	805.28	820.40	834.90	855.06	880.26	909.88	945.17	984.86	1030.23	1074.97	1125.38	1175.16	1229.97	1285.42	1345.28	1405.15	1470.05	1535.58	1605.52	1640.18	1710.12	1770.61	1810.31	1860.08	1890.33
Anthem Blue Cross	Select PPO	PPO D	482.03	524.88	541.26	557.65	575.29	592.93	611.21	630.11	630.11	630.11	630.11	632.63	645.23	660.36	684.93	705.09	715.17	730.30	745.42	754.87	764.95	769.99	775.04	780.08	785.12	795.20	805.28	820.40	834.90	855.06	880.26	909.88	945.17	984.86	1030.23	1074.97	1125.38	1175.16	1229.97	1285.42	1345.28	1405.15	1470.05	1535.58	1605.52	1640.18	1710.12	1770.61	1810.31	1860.08	1890.33
Kaiser Permanente	Full	HMO A	361.00	391.82	403.61	415.39	428.08	426.51	439.65	453.25	453.25	453.25	453.25	455.06	464.13	475.00	492.68	507.18	514.44	525.31	536.19	542.99	550.24	553.87	557.49	561.12	564.75	572.00	579.25	590.13	600.55	615.06	633.19	654.49	679.87	708.43	741.06	773.24	809.50	845.31	884.74	924.62	967.68	1010.74	1057.43	1104.56	1154.87	1179.80	1230.11	1273.62	1302.18	1337.99	1359.75
Kaiser Permanente	Full	HMO C	350.95	380.87	392.31	403.76	416.08	414.13	426.90	440.10	440.10	440.10	440.10	441.86	450.66	461.22	478.39	492.47	499.51	510.07	520.64	527.24	534.28	537.80	541.32	544.84	548.36	555.40	562.45	573.01	583.13	597.21	614.82	635.50	660.15	687.87	719.56	750.81	786.02	820.78	859.07	897.80	939.61	981.42	1026.75	1072.52	1121.37	1145.58	1194.43	1236.68	1264.40	1299.17	1320.30
Sharp Health Plan	Premier	HMO A	272.80	297.05	306.32	315.59	325.58	335.56	345.90	356.60	356.60	356.60	356.60	358.03	365.16	373.72	387.62	399.04	404.74	413.30	421.86	427.21	432.91	435.77	438.62	441.47	444.32	450.03	455.73	464.29	472.50	483.91	498.17	514.93	534.90	557.37	583.04	608.36	636.89	665.06	696.08	727.46	761.34	795.22	831.95	869.03	908.62	928.23	967.81	1002.05	1024.51	1052.68	1069.80
Sharp Health Plan	Performance	HMO B	291.24	317.12	327.02	336.92	347.58	358.24	369.28	380.70	380.70	380.70	380.70	382.22	389.84	398.97	413.82	426.00	432.09	441.23	450.37	456.08	462.17	465.22	468.26	471.31	474.35	480.44	486.53	495.67	504.43	516.61	531.84	549.73	571.05	595.03	622.44	649.47	679.93	710.01	743.13	776.63	812.79	848.96	888.17	927.77	970.02	990.96	1033.22	1069.77	1093.75	1123.83	1142.10
Sutter Health Plan	Sutter Health Plan	HMO A	509.68	554.98	572.31	589.63	608.28	626.94	646.26	666.26	666.26	666.26	666.26	668.91	682.24	698.23	724.21	745.53	756.19	772.18	788.17	798.16	808.82	814.15	819.48	824.81	830.14	840.80	851.46	867.45	882.78	904.10	930.75	962.06	999.37	1041.35	1089.32	1136.62	1189.92	1242.55	1300.52	1359.15	1422.44	1485.73	1554.36	1623.65	1697.60	1734.24	1808.20	1872.16	1914.13	1966.76	1998.73
Sutter Health Plan	Sutter Health Plan	HMO B	509.93	555.26	572.59	589.92	608.58	627.25	646.58	666.59	666.59	666.59	666.59	669.24	682.57	698.57	724.57	745.90	756.56	772.56	788.56	798.56	809.22	814.56	819.89	825.22	830.55	841.22	851.89	867.88	883.21	904.54	931.21	962.54	999.87	1041.86	1089.85	1137.18	1190.51	1243.17	1301.16	1359.82	1423.14	1486.47	1555.12	1624.45	1698.44	1735.10	1809.09	1873.08	1915.08	1967.74	1999.72
Western Health	Full	HMO B	316.71	344.87	355.63	366.39	377.99	389.58	401.59	414.01	414.01	414.01	414.01	415.66	423.94	433.88	450.02	463.27	469.90	479.83	489.77	495.98	502.60	505.91	509.23	512.54	515.85	522.47	529.10	539.03	548.56	561.81	578.37	597.82	621.01	647.09	676.90	706.29	739.41	772.12	808.14	844.57	883.90	923.23	965.87	1008.93	1054.89	1077.66	1123.61	1163.36	1189.44	1222.14	1242.02
Western Health	Full	HMO C	330.55	359.93	371.17	382.40	394.50	406.60	419.13	432.09	432.09	432.09	432.09	433.82	442.46	452.83	469.68	483.51	490.42	500.79	511.16	517.64	524.56	528.01	531.47	534.93	538.38	545.30	552.21	562.58	572.52	586.35	603.63	623.94	648.13	675.36	706.47	737.15	771.71	805.85	843.44	881.46	922.51	963.56	1008.07	1053.00	1100.97	1124.73	1172.69	1214.17	1241.39	1275.53	1296.27

Silver		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																																																	
Anthem Blue Cross	Select HMO	HMO A	396.61	431.87	445.35	458.83	473.34	487.86	502.90	518.45	518.45	518.45	518.45	520.52	530.89	543.34	563.56	580.15	588.44	600.88	613.33	621.10	629.40	633.55	637.69	641.84	645.99	654.28	662.58	675.02	686.95	703.54	724.27	748.64	777.68	810.34	847.67	884.48	925.95	966.91	1012.01	1057.64	1106.89	1156.14	1209.54	1263.46	1321.01	1349.53	1407.07	1456.84	1489.51	1530.46	1555.35
Anthem Blue Cross	CaliforniaCare HMO	HMO B	445.10	484.66	499.79	514.92	531.21	547.50	564.38	581.83	581.83	581.83	581.83	584.16	595.79	609.76	632.45	651.07	660.38	674.34	688.30	697.03	706.34	711.00	715.65	720.31	724.96	734.27	743.58	757.54	770.92	789.54	812.82	840.16	872.75	909.40	951.29	992.60	1039.15	1085.11	1135.73	1186.93	1242.21	1297.48	1357.41	1417.92	1482.50	1514.50	1579.09	1634.94	1671.60	1717.56	1745.49
Anthem Blue Cross	CaliforniaCare HMO	HMO D	444.52	484.03	499.14	514.25	530.52	546.79	563.64	581.07	581.07	581.07	581.07	583.39	595.02	608.96	631.62	650.22	659.51	673.46	687.41	696.12	705.42	710.07	714.72	719.36	724.01	733.31	742.61	756.55	769.92	788.51	811.75	839.07	871.61	908.21	950.05	991.31	1037.79	1083.70	1134.25	1185.38	1240.58	1295.79	1355.64	1416.07	1480.57	1512.53	1577.02	1632.81	1669.41	1715.32	1743.21
Anthem Blue Cross	Select PPO	PPO B	520.59	566.86	584.56	602.25	621.31	640.36	660.09	680.51	680.51	680.51	680.51	683.23	696.84	713.17	739.71	761.49	772.38	788.71	805.04	815.25	826.14	831.58	837.03	842.47	847.92	858.80	869.69	886.02	901.68	923.45	950.67	982.66	1020.77	1063.64	1112.63	1160.95	1215.39	1269.15	1328.36	1388.24	1452.89	1517.54	1587.63	1658.40	1733.94	1771.37	1846.90	1912.23	1955.11	2008.87	2041.53
Anthem Blue Cross	Prudent Buyer - Small Group	PPO C	520.59	566.86	584.56	602.25	621.31	640.36	660.09	680.51	680.51	680.51	680.51	683.23	696.84	713.17	739.71	761.49	772.38	788.71	805.04	815.25	826.14	831.58	837.03	842.47	847.92	858.80	869.69	886.02	901.68	923.45	950.67	982.66	1020.77	1063.64	1112.63	1160.95	1215.39	1269.15	1328.36	1388.24	1452.89	1517.54	1587.63	1658.40	1733.94	1771.37	1846.90	1912.23	1955.11	2008.87	2041.53
Anthem Blue Cross	Prudent Buyer - Small Group	PPO D	504.78	549.65	566.80	583.96	602.43	620.91	640.04	659.84	659.84	659.84	659.84	662.48	675.68	691.51	717.25	738.36	748.92	764.75	780.59	790.49	801.05	806.32	811.60	816.88	822.16	832.72	843.28	859.11	874.29	895.40	921.80	952.81	989.76	1031.33	1078.84	1125.69	1178.47	1230.60	1288.01	1346.07	1408.76	1471.44	1539.41	1608.03	1681.27	1717.56	1790.81	1854.15	1895.72	1947.85	1979.52
Anthem Blue Cross	Select PPO	PPO E	504.78	549.65	566.80	583.96	602.43	620.91	640.04	659.84	659.84	659.84	659.84	662.48	675.68	691.51	717.25	738.36	748.92	764.75	780.59	790.49	801.05	806.32	811.60	816.88	822.16	832.72	843.28	859.11	874.29	895.40	921.80	952.81	989.76	1031.33	1078.84	1125.69	1178.47	1230.60	1288.01	1346.07	1408.76	1471.44	1539.41	1608.03	1681.27	1717.56	1790.81	1854.15	1895.72	1947.85	1979.52
Anthem Blue Cross	Prudent Buyer - Small Group	PPO F	522.72	569.19	586.95	604.72	623.85	642.99	662.80	683.30	683.30	683.30	683.30	686.03	699.70	716.10	742.75	764.61	775.55	791.94	808.34	818.59	829.53	834.99	840.46	845.93	851.39	862.32	873.26	889.66	905.37	927.24	954.57	986.69	1024.95	1068.00	1117.20	1165.71	1220.37	1274.35	1333.80	1393.93	1458.85	1523.76	1594.14	1665.20	1741.05	1778.63	1854.48	1920.07	1963.12	2017.10	2049.90
Kaiser Permanente	Full	HMO A	393.85	427.60	440.50	453.40	467.29	466.91	481.30	496.19	496.19	496.19	496.19	498.17	508.10	520.01	539.36	555.24	563.17	575.08	586.99	594.43	602.37	606.34	610.31	614.28	618.25	626.19	634.13	646.04	657.45	673.33	693.18	716.50	744.28	775.54	811.27	846.50	886.19	925.39	968.56	1012.23	1059.36	1106.50	1157.61	1209.21	1264.29	1291.58	1346.66	1394.29	1425.55	1464.75	1488.57
Kaiser Permanente	Full	HMO B	399.08	433.29	446.36	459.44	473.53	473.34	487.93	503.02	503.02	503.02	503.02	505.03	515.09	527.16	546.78	562.88	570.93	583.00	595.07	602.62	610.67	614.69	618.71	622.74	626.76	634.81	642.86	654.93	666.50	682.60	702.72	726.36	754.53	786.22	822.44	858.15	898.39	938.13	981.89	1026.16	1073.95	1121.73	1173.55	1225.86	1281.69	1309.36	1365.20	1413.49	1445.18	1484.91	1509.06
Kaiser Permanente	Full	HMO C	396.23	430.18	443.16	456.14	470.12	469.83	484.31	499.29	499.29	499.29	499.29	501.29	511.27	523.26	542.73	558.71	566.69	578.68	590.66	598.15	606.14	610.13	614.13	618.12	622.12	630.10	638.09	650.08	661.56	677.54	697.51	720.98	748.94	780.39	816.34	851.79	891.73	931.18	974.61	1018.55	1065.98	1113.42	1164.84	1216.77	1272.19	1299.65	1355.07	1403.01	1434.46	1473.90	1497.87
Kaiser Permanente	Full	HMO D	363.85	394.92	406.80	418.68	431.48	430.00	443.25	456.96	456.96	456.96	456.96	458.79	467.93	478.89	496.72	511.34	518.65	529.62	540.58	547.44	554.75	558.41	562.06	565.72	569.37	576.68	584.00	594.96	605.47	620.10	638.37	659.85	685.44	714.23	747.13	779.58	816.13	852.23	891.99	932.20	975.61	1019.02	1066.09	1113.61	1164.34	1189.47	1240.19	1284.06	1312.85	1348.95	1370.88
Kaiser Permanente	Full	HMO E	379.46	411.92	424.33	436.74	450.11	449.20	463.05	477.37	477.37	477.37	477.37	479.28	488.83	500.28	518.90	534.18	541.81	553.27	564.73	571.89	579.53	583.34	587.16	590.98	594.80	602.44	610.08	621.53	632.51	647.79	666.88	689.32	716.05	746.13	780.50	814.39	852.58	890.29	931.82	973.83	1019.18	1064.53	1113.70	1163.35	1216.34	1242.59	1295.58	1341.41	1371.48	1409.19	1432.11
Sharp Health Plan	Premier	HMO A	285.29	310.65	320.35	330.04	340.49	350.93	361.74	372.93	372.93	372.93	372.93	374.42	381.88	390.83	405.37	417.31	423.28	432.23	441.18	446.77	452.74	455.72	458.70	461.69	464.67	470.64	476.60	485.55	494.13	506.07	520.98	538.51	559.40	582.89	609.74	636.22	666.05	695.51	727.96	760.78	796.21	831.63	870.05	908.83	950.23	970.74	1012.13	1047.93	1071.43	1100.89	1118.79
Sharp Health Plan	Performance	HMO B	294.75	320.95	330.96	340.98	351.77	362.56	373.73	385.29	385.29	385.29	385.29	386.83	394.54	403.78	418.81	431.14	437.30	446.55	455.80	461.58	467.74	470.82	473.91	476.99	480.07	486.24	492.40	501.65	510.51	522.84	538.25	556.36	577.94	602.21	629.95	657.30	688.13	718.57	752.09	785.99	822.59	859.20	898.88	938.95	981.72	1002.91	1045.68	1082.66	1106.94	1137.38	1155.87
Sharp Health Plan	Premier	HMO C	268.76	292.65	301.78	310.92	320.76	330.59	340.78	351.32	351.32	351.32	351.32	352.73	359.75	368.18	381.88	393.13	398.75	407.18	415.61	420.88	426.50	429.31	432.12	434.93	437.74	443.37	448.99	457.42	465.50	476.74	490.79	507.31	526.98	549.11	574.41	599.35	627.46	655.21	685.78	716.69	750.07	783.44	819.63	856.17	895.16	914.49	953.48	987.21	1009.34	1037.10	1053.96
Sutter Health Plan	Sutter Health Plan	HMO B	623.06	678.44	699.62	720.80	743.60	766.41	790.02	814.47	814.47	814.47	814.47	817.72	834.01	853.55	885.32	911.38	924.41	943.96	963.50	975.72	988.75	995.27	1001.78	1008.30	1014.82	1027.85	1040.88	1060.43	1079.16	1105.22	1137.80	1176.08	1221.69	1273.00	1331.64	1389.47	1454.62	1518.97	1589.82	1661.50	1738.87	1816.24	1900.13	1984.84	2075.24	2120.04	2210.44	2288.63	2339.94	2404.28	2443.37
Sutter Health Plan	Sutter Health Plan	HMO C	539.64	587.61	605.95	624.29	644.04	663.79	684.25	705.42	705.42	705.42	705.42	708.23	722.34	739.27	766.78	789.35	800.64	817.57	834.50	845.08	856.37	862.01	867.65	873.30	878.94	890.23	901.51	918.44	934.67	957.24	985.46	1018.61	1058.12	1102.56	1153.35	1203.43	1259.86	1315.59	1376.96	1439.04	1506.05	1573.06	1645.72	1719.08	1797.38	1836.18	1914.48	1982.20	2026.64	2082.37	2116.22
UnitedHealthcare	SignatureValue	HMO A	574.71	625.79	645.32	664.86	685.89	706.93	728.71	751.25	751.25	751.25	751.25	754.26	769.28	787.31	816.61	840.65	852.67	870.70	888.73	900.00	912.02	918.03	924.04	930.05	936.06	948.08	960.10	978.13	995.41	1019.45	1049.50	1084.81	1126.88	1174.20	1228.29	1281.63	1341.73	1401.08	1466.44	1532.55	1603.92	1675.29	1752.67	1830.80	1914.19	1955.50	2038.89	2111.01	2158.34	2217.69	2253.75
Western Health	Full	HMO B	362.81	395.06	407.40	419.73	433.01	446.29	460.04	474.27	474.27	474.27	474.27	476.16	485.65	497.03	515.53	530.71	538.29	549.68	561.06	568.17	575.76	579.56	583.35	587.14	590.94	598.53	606.11	617.50	628.40	643.58	662.55	684.84	711.40	741.28	775.43	809.10	847.04	884.51	925.77	967.51	1012.56	1057.62	1106.47	1155.79	1208.43	1234.52	1287.16	1332.69	1362.57	1400.04	1422.80
Western Health	Full	HMO C	342.86	373.34	384.99	396.64	409.19	421.74	434.74	448.18	448.18	448.18	448.18	449.98	458.94	469.70	487.18	501.52	508.69	519.45	530.20	536.93	544.10	547.68	551.27	554.85	558.44	565.61	572.78	583.54	593.84	608.19	626.11	647.18	672.28	700.51	732.78	764.60	800.46	835.86	874.86	914.30	956.87	999.45	1045.62	1092.23	1141.97	1166.63	1216.37	1259.40	1287.64	1323.04	1344.54
Western Health	Full	HMO D	330.78	360.19	371.43	382.67	394.78	406.88	419.42	432.40	432.40	432.40	432.40	434.12	442.77	453.15	470.01	483.85	490.77	501.15	511.52	518.01	524.93	528.39	531.85	535.31	538.76	545.68	552.60	562.98	572.92	586.76	604.06	624.38	648.59	675.83	706.97	737.67	772.26	806.42	844.04	882.09	923.16	964.24	1008.78	1053.75	1101.74	1125.52	1173.52	1215.03	1242.27	1276.43	1297.19

Health Care Service Plan rates will vary by county

THE INFORMATION PROVIDED HEREIN, INCLUDING THE RATING INFORMATION IS PROVIDED ON TO YOU ON AN "AS IS" "AS AVAILABLE" BASIS WITHOUT WARRANTY OF ANY KIND, EXPRESS OR IMPLIED. WE FURTHER DISCLAIM ALL LIABILITY RELATED TO THE INFORMATION, INCLUDING THOSE CAUSED BY RATING DISCREPANCIES. FINAL RATES AND RATING AREAS ARE BASED UPON ACTUAL ENROLLMENT AND UNDERWRITING AND MUST BE APPROVED BY THE APPLICABLE INSURANCE CARRIER.

Continued

USE EMPLOYER ZIP CODE FOR RATING

AREA 4 - Contined

02/01/27 - 03/01/27

Gold		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																																																			
Anthem Blue Cross	Select HMO	HMO A	508.47	553.67	570.95	588.23	606.84	625.45	644.73	664.67	664.67	664.67	664.67	667.33	680.62	696.57	722.50	743.77	754.40	770.35	786.30	796.27	806.91	812.23	817.54	822.86	828.18	838.81	849.45	865.40	880.69	901.96	928.54	959.78	997.01	1038.88	1086.74	1133.93	1187.10	1239.61	1297.44	1355.93	1419.07	1482.21	1550.68	1619.80	1693.58	1730.14	1803.91	1867.72	1909.60	1962.11	1994.01
Anthem Blue Cross	CaliforniaCare HMO	HMO B	570.57	621.28	640.68	660.07	680.95	701.84	723.46	745.84	745.84	745.84	745.84	748.82	763.74	781.64	810.73	834.59	846.53	864.43	882.33	893.52	905.45	911.42	917.38	923.35	929.32	941.25	953.18	971.08	988.24	1012.10	1041.94	1076.99	1118.76	1165.75	1219.45	1272.40	1332.07	1390.99	1455.88	1521.51	1592.37	1663.22	1740.04	1817.61	1900.40	1941.42	2024.21	2095.81	2142.80	2201.72	2237.52
Anthem Blue Cross	Priority Select HMO	HMO C	384.15	418.30	431.36	444.41	458.47	472.53	487.10	502.16	502.16	502.16	502.16	504.17	514.21	526.26	545.85	561.92	569.95	582.00	594.06	601.59	609.62	613.64	617.66	621.67	625.69	633.73	641.76	653.81	665.36	681.43	701.52	725.12	753.24	784.88	821.03	856.68	896.86	936.53	980.22	1024.41	1072.11	1119.82	1171.54	1223.76	1279.50	1307.12	1362.86	1411.07	1442.71	1482.38	1506.48
Anthem Blue Cross	Select PPO	PPO B	616.28	671.06	692.01	712.96	735.51	758.07	781.43	805.60	805.60	805.60	805.60	808.82	824.93	844.27	875.69	901.47	914.36	933.69	953.02	965.11	978.00	984.44	990.89	997.33	1003.78	1016.67	1029.56	1048.89	1067.42	1093.20	1125.42	1163.29	1208.40	1259.15	1317.16	1374.35	1438.80	1502.44	1572.53	1643.42	1719.96	1796.49	1879.46	1963.25	2052.67	2096.98	2186.40	2263.74	2314.49	2378.13	2416.80
Anthem Blue Cross	Select PPO	PPO C	635.85	692.36	713.98	735.59	758.86	782.13	806.23	831.17	831.17	831.17	831.17	834.49	851.12	871.07	903.48	930.08	943.38	963.33	983.27	995.74	1009.04	1015.69	1022.34	1028.99	1035.64	1048.94	1062.24	1082.18	1101.30	1127.90	1161.14	1200.21	1246.76	1299.12	1358.96	1417.98	1484.47	1550.13	1622.44	1695.59	1774.55	1853.51	1939.12	2025.56	2117.82	2163.54	2255.80	2335.59	2387.95	2453.61	2493.51
Anthem Blue Cross	Select PPO	PPO D	611.78	666.16	686.95	707.74	730.14	752.53	775.72	799.71	799.71	799.71	799.71	802.91	818.90	838.10	869.28	894.88	907.67	926.86	946.06	958.05	970.85	977.25	983.64	990.04	996.44	1009.23	1022.03	1041.22	1059.62	1085.21	1117.19	1154.78	1199.57	1249.95	1307.53	1364.31	1428.28	1491.46	1561.03	1631.41	1707.38	1783.35	1865.72	1948.89	2037.66	2081.65	2170.41	2247.19	2297.57	2360.74	2399.13
Anthem Blue Cross	Prudent Buyer - Small Group	PPO E	635.85	692.36	713.98	735.59	758.86	782.13	806.23	831.17	831.17	831.17	831.17	834.49	851.12	871.07	903.48	930.08	943.38	963.33	983.27	995.74	1009.04	1015.69	1022.34	1028.99	1035.64	1048.94	1062.24	1082.18	1101.30	1127.90	1161.14	1200.21	1246.76	1299.12	1358.96	1417.98	1484.47	1550.13	1622.44	1695.59	1774.55	1853.51	1939.12	2025.56	2117.82	2163.54	2255.80	2335.59	2387.95	2453.61	2493.51
Anthem Blue Cross	Prudent Buyer - Small Group	PPO H	611.84	666.23	687.02	707.81	730.21	752.60	775.80	799.79	799.79	799.79	799.79	802.99	818.98	838.18	869.37	894.97	907.76	926.96	946.15	958.15	970.95	977.34	983.74	990.14	996.54	1009.33	1022.13	1041.33	1059.72	1085.32	1117.31	1154.90	1199.69	1250.07	1307.66	1364.44	1428.42	1491.61	1561.19	1631.57	1707.55	1783.53	1865.91	1949.09	2037.86	2081.85	2170.63	2247.41	2297.80	2360.98	2399.37
Anthem Blue Cross	Prudent Buyer - Small Group	PPO I	620.84	676.03	697.13	718.23	740.95	763.68	787.21	811.56	811.56	811.56	811.56	814.81	831.04	850.51	882.17	908.14	921.12	940.60	960.08	972.25	985.23	991.73	998.22	1004.71	1011.20	1024.19	1037.17	1056.65	1075.32	1101.29	1133.75	1171.89	1217.34	1268.47	1326.90	1384.52	1449.45	1513.56	1584.17	1655.58	1732.68	1809.78	1893.37	1977.77	2067.85	2112.49	2202.57	2280.48	2331.61	2395.73	2434.68
Kaiser Permanente	Full	HMO B	473.93	514.79	530.41	546.03	562.86	565.41	582.84	600.86	600.86	600.86	600.86	603.27	615.28	629.71	653.14	672.37	681.98	696.40	710.82	719.83	729.45	734.26	739.06	743.87	748.68	758.29	767.90	782.32	796.14	815.37	839.41	867.65	901.30	939.15	982.41	1025.07	1073.14	1120.61	1172.89	1225.76	1282.84	1339.93	1401.82	1464.31	1531.00	1564.05	1630.74	1688.43	1726.28	1773.75	1802.58
Kaiser Permanente	Full	HMO C	487.67	529.75	545.84	561.93	579.25	582.31	600.26	618.82	618.82	618.82	618.82	621.30	633.67	648.52	672.66	692.46	702.36	717.21	732.07	741.35	751.25	756.20	761.15	766.10	771.05	780.95	790.85	805.71	819.94	839.74	864.49	893.58	928.23	967.22	1011.77	1055.71	1105.22	1154.10	1207.94	1262.40	1321.18	1379.97	1443.71	1508.07	1576.76	1610.79	1679.48	1738.89	1777.87	1826.76	1856.46
Kaiser Permanente	Full	HMO D	460.28	499.93	515.09	530.25	546.57	548.63	565.53	583.02	583.02	583.02	583.02	585.36	597.02	611.01	633.75	652.40	661.73	675.72	689.72	698.46	707.79	712.46	717.12	721.78	726.45	735.78	745.10	759.10	772.51	791.16	814.48	841.89	874.54	911.27	953.24	994.64	1041.28	1087.34	1138.06	1189.37	1244.76	1300.14	1360.19	1420.83	1485.54	1517.61	1582.33	1638.30	1675.03	1721.09	1749.06
Kaiser Permanente	Full	HMO E	411.40	446.70	460.20	473.70	488.23	488.50	503.55	519.12	519.12	519.12	519.12	521.20	531.58	544.04	564.29	580.90	589.21	601.67	614.12	621.91	630.22	634.37	638.52	642.68	646.83	655.14	663.44	675.90	687.84	704.45	725.22	749.62	778.69	811.39	848.77	885.63	927.16	968.17	1013.33	1059.01	1108.33	1157.65	1211.12	1265.11	1322.73	1351.28	1408.91	1458.74	1491.45	1532.46	1557.36
Kaiser Permanente	Full	HMO F	469.96	510.47	525.95	541.44	558.12	560.53	577.80	595.67	595.67	595.67	595.67	598.06	609.97	624.27	647.50	666.56	676.09	690.39	704.68	713.62	723.15	727.91	732.68	737.44	742.21	751.74	761.27	775.57	789.27	808.33	832.16	860.15	893.51	931.04	973.93	1016.22	1063.87	1110.93	1162.75	1215.17	1271.76	1328.35	1389.71	1451.66	1517.78	1550.54	1616.66	1673.84	1711.37	1758.43	1787.01
Sharp Health Plan	Performance	HMO A	366.15	398.70	411.14	423.59	436.99	450.39	464.27	478.63	478.63	478.63	478.63	480.54	490.12	501.60	520.27	535.59	543.25	554.73	566.22	573.40	581.06	584.89	588.71	592.54	596.37	604.03	611.69	623.18	634.18	649.50	668.65	691.14	717.95	748.10	782.56	816.54	854.83	892.64	934.29	976.41	1021.88	1067.34	1116.64	1166.42	1219.55	1245.87	1299.00	1344.95	1375.10	1412.92	1435.89
Sharp Health Plan	Premier	HMO B	345.92	376.67	388.42	400.18	412.84	425.50	438.61	452.18	452.18	452.18	452.18	453.99	463.03	473.88	491.52	505.99	513.22	524.08	534.93	541.71	548.95	552.56	556.18	559.80	563.42	570.65	577.89	588.74	599.14	613.61	631.70	652.95	678.27	706.76	739.31	771.42	807.59	843.32	882.66	922.45	965.40	1008.36	1054.94	1101.96	1152.15	1177.02	1227.22	1270.63	1299.11	1334.84	1356.54
Sharp Health Plan	Performance	HMO D	377.08	410.59	423.41	436.23	450.03	463.83	478.12	492.91	492.91	492.91	492.91	494.88	504.74	516.57	535.79	551.57	559.45	571.28	583.11	590.51	598.39	602.34	606.28	610.22	614.17	622.05	629.94	641.77	653.11	668.88	688.60	711.76	739.37	770.42	805.91	840.90	880.34	919.28	962.16	1005.54	1052.36	1099.19	1149.96	1201.22	1255.93	1283.04	1337.76	1385.08	1416.13	1455.07	1478.73
Sutter Health Plan	Sutter Health Plan	HMO A	682.56	743.23	766.43	789.63	814.61	839.59	865.47	892.24	892.24	892.24	892.24	895.80	913.65	935.06	969.86	998.41	1012.68	1034.10	1055.51	1068.89	1083.17	1090.31	1097.45	1104.58	1111.72	1126.00	1140.27	1161.69	1182.21	1210.76	1246.45	1288.38	1338.35	1394.56	1458.80	1522.15	1593.53	1664.01	1741.64	1820.15	1904.92	1989.68	2081.58	2174.37	2273.41	2322.48	2421.52	2507.17	2563.38	2633.87	2676.69
Sutter Health Plan	Sutter Health Plan	HMO B	732.11	797.19	822.07	846.96	873.75	900.55	928.30	957.02	957.02	957.02	957.02	960.84	979.98	1002.95	1040.27	1070.90	1086.21	1109.18	1132.14	1146.50	1161.81	1169.47	1177.12	1184.78	1192.44	1207.75	1223.06	1246.03	1268.04	1298.66	1336.95	1381.92	1435.52	1495.81	1564.71	1632.66	1709.22	1784.83	1868.09	1952.30	2043.22	2134.14	2232.71	2332.24	2438.47	2491.10	2597.33	2689.20	2749.49	2825.10	2871.02
Sutter Health Plan	Sutter Health Plan	HMO C	622.02	677.31	698.45	719.59	742.36	765.12	788.70	813.11	813.11	813.11	813.11	816.35	832.61	852.13	883.84	909.86	922.87	942.38	961.89	974.09	987.10	993.61	1000.11	1006.61	1013.12	1026.13	1039.14	1058.65	1077.35	1103.37	1135.90	1174.11	1219.65	1270.87	1329.41	1387.14	1452.19	1516.43	1587.17	1658.72	1735.96	1813.21	1896.96	1981.52	2071.77	2116.49	2206.75	2284.80	2336.03	2400.26	2439.28
UnitedHealthcare	SignatureValue	HMO A	629.20	685.13	706.52	727.90	750.93	773.96	797.82	822.49	822.49	822.49	822.49	825.78	842.23	861.97	894.05	920.37	933.53	953.27	973.01	985.34	998.50	1005.08	1011.66	1018.24	1024.82	1037.98	1051.14	1070.88	1089.80	1116.12	1149.02	1187.68	1233.74	1285.55	1344.77	1403.17	1468.97	1533.94	1605.50	1677.88	1756.02	1834.15	1918.87	2004.41	2095.70	2140.94	2232.24	2311.20	2363.01	2427.99	2467.47
UnitedHealthcare	SignatureValue	HMO C	673.63	733.51	756.40	779.30	803.95	828.61	854.14	880.56	880.56	880.56	880.56	884.08	901.69	922.83	957.17	985.35	999.44	1020.57	1041.70	1054.91	1069.00	1076.04	1083.09	1090.13	1097.18	1111.27	1125.36	1146.49	1166.74	1194.92	1230.14	1271.53	1320.84	1376.32	1439.72	1502.24	1572.68	1642.24	1718.85	1796.34	1880.00	1963.65	2054.35	2145.92	2243.67	2292.10	2389.84	2474.37	2529.85	2599.41	2641.68
UnitedHealthcare	SignatureValue	HMO F	696.76	758.70	782.38	806.06	831.56	857.06	883.48	910.80	910.80	910.80	910.80	914.44	932.66	954.52	990.04	1019.19	1033.76	1055.62	1077.48	1091.14	1105.71	1113.00	1120.28	1127.57	1134.86	1149.43	1164.00	1185.86	1206.81	1235.96	1272.39	1315.20	1366.20	1423.58	1489.16	1553.82	1626.69	1698.64	1777.88	1858.03	1944.56	2031.08	2124.90	2219.62	2320.72	2370.81	2471.91	2559.35	2616.73	2688.68	2732.40
UnitedHealthcare	SignatureValue	HMO H	652.96	711.00	733.19	755.38	779.28	803.18	827.93	853.54	853.54	853.54	853.54	856.95	874.02	894.51	927.80	955.11	968.77	989.25	1009.74	1022.54	1036.20	1043.03	1049.85	1056.68	1063.51	1077.17	1090.82	1111.31	1130.94	1158.25	1192.40	1232.51	1280.31	1334.08	1395.54	1456.14	1524.42	1591.85	1666.11	1741.22	1822.31	1903.39	1991.31	2080.08	2174.82	2221.76	2316.51	2398.45	2452.22	2519.65	2560.62
Western Health	Full	HMO A	406.47	442.60	456.41	470.23	485.10	499.98	515.39	531.33	531.33	531.33	531.33	533.45	544.08	556.83	577.55	594.56	603.06	615.81	628.56	636.53	645.03	649.28	653.53	657.78	662.04	670.54	679.04	691.79	704.01	721.01	742.27	767.24	796.99	830.47	868.72	906.45	948.95	990.93	1037.15	1083.91	1134.39	1184.86	1239.59	1294.85	1353.83	1383.05	1442.03	1493.03	1526.51	1568.48	1593.99
Western Health	Full	HMO B	426.53	464.44	478.93	493.43	509.04	524.65	540.82	557.55	557.55	557.55	557.55	559.78	570.93	584.31	606.06	623.90	632.82	646.20	659.58	667.94	676.86	681.33	685.79	690.25	694.71	703.63	712.55	725.93	738.75	756.59	778.90	805.10	836.32	871.45	911.59	951.18	995.78	1039.83	1088.34	1137.40	1190.37	1243.34	1300.76	1358.75	1420.64	1451.30	1513.19	1566.71	1601.84	1645.89	1672.65
Western Health	Full	HMO C	397.43	432.76	446.27	459.77	474.32	488.87	503.93	519.52	519.52	519.52	519.52	521.60	531.99	544.46	564.72	581.34	589.65	602.12	614.59	622.38	630.70	634.85	639.01	643.16	647.32	655.63	663.94	676.41	688.36	704.99	725.77	750.18	779.28	812.01	849.41	886.30	927.86	968.90	1014.10	1059.82	1109.17	1158.53	1212.04	1266.07	1323.73	1352.31	1409.97	1459.85	1492.58	1533.62	1558.56
Western Health	Full	HMO D	382.67	416.69	429.69	442.70	456.70	470.71	485.22	500.22	500.22	500.22	500.22	502.22	512.23	524.23	543.74	559.75	567.75	579.76	591.76	599.27	607.27	611.27	615.27	619.28	623.28	631.28	639.28	651.29	662.79	678.80	698.81	722.32	750.33	781.85	817.86	853.38	893.40	932.91	976.43	1020.45	1067.97	1115.50	1167.02	1219.04	1274.57	1302.08	1357.60	1405.62	1437.14	1476.66	1500.66

Platinum		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																																																			
Anthem Blue Cross	Select HMO	HMO A	551.64	600.68	619.42	638.17	658.36	678.56	699.47	721.10	721.10	721.10	721.10	723.98	738.41	755.71	783.84	806.91	818.45	835.75	853.06	863.88	875.42	881.18	886.95	892.72	898.49	910.03	921.57	938.87	955.46	978.53	1007.38	1041.27	1081.65	1127.08	1179.00	1230.20	1287.88	1344.85	1407.59	1471.04	1539.55	1608.05	1682.33	1757.32	1837.36	1877.02	1957.07	2026.29	2071.72	2128.69	2163.30
Anthem Blue Cross	Vivity	HMO B	618.07	673.01	694.02	715.03	737.65	760.27	783.70	807.94	807.94	807.94	807.94	811.17	827.33	846.72	878.23	904.08	917.01	936.40	955.79	967.91	980.84	987.30	993.77	1000.23	1006.69	1019.62	1032.55	1051.94	1070.52	1096.37	1128.69	1166.67	1211.91	1262.81	1320.98	1378.35	1442.98	1506.81	1577.10	1648.20	1724.95	1801.71	1884.92	1968.95	2058.63	2103.07	2192.75	2270.31	2321.21	2385.04	2423.82
Anthem Blue Cross	Vivity	HMO C	605.20	658.99	679.56	700.13	722.28	744.43	767.38	791.11	791.11	791.11	791.11	794.27	810.10	829.08	859.94	885.25	897.91	916.90	935.88	947.75	960.41	966.74	973.07	979.39	985.72	998.38	1011.04	1030.03	1048.22	1073.54	1105.18	1142.36	1186.67	1236.50	1293.46	1349.63	1412.92	1475.42	1544.25	1613.86	1689.02	1764.18	1845.66	1927.94	2015.75	2059.26	2147.07	2223.02	2272.86	2335.36	2373.33
Anthem Blue Cross	CaliforniaCare HMO	HMO D	618.94	673.96	694.99	716.03	738.68	761.33	784.80	809.07	809.07	809.07	809.07	812.31	828.49	847.91	879.46	905.35	918.29	937.71	957.13	969.27	982.21	988.68	995.16	1001.63	1008.10	1021.05	1033.99	1053.41	1072.02	1097.91	1130.27	1168.30	1213.61	1264.58	1322.83	1380.27	1445.00	1508.92	1579.30	1650.50	1727.36	1804.23	1887.56	1971.70	2061.51	2106.01	2195.82	2273.49	2324.46	2388.37	2427.21
Anthem Blue Cross	Prudent Buyer - Small Group	PPO B	717.34	781.10	805.48	829.86	856.12	882.38	909.57	937.70	937.70	937.70	937.70	941.45	960.20	982.71	1019.28	1049.29	1064.29	1086.79	1109.30	1123.36	1138.37	1145.87	1153.37	1160.87	1168.37	1183.38	1198.38	1220.89	1242.45	1272.46	1309.97	1354.04	1406.55	1465.63	1533.14	1599.72	1674.73	1748.81	1830.39	1912.91	2001.99	2091.07	2187.65	2285.17	2389.26	2440.83	2544.92	2634.94	2694.01	2768.09	2813.10
Kaiser Permanente	Full	HMO A	525.07	570.47	587.83	605.19	623.89	628.31	647.68	667.71	667.71	667.71	667.71	670.38	683.73	699.76	725.80	747.16	757.85	773.87	789.90	799.91	810.60	815.94	821.28	826.62	831.96	842.65	853.33	869.35	884.71	906.08	932.79	964.17	1001.56	1043.63	1091.70	1139.11	1192.52	1245.27	1303.36	1362.12	1425.55	1488.99	1557.76	1627.20	1701.32	1738.04	1812.16	1876.26	1918.32	1971.07	2003.13
Kaiser Permanente	Full	HMO B	511.28	555.46	572.35	589.24	607.43	611.35	630.19	649.68	649.68	649.68	649.68	652.28	665.28	680.87	706.21	727.00	737.39	752.98	768.58	778.32	788.72	793.91	799.11	804.31	809.51	819.90	830.29	845.89	860.83	881.62	907.61	938.14	974.52	1015.45	1062.23	1108.36	1160.33	1211.66	1268.18	1325.35	1387.07	1448.79	1515.71	1583.28	1655.39	1691.12	1763.24	1825.61	1866.54	1917.86	1949.04
Kaiser Permanente	Full	HMO C	490.99	533.36	549.57	565.77	583.22	586.39	604.47	623.16	623.16	623.16	623.16	625.65	638.12	653.07	677.38	697.32	707.29	722.24	737.20	746.55	756.52	761.50	766.49	771.47	776.46	786.43	796.40	811.36	825.69	845.63	870.56	899.84	934.74	974.00	1018.87	1063.11	1112.97	1162.20	1216.41	1271.25	1330.45	1389.65	1453.84	1518.64	1587.81	1622.09	1691.26	1751.08	1790.34	1839.57	1869.48
Sharp Health Plan	Premier	HMO A	387.44	421.88	435.05	448.22	462.40	476.58	491.27	506.46	506.46	506.46	506.46	508.49	518.62	530.77	550.52	566.73	574.83	586.99	599.14	606.74	614.84	618.89	622.95	627.00	631.05	639.15	647.26	659.41	671.06	687.27	707.52	731.33	759.69	791.60	828.06	864.02	904.54	944.55	988.61	1033.18	1081.29	1129.41	1181.57	1234.24	1290.46	1318.32	1374.53	1423.15	1455.06	1495.07	1519.38
Sharp Health Plan	Performance	HMO B	415.31	452.23	466.34	480.46	495.66	510.86	526.60	542.89	542.89	542.89	542.89	545.06	555.92	568.95	590.12	607.49	616.18	629.21	642.24	650.38	659.07	663.41	667.75	672.10	676.44	685.13	693.81	706.84	719.33	736.70	758.42	783.93	814.34	848.54	887.63	926.17	969.60	1012.49	1059.72	1107.50	1159.07	1210.64	1266.56	1323.02	1383.28	1413.14	1473.40	1525.52	1559.72	1602.61	1628.67
Sharp Health Plan	Premier	HMO C	388.91	423.48	436.70	449.92	464.15	478.39	493.13	508.38	508.38	508.38	508.38	510.41	520.58	532.78	552.61	568.88	577.01	589.21	601.41	609.04	617.17	621.24	625.31	629.37	633.44	641.58	649.71	661.91	673.60	689.87	710.21	734.10	762.57	794.60	831.20	867.30	907.97	948.13	992.36	1037.10	1085.39	1133.69	1186.05	1238.92	1295.35	1323.31	1379.74	1428.55	1460.58	1500.74	1525.14
Sutter Health Plan	Sutter Health Plan	HMO A	795.18	865.86	892.88	919.91	949.01	978.12	1008.26	1039.45	1039.45	1039.45	1039.45	1043.60	1064.39	1089.34	1129.88	1163.14	1179.77	1204.72	1229.66	1245.25	1261.89	1270.20	1278.52	1286.83	1295.15	1311.78	1328.41	1353.36	1377.26	1410.53	1452.10	1500.96	1559.17	1624.65	1699.49	1773.29	1856.45	1938.56	2029.00	2120.47	2219.21	2317.96	2425.02	2533.13	2648.51	2705.67	2821.05	2920.84	2986.32	3068.44	3118.32
UnitedHealthcare	SignatureValue	HMO A	699.13	761.27	785.03	808.79	834.38	859.97	886.47	913.89	913.89	913.89	913.89	917.55	935.82	957.76	993.40	1022.64	1037.27	1059.20	1081.13	1094.84	1109.46	1116.77	1124.08	1131.40	1138.71	1153.33	1167.95	1189.88	1210.90	1240.15	1276.70	1319.66	1370.84	1428.41	1494.21	1559.10	1632.21	1704.40	1783.91	1864.34	1951.16	2037.97	2132.11	2227.15	2328.59	2378.86	2480.30	2568.03	2625.61	2697.80	2741.67
UnitedHealthcare	SignatureValue	HMO B	757.23	824.54	850.27	876.01	903.72	931.44	960.14	989.84	989.84	989.84	989.84	993.80	1013.60	1037.35	1075.96	1107.63	1123.47	1147.22	1170.98	1185.83	1201.67	1209.58	1217.50	1225.42	1233.34	1249.18	1265.02	1288.77	1311.54	1343.21	1382.81	1429.33	1484.76	1547.12	1618.39	1688.67	1767.85	1846.05	1932.17	2019.27	2113.31	2207.34	2309.30	2412.24	2522.11	2576.55	2686.43	2781.45	2843.81	2922.01	2969.52
UnitedHealthcare	SignatureValue	HMO D	726.69	791.28	815.98	840.68	867.28	893.87	921.42	949.92	949.92	949.92	949.92	953.72	972.72	995.52	1032.56	1062.96	1078.16	1100.96	1123.76	1138.00	1153.20	1160.80	1168.40	1176.00	1183.60	1198.80	1214.00	1236.80	1258.64	1289.04	1327.04	1371.68	1424.88	1484.72	1553.12	1620.56	1696.56	1771.60	1854.24	1937.84	2028.08	2118.32	2216.16	2314.96	2420.40	2472.64	2578.08	2669.28	2729.12	2804.16	2849.76
UnitedHealthcare	SignatureValue	HMO E	745.19	811.43	836.76	862.09	889.36	916.64	944.89	974.11	974.11	974.11	974.11	978.01	997.49	1020.87	1058.86	1090.03	1105.61	1128.99	1152.37	1166.98	1182.57	1190.36	1198.16	1205.95	1213.74	1229.33	1244.91	1268.29	1290.70	1321.87	1360.83	1406.61	1461.17	1522.53	1592.67	1661.83	1739.76	1816.72	1901.46	1987.18	2079.72	2172.27	2272.60	2373.91	2482.03	2535.61	2643.73	2737.25	2798.62	2875.57	2922.33
Western Health	Full	HMO B	464.61	505.91	521.70	537.49	554.49	571.50	589.11	607.33	607.33	607.33	607.33	609.76	621.91	636.48	660.17	679.60	689.32	703.90	718.47	727.58	737.30	742.16	747.02	751.88	756.73	766.45	776.17	790.75	804.71	824.15	848.44	876.99	911.00	949.26	992.99	1036.11	1084.69	1132.67	1185.51	1238.96	1296.65	1354.35	1416.90	1480.07	1547.48	1580.88	1648.30	1706.60	1744.86	1792.84	1821.99
Western Health	Full	HMO C	459.94	500.82	516.45	532.08	548.92	565.75	583.19	601.22	601.22	601.22	601.22	603.63	615.65	630.08	653.53	672.77	682.39	696.82	711.25	720.27	729.89	734.70	739.51	744.32	749.13	758.75	768.36	782.79	796.62	815.86	839.91	868.17	901.84	939.71	983.00	1025.69	1073.79	1121.28	1173.59	1226.50	1283.61	1340.73	1402.66	1465.18	1531.92	1564.99	1631.72	1689.44	1727.32	1774.81	1803.66
Western Health	Full	HMO D	434.40	473.01	487.78	502.54	518.44	534.34	550.81	567.84	567.84	567.84	567.84	570.11	581.47	595.10	617.24	635.42	644.50	658.13	671.76	680.28	689.36	693.90	698.45	702.99	707.53	716.62	725.70	739.33	752.39	770.56	793.28	819.96	851.76	887.54	928.42	968.74	1014.17	1059.03	1108.43	1158.40	1212.34	1266.29	1324.78	1383.83	1446.86	1478.09	1541.12	1595.64	1631.41	1676.27	1703.52

Health Care Service Plan rates will vary by county

THE INFORMATION PROVIDED HEREIN, INCLUDING THE RATING INFORMATION IS PROVIDED ON TO YOU ON AN “AS IS” “AS AVAILABLE” BASIS WITHOUT WARRANTY OF ANY KIND, EXPRESS OR IMPLIED. WE FURTHER DISCLAIM ALL LIABILITY RELATED TO THE INFORMATION, INCLUDING THOSE CAUSED BY RATING DISCREPANCIES. FINAL RATES AND RATING AREAS ARE BASED UPON ACTUAL ENROLLMENT AND UNDERWRITING AND MUST BE APPROVED BY THE APPLICABLE INSURANCE CARRIER.

USE EMPLOYER ZIP CODE FOR RATING | AREA 5 | 02/01/27 - 03/01/27

Bronze		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																																																	
Anthem Blue Cross	Prudent Buyer - Small Group	PPO A	476.75	519.13	535.33	551.53	568.98	586.43	604.50	623.20	623.20	623.20	623.20	625.69	638.16	653.11	677.42	697.36	707.33	722.29	737.25	746.59	756.56	761.55	766.54	771.52	776.51	786.48	796.45	811.41	825.74	845.68	870.61	899.90	934.80	974.06	1018.93	1063.18	1113.04	1162.27	1216.49	1271.33	1330.53	1389.74	1453.93	1518.74	1587.91	1622.19	1691.36	1751.19	1790.45	1839.69	1869.60
Anthem Blue Cross	Select PPO	PPO B	449.50	489.45	504.73	520.01	536.46	552.91	569.95	587.58	587.58	587.58	587.58	589.93	601.68	615.78	638.70	657.50	666.90	681.01	695.11	703.92	713.32	718.02	722.72	727.42	732.12	741.53	750.93	765.03	778.54	797.35	820.85	848.47	881.37	918.39	960.69	1002.41	1049.42	1095.84	1146.96	1198.66	1254.48	1310.30	1370.82	1431.93	1497.15	1529.47	1594.69	1651.10	1688.12	1734.54	1762.74
Anthem Blue Cross	Prudent Buyer - Small Group	PPO C	476.16	518.48	534.67	550.85	568.28	585.71	603.76	622.43	622.43	622.43	622.43	624.92	637.37	652.31	676.58	696.50	706.46	721.40	736.33	745.67	755.63	760.61	765.59	770.57	775.55	785.51	795.47	810.40	824.72	844.64	869.53	898.79	933.65	972.86	1017.67	1061.87	1111.66	1160.83	1214.98	1269.76	1328.89	1388.02	1452.13	1516.86	1585.95	1620.19	1689.28	1749.03	1788.24	1837.41	1867.29
Anthem Blue Cross	Select PPO	PPO D	448.91	488.81	504.07	519.33	535.76	552.19	569.21	586.81	586.81	586.81	586.81	589.16	600.89	614.98	637.86	656.64	666.03	680.11	694.20	703.00	712.39	717.08	721.78	726.47	731.17	740.55	749.94	764.03	777.52	796.30	819.77	847.35	880.22	917.18	959.43	1001.10	1048.04	1094.40	1145.45	1197.09	1252.84	1308.59	1369.03	1430.06	1495.19	1527.47	1592.60	1648.94	1685.91	1732.26	1760.43
Kaiser Permanente	Full	HMO A	327.98	355.87	366.53	377.19	388.67	385.89	397.78	410.08	410.08	410.08	410.08	411.72	419.92	429.76	445.76	458.88	465.44	475.28	485.13	491.28	497.84	501.12	504.40	507.68	510.96	517.52	524.08	533.93	543.36	556.48	572.88	592.16	615.12	640.96	670.48	699.60	732.40	764.80	800.48	836.56	875.52	914.48	956.72	999.37	1044.89	1067.44	1112.96	1152.33	1178.16	1210.56	1230.24
Kaiser Permanente	Full	HMO C	318.88	345.96	356.31	366.66	377.81	374.69	386.24	398.18	398.18	398.18	398.18	399.78	407.74	417.30	432.83	445.57	451.94	461.50	471.05	477.02	483.40	486.58	489.77	492.95	496.14	502.51	508.88	518.44	527.59	540.34	556.26	574.98	597.28	622.36	651.03	679.30	711.16	742.61	777.26	812.30	850.12	887.95	928.96	970.37	1014.57	1036.47	1080.67	1118.90	1143.98	1175.44	1194.54
Sharp Health Plan	Premier	HMO A	272.80	297.05	306.32	315.59	325.58	335.56	345.90	356.60	356.60	356.60	356.60	358.03	365.16	373.72	387.62	399.04	404.74	413.30	421.86	427.21	432.91	435.77	438.62	441.47	444.32	450.03	455.73	464.29	472.50	483.91	498.17	514.93	534.90	557.37	583.04	608.36	636.89	665.06	696.08	727.46	761.34	795.22	831.95	869.03	908.62	928.23	967.81	1002.05	1024.51	1052.68	1069.80
Sharp Health Plan	Performance	HMO B	291.24	317.12	327.02	336.92	347.58	358.24	369.28	380.70	380.70	380.70	380.70	382.22	389.84	398.97	413.82	426.00	432.09	441.23	450.37	456.08	462.17	465.22	468.26	471.31	474.35	480.44	486.53	495.67	504.43	516.61	531.84	549.73	571.05	595.03	622.44	649.47	679.93	710.01	743.13	776.63	812.79	848.96	888.17	927.77	970.02	990.96	1033.22	1069.77	1093.75	1123.83	1142.10
Sutter Health Plan	Sutter Health Plan	HMO A	429.57	467.76	482.36	496.96	512.68	528.40	544.69	561.54	561.54	561.54	561.54	563.78	575.01	588.49	610.39	628.35	637.34	650.82	664.29	672.72	681.70	686.19	690.69	695.18	699.67	708.65	717.64	731.12	744.03	762.00	784.46	810.85	842.30	877.68	918.11	957.97	1002.90	1047.26	1096.11	1145.53	1198.87	1252.22	1310.06	1368.45	1430.78	1461.67	1524.00	1577.91	1613.28	1657.64	1684.59
Sutter Health Plan	Sutter Health Plan	HMO B	429.78	467.99	482.59	497.20	512.93	528.66	544.96	561.82	561.82	561.82	561.82	564.06	575.29	588.78	610.69	628.67	637.65	651.14	664.62	673.05	682.04	686.53	691.03	695.52	700.02	709.00	717.99	731.48	744.40	762.38	784.85	811.25	842.71	878.11	918.56	958.45	1003.39	1047.78	1096.65	1146.09	1199.46	1252.84	1310.70	1369.13	1431.49	1462.39	1524.75	1578.69	1614.08	1658.46	1685.42
Western Health	Full	HMO B	316.71	344.87	355.63	366.39	377.99	389.58	401.59	414.01	414.01	414.01	414.01	415.66	423.94	433.88	450.02	463.27	469.90	479.83	489.77	495.98	502.60	505.91	509.23	512.54	515.85	522.47	529.10	539.03	548.56	561.81	578.37	597.82	621.01	647.09	676.90	706.29	739.41	772.12	808.14	844.57	883.90	923.23	965.87	1008.93	1054.89	1077.66	1123.61	1163.36	1189.44	1222.14	1242.02
Western Health	Full	HMO C	330.55	359.93	371.17	382.40	394.50	406.60	419.13	432.09	432.09	432.09	432.09	433.82	442.46	452.83	469.68	483.51	490.42	500.79	511.16	517.64	524.56	528.01	531.47	534.93	538.38	545.30	552.21	562.58	572.52	586.35	603.63	623.94	648.13	675.36	706.47	737.15	771.71	805.85	843.44	881.46	922.51	963.56	1008.07	1053.00	1100.97	1124.73	1172.69	1214.17	1241.39	1275.53	1296.27

Silver		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																																																	
Anthem Blue Cross	Select HMO	HMO A	436.82	475.64	490.49	505.34	521.32	537.31	553.87	571.00	571.00	571.00	571.00	573.28	584.70	598.41	620.68	638.95	648.09	661.79	675.49	684.06	693.19	697.76	702.33	706.90	711.47	720.60	729.74	743.44	756.58	774.85	797.69	824.52	856.50	892.47	933.59	974.13	1019.81	1064.92	1114.59	1164.84	1219.09	1273.33	1332.14	1391.53	1454.91	1486.31	1549.69	1604.51	1640.48	1685.59	1713.00
Anthem Blue Cross	CaliforniaCare HMO	HMO B	457.62	498.29	513.85	529.40	546.15	562.90	580.24	598.19	598.19	598.19	598.19	600.58	612.55	626.90	650.23	669.37	678.95	693.30	707.66	716.63	726.20	730.99	735.77	740.56	745.34	754.92	764.49	778.84	792.60	811.74	835.67	863.79	897.29	934.97	978.04	1020.51	1068.37	1115.62	1167.67	1220.31	1277.14	1333.96	1395.58	1457.79	1524.19	1557.09	1623.49	1680.91	1718.60	1765.86	1794.57
Anthem Blue Cross	CaliforniaCare HMO	HMO D	457.03	497.65	513.18	528.72	545.44	562.17	579.50	597.42	597.42	597.42	597.42	599.81	611.76	626.10	649.40	668.51	678.07	692.41	706.75	715.71	725.27	730.05	734.83	739.61	744.39	753.94	763.50	777.84	791.58	810.70	834.60	862.67	896.13	933.77	976.78	1019.20	1066.99	1114.19	1166.16	1218.74	1275.49	1332.25	1393.78	1455.91	1522.23	1555.08	1621.40	1678.75	1716.39	1763.58	1792.26
Anthem Blue Cross	Select PPO	PPO B	484.81	527.91	544.38	560.86	578.60	596.35	614.73	633.74	633.74	633.74	633.74	636.27	648.95	664.16	688.88	709.16	719.29	734.50	749.71	759.22	769.36	774.43	779.50	784.57	789.64	799.78	809.92	825.13	839.71	859.99	885.33	915.12	950.61	990.54	1036.16	1081.16	1131.86	1181.93	1237.06	1292.83	1353.03	1413.24	1478.52	1544.42	1614.77	1649.63	1719.97	1780.81	1820.74	1870.80	1901.22
Anthem Blue Cross	Prudent Buyer - Small Group	PPO C	514.21	559.92	577.39	594.87	613.69	632.51	652.00	672.17	672.17	672.17	672.17	674.86	688.30	704.43	730.65	752.16	762.91	779.05	795.18	805.26	816.01	821.39	826.77	832.15	837.52	848.28	859.03	875.17	890.63	912.13	939.02	970.61	1008.26	1050.60	1099.00	1146.72	1200.50	1253.60	1312.08	1371.23	1435.08	1498.94	1568.17	1638.08	1712.69	1749.66	1824.27	1888.80	1931.14	1984.25	2016.51
Anthem Blue Cross	Prudent Buyer - Small Group	PPO D	498.57	542.89	559.84	576.78	595.03	613.28	632.18	651.73	651.73	651.73	651.73	654.34	667.37	683.01	708.43	729.29	739.71	755.36	771.00	780.77	791.20	796.41	801.63	806.84	812.06	822.48	832.91	848.55	863.54	884.40	910.47	941.10	977.60	1018.65	1065.58	1111.85	1163.99	1215.48	1272.18	1329.53	1391.44	1453.36	1520.49	1588.27	1660.61	1696.45	1768.80	1831.36	1872.42	1923.91	1955.19
Anthem Blue Cross	Select PPO	PPO E	470.08	511.87	527.85	543.82	561.03	578.24	596.06	614.49	614.49	614.49	614.49	616.95	629.24	643.99	667.95	687.61	697.45	712.19	726.94	736.16	745.99	750.91	755.82	760.74	765.65	775.49	785.32	800.07	814.20	833.86	858.44	887.32	921.74	960.45	1004.69	1048.32	1097.48	1146.02	1199.48	1253.56	1311.94	1370.31	1433.61	1497.51	1565.72	1599.52	1667.73	1726.72	1765.43	1813.97	1843.47
Anthem Blue Cross	Prudent Buyer - Small Group	PPO F	516.36	562.26	579.81	597.36	616.26	635.16	654.73	674.98	674.98	674.98	674.98	677.68	691.18	707.38	733.70	755.30	766.10	782.30	798.50	808.63	819.43	824.83	830.23	835.63	841.03	851.82	862.62	878.82	894.35	915.95	942.95	974.67	1012.47	1054.99	1103.59	1151.52	1205.51	1258.84	1317.56	1376.96	1441.08	1505.21	1574.73	1644.93	1719.85	1756.97	1831.90	1896.69	1939.22	1992.54	2024.94
Kaiser Permanente	Full	HMO A	357.70	388.23	399.90	411.58	424.15	422.45	435.46	448.93	448.93	448.93	448.93	450.73	459.71	470.48	487.99	502.36	509.54	520.31	531.09	537.82	545.00	548.60	552.19	555.78	559.37	566.55	573.74	584.51	594.84	609.20	627.16	648.26	673.40	701.68	734.01	765.88	801.79	837.26	876.32	915.82	958.47	1001.12	1047.36	1094.05	1143.88	1168.57	1218.40	1261.50	1289.78	1325.25	1346.79
Kaiser Permanente	Full	HMO B	362.43	393.38	405.21	417.05	429.79	428.26	441.46	455.11	455.11	455.11	455.11	456.93	466.04	476.96	494.71	509.27	516.55	527.48	538.40	545.23	552.51	556.15	559.79	563.43	567.07	574.35	581.63	592.56	603.02	617.59	635.79	657.18	682.67	711.34	744.11	776.42	812.83	848.79	888.38	928.43	971.67	1014.90	1061.78	1109.11	1159.63	1184.66	1235.18	1278.87	1307.54	1343.49	1365.33
Kaiser Permanente	Full	HMO C	359.85	390.57	402.31	414.06	426.71	425.09	438.19	451.74	451.74	451.74	451.74	453.55	462.58	473.42	491.04	505.50	512.72	523.57	534.41	541.18	548.41	552.02	555.64	559.25	562.87	570.09	577.32	588.16	598.55	613.01	631.08	652.31	677.61	706.07	738.59	770.67	806.81	842.49	881.79	921.55	964.46	1007.38	1053.91	1100.89	1151.03	1175.88	1226.02	1269.39	1297.85	1333.53	1355.22
Kaiser Permanente	Full	HMO D	330.55	358.67	369.42	380.17	391.74	389.05	401.04	413.44	413.44	413.44	413.44	415.09	423.36	433.29	449.41	462.64	469.26	479.18	489.10	495.30	501.92	505.22	508.53	511.84	515.15	521.76	528.38	538.30	547.81	561.04	577.58	597.01	620.16	646.21	675.98	705.33	738.41	771.07	807.04	843.42	882.70	921.97	964.56	1007.56	1053.45	1076.19	1122.08	1161.77	1187.82	1220.48	1240.32
Kaiser Permanente	Full	HMO E	344.68	374.05	385.28	396.51	408.60	406.42	418.95	431.90	431.90	431.90	431.90	433.63	442.27	452.64	469.48	483.30	490.21	500.58	510.94	517.42	524.33	527.79	531.24	534.70	538.15	545.06	551.97	562.34	572.27	586.09	603.37	623.67	647.86	675.07	706.16	736.83	771.38	805.50	843.08	881.09	922.12	963.15	1007.63	1052.55	1100.49	1124.25	1172.19	1213.65	1240.86	1274.98	1295.70
Sharp Health Plan	Premier	HMO A	285.29	310.65	320.35	330.04	340.49	350.93	361.74	372.93	372.93	372.93	372.93	374.42	381.88	390.83	405.37	417.31	423.28	432.23	441.18	446.77	452.74	455.72	458.70	461.69	464.67	470.64	476.60	485.55	494.13	506.07	520.98	538.51	559.40	582.89	609.74	636.22	666.05	695.51	727.96	760.78	796.21	831.63	870.05	908.83	950.23	970.74	1012.13	1047.93	1071.43	1100.89	1118.79
Sharp Health Plan	Performance	HMO B	294.75	320.95	330.96	340.98	351.77	362.56	373.73	385.29	385.29	385.29	385.29	386.83	394.54	403.78	418.81	431.14	437.30	446.55	455.80	461.58	467.74	470.82	473.91	476.99	480.07	486.24	492.40	501.65	510.51	522.84	538.25	556.36	577.94	602.21	629.95	657.30	688.13	718.57	752.09	785.99	822.59	859.20	898.88	938.95	981.72	1002.91	1045.68	1082.66	1106.94	1137.38	1155.87
Sharp Health Plan	Premier	HMO C	268.76	292.65	301.78	310.92	320.76	330.59	340.78	351.32	351.32	351.32	351.32	352.73	359.75	368.18	381.88	393.13	398.75	407.18	415.61	420.88	426.50	429.31	432.12	434.93	437.74	443.37	448.99	457.42	465.50	476.74	490.79	507.31	526.98	549.11	574.41	599.35	627.46	655.21	685.78	716.69	750.07	783.44	819.63	856.17	895.16	914.49	953.48	987.21	1009.34	1037.10	1053.96
Sutter Health Plan	Sutter Health Plan	HMO B	525.13	571.81	589.66	607.51	626.73	645.95	665.86	686.46	686.46	686.46	686.46	689.19	702.92	719.40	746.17	768.14	779.12	795.59	812.07	822.37	833.35	838.84	844.33	849.82	855.32	866.30	877.28	893.76	909.54	931.51	958.97	991.23	1029.67	1072.92	1122.34	1171.08	1226.00	1280.23	1339.95	1400.36	1465.57	1530.78	1601.49	1672.88	1749.07	1786.83	1863.02	1928.92	1972.17	2026.40	2059.34
Sutter Health Plan	Sutter Health Plan	HMO C	454.82	495.25	510.71	526.17	542.81	559.46	576.70	594.55	594.55	594.55	594.55	596.92	608.81	623.08	646.26	665.29	674.80	689.07	703.34	712.26	721.77	726.53	731.28	736.04	740.80	750.31	759.82	774.09	787.77	806.79	830.57	858.52	891.81	929.27	972.07	1014.28	1061.85	1108.82	1160.54	1212.86	1269.34	1325.82	1387.06	1448.89	1514.89	1547.59	1613.58	1670.66	1708.11	1755.08	1783.61
UnitedHealthcare	SignatureValue	HMO A	556.44	605.90	624.81	643.72	664.09	684.46	705.55	727.37	727.37	727.37	727.37	730.28	744.83	762.28	790.65	813.93	825.56	843.02	860.48	871.39	883.03	888.85	894.67	900.48	906.30	917.94	929.58	947.04	963.77	987.04	1016.14	1050.32	1091.06	1136.88	1189.25	1240.89	1299.08	1356.55	1419.83	1483.83	1552.93	1622.04	1696.95	1772.60	1853.34	1893.34	1974.08	2043.91	2089.73	2147.20	2182.11
Western Health	Full	HMO B	362.81	395.06	407.40	419.73	433.01	446.29	460.04	474.27	474.27	474.27	474.27	476.16	485.65	497.03	515.53	530.71	538.29	549.68	561.06	568.17	575.76	579.56	583.35	587.14	590.94	598.53	606.11	617.50	628.40	643.58	662.55	684.84	711.40	741.28	775.43	809.10	847.04	884.51	925.77	967.51	1012.56	1057.62	1106.47	1155.79	1208.43	1234.52	1287.16	1332.69	1362.57	1400.04	1422.80
Western Health	Full	HMO C	342.86	373.34	384.99	396.64	409.19	421.74	434.74	448.18	448.18	448.18	448.18	449.98	458.94	469.70	487.18	501.52	508.69	519.45	530.20	536.93	544.10	547.68	551.27	554.85	558.44	565.61	572.78	583.54	593.84	608.19	626.11	647.18	672.28	700.51	732.78	764.60	800.46	835.86	874.86	914.30	956.87	999.45	1045.62	1092.23	1141.97	1166.63	1216.37	1259.40	1287.64	1323.04	1344.54
Western Health	Full	HMO D	330.78	360.19	371.43	382.67	394.78	406.88	419.42	432.40	432.40	432.40	432.40	434.12	442.77	453.15	470.01	483.85	490.77	501.15	511.52	518.01	524.93	528.39	531.85	535.31	538.76	545.68	552.60	562.98	572.92	586.76	604.06	624.38	648.59	675.83	706.97	737.67	772.26	806.42	844.04	882.09	923.16	964.24	1008.78	1053.75	1101.74	1125.52	1173.52	1215.03	1242.27	1276.43	1297.19

Health Care Service Plan rates will vary by county

THE INFORMATION PROVIDED HEREIN, INCLUDING THE RATING INFORMATION IS PROVIDED ON TO YOU ON AN "AS IS" "AS AVAILABLE" BASIS WITHOUT WARRANTY OF ANY KIND, EXPRESS OR IMPLIED. WE FURTHER DISCLAIM ALL LIABILITY RELATED TO THE INFORMATION, INCLUDING THOSE CAUSED BY RATING DISCREPANCIES. FINAL RATES AND RATING AREAS ARE BASED UPON ACTUAL ENROLLMENT AND UNDERWRITING AND MUST BE APPROVED BY THE APPLICABLE INSURANCE CARRIER.

Continued

Gold		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24
CARRIER	NETWORK	PLAN											
Anthem Blue Cross	Select HMO	HMO A	560.00	609.78	628.81	647.85	668.34	688.84	710.07	732.03	732.03	732.03	732.03
Anthem Blue Cross	CaliforniaCare HMO	HMO B	586.72	638.87	658.81	678.75	700.23	721.70	743.94	766.95	766.95	766.95	766.95
Anthem Blue Cross	Priority Select HMO	HMO C	387.90	422.38	435.56	448.75	462.95	477.14	491.85	507.06	507.06	507.06	507.06
Anthem Blue Cross	Select PPO	PPO B	573.93	624.94	644.45	663.95	684.96	705.97	727.72	750.23	750.23	750.23	750.23
Anthem Blue Cross	Select PPO	PPO C	592.15	644.78	664.91	685.03	706.71	728.38	750.83	774.05	774.05	774.05	774.05
Anthem Blue Cross	Select PPO	PPO D	569.73	620.38	639.74	659.10	679.96	700.81	722.41	744.75	744.75	744.75	744.75
Anthem Blue Cross	Prudent Buyer - Small Group	PPO E	628.10	683.93	705.28	726.63	749.62	772.61	796.42	821.05	821.05	821.05	821.05
Anthem Blue Cross	Prudent Buyer - Small Group	PPO H	604.35	658.07	678.61	699.15	721.27	743.39	766.30	790.00	790.00	790.00	790.00
Anthem Blue Cross	Prudent Buyer - Small Group	PPO I	613.27	667.78	688.63	709.47	731.92	754.36	777.61	801.66	801.66	801.66	801.66
Kaiser Permanente	Full	HMO B	430.15	467.12	481.26	495.39	510.61	511.56	527.33	543.64	543.64	543.64	543.64
Kaiser Permanente	Full	HMO C	442.58	480.66	495.21	509.77	525.45	526.85	543.09	559.89	559.89	559.89	559.89
Kaiser Permanente	Full	HMO D	417.81	453.68	467.39	481.11	495.88	496.38	511.67	527.50	527.50	527.50	527.50
Kaiser Permanente	Full	HMO E	373.58	405.52	417.73	429.94	443.09	441.97	455.59	469.68	469.68	469.68	469.68
Kaiser Permanente	Full	HMO F	426.56	463.21	477.22	491.23	506.32	507.15	522.77	538.94	538.94	538.94	538.94
Sharp Health Plan	Performance	HMO A	366.15	398.70	411.14	423.59	436.99	450.39	464.27	478.63	478.63	478.63	478.63
Sharp Health Plan	Premier	HMO B	345.92	376.67	388.42	400.18	412.84	425.50	438.61	452.18	452.18	452.18	452.18
Sharp Health Plan	Performance	HMO D	377.08	410.59	423.41	436.23	450.03	463.83	478.12	492.91	492.91	492.91	492.91
Sutter Health Plan	Sutter Health Plan	HMO A	575.28	626.42	645.97	665.52	686.57	707.63	729.44	752.01	752.01	752.01	752.01
Sutter Health Plan	Sutter Health Plan	HMO B	617.05	671.89	692.87	713.84	736.42	759.01	782.40	806.61	806.61	806.61	806.61
Sutter Health Plan	Sutter Health Plan	HMO C	524.26	570.86	588.67	606.49	625.68	644.87	664.74	685.31	685.31	685.31	685.31
UnitedHealthcare	SignatureValue	HMO A	609.21	663.36	684.06	704.77	727.07	749.37	772.46	796.35	796.35	796.35	796.35
UnitedHealthcare	SignatureValue	HMO C	652.22	710.19	732.36	754.52	778.40	802.27	826.99	852.57	852.57	852.57	852.57
UnitedHealthcare	SignatureValue	HMO F	674.62	734.58	757.51	780.44	805.13	829.82	855.39	881.85	881.85	881.85	881.85
UnitedHealthcare	SignatureValue	HMO H	632.20	688.40	709.89	731.37	754.51	777.65	801.62	826.41	826.41	826.41	826.41
Western Health	Full	HMO A	406.47	442.60	456.41	470.23	485.10	499.98	515.39	531.33	531.33	531.33	531.33
Western Health	Full	HMO B	426.53	464.44	478.93	493.43	509.04	524.65	540.82	557.55	557.55	557.55	557.55
Western Health	Full	HMO C	397.43	432.76	446.27	459.77	474.32	488.87	503.93	519.52	519.52	519.52	519.52
Western Health	Full	HMO D	382.67	416.69	429.69	442.70	456.70	470.71	485.22	500.22	500.22	500.22	500.22

Gold		AGE -->	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45
CARRIER	NETWORK	PLAN																					
Anthem Blue Cross	Select HMO	HMO A	734.96	749.60	767.17	795.72	819.14	830.85	848.42	865.99	876.97	888.68	894.54	900.40	906.25	912.11	923.82	935.53	953.10	969.94	993.36	1022.65	1057.05
Anthem Blue Cross	CaliforniaCare HMO	HMO B	770.02	785.36	803.76	833.67	858.22	870.49	888.90	907.30	918.81	931.08	937.21	943.35	949.48	955.62	967.89	980.16	998.57	1016.21	1040.75	1071.43	1107.48
Anthem Blue Cross	Priority Select HMO	HMO C	509.09	519.23	531.40	551.17	567.40	575.51	587.68	599.85	607.46	615.57	619.63	623.68	627.74	631.80	639.91	648.02	660.19	671.85	688.08	708.36	732.19
Anthem Blue Cross	Select PPO	PPO B	753.23	768.24	786.24	815.50	839.51	851.51	869.52	887.52	898.78	910.78	916.78	922.78	928.78	934.79	946.79	958.79	976.80	994.05	1018.06	1048.07	1083.33
Anthem Blue Cross	Select PPO	PPO C	777.15	792.63	811.20	841.39	866.16	878.55	897.12	915.70	927.31	939.70	945.89	952.08	958.27	964.47	976.85	989.24	1007.81	1025.62	1050.39	1081.35	1117.73
Anthem Blue Cross	Select PPO	PPO D	747.73	762.62	780.50	809.54	833.38	845.29	863.17	881.04	892.21	904.13	910.08	916.04	922.00	927.96	939.87	951.79	969.66	986.79	1010.63	1040.42	1075.42
Anthem Blue Cross	Prudent Buyer - Small Group	PPO E	824.33	840.76	860.46	892.48	918.75	931.89	951.60	971.30	983.62	996.75	1003.32	1009.89	1016.46	1023.03	1036.17	1049.30	1069.01	1087.89	1114.16	1147.01	1185.60
Anthem Blue Cross	Prudent Buyer - Small Group	PPO H	793.16	808.96	827.92	858.73	884.01	896.65	915.61	934.57	946.42	959.06	965.38	971.70	978.02	984.34	996.98	1009.62	1028.58	1046.75	1072.03	1103.63	1140.76
Anthem Blue Cross	Prudent Buyer - Small Group	PPO I	804.87	820.90	840.14	871.40	897.06	909.88	929.12	948.36	960.39	973.22	979.63	986.04	992.46	998.87	1011.69	1024.52	1043.76	1062.20	1087.85	1119.92	1157.60
Kaiser Permanente	Full	HMO B	545.81	556.69	569.73	590.94	608.33	617.03	630.08	643.12	651.28	659.98	664.33	668.68	673.02	677.37	686.07	694.77	707.82	720.32	737.72	759.46	785.01
Kaiser Permanente	Full	HMO C	562.13	573.32	586.76	608.60	626.51	635.47	648.91	662.35	670.74	679.70	684.18	688.66	693.14	697.62	706.58	715.53	728.97	741.85	759.77	782.16	808.48
Kaiser Permanente	Full	HMO D	529.61	540.16	552.82	573.39	590.27	598.71	611.37	624.03	631.94	640.38	644.60	648.82	653.04	657.26	665.70	674.14	686.80	698.93	715.81	736.91	761.71
Kaiser Permanente	Full	HMO E	471.56	480.96	492.23	510.55	525.58	533.09	544.36	555.64	562.68	570.20	573.95	577.71	581.47	585.23	592.74	600.26	611.53	622.33	637.36	656.15	678.22
Kaiser Permanente	Full	HMO F	541.10	551.88	564.81	585.83	603.08	611.70	624.63	637.57	645.65	654.28	658.59	662.90	667.21	671.52	680.15	688.77	701.70	714.10	731.35	752.90	778.23
Sharp Health Plan	Performance	HMO A	480.54	490.12	501.60	520.27	535.59	543.25	554.73	566.22	573.40	581.06	584.89	588.71	592.54	596.37	604.03	611.69	623.18	634.18	649.50	668.65	691.14
Sharp Health Plan	Premier	HMO B	453.99	463.03	473.88	491.52	505.99	513.22	524.08	534.93	541.71	548.95	552.56	556.18	559.80	563.42	570.65	577.89	588.74	599.14	613.61	631.70	652.95
Sharp Health Plan	Performance	HMO D	494.88	504.74	516.57	535.79	551.57	559.45	571.28	583.11	590.51	598.39	602.34	606.28	610.22	614.17	622.05	629.94	641.77	653.11	668.88	688.60	711.76
Sutter Health Plan	Sutter Health Plan	HMO A	755.01	770.05	788.09	817.42	841.49	853.52	871.57	889.61	900.89	912.93	918.94	924.96	930.97	936.99	949.02	961.05	979.10	996.40	1020.46	1050.54	1085.89
Sutter Health Plan	Sutter Health Plan	HMO B	809.82	825.95	845.31	876.77	902.58	915.49	934.85	954.20	966.30	979.21	985.66	992.11	998.57	1005.02	1017.92	1030.83	1050.19	1068.74	1094.55	1126.82	1164.73
Sutter Health Plan	Sutter Health Plan	HMO C	688.04	701.75	718.20	744.92	766.85	777.82	794.26	810.71	820.99	831.96	837.44	842.92	848.40	853.89	864.85	875.82	892.26	908.02	929.95	957.37	989.58
UnitedHealthcare	SignatureValue	HMO A	799.54	815.46	834.57	865.63	891.12	903.86	922.97	942.08	954.03	966.77	973.14	979.51	985.88	992.25	1004.99	1017.74	1036.85	1055.16	1080.65	1112.50	1149.93
UnitedHealthcare	SignatureValue	HMO C	855.98	873.03	893.49	926.74	954.03	967.67	988.13	1008.59	1021.38	1035.02	1041.84	1048.66	1055.48	1062.30	1075.94	1089.58	1110.05	1129.66	1156.94	1191.04	1231.11
UnitedHealthcare	SignatureValue	HMO F	885.38	903.01	924.18	958.57	986.79	1000.90	1022.06	1043.23	1056.46	1070.57	1077.62	1084.68	1091.73	1098.79	1112.89	1127.00	1148.17	1168.45	1196.67	1231.94	1273.39
UnitedHealthcare	SignatureValue	HMO H	829.72	846.24	866.08	898.31	924.75	937.98	957.81	977.64	990.04	1003.26	1009.87	1016.48	1023.10	1029.71	1042.93	1056.15	1075.99	1094.99	1121.44	1154.49	1193.34
Western Health	Full	HMO A	533.45	544.08	556.83	577.55	594.56	603.06	615.81	628.56	636.53	645.03	649.28	653.53	657.78	662.04	670.54	679.04	691.79	704.01	721.01	742.27	767.24
Western Health	Full	HMO B	559.78	570.93	584.31	606.06	623.90	632.82	646.20	659.58	667.94	676.86	681.33	685.79	690.25	694.71	703.63	712.55	725.93	738.75	756.59	778.90	805.10
Western Health	Full	HMO C	521.60	531.99	544.46	564.72	581.34	589.65	602.12	614.59	622.38	630.70	634.85	639.01	643.16	647.32	655.63	663.94	676.41	688.36	704.99	725.77	750.18
Western Health	Full	HMO D	502.22	512.23	524.23	543.74	559.75	567.75	579.76	591.76	599.27	607.27	611.27	615.27	619.28	623.28	631.28	639.28	651.29	662.79	678.80	698.81	722.32

Gold		AGE -->	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																			
Anthem Blue Cross	Select HMO	HMO A	1098.05	1144.16	1196.87	1248.84	1307.41	1365.24	1428.92	1493.34	1562.88	1632.43	1707.83	1783.96	1865.21	1905.47	1986.73	2057.00	2103.12	2160.95	2196.09
Anthem Blue Cross	CaliforniaCare HMO	HMO B	1150.43	1198.74	1253.96	1308.42	1369.77	1430.36	1497.09	1564.58	1637.44	1710.30	1789.29	1869.06	1954.19	1996.37	2081.50	2155.13	2203.45	2264.04	2300.85
Anthem Blue Cross	Priority Select HMO	HMO C	760.59	792.53	829.04	865.04	905.61	945.67	989.78	1034.40	1082.57	1130.74	1182.97	1235.71	1291.99	1319.88	1376.16	1424.84	1456.78	1496.84	1521.18
Anthem Blue Cross	Select PPO	PPO B	1125.35	1172.61	1226.63	1279.89	1339.91	1399.18	1464.45	1530.47	1601.74	1673.01	1750.29	1828.31	1911.59	1952.85	2036.12	2108.15	2155.41	2214.68	2250.69
Anthem Blue Cross	Select PPO	PPO C	1161.08	1209.84	1265.57	1320.53	1382.45	1443.60	1510.95	1579.06	1652.60	1726.13	1805.86	1886.36	1972.28	2014.85	2100.77	2175.08	2223.85	2285.00	2322.15
Anthem Blue Cross	Select PPO	PPO D	1117.13	1164.04	1217.67	1270.54	1330.12	1388.96	1453.75	1519.29	1590.04	1660.79	1737.50	1814.96	1897.62	1938.58	2021.25	2092.75	2139.67	2198.50	2234.25
Anthem Blue Cross	Prudent Buyer - Small Group	PPO E	1231.58	1283.30	1342.42	1400.71	1466.40	1531.26	1602.69	1674.94	1752.94	1830.94	1915.51	2000.90	2092.04	2137.19	2228.33	2307.15	2358.88	2423.74	2463.15
Anthem Blue Cross	Prudent Buyer - Small Group	PPO H	1185.00	1234.77	1291.65	1347.74	1410.94	1473.35	1542.08	1611.60	1686.65	1761.70	1843.07	1925.23	2012.92	2056.37	2144.06	2219.90	2269.67	2332.08	2370.00
Anthem Blue Cross	Prudent Buyer - Small Group	PPO I	1202.49	1252.99	1310.71	1367.63	1431.76	1495.10	1564.84	1635.39	1711.54	1787.70	1870.27	1953.65	2042.63	2086.72	2175.71	2252.66	2303.17	2366.50	2404.98
Kaiser Permanente	Full	HMO B	815.46	849.71	888.85	927.45	970.94	1013.89	1061.18	1109.02	1160.67	1212.31	1268.31	1324.85	1385.19	1415.09	1475.44	1527.62	1561.87	1604.82	1630.92
Kaiser Permanente	Full	HMO C	839.83	875.10	915.41	955.17	999.96	1044.19	1092.90	1142.17	1195.36	1248.55	1306.21	1364.44	1426.59	1457.38	1519.53	1573.28	1608.55	1652.78	1679.67
Kaiser Permanente	Full	HMO D	791.25	824.48	862.46	899.91	942.11	983.78	1029.68	1076.10	1126.21	1176.32	1230.65	1285.51	1344.06	1373.08	1431.63	1482.27	1515.50	1557.17	1582.50
Kaiser Permanente	Full	HMO E	704.53	734.12	767.93	801.28	838.86	875.96	916.82	958.16	1002.78	1047.40	1095.77	1144.62	1196.76	1222.59	1274.72	1319.81	1349.40	1386.51	1409.04
Kaiser Permanente	Full	HMO F	808.41	842.37	881.17	919.44	962.55	1005.13	1052.02	1099.44	1150.64	1201.84	1257.35	1313.40	1373.23	1402.87	1462.69	1514.43	1548.38	1590.96	1616.82
Sharp Health Plan	Performance	HMO A	717.95	748.10	782.56	816.54	854.83	892.64	934.29	976.41	1021.88	1067.34	1116.64	1166.42	1219.55	1245.87	1299.00	1344.95	1375.10	1412.92	1435.89
Sharp Health Plan	Premier	HMO B	678.27	706.76	739.31	771.42	807.59	843.32	882.66	922.45	965.40	1008.36	1054.94	1101.96	1152.15	1177.02	1227.22	1270.63	1299.11	1334.84	1356.54
Sharp Health Plan	Performance	HMO D	739.37	770.42	805.91	840.90	880.34	919.28	962.16	1005.54	1052.36	1099.19	1149.96	1201.22	1255.93	1283.04	1337.76	1385.08	1416.13	1455.07	1478.73
Sutter Health Plan	Sutter Health Plan	HMO A	1128.00	1175.37	1229.52	1282.91	1343.07	1402.48	1467.90	1534.08	1605.52	1676.96	1754.41	1832.62	1916.09	1957.45	2040.92	2113.12	2160.49	2219.90	2255.99
Sutter Health Plan	Sutter Health Plan	HMO B	1209.89	1260.71	1318.79	1376.05	1440.58	1504.30	1574.48	1645.46	1722.08	1798.71	1881.79	1965.68	2055.21	2099.57	2189.10	2266.54	2317.35	2381.07	2419.78
Sutter Health Plan	Sutter Health Plan	HMO C	1027.95	1071.13	1120.47	1169.12	1223.95	1278.09	1337.71	1398.02	1463.12	1528.22	1598.81	1670.08	1746.15	1783.84	1859.91	1925.70	1968.87	2023.01	2055.89
UnitedHealthcare	SignatureValue	HMO A	1194.53	1244.70	1302.03	1358.57	1422.28	1485.19	1554.48	1624.55	1700.21	1775.86	1857.88	1940.70	2029.10	2072.90	2161.29	2237.74	2287.91	2350.83	2389.05
UnitedHealthcare	SignatureValue	HMO C	1278.86	1332.57	1393.95	1454.48	1522.69	1590.04	1664.22	1739.24	1820.24	1901.23	1989.05	2077.71	2172.35	2219.24	2313.87	2395.72	2449.43	2516.79	2557.71
UnitedHealthcare	SignatureValue	HMO F	1322.78	1378.33	1441.82	1504.44	1574.98	1644.65	1721.37	1798.97	1882.75	1966.53	2057.36	2149.07	2246.95	2295.46	2393.34	2478.00	2533.56	2603.22	2645.55
UnitedHealthcare	SignatureValue	HMO H	1239.62	1291.68	1351.18	1409.86	1475.97	1541.25	1613.15	1685.88	1764.39	1842.89	1928.01	2013.96	2105.69	2151.15	2242.88	2322.21	2374.28	2439.56	2479.23
Western Health	Full	HMO A	796.99	830.47	868.72	906.45	948.95	990.93	1037.15	1083.91	1134.39	1184.86	1239.59	1294.85	1353.83	1383.05	1442.03	1493.03	1526.51	1568.48	1593.99
Western Health	Full	HMO B	836.32	871.45	911.59	951.18	995.78	1039.83	1088.34	1137.40	1190.37	1243.34	1300.76	1358.75	1420.64	1451.30	1513.19	1566.71	1601.84	1645.89	1672.65
Western Health	Full	HMO C	779.28	812.01	849.41	886.30	927.86	968.90	1014.10	1059.82	1109.17	1158.53	1212.04	1266.07	1323.73	1352.31	1409.97	1459.85	1492.58	1533.62	1558.56
Western Health	Full	HMO D	750.33	781.85	817.86	853.38	893.40	932.91	976.43	1020.45	1067.97	1115.50	1167.02	1219.04	1274.57	1302.08	1357.60	1405.62	1437.14	1476.66	1500.66

Platinum		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24
CARRIER	NETWORK	PLAN											
Anthem Blue Cross	Select HMO	HMO A	607.57	661.58	682.23	702.88	725.11	747.35	770.38	794.21	794.21	794.21	794.21
Anthem Blue Cross	Vivity	HMO B	635.52	692.01	713.61	735.21	758.47	781.74	805.83	830.75	830.75	830.75	830.75
Anthem Blue Cross	Vivity	HMO C	622.24	677.55	698.70	719.85	742.63	765.40	788.99	813.39	813.39	813.39	813.39
Anthem Blue Cross	CaliforniaCare HMO	HMO D	636.38	692.95	714.58	736.20	759.50	782.79	806.91	831.87	831.87	831.87	831.87
Anthem Blue Cross	Prudent Buyer - Small Group	PPO B	708.62	771.61	795.69	819.78	845.71	871.65	898.51	926.30	926.30	926.30	926.30
Kaiser Permanente	Full	HMO A	476.42	517.50	533.21	548.91	565.83	568.47	585.99	604.12	604.12	604.12	604.12
Kaiser Permanente	Full	HMO B	463.94	503.91	519.20	534.48	550.94	553.13	570.17	587.81	587.81	587.81	587.81
Kaiser Permanente	Full	HMO C	445.59	483.93	498.59	513.24	529.03	530.55	546.90	563.81	563.81	563.81	563.81
Sharp Health Plan	Premier	HMO A	387.44	421.88	435.05	448.22	462.40	476.58	491.27	506.46	506.46	506.46	506.46
Sharp Health Plan	Performance	HMO B	415.31	452.23	466.34	480.46	495.66	510.86	526.60	542.89	542.89	542.89	542.89
Sharp Health Plan	Premier	HMO C	388.91	423.48	436.70	449.92	464.15	478.39	493.13	508.38	508.38	508.38	508.38
Sutter Health Plan	Sutter Health Plan	HMO A	670.20	729.77	752.55	775.33	799.86	824.39	849.79	876.08	876.08	876.08	876.08
UnitedHealthcare	SignatureValue	HMO A	676.90	737.07	760.08	783.08	807.86	832.63	858.29	884.84	884.84	884.84	884.84
UnitedHealthcare	SignatureValue	HMO B	733.15	798.32	823.24	848.16	874.99	901.83	929.62	958.37	958.37	958.37	958.37
UnitedHealthcare	SignatureValue	HMO D	703.59	766.13	790.04	813.95	839.70	865.46	892.13	919.72	919.72	919.72	919.72
UnitedHealthcare	SignatureValue	HMO E	721.51	785.64	810.17	834.69	861.10	887.50	914.86	943.15	943.15	943.15	943.15
Western Health	Full	HMO B	464.61	505.91	521.70	537.49	554.49	571.50	589.11	607.33	607.33	607.33	607.33
Western Health	Full	HMO C	459.94	500.82	516.45	532.08	548.92	565.75	583.19	601.22	601.22	601.22	601.22
Western Health	Full	HMO D	434.40	473.01	487.78	502.54	518.44	534.34	550.81	567.84	567.84	567.84	567.84

Platinum		AGE -->	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45
CARRIER	NETWORK	PLAN																					
Anthem Blue Cross	Select HMO	HMO A	797.39	813.27	832.33	863.31	888.72	901.43	920.49	939.55	951.46	964.17	970.52	976.88	983.23	989.59	1002.29	1015.00	1034.06	1052.33	1077.74	1109.51	1146.84
Anthem Blue Cross	Vivity	HMO B	834.07	850.69	870.63	903.03	929.61	942.90	962.84	982.78	995.24	1008.53	1015.18	1021.82	1028.47	1035.11	1048.41	1061.70	1081.64	1100.74	1127.33	1160.56	1199.60
Anthem Blue Cross	Vivity	HMO C	816.64	832.91	852.43	884.15	910.18	923.20	942.72	962.24	974.44	987.46	993.96	1000.47	1006.98	1013.48	1026.50	1039.51	1059.03	1077.74	1103.77	1136.31	1174.54
Anthem Blue Cross	CaliforniaCare HMO	HMO D	835.20	851.83	871.80	904.24	930.86	944.17	964.14	984.10	996.58	1009.89	1016.55	1023.20	1029.86	1036.51	1049.82	1063.13	1083.09	1102.23	1128.85	1162.12	1201.22
Anthem Blue Cross	Prudent Buyer - Small Group	PPO B	930.01	948.53	970.76	1006.89	1036.53	1051.35	1073.58	1095.81	1109.71	1124.53	1131.94	1139.35	1146.76	1154.17	1168.99	1183.81	1206.04	1227.35	1256.99	1294.04	1337.58
Kaiser Permanente	Full	HMO A	606.53	618.61	633.11	656.67	676.01	685.67	700.17	714.67	723.73	733.40	738.23	743.06	747.90	752.73	762.39	772.06	786.56	800.45	819.79	843.95	872.34
Kaiser Permanente	Full	HMO B	590.16	601.92	616.02	638.95	657.76	667.16	681.27	695.38	704.19	713.60	718.30	723.00	727.71	732.41	741.81	751.22	765.33	778.85	797.66	821.17	848.80
Kaiser Permanente	Full	HMO C	566.07	577.34	590.88	612.86	630.91	639.93	653.46	666.99	675.45	684.47	688.98	693.49	698.00	702.51	711.53	720.55	734.08	747.05	765.09	787.65	814.15
Sharp Health Plan	Premier	HMO A	508.49	518.62	530.77	550.52	566.73	574.83	586.99	599.14	606.74	614.84	618.89	622.95	627.00	631.05	639.15	647.26	659.41	671.06	687.27	707.52	731.33
Sharp Health Plan	Performance	HMO B	545.06	555.92	568.95	590.12	607.49	616.18	629.21	642.24	650.38	659.07	663.41	667.75	672.10	676.44	685.13	693.81	706.84	719.33	736.70	758.42	783.93
Sharp Health Plan	Premier	HMO C	510.41	520.58	532.78	552.61	568.88	577.01	589.21	601.41	609.04	617.17	621.24	625.31	629.37	633.44	641.58	649.71	661.91	673.60	689.87	710.21	734.10
Sutter Health Plan	Sutter Health Plan	HMO A	879.58	897.10	918.13	952.29	980.33	994.34	1015.37	1036.40	1049.54	1063.55	1070.56	1077.57	1084.58	1091.59	1105.60	1119.62	1140.65	1160.80	1188.83	1223.87	1265.05
UnitedHealthcare	SignatureValue	HMO A	888.38	906.08	927.31	961.82	990.14	1004.29	1025.53	1046.77	1060.04	1074.20	1081.27	1088.35	1095.43	1102.51	1116.67	1130.83	1152.06	1172.41	1200.73	1236.12	1277.71
UnitedHealthcare	SignatureValue	HMO B	962.20	981.37	1004.37	1041.75	1072.42	1087.75	1110.75	1133.75	1148.13	1163.46	1171.13	1178.80	1186.46	1194.13	1209.46	1224.80	1247.80	1269.84	1300.51	1338.84	1383.89
UnitedHealthcare	SignatureValue	HMO D	923.40	941.79	963.87	999.74	1029.17	1043.88	1065.96	1088.03	1101.82	1116.54	1123.90	1131.26	1138.61	1145.97	1160.69	1175.40	1197.48	1218.63	1248.06	1284.85	1328.08
UnitedHealthcare	SignatureValue	HMO E	946.92	965.79	988.42	1025.20	1055.38	1070.48	1093.11	1115.75	1129.89	1144.98	1152.53	1160.07	1167.62	1175.16	1190.26	1205.35	1227.98	1249.67	1279.85	1317.58	1361.91
Western Health	Full	HMO B	609.76	621.91	636.48	660.17	679.60	689.32	703.90	718.47	727.58	737.30	742.16	747.02	751.88	756.73	766.45	776.17	790.75	804.71	824.15	848.44	876.99
Western Health	Full	HMO C	603.63	615.65	630.08	653.53	672.77	682.39	696.82	711.25	720.27	729.89	734.70	739.51	744.32	749.13	758.75	768.36	782.79	796.62	815.86	839.91	868.17
Western Health	Full	HMO D	570.11	581.47	595.10	617.24	635.42	644.50	658.13	671.76	680.28	689.36	693.90	698.45	702.99	707.53	716.62	725.70	739.33	752.39	770.56	793.28	819.96

Platinum		AGE -->	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																			
Anthem Blue Cross	Select HMO	HMO A	1191.32	1241.35	1298.53	1354.92	1418.46	1481.20	1550.30	1620.19	1695.64	1771.09	1852.89	1935.49	2023.65	2067.33	2155.49	2231.73	2281.77	2344.51	2382.63
Anthem Blue Cross	Vivity	HMO B	1246.13	1298.46	1358.28	1417.26	1483.72	1549.35	1621.62	1694.73	1773.65	1852.57	1938.14	2024.54	2116.75	2162.44	2254.66	2334.41	2386.74	2452.37	2492.25
Anthem Blue Cross	Vivity	HMO C	1220.09	1271.33	1329.89	1387.64	1452.71	1516.97	1587.74	1659.32	1736.59	1813.86	1897.64	1982.23	2072.52	2117.25	2207.54	2285.63	2336.87	2401.13	2440.17
Anthem Blue Cross	CaliforniaCare HMO	HMO D	1247.81	1300.21	1360.11	1419.17	1485.72	1551.44	1623.81	1697.01	1776.04	1855.07	1940.75	2027.27	2119.60	2165.36	2257.70	2337.55	2389.96	2455.68	2495.61
Anthem Blue Cross	Prudent Buyer - Small Group	PPO B	1389.45	1447.81	1514.50	1580.27	1654.37	1727.55	1808.14	1889.65	1977.65	2065.65	2161.06	2257.39	2360.21	2411.16	2513.98	2602.90	2661.26	2734.44	2778.90
Kaiser Permanente	Full	HMO A	906.17	944.23	987.73	1030.62	1078.95	1126.68	1179.23	1232.40	1289.79	1347.18	1409.40	1472.23	1539.29	1572.51	1639.57	1697.57	1735.62	1783.35	1812.36
Kaiser Permanente	Full	HMO B	881.71	918.74	961.07	1002.80	1049.83	1096.26	1147.40	1199.13	1254.97	1310.81	1371.36	1432.49	1497.74	1530.07	1595.31	1651.74	1688.77	1735.21	1763.43
Kaiser Permanente	Full	HMO C	845.72	881.24	921.83	961.86	1006.97	1051.51	1100.56	1150.18	1203.74	1257.30	1315.37	1374.01	1436.59	1467.60	1530.19	1584.31	1619.83	1664.37	1691.43
Sharp Health Plan	Premier	HMO A	759.69	791.60	828.06	864.02	904.54	944.55	988.61	1033.18	1081.29	1129.41	1181.57	1234.24	1290.46	1318.32	1374.53	1423.15	1455.06	1495.07	1519.38
Sharp Health Plan	Performance	HMO B	814.34	848.54	887.63	926.17	969.60	1012.49	1059.72	1107.50	1159.07	1210.64	1266.56	1323.02	1383.28	1413.14	1473.40	1525.52	1559.72	1602.61	1628.67
Sharp Health Plan	Premier	HMO C	762.57	794.60	831.20	867.30	907.97	948.13	992.36	1037.10	1085.39	1133.69	1186.05	1238.92	1295.35	1323.31	1379.74	1428.55	1460.58	1500.74	1525.14
Sutter Health Plan	Sutter Health Plan	HMO A	1314.11	1369.30	1432.38	1494.58	1564.67	1633.88	1710.10	1787.19	1870.42	1953.64	2043.88	2134.99	2232.24	2280.42	2377.66	2461.77	2516.96	2586.17	2628.21
UnitedHealthcare	SignatureValue	HMO A	1327.26	1383.00	1446.71	1509.54	1580.32	1650.23	1727.21	1805.07	1889.13	1973.19	2064.33	2156.36	2254.57	2303.24	2401.46	2486.40	2542.15	2612.05	2654.52
UnitedHealthcare	SignatureValue	HMO B	1437.56	1497.93	1566.93	1634.98	1711.65	1787.36	1870.74	1955.07	2046.12	2137.17	2235.88	2335.55	2441.93	2494.64	2601.02	2693.02	2753.40	2829.11	2875.11
UnitedHealthcare	SignatureValue	HMO D	1379.58	1437.52	1503.74	1569.04	1642.62	1715.28	1795.29	1876.23	1963.60	2050.98	2145.71	2241.36	2343.45	2394.03	2496.12	2584.41	2642.36	2715.01	2759.16
UnitedHealthcare	SignatureValue	HMO E	1414.73	1474.14	1542.05	1609.01	1684.47	1758.97	1841.03	1924.03	2013.63	2103.22	2200.37	2298.46	2403.15	2455.02	2559.71	2650.25	2709.67	2784.18	2829.45
Western Health	Full	HMO B	911.00	949.26	992.99	1036.11	1084.69	1132.67	1185.51	1238.96	1296.65	1354.35	1416.90	1480.07	1547.48	1580.88	1648.30	1706.60	1744.86	1792.84	1821.99
Western Health	Full	HMO C	901.84	939.71	983.00	1025.69	1073.79	1121.28	1173.59	1226.50	1283.61	1340.73	1402.66	1465.18	1531.92	1564.99	1631.72	1689.44	1727.32	1774.81	1803.66
Western Health	Full	HMO D	851.76	887.54	928.42	968.74	1014.17	1059.03	1108.43	1158.40	1212.34	1266.29	1324.78	1383.83	1446.86	1478.09	1541.12	1595.64	1631.41	1676.27	1703.52

Health Care Service Plan rates will vary by county

THE INFORMATION PROVIDED HEREIN, INCLUDING THE RATING INFORMATION IS PROVIDED ON TO YOU ON AN “AS IS” “AS AVAILABLE” BASIS WITHOUT WARRANTY OF ANY KIND, EXPRESS OR IMPLIED. WE FURTHER DISCLAIM ALL LIABILITY RELATED TO THE INFORMATION, INCLUDING THOSE CAUSED BY RATING DISCREPANCIES. FINAL RATES AND RATING AREAS ARE BASED UPON ACTUAL ENROLLMENT AND UNDERWRITING AND MUST BE APPROVED BY THE APPLICABLE INSURANCE CARRIER.

USE EMPLOYER ZIP CODE FOR RATING | AREA 6 | 02/01/27 - 03/01/27

Bronze		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																																																	
Anthem Blue Cross	Prudent Buyer - Small Group	PPO A	479.44	522.06	538.35	554.65	572.20	589.74	607.92	626.72	626.72	626.72	626.72	629.23	641.76	656.80	681.24	701.30	711.33	726.37	741.41	750.81	760.84	765.85	770.87	775.88	780.89	790.92	800.95	815.99	830.40	850.46	875.53	904.98	940.08	979.56	1024.69	1069.18	1119.32	1168.83	1223.36	1278.51	1338.05	1397.59	1462.14	1527.32	1596.88	1631.35	1700.92	1761.08	1800.57	1850.08	1880.16
Anthem Blue Cross	Select PPO	PPO B	451.17	491.27	506.60	521.94	538.45	554.96	572.07	589.76	589.76	589.76	589.76	592.12	603.91	618.07	641.07	659.94	669.38	683.53	697.69	706.53	715.97	720.69	725.40	730.12	734.84	744.28	753.71	767.87	781.43	800.30	823.89	851.61	884.64	921.79	964.26	1006.13	1053.31	1099.90	1151.21	1203.11	1259.14	1315.16	1375.91	1437.25	1502.71	1535.15	1600.61	1657.23	1694.38	1740.97	1769.28
Anthem Blue Cross	Prudent Buyer - Small Group	PPO C	478.84	521.41	537.68	553.96	571.48	589.01	607.16	625.94	625.94	625.94	625.94	628.44	640.96	655.99	680.40	700.43	710.44	725.46	740.49	749.88	759.89	764.90	769.91	774.91	779.92	789.94	799.95	814.97	829.37	849.40	874.44	903.86	938.91	978.34	1023.41	1067.85	1117.93	1167.38	1221.83	1276.92	1336.38	1395.85	1460.32	1525.42	1594.90	1629.32	1698.80	1758.89	1798.33	1847.77	1877.82
Anthem Blue Cross	Select PPO	PPO D	450.58	490.63	505.94	521.26	537.75	554.24	571.32	588.99	588.99	588.99	588.99	591.35	603.13	617.26	640.23	659.08	668.50	682.64	696.78	705.61	715.03	719.75	724.46	729.17	733.88	743.31	752.73	766.86	780.41	799.26	822.82	850.50	883.49	920.59	963.00	1004.82	1051.94	1098.47	1149.71	1201.54	1257.49	1313.45	1374.11	1435.37	1500.75	1533.14	1598.52	1655.06	1692.17	1738.70	1766.97
Kaiser Permanente	Full	HMO A	344.49	373.85	385.07	396.29	408.38	406.20	418.71	431.66	431.66	431.66	431.66	433.39	442.02	452.38	469.22	483.03	489.94	500.30	510.66	517.13	524.04	527.49	530.95	534.40	537.85	544.76	551.67	562.03	571.95	585.77	603.03	623.32	647.50	674.69	705.77	736.42	770.95	805.05	842.61	880.59	921.60	962.61	1007.07	1051.97	1099.88	1123.62	1171.54	1212.98	1240.17	1274.27	1294.98
Kaiser Permanente	Full	HMO C	334.91	363.41	374.31	385.21	396.95	394.41	406.57	419.14	419.14	419.14	419.14	420.82	429.20	439.26	455.61	469.02	475.73	485.78	495.84	502.13	508.84	512.19	515.54	518.90	522.25	528.96	535.66	545.72	555.36	568.77	585.54	605.24	628.71	655.12	685.30	715.05	748.59	781.70	818.16	855.05	894.87	934.68	977.86	1021.45	1067.97	1091.02	1137.55	1177.79	1204.19	1237.30	1257.42
Sharp Health Plan	Premier	HMO A	272.80	297.05	306.32	315.59	325.58	335.56	345.90	356.60	356.60	356.60	356.60	358.03	365.16	373.72	387.62	399.04	404.74	413.30	421.86	427.21	432.91	435.77	438.62	441.47	444.32	450.03	455.73	464.29	472.50	483.91	498.17	514.93	534.90	557.37	583.04	608.36	636.89	665.06	696.08	727.46	761.34	795.22	831.95	869.03	908.62	928.23	967.81	1002.05	1024.51	1052.68	1069.80
Sharp Health Plan	Performance	HMO B	291.24	317.12	327.02	336.92	347.58	358.24	369.28	380.70	380.70	380.70	380.70	382.22	389.84	398.97	413.82	426.00	432.09	441.23	450.37	456.08	462.17	465.22	468.26	471.31	474.35	480.44	486.53	495.67	504.43	516.61	531.84	549.73	571.05	595.03	622.44	649.47	679.93	710.01	743.13	776.63	812.79	848.96	888.17	927.77	970.02	990.96	1033.22	1069.77	1093.75	1123.83	1142.10
Sutter Health Plan	Sutter Health Plan	HMO A	359.93	391.93	404.16	416.39	429.56	442.74	456.38	470.51	470.51	470.51	470.51	472.38	481.79	493.08	511.43	526.49	534.02	545.31	556.60	563.66	571.18	574.95	578.71	582.48	586.24	593.77	601.30	612.59	623.41	638.47	657.29	679.40	705.75	735.39	769.26	802.67	840.31	877.48	918.41	959.82	1004.51	1049.21	1097.67	1146.60	1198.83	1224.71	1276.93	1322.10	1351.74	1388.91	1411.48
Sutter Health Plan	Sutter Health Plan	HMO B	360.11	392.12	404.36	416.60	429.78	442.96	456.61	470.74	470.74	470.74	470.74	472.61	482.03	493.33	511.68	526.75	534.28	545.58	556.87	563.94	571.47	575.23	579.00	582.76	586.53	594.06	601.59	612.89	623.72	638.78	657.61	679.74	706.10	735.75	769.64	803.07	840.73	877.91	918.87	960.29	1005.01	1049.73	1098.21	1147.17	1199.42	1225.31	1277.56	1322.75	1352.41	1389.60	1412.18
Western Health	Full	HMO B	316.71	344.87	355.63	366.39	377.99	389.58	401.59	414.01	414.01	414.01	414.01	415.66	423.94	433.88	450.02	463.27	469.90	479.83	489.77	495.98	502.60	505.91	509.23	512.54	515.85	522.47	529.10	539.03	548.56	561.81	578.37	597.82	621.01	647.09	676.90	706.29	739.41	772.12	808.14	844.57	883.90	923.23	965.87	1008.93	1054.89	1077.66	1123.61	1163.36	1189.44	1222.14	1242.02
Western Health	Full	HMO C	330.55	359.93	371.17	382.40	394.50	406.60	419.13	432.09	432.09	432.09	432.09	433.82	442.46	452.83	469.68	483.51	490.42	500.79	511.16	517.64	524.56	528.01	531.47	534.93	538.38	545.30	552.21	562.58	572.52	586.35	603.63	623.94	648.13	675.36	706.47	737.15	771.71	805.85	843.44	881.46	922.51	963.56	1008.07	1053.00	1100.97	1124.73	1172.69	1214.17	1241.39	1275.53	1296.27

Silver		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																																																	
Anthem Blue Cross	Select HMO	HMO A	448.58	488.45	503.70	518.95	535.36	551.78	568.79	586.38	586.38	586.38	586.38	588.73	600.45	614.53	637.40	656.16	665.54	679.61	693.69	702.48	711.87	716.56	721.25	725.94	730.63	740.01	749.39	763.47	776.95	795.72	819.17	846.73	879.57	916.51	958.73	1000.36	1047.27	1093.60	1144.61	1196.22	1251.92	1307.63	1368.02	1429.01	1494.10	1526.35	1591.44	1647.73	1684.67	1730.99	1759.14
Anthem Blue Cross	CaliforniaCare HMO	HMO B	481.44	524.23	540.59	556.96	574.58	592.20	610.45	629.33	629.33	629.33	629.33	631.85	644.43	659.54	684.08	704.22	714.29	729.39	744.50	753.94	764.01	769.04	774.08	779.11	784.15	794.21	804.28	819.39	833.86	854.00	879.17	908.75	944.00	983.64	1028.95	1073.64	1123.98	1173.70	1228.45	1283.83	1343.62	1403.41	1468.23	1533.68	1603.53	1638.15	1708.00	1768.42	1808.07	1857.78	1887.99
Anthem Blue Cross	CaliforniaCare HMO	HMO D	480.79	523.52	539.86	556.20	573.80	591.40	609.63	628.48	628.48	628.48	628.48	630.99	643.56	658.65	683.16	703.27	713.32	728.41	743.49	752.92	762.97	768.00	773.03	778.06	783.09	793.14	803.20	818.28	832.74	852.85	877.99	907.53	942.72	982.31	1027.56	1072.19	1122.47	1172.12	1226.79	1282.10	1341.80	1401.51	1466.24	1531.61	1601.37	1635.93	1705.69	1766.03	1805.62	1855.27	1885.44
Anthem Blue Cross	Select PPO	PPO B	486.62	529.87	546.41	562.95	580.76	598.57	617.02	636.10	636.10	636.10	636.10	638.64	651.37	666.63	691.44	711.80	721.97	737.24	752.51	762.05	772.23	777.31	782.40	787.49	792.58	802.76	812.94	828.20	842.83	863.19	888.63	918.53	954.15	994.22	1040.02	1085.19	1136.07	1186.33	1241.67	1297.64	1358.07	1418.50	1484.02	1550.18	1620.78	1655.77	1726.38	1787.44	1827.52	1877.77	1908.30
Anthem Blue Cross	Prudent Buyer - Small Group	PPO C	517.15	563.12	580.69	598.27	617.20	636.13	655.73	676.01	676.01	676.01	676.01	678.71	692.23	708.46	734.82	756.46	767.27	783.50	799.72	809.86	820.68	826.08	831.49	836.90	842.31	853.12	863.94	880.17	895.71	917.35	944.39	976.16	1014.02	1056.60	1105.28	1153.27	1207.35	1260.76	1319.57	1379.06	1443.28	1507.50	1577.13	1647.44	1722.47	1759.65	1834.69	1899.59	1942.18	1995.58	2028.03
Anthem Blue Cross	Prudent Buyer - Small Group	PPO D	501.40	545.96	563.01	580.05	598.40	616.75	635.76	655.42	655.42	655.42	655.42	658.04	671.15	686.88	712.44	733.41	743.90	759.63	775.36	785.19	795.68	800.92	806.17	811.41	816.65	827.14	837.63	853.36	868.43	889.40	915.62	946.43	983.13	1024.42	1071.61	1118.15	1170.58	1222.36	1279.38	1337.06	1399.32	1461.59	1529.09	1597.26	1670.01	1706.06	1778.81	1841.73	1883.02	1934.80	1966.26
Anthem Blue Cross	Select PPO	PPO E	471.83	513.77	529.81	545.84	563.11	580.38	598.27	616.77	616.77	616.77	616.77	619.24	631.57	646.37	670.43	690.17	700.03	714.84	729.64	738.89	748.76	753.69	758.63	763.56	768.50	778.36	788.23	803.03	817.22	836.96	861.63	890.62	925.16	964.01	1008.42	1052.21	1101.55	1150.28	1203.94	1258.21	1316.80	1375.40	1438.92	1503.07	1571.53	1605.45	1673.91	1733.12	1771.98	1820.71	1850.31
Anthem Blue Cross	Prudent Buyer - Small Group	PPO F	519.25	565.41	583.05	600.70	619.71	638.71	658.40	678.76	678.76	678.76	678.76	681.48	695.05	711.34	737.81	759.53	770.39	786.68	802.97	813.15	824.01	829.44	834.87	840.30	845.73	856.60	867.46	883.75	899.36	921.08	948.23	980.13	1018.14	1060.90	1109.77	1157.96	1212.27	1265.89	1324.94	1384.67	1449.15	1513.63	1583.55	1654.14	1729.48	1766.81	1842.15	1907.32	1950.08	2003.70	2036.28
Kaiser Permanente	Full	HMO A	375.78	407.91	420.20	432.49	445.72	444.68	458.38	472.56	472.56	472.56	472.56	474.45	483.90	495.24	513.67	528.80	536.36	547.70	559.04	566.13	573.69	577.47	581.25	585.03	588.81	596.37	603.93	615.27	626.14	641.27	660.17	682.38	708.84	738.61	772.64	806.19	843.99	881.33	922.44	964.02	1008.92	1053.81	1102.48	1151.63	1204.09	1230.08	1282.53	1327.90	1357.67	1395.00	1417.68
Kaiser Permanente	Full	HMO B	380.76	413.33	425.79	438.24	451.66	450.80	464.69	479.07	479.07	479.07	479.07	480.98	490.56	502.06	520.75	536.08	543.74	555.24	566.74	573.92	581.59	585.42	589.25	593.08	596.92	604.58	612.25	623.74	634.76	650.09	669.26	691.77	718.60	748.78	783.27	817.29	855.61	893.46	935.14	977.30	1022.81	1068.32	1117.66	1167.48	1220.66	1247.01	1300.19	1346.18	1376.36	1414.20	1437.21
Kaiser Permanente	Full	HMO C	378.04	410.37	422.74	435.10	448.41	447.46	461.25	475.51	475.51	475.51	475.51	477.42	486.93	498.34	516.88	532.10	539.71	551.12	562.53	569.67	577.27	581.08	584.88	588.69	592.49	600.10	607.71	619.12	630.06	645.27	664.29	686.64	713.27	743.23	777.47	811.23	849.27	886.83	928.20	970.05	1015.22	1060.40	1109.38	1158.83	1211.61	1237.76	1290.55	1336.20	1366.15	1403.72	1426.53
Kaiser Permanente	Full	HMO D	347.20	376.79	388.11	399.42	411.61	409.52	422.14	435.20	435.20	435.20	435.20	436.94	445.65	456.09	473.06	486.99	493.95	504.40	514.84	521.37	528.33	531.82	535.30	538.78	542.26	549.22	556.19	566.63	576.64	590.57	607.98	628.43	652.80	680.22	711.55	742.45	777.27	811.65	849.51	887.81	929.15	970.50	1015.32	1060.58	1108.89	1132.83	1181.13	1222.91	1250.33	1284.71	1305.60
Kaiser Permanente	Full	HMO E	362.07	392.98	404.80	416.62	429.35	427.81	441.00	454.64	454.64	454.64	454.64	456.46	465.55	476.46	494.19	508.74	516.01	526.92	537.84	544.65	551.93	555.57	559.20	562.84	566.48	573.75	581.03	591.94	602.39	616.94	635.13	656.50	681.96	710.60	743.33	775.61	811.98	847.90	887.45	927.46	970.65	1013.84	1060.67	1107.95	1158.41	1183.42	1233.88	1277.53	1306.17	1342.09	1363.92
Sharp Health Plan	Premier	HMO A	285.29	310.65	320.35	330.04	340.49	350.93	361.74	372.93	372.93	372.93	372.93	374.42	381.88	390.83	405.37	417.31	423.28	432.23	441.18	446.77	452.74	455.72	458.70	461.69	464.67	470.64	476.60	485.55	494.13	506.07	520.98	538.51	559.40	582.89	609.74	636.22	666.05	695.51	727.96	760.78	796.21	831.63	870.05	908.83	950.23	970.74	1012.13	1047.93	1071.43	1100.89	1118.79
Sharp Health Plan	Performance	HMO B	294.75	320.95	330.96	340.98	351.77	362.56	373.73	385.29	385.29	385.29	385.29	386.83	394.54	403.78	418.81	431.14	437.30	446.55	455.80	461.58	467.74	470.82	473.91	476.99	480.07	486.24	492.40	501.65	510.51	522.84	538.25	556.36	577.94	602.21	629.95	657.30	688.13	718.57	752.09	785.99	822.59	859.20	898.88	938.95	981.72	1002.91	1045.68	1082.66	1106.94	1137.38	1155.87
Sharp Health Plan	Premier	HMO C	268.76	292.65	301.78	310.92	320.76	330.59	340.78	351.32	351.32	351.32	351.32	352.73	359.75	368.18	381.88	393.13	398.75	407.18	415.61	420.88	426.50	429.31	432.12	434.93	437.74	443.37	448.99	457.42	465.50	476.74	490.79	507.31	526.98	549.11	574.41	599.35	627.46	655.21	685.78	716.69	750.07	783.44	819.63	856.17	895.16	914.49	953.48	987.21	1009.34	1037.10	1053.96
Sutter Health Plan	Sutter Health Plan	HMO B	440.00	479.11	494.07	509.02	525.12	541.23	557.91	575.17	575.17	575.17	575.17	577.46	588.97	602.77	625.20	643.61	652.81	666.61	680.42	689.05	698.25	702.85	707.45	712.05	716.65	725.86	735.06	748.86	762.09	780.50	803.50	830.54	862.75	898.98	940.39	981.23	1027.24	1072.68	1122.72	1173.33	1227.97	1282.61	1341.86	1401.67	1465.52	1497.15	1560.99	1616.21	1652.45	1697.88	1725.48
Sutter Health Plan	Sutter Health Plan	HMO C	381.09	414.96	427.91	440.87	454.81	468.76	483.21	498.16	498.16	498.16	498.16	500.15	510.11	522.07	541.49	557.43	565.41	577.36	589.32	596.79	604.76	608.74	612.73	616.72	620.70	628.67	636.64	648.60	660.05	676.00	695.92	719.33	747.23	778.62	814.48	849.85	889.70	929.06	972.40	1016.23	1063.56	1110.88	1162.19	1214.00	1269.30	1296.70	1351.99	1399.81	1431.20	1470.55	1494.45
UnitedHealthcare	SignatureValue	HMO A	496.82	540.98	557.87	574.75	592.94	611.12	629.96	649.44	649.44	649.44	649.44	652.04	665.03	680.61	705.94	726.72	737.11	752.70	768.29	778.03	788.42	793.62	798.81	804.01	809.20	819.59	829.98	845.57	860.51	881.29	907.27	937.79	974.16	1015.07	1061.83	1107.94	1159.90	1211.21	1267.71	1324.86	1386.55	1448.25	1515.14	1582.69	1654.77	1690.49	1762.58	1824.93	1865.84	1917.15	1948.32
Western Health	Full	HMO B	362.81	395.06	407.40	419.73	433.01	446.29	460.04	474.27	474.27	474.27	474.27	476.16	485.65	497.03	515.53	530.71	538.29	549.68	561.06	568.17	575.76	579.56	583.35	587.14	590.94	598.53	606.11	617.50	628.40	643.58	662.55	684.84	711.40	741.28	775.43	809.10	847.04	884.51	925.77	967.51	1012.56	1057.62	1106.47	1155.79	1208.43	1234.52	1287.16	1332.69	1362.57	1400.04	1422.80
Western Health	Full	HMO C	342.86	373.34	384.99	396.64	409.19	421.74	434.74	448.18	448.18	448.18	448.18	449.98	458.94	469.70	487.18	501.52	508.69	519.45	530.20	536.93	544.10	547.68	551.27	554.85	558.44	565.61	572.78	583.54	593.84	608.19	626.11	647.18	672.28	700.51	732.78	764.60	800.46	835.86	874.86	914.30	956.87	999.45	1045.62	1092.23	1141.97	1166.63	1216.37	1259.40	1287.64	1323.04	1344.54
Western Health	Full	HMO D	330.78	360.19	371.43	382.67	394.78	406.88	419.42	432.40	432.40	432.40	432.40	434.12	442.77	453.15	470.01	483.85	490.77	501.15	511.52	518.01	524.93	528.39	531.85	535.31	538.76	545.68	552.60	562.98	572.92	586.76	604.06	624.38	648.59	675.83	706.97	737.67	772.26	806.42	844.04	882.09	923.16	964.24	1008.78	1053.75	1101.74	1125.52	1173.52	1215.03	1242.27	1276.43	1297.19

Health Care Service Plan rates will vary by county

THE INFORMATION PROVIDED HEREIN, INCLUDING THE RATING INFORMATION IS PROVIDED ON TO YOU ON AN "AS IS" "AS AVAILABLE" BASIS WITHOUT WARRANTY OF ANY KIND, EXPRESS OR IMPLIED. WE FURTHER DISCLAIM ALL LIABILITY RELATED TO THE INFORMATION, INCLUDING THOSE CAUSED BY RATING DISCREPANCIES. FINAL RATES AND RATING AREAS ARE BASED UPON ACTUAL ENROLLMENT AND UNDERWRITING AND MUST BE APPROVED BY THE APPLICABLE INSURANCE CARRIER.

Continued

Gold		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																																																			
Anthem Blue Cross	Select HMO	HMO A	575.14	626.27	645.81	665.36	686.41	707.46	729.27	751.82	751.82	751.82	751.82	754.83	769.86	787.91	817.23	841.29	853.32	871.36	889.40	900.68	912.71	918.72	924.74	930.75	936.77	948.80	960.83	978.87	996.16	1020.22	1050.29	1085.63	1127.73	1175.09	1229.23	1282.60	1342.75	1402.14	1467.55	1533.71	1605.14	1676.56	1754.00	1832.19	1915.64	1956.99	2040.44	2112.61	2159.98	2219.37	2255.46
Anthem Blue Cross	CaliforniaCare HMO	HMO B	617.22	672.09	693.07	714.04	736.64	759.23	782.63	806.83	806.83	806.83	806.83	810.06	826.19	845.56	877.02	902.84	915.75	935.12	954.48	966.58	979.49	985.95	992.40	998.86	1005.31	1018.22	1031.13	1050.49	1069.05	1094.87	1127.14	1165.06	1210.25	1261.08	1319.17	1376.45	1441.00	1504.74	1574.93	1645.93	1722.58	1799.23	1882.33	1966.24	2055.80	2100.18	2189.74	2267.19	2318.02	2381.76	2420.49
Anthem Blue Cross	Priority Select HMO	HMO C	420.37	457.73	472.02	486.31	501.69	517.08	533.02	549.50	549.50	549.50	549.50	551.70	562.69	575.88	597.31	614.89	623.68	636.87	650.06	658.30	667.09	671.49	675.89	680.28	684.68	693.47	702.26	715.45	728.09	745.67	767.65	793.48	824.25	858.87	898.43	937.45	981.41	1024.82	1072.62	1120.98	1173.18	1225.39	1281.98	1339.13	1400.13	1430.35	1491.34	1544.10	1578.71	1622.12	1648.50
Anthem Blue Cross	Select PPO	PPO B	576.06	627.27	646.84	666.42	687.51	708.59	730.43	753.02	753.02	753.02	753.02	756.03	771.09	789.16	818.53	842.63	854.68	872.75	890.82	902.12	914.17	920.19	926.21	932.24	938.26	950.31	962.36	980.43	997.75	1021.85	1051.97	1087.36	1129.53	1176.97	1231.19	1284.65	1344.89	1404.38	1469.90	1536.16	1607.70	1679.23	1756.80	1835.11	1918.69	1960.11	2043.70	2115.99	2163.43	2222.92	2259.06
Anthem Blue Cross	Select PPO	PPO C	594.35	647.18	667.38	687.58	709.34	731.09	753.62	776.93	776.93	776.93	776.93	780.04	795.58	814.22	844.52	869.38	881.82	900.46	919.11	930.76	943.19	949.41	955.62	961.84	968.05	980.49	992.92	1011.56	1029.43	1054.29	1085.37	1121.89	1165.40	1214.34	1270.28	1325.44	1387.60	1448.97	1516.57	1584.94	1658.75	1732.55	1812.58	1893.38	1979.62	2022.35	2108.59	2183.17	2232.12	2293.50	2330.79
Anthem Blue Cross	Select PPO	PPO D	571.85	622.68	642.12	661.56	682.49	703.42	725.09	747.52	747.52	747.52	747.52	750.51	765.46	783.40	812.55	836.47	848.44	866.38	884.32	895.53	907.49	913.47	919.45	925.43	931.41	943.37	955.33	973.27	990.46	1014.38	1044.29	1079.42	1121.28	1168.37	1222.20	1275.27	1335.07	1394.12	1459.16	1524.94	1595.96	1666.97	1743.96	1821.71	1904.68	1945.79	2028.77	2100.53	2147.62	2206.68	2242.56
Anthem Blue Cross	Prudent Buyer - Small Group	PPO E	631.62	687.77	709.23	730.70	753.82	776.94	800.88	825.65	825.65	825.65	825.65	828.95	845.47	865.28	897.48	923.90	937.11	956.93	976.74	989.13	1002.34	1008.94	1015.55	1022.15	1028.76	1041.97	1055.18	1075.00	1093.99	1120.41	1153.43	1192.24	1238.48	1290.49	1349.94	1408.56	1474.61	1539.84	1611.67	1684.33	1762.76	1841.20	1926.24	2012.11	2103.76	2149.17	2240.81	2320.08	2372.09	2437.32	2476.95
Anthem Blue Cross	Prudent Buyer - Small Group	PPO H	607.78	661.80	682.46	703.11	725.36	747.61	770.65	794.48	794.48	794.48	794.48	797.66	813.55	832.62	863.60	889.02	901.73	920.80	939.87	951.79	964.50	970.85	977.21	983.57	989.92	1002.63	1015.35	1034.41	1052.69	1078.11	1109.89	1147.23	1191.72	1241.77	1298.97	1355.38	1418.94	1481.71	1550.82	1620.74	1696.21	1771.69	1853.52	1936.15	2024.34	2068.03	2156.22	2232.49	2282.54	2345.30	2383.44
Anthem Blue Cross	Prudent Buyer - Small Group	PPO I	616.74	671.56	692.52	713.48	736.05	758.62	782.00	806.19	806.19	806.19	806.19	809.41	825.54	844.89	876.33	902.13	915.03	934.37	953.72	965.82	978.71	985.16	991.61	998.06	1004.51	1017.41	1030.31	1049.66	1068.20	1094.00	1126.25	1164.14	1209.29	1260.07	1318.12	1375.36	1439.86	1503.54	1573.68	1644.63	1721.22	1797.80	1880.84	1964.69	2054.17	2098.51	2188.00	2265.39	2316.18	2379.87	2418.57
Kaiser Permanente	Full	HMO B	452.04	490.96	505.83	520.71	536.74	538.49	555.08	572.25	572.25	572.25	572.25	574.54	585.99	599.72	622.04	640.35	649.51	663.24	676.97	685.56	694.71	699.29	703.87	708.45	713.03	722.18	731.34	745.07	758.23	776.55	799.44	826.33	858.38	894.43	935.63	976.26	1022.04	1067.25	1117.03	1167.39	1221.76	1276.12	1335.06	1394.58	1458.10	1489.57	1553.09	1608.03	1644.08	1689.29	1716.75
Kaiser Permanente	Full	HMO C	465.13	505.20	520.52	535.85	552.35	554.58	571.67	589.35	589.35	589.35	589.35	591.71	603.50	617.64	640.63	659.49	668.92	683.06	697.21	706.05	715.48	720.19	724.91	729.62	734.33	743.76	753.19	767.34	780.89	799.75	823.33	851.03	884.03	921.16	963.59	1005.44	1052.59	1099.14	1150.42	1202.28	1258.27	1314.26	1374.96	1436.25	1501.67	1534.09	1599.51	1656.08	1693.21	1739.77	1768.05
Kaiser Permanente	Full	HMO D	439.04	476.80	491.24	505.68	521.22	522.50	538.60	555.26	555.26	555.26	555.26	557.48	568.59	581.91	603.57	621.34	630.22	643.55	656.87	665.20	674.09	678.53	682.97	687.41	691.85	700.74	709.62	722.95	735.72	753.49	775.70	801.80	832.89	867.87	907.85	947.27	991.70	1035.56	1083.87	1132.73	1185.48	1238.23	1295.42	1353.17	1414.80	1445.34	1506.98	1560.28	1595.26	1639.13	1665.78
Kaiser Permanente	Full	HMO E	392.49	426.11	438.96	451.82	465.66	465.23	479.57	494.40	494.40	494.40	494.40	496.38	506.27	518.14	537.42	553.24	561.15	573.02	584.88	592.30	600.21	604.16	608.12	612.07	616.03	623.94	631.85	643.71	655.09	670.91	690.68	713.92	741.61	772.75	808.35	843.45	883.01	922.06	965.08	1008.59	1055.55	1102.52	1153.45	1204.86	1259.74	1286.94	1341.81	1389.28	1420.42	1459.48	1483.20
Kaiser Permanente	Full	HMO F	448.26	486.84	501.59	516.34	532.22	533.84	550.29	567.31	567.31	567.31	567.31	569.58	580.92	594.54	616.66	634.82	643.89	657.51	671.13	679.64	688.71	693.25	697.79	702.33	706.87	715.94	725.02	738.64	751.68	769.84	792.53	819.19	850.96	886.70	927.55	967.83	1013.21	1058.03	1107.39	1157.31	1211.20	1265.10	1323.53	1382.53	1445.50	1476.70	1539.67	1594.14	1629.88	1674.69	1701.93
Sharp Health Plan	Performance	HMO A	366.15	398.70	411.14	423.59	436.99	450.39	464.27	478.63	478.63	478.63	478.63	480.54	490.12	501.60	520.27	535.59	543.25	554.73	566.22	573.40	581.06	584.89	588.71	592.54	596.37	604.03	611.69	623.18	634.18	649.50	668.65	691.14	717.95	748.10	782.56	816.54	854.83	892.64	934.29	976.41	1021.88	1067.34	1116.64	1166.42	1219.55	1245.87	1299.00	1344.95	1375.10	1412.92	1435.89
Sharp Health Plan	Premier	HMO B	345.92	376.67	388.42	400.18	412.84	425.50	438.61	452.18	452.18	452.18	452.18	453.99	463.03	473.88	491.52	505.99	513.22	524.08	534.93	541.71	548.95	552.56	556.18	559.80	563.42	570.65	577.89	588.74	599.14	613.61	631.70	652.95	678.27	706.76	739.31	771.42	807.59	843.32	882.66	922.45	965.40	1008.36	1054.94	1101.96	1152.15	1177.02	1227.22	1270.63	1299.11	1334.84	1356.54
Sharp Health Plan	Performance	HMO D	377.08	410.59	423.41	436.23	450.03	463.83	478.12	492.91	492.91	492.91	492.91	494.88	504.74	516.57	535.79	551.57	559.45	571.28	583.11	590.51	598.39	602.34	606.28	610.22	614.17	622.05	629.94	641.77	653.11	668.88	688.60	711.76	739.37	770.42	805.91	840.90	880.34	919.28	962.16	1005.54	1052.36	1099.19	1149.96	1201.22	1255.93	1283.04	1337.76	1385.08	1416.13	1455.07	1478.73
Sutter Health Plan	Sutter Health Plan	HMO A	482.02	524.86	541.24	557.63	575.27	592.91	611.18	630.10	630.10	630.10	630.10	632.61	645.21	660.33	684.90	705.07	715.15	730.27	745.39	754.84	764.93	769.97	775.01	780.05	785.09	795.17	805.25	820.37	834.86	855.03	880.23	909.85	945.13	984.83	1030.19	1074.93	1125.33	1175.11	1229.93	1285.38	1345.24	1405.09	1469.99	1535.52	1605.46	1640.12	1710.06	1770.54	1810.24	1860.02	1890.25
Sutter Health Plan	Sutter Health Plan	HMO B	517.01	562.97	580.54	598.11	617.04	635.96	655.56	675.84	675.84	675.84	675.84	678.54	692.05	708.27	734.63	756.26	767.07	783.29	799.51	809.65	820.46	825.87	831.27	836.68	842.09	852.90	863.71	879.93	895.48	917.11	944.14	975.90	1013.75	1056.33	1104.99	1152.97	1207.04	1260.43	1319.23	1378.70	1442.90	1507.11	1576.72	1647.01	1722.02	1759.19	1834.21	1899.09	1941.67	1995.06	2027.49
Sutter Health Plan	Sutter Health Plan	HMO C	439.26	478.31	493.24	508.17	524.25	540.32	556.98	574.21	574.21	574.21	574.21	576.50	587.98	601.76	624.16	642.53	651.72	665.50	679.28	687.89	697.08	701.68	706.27	710.86	715.46	724.64	733.83	747.61	760.82	779.19	802.16	829.15	861.30	897.48	938.82	979.59	1025.53	1070.89	1120.84	1171.37	1225.92	1280.47	1339.61	1399.33	1463.07	1494.65	1558.39	1613.51	1649.68	1695.05	1722.60
UnitedHealthcare	SignatureValue	HMO A	543.94	592.29	610.77	629.26	649.17	669.08	689.70	711.03	711.03	711.03	711.03	713.87	728.09	745.16	772.89	795.64	807.02	824.08	841.15	851.81	863.19	868.88	874.57	880.26	885.94	897.32	908.70	925.76	942.11	964.87	993.31	1026.73	1066.55	1111.34	1162.53	1213.02	1269.90	1326.07	1387.93	1450.50	1518.05	1585.60	1658.83	1732.78	1811.70	1850.81	1929.74	1997.99	2042.79	2098.96	2133.09
UnitedHealthcare	SignatureValue	HMO C	582.34	634.10	653.90	673.69	695.00	716.32	738.39	761.23	761.23	761.23	761.23	764.27	779.50	797.77	827.46	851.82	864.00	882.27	900.54	911.95	924.13	930.22	936.31	942.40	948.49	960.67	972.85	991.12	1008.63	1032.99	1063.44	1099.22	1141.85	1189.80	1244.61	1298.66	1359.56	1419.69	1485.92	1552.91	1625.23	1697.54	1775.95	1855.12	1939.61	1981.48	2065.98	2139.06	2187.01	2247.15	2283.69
UnitedHealthcare	SignatureValue	HMO F	602.34	655.88	676.35	696.82	718.87	740.92	763.75	787.37	787.37	787.37	787.37	790.52	806.27	825.16	855.87	881.07	893.66	912.56	931.46	943.27	955.87	962.17	968.47	974.76	981.06	993.66	1006.26	1025.16	1043.27	1068.46	1099.96	1136.96	1181.06	1230.66	1287.35	1343.25	1406.24	1468.45	1536.95	1606.23	1681.03	1755.84	1836.93	1918.82	2006.22	2049.52	2136.92	2212.51	2262.11	2324.32	2362.11
UnitedHealthcare	SignatureValue	HMO H	564.47	614.65	633.83	653.01	673.68	694.34	715.73	737.87	737.87	737.87	737.87	740.82	755.58	773.29	802.06	825.68	837.48	855.19	872.90	883.97	895.77	901.68	907.58	913.48	919.39	931.19	943.00	960.71	977.68	1001.29	1030.80	1065.48	1106.81	1153.29	1206.42	1258.81	1317.84	1376.13	1440.32	1505.25	1575.35	1645.45	1721.45	1798.19	1880.09	1920.68	2002.58	2073.41	2119.90	2178.19	2213.61
Western Health	Full	HMO A	406.47	442.60	456.41	470.23	485.10	499.98	515.39	531.33	531.33	531.33	531.33	533.45	544.08	556.83	577.55	594.56	603.06	615.81	628.56	636.53	645.03	649.28	653.53	657.78	662.04	670.54	679.04	691.79	704.01	721.01	742.27	767.24	796.99	830.47	868.72	906.45	948.95	990.93	1037.15	1083.91	1134.39	1184.86	1239.59	1294.85	1353.83	1383.05	1442.03	1493.03	1526.51	1568.48	1593.99
Western Health	Full	HMO B	426.53	464.44	478.93	493.43	509.04	524.65	540.82	557.55	557.55	557.55	557.55	559.78	570.93	584.31	606.06	623.90	632.82	646.20	659.58	667.94	676.86	681.33	685.79	690.25	694.71	703.63	712.55	725.93	738.75	756.59	778.90	805.10	836.32	871.45	911.59	951.18	995.78	1039.83	1088.34	1137.40	1190.37	1243.34	1300.76	1358.75	1420.64	1451.30	1513.19	1566.71	1601.84	1645.89	1672.65
Western Health	Full	HMO C	397.43	432.76	446.27	459.77	474.32	488.87	503.93	519.52	519.52	519.52	519.52	521.60	531.99	544.46	564.72	581.34	589.65	602.12	614.59	622.38	630.70	634.85	639.01	643.16	647.32	655.63	663.94	676.41	688.36	704.99	725.77	750.18	779.28	812.01	849.41	886.30	927.86	968.90	1014.10	1059.82	1109.17	1158.53	1212.04	1266.07	1323.73	1352.31	1409.97	1459.85	1492.58	1533.62	1558.56
Western Health	Full	HMO D	382.67	416.69	429.69	442.70	456.70	470.71	485.22	500.22	500.22	500.22	500.22	502.22	512.23	524.23	543.74	559.75	567.75	579.76	591.76	599.27	607.27	611.27	615.27	619.28	623.28	631.28	639.28	651.29	662.79	678.80	698.81	722.32	750.33	781.85	817.86	853.38	893.40	932.91	976.43	1020.45	1067.97	1115.50	1167.02	1219.04	1274.57	1302.08	1357.60	1405.62	1437.14	1476.66	1500.66

Platinum		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																																																		
Anthem Blue Cross	Select HMO	HMO A	623.96	679.43	700.63	721.84	744.68	767.52	791.17	815.64	815.64	815.64	815.64	818.90	835.22	854.79	886.60	912.70	925.75	945.33	964.90	977.14	990.19	996.71	1003.24	1009.76	1016.29	1029.34	1042.39	1061.96	1080.72	1106.82	1139.45	1177.78	1223.46	1274.85	1333.57	1391.48	1456.73	1521.17	1592.13	1663.91	1741.39	1818.88	1902.89	1987.71	2078.25	2123.11	2213.65	2291.95	2343.33	2407.77	2446.92
Anthem Blue Cross	Vivity	HMO B	668.58	728.01	750.73	773.45	797.93	822.40	847.74	873.96	873.96	873.96	873.96	877.46	894.94	915.91	949.99	977.96	991.94	1012.92	1033.89	1047.00	1060.99	1067.98	1074.97	1081.96	1088.95	1102.94	1116.92	1137.90	1158.00	1185.96	1220.92	1262.00	1310.94	1366.00	1428.92	1490.98	1560.89	1629.94	1705.97	1782.88	1865.90	1948.93	2038.95	2129.84	2226.85	2274.92	2371.93	2455.83	2510.89	2579.93	2621.88
Anthem Blue Cross	Vivity	HMO C	654.61	712.80	735.05	757.29	781.25	805.21	830.03	855.70	855.70	855.70	855.70	859.12	876.24	896.77	930.15	957.53	971.22	991.76	1012.29	1025.13	1038.82	1045.67	1052.51	1059.36	1066.20	1079.89	1093.58	1114.12	1133.80	1161.18	1195.41	1235.63	1283.55	1337.46	1399.07	1459.82	1528.28	1595.88	1670.33	1745.63	1826.92	1908.21	1996.35	2085.34	2180.32	2227.39	2322.37	2404.52	2458.43	2526.03	2567.10
Anthem Blue Cross	CaliforniaCare HMO	HMO D	669.50	729.01	751.76	774.52	799.02	823.53	848.91	875.16	875.16	875.16	875.16	878.66	896.16	917.17	951.30	979.30	993.31	1014.31	1035.31	1048.44	1062.44	1069.45	1076.45	1083.45	1090.45	1104.45	1118.45	1139.46	1159.59	1187.59	1222.60	1263.73	1312.74	1367.88	1430.89	1493.02	1563.04	1632.17	1708.31	1785.33	1868.47	1951.61	2041.75	2132.76	2229.91	2278.04	2375.18	2459.20	2514.33	2583.47	2625.48
Anthem Blue Cross	Prudent Buyer - Small Group	PPO B	712.61	775.95	800.17	824.39	850.47	876.55	903.56	931.51	931.51	931.51	931.51	935.24	953.87	976.22	1012.55	1042.36	1057.26	1079.62	1101.98	1115.95	1130.85	1138.31	1145.76	1153.21	1160.66	1175.57	1190.47	1212.83	1234.25	1264.06	1301.32	1345.10	1397.27	1455.95	1523.02	1589.16	1663.68	1737.27	1818.31	1900.28	1988.77	2077.27	2173.21	2270.09	2373.49	2424.72	2528.12	2617.54	2676.23	2749.82	2794.53
Kaiser Permanente	Full	HMO A	500.74	543.98	560.52	577.05	594.86	598.39	616.83	635.91	635.91	635.91	635.91	638.45	651.17	666.44	691.24	711.58	721.76	737.02	752.28	761.82	772.00	777.08	782.17	787.26	792.35	802.52	812.69	827.96	842.58	862.93	888.37	918.26	953.87	993.93	1039.72	1084.86	1135.74	1185.97	1241.30	1297.26	1357.67	1418.08	1483.58	1549.72	1620.30	1655.28	1725.86	1786.91	1826.97	1877.21	1907.73
Kaiser Permanente	Full	HMO B	487.61	529.69	545.77	561.86	579.18	582.24	600.18	618.75	618.75	618.75	618.75	621.22	633.60	648.45	672.58	692.38	702.28	717.13	731.98	741.26	751.16	756.11	761.06	766.01	770.96	780.86	790.76	805.61	819.84	839.64	864.39	893.47	928.12	967.10	1011.65	1055.58	1105.08	1153.96	1207.79	1262.24	1321.02	1379.80	1443.53	1507.88	1576.56	1610.60	1679.28	1738.68	1777.66	1826.54	1856.25
Kaiser Permanente	Full	HMO C	468.29	508.64	524.08	539.51	556.12	558.47	575.68	593.49	593.49	593.49	593.49	595.86	607.73	621.97	645.12	664.11	673.61	687.85	702.10	711.00	720.49	725.24	729.99	734.74	739.48	748.98	758.48	772.72	786.37	805.36	829.10	857.00	890.23	927.62	970.35	1012.49	1059.97	1106.85	1158.49	1210.71	1267.09	1323.48	1384.61	1446.33	1512.20	1544.85	1610.72	1667.70	1705.09	1751.97	1780.47
Sharp Health Plan	Premier	HMO A	387.44	421.88	435.05	448.22	462.40	476.58	491.27	506.46	506.46	506.46	506.46	508.49	518.62	530.77	550.52	566.73	574.83	586.99	599.14	606.74	614.84	618.89	622.95	627.00	631.05	639.15	647.26	659.41	671.06	687.27	707.52	731.33	759.69	791.60	828.06	864.02	904.54	944.55	988.61	1033.18	1081.29	1129.41	1181.57	1234.24	1290.46	1318.32	1374.53	1423.15	1455.06	1495.07	1519.38
Sharp Health Plan	Performance	HMO B	415.31	452.23	466.34	480.46	495.66	510.86	526.60	542.89	542.89	542.89	542.89	545.06	555.92	568.95	590.12	607.49	616.18	629.21	642.24	650.38	659.07	663.41	667.75	672.10	676.44	685.13	693.81	706.84	719.33	736.70	758.42	783.93	814.34	848.54	887.63	926.17	969.60	1012.49	1059.72	1107.50	1159.07	1210.64	1266.56	1323.02	1383.28	1413.14	1473.40	1525.52	1559.72	1602.61	1628.67
Sharp Health Plan	Premier	HMO C	388.91	423.48	436.70	449.92	464.15	478.39	493.13	508.38	508.38	508.38	508.38	510.41	520.58	532.78	552.61	568.88	577.01	589.21	601.41	609.04	617.17	621.24	625.31	629.37	633.44	641.58	649.71	661.91	673.60	689.87	710.21	734.10	762.57	794.60	831.20	867.30	907.97	948.13	992.36	1037.10	1085.39	1133.69	1186.05	1238.92	1295.35	1323.31	1379.74	1428.55	1460.58	1500.74	1525.14
Sutter Health Plan	Sutter Health Plan	HMO A	561.55	611.46	630.55	649.63	670.18	690.74	712.03	734.06	734.06	734.06	734.06	736.98	751.66	769.28	797.91	821.40	833.14	850.76	868.38	879.39	891.13	897.01	902.88	908.75	914.62	926.37	938.11	955.73	972.61	996.10	1025.46	1059.96	1101.07	1147.32	1200.17	1252.28	1311.01	1369.00	1432.86	1497.46	1567.19	1636.92	1712.53	1788.87	1870.35	1910.72	1992.20	2062.67	2108.92	2166.91	2202.13
UnitedHealthcare	SignatureValue	HMO A	604.38	658.10	678.64	699.19	721.31	743.43	766.34	790.04	790.04	790.04	790.04	793.20	809.00	827.96	858.77	884.05	896.70	915.66	934.62	946.47	959.11	965.43	971.75	978.07	984.39	997.03	1009.67	1028.63	1046.80	1072.08	1103.69	1140.82	1185.06	1234.83	1291.72	1347.81	1411.01	1473.42	1542.16	1611.68	1686.74	1761.79	1843.16	1925.33	2013.02	2056.47	2144.17	2220.01	2269.78	2332.20	2370.12
UnitedHealthcare	SignatureValue	HMO B	654.61	712.80	735.05	757.29	781.25	805.21	830.03	855.70	855.70	855.70	855.70	859.12	876.24	896.77	930.15	957.53	971.22	991.76	1012.29	1025.13	1038.82	1045.67	1052.51	1059.36	1066.20	1079.89	1093.58	1114.12	1133.80	1161.18	1195.41	1235.63	1283.55	1337.46	1399.07	1459.82	1528.28	1595.88	1670.33	1745.63	1826.92	1908.21	1996.35	2085.34	2180.32	2227.39	2322.37	2404.52	2458.43	2526.03	2567.10
UnitedHealthcare	SignatureValue	HMO D	628.21	684.05	705.40	726.75	749.75	772.74	796.55	821.19	821.19	821.19	821.19	824.47	840.90	860.61	892.63	918.91	932.05	951.76	971.47	983.79	996.92	1003.49	1010.06	1016.63	1023.20	1036.34	1049.48	1069.19	1088.08	1114.35	1147.20	1185.80	1231.79	1283.52	1342.65	1400.95	1466.65	1531.52	1602.96	1675.23	1753.24	1831.25	1915.84	2001.24	2092.39	2137.56	2228.71	2307.54	2359.28	2424.15	2463.57
UnitedHealthcare	SignatureValue	HMO E	644.21	701.47	723.36	745.26	768.84	792.42	816.84	842.10	842.10	842.10	842.10	845.47	862.31	882.52	915.36	942.31	955.78	975.99	996.20	1008.84	1022.31	1029.05	1035.78	1042.52	1049.26	1062.73	1076.20	1096.41	1115.78	1142.73	1176.41	1215.99	1263.15	1316.20	1376.83	1436.62	1503.99	1570.52	1643.78	1717.88	1797.88	1877.88	1964.62	2052.20	2145.67	2191.99	2285.46	2366.30	2419.35	2485.88	2526.30
Western Health	Full	HMO B	464.61	505.91	521.70	537.49	554.49	571.50	589.11	607.33	607.33	607.33	607.33	609.76	621.91	636.48	660.17	679.60	689.32	703.90	718.47	727.58	737.30	742.16	747.02	751.88	756.73	766.45	776.17	790.75	804.71	824.15	848.44	876.99	911.00	949.26	992.99	1036.11	1084.69	1132.67	1185.51	1238.96	1296.65	1354.35	1416.90	1480.07	1547.48	1580.88	1648.30	1706.60	1744.86	1792.84	1821.99
Western Health	Full	HMO C	459.94	500.82	516.45	532.08	548.92	565.75	583.19	601.22	601.22	601.22	601.22	603.63	615.65	630.08	653.53	672.77	682.39	696.82	711.25	720.27	729.89	734.70	739.51	744.32	749.13	758.75	768.36	782.79	796.62	815.86	839.91	868.17	901.84	939.71	983.00	1025.69	1073.79	1121.28	1173.59	1226.50	1283.61	1340.73	1402.66	1465.18	1531.92	1564.99	1631.72	1689.44	1727.32	1774.81	1803.66
Western Health	Full	HMO D	434.40	473.01	487.78	502.54	518.44	534.34	550.81	567.84	567.84	567.84	567.84	570.11	581.47	595.10	617.24	635.42	644.50	658.13	671.76	680.28	689.36	693.90	698.45	702.99	707.53	716.62	725.70	739.33	752.39	770.56	793.28	819.96	851.76	887.54	928.42	968.74	1014.17	1059.03	1108.43	1158.40	1212.34	1266.29	1324.78	1383.83	1446.86	1478.09	1541.12	1595.64	1631.41	1676.27	1703.52

Health Care Service Plan rates will vary by county

THE INFORMATION PROVIDED HEREIN, INCLUDING THE RATING INFORMATION IS PROVIDED ON TO YOU ON AN “AS IS” “AS AVAILABLE” BASIS WITHOUT WARRANTY OF ANY KIND, EXPRESS OR IMPLIED. WE FURTHER DISCLAIM ALL LIABILITY RELATED TO THE INFORMATION, INCLUDING THOSE CAUSED BY RATING DISCREPANCIES. FINAL RATES AND RATING AREAS ARE BASED UPON ACTUAL ENROLLMENT AND UNDERWRITING AND MUST BE APPROVED BY THE APPLICABLE INSURANCE CARRIER.

USE EMPLOYER ZIP CODE FOR RATING

AREA 7

02/01/27 - 03/01/27

Bronze		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																																																	
Anthem Blue Cross	Prudent Buyer - Small Group	PPO A	475.36	517.62	533.77	549.93	567.33	584.73	602.75	621.39	621.39	621.39	621.39	623.88	636.30	651.22	675.45	695.34	705.28	720.19	735.10	744.43	754.37	759.34	764.31	769.28	774.25	784.19	794.14	809.05	823.34	843.23	868.08	897.29	932.09	971.23	1015.97	1060.09	1109.80	1158.89	1212.95	1267.64	1326.67	1385.70	1449.70	1514.33	1583.30	1617.48	1686.45	1746.11	1785.25	1834.34	1864.17
Anthem Blue Cross	Select PPO	PPO B	414.97	451.86	465.96	480.07	495.26	510.45	526.18	542.45	542.45	542.45	542.45	544.62	555.47	568.49	589.64	607.00	615.68	628.70	641.72	649.86	658.53	662.87	667.21	671.55	675.89	684.57	693.25	706.27	718.75	736.10	757.80	783.30	813.68	847.85	886.91	925.42	968.82	1011.67	1058.86	1106.60	1158.13	1209.66	1265.54	1321.95	1382.16	1412.00	1472.21	1524.28	1558.46	1601.31	1627.35
Anthem Blue Cross	Prudent Buyer - Small Group	PPO C	474.77	516.97	533.10	549.24	566.62	583.99	601.99	620.61	620.61	620.61	620.61	623.09	635.50	650.40	674.60	694.46	704.39	719.29	734.18	743.49	753.42	758.39	763.35	768.32	773.28	783.21	793.14	808.03	822.31	842.17	866.99	896.16	930.92	970.01	1014.70	1058.76	1108.41	1157.44	1211.43	1266.04	1325.00	1383.96	1447.88	1512.43	1581.31	1615.45	1684.34	1743.91	1783.01	1832.04	1861.83
Anthem Blue Cross	Select PPO	PPO D	414.43	451.27	465.35	479.44	494.61	509.78	525.49	541.74	541.74	541.74	541.74	543.91	554.74	567.74	588.87	606.21	614.87	627.88	640.88	649.00	657.67	662.01	666.34	670.67	675.01	683.68	692.34	705.35	717.81	735.14	756.81	782.27	812.61	846.74	885.74	924.21	967.55	1010.35	1057.48	1105.15	1156.61	1208.08	1263.88	1320.22	1380.35	1410.15	1470.28	1522.29	1556.42	1599.22	1625.22
Kaiser Permanente	Full	HMO A	354.40	384.63	396.19	407.75	420.20	418.38	431.28	444.61	444.61	444.61	444.61	446.39	455.28	465.96	483.30	497.52	504.64	515.31	525.98	532.65	539.76	543.32	546.88	550.43	553.99	561.10	568.22	578.89	589.11	603.34	621.13	642.02	666.92	694.93	726.94	758.51	794.08	829.21	867.89	907.01	949.25	991.49	1037.28	1083.52	1132.88	1157.33	1206.68	1249.37	1277.38	1312.50	1333.83
Kaiser Permanente	Full	HMO C	344.53	373.89	385.11	396.34	408.43	406.24	418.76	431.72	431.72	431.72	431.72	433.44	442.08	452.44	469.27	483.09	490.00	500.36	510.72	517.20	524.10	527.56	531.01	534.46	537.92	544.82	551.73	562.09	572.02	585.84	603.11	623.40	647.57	674.77	705.85	736.51	771.04	805.15	842.71	880.70	921.71	962.73	1007.19	1052.09	1100.01	1123.76	1171.68	1213.12	1240.32	1274.42	1295.16
Sharp Health Plan	Premier	HMO A	272.80	297.05	306.32	315.59	325.58	335.56	345.90	356.60	356.60	356.60	356.60	358.03	365.16	373.72	387.62	399.04	404.74	413.30	421.86	427.21	432.91	435.77	438.62	441.47	444.32	450.03	455.73	464.29	472.50	483.91	498.17	514.93	534.90	557.37	583.04	608.36	636.89	665.06	696.08	727.46	761.34	795.22	831.95	869.03	908.62	928.23	967.81	1002.05	1024.51	1052.68	1069.80
Sharp Health Plan	Performance	HMO B	291.24	317.12	327.02	336.92	347.58	358.24	369.28	380.70	380.70	380.70	380.70	382.22	389.84	398.97	413.82	426.00	432.09	441.23	450.37	456.08	462.17	465.22	468.26	471.31	474.35	480.44	486.53	495.67	504.43	516.61	531.84	549.73	571.05	595.03	622.44	649.47	679.93	710.01	743.13	776.63	812.79	848.96	888.17	927.77	970.02	990.96	1033.22	1069.77	1093.75	1123.83	1142.10
Sutter Health Plan	Sutter Health Plan	HMO A	491.14	534.79	551.49	568.18	586.15	604.13	622.75	642.02	642.02	642.02	642.02	644.58	657.42	672.83	697.86	718.41	728.68	744.09	759.50	769.13	779.40	784.54	789.67	794.81	799.94	810.22	820.49	835.90	850.66	871.21	896.89	927.06	963.01	1003.46	1049.69	1095.27	1146.63	1197.35	1253.20	1309.70	1370.69	1431.68	1497.81	1564.58	1635.84	1671.15	1742.41	1804.05	1844.49	1895.21	1926.02
Sutter Health Plan	Sutter Health Plan	HMO B	491.38	535.06	551.76	568.46	586.44	604.43	623.06	642.34	642.34	642.34	642.34	644.90	657.74	673.16	698.21	718.76	729.04	744.46	759.87	769.51	779.78	784.92	790.06	795.20	800.34	810.62	820.89	836.31	851.08	871.64	897.33	927.52	963.49	1003.96	1050.20	1095.81	1147.20	1197.94	1253.82	1310.35	1371.37	1432.39	1498.55	1565.35	1636.65	1671.98	1743.28	1804.94	1845.41	1896.15	1926.97
Western Health	Full	HMO B	316.71	344.87	355.63	366.39	377.99	389.58	401.59	414.01	414.01	414.01	414.01	415.66	423.94	433.88	450.02	463.27	469.90	479.83	489.77	495.98	502.60	505.91	509.23	512.54	515.85	522.47	529.10	539.03	548.56	561.81	578.37	597.82	621.01	647.09	676.90	706.29	739.41	772.12	808.14	844.57	883.90	923.23	965.87	1008.93	1054.89	1077.66	1123.61	1163.36	1189.44	1222.14	1242.02
Western Health	Full	HMO C	330.55	359.93	371.17	382.40	394.50	406.60	419.13	432.09	432.09	432.09	432.09	433.82	442.46	452.83	469.68	483.51	490.42	500.79	511.16	517.64	524.56	528.01	531.47	534.93	538.38	545.30	552.21	562.58	572.52	586.35	603.63	623.94	648.13	675.36	706.47	737.15	771.71	805.85	843.44	881.46	922.51	963.56	1008.07	1053.00	1100.97	1124.73	1172.69	1214.17	1241.39	1275.53	1296.27

Silver		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																																																	
Anthem Blue Cross	Select HMO	HMO A	386.04	420.36	433.48	446.60	460.73	474.86	489.49	504.63	504.63	504.63	504.63	506.65	516.74	528.85	548.53	564.68	572.76	584.87	596.98	604.55	612.62	616.66	620.69	624.73	628.77	636.84	644.92	657.03	668.63	684.78	704.97	728.69	756.95	788.74	825.07	860.90	901.27	941.13	985.04	1029.45	1077.39	1125.32	1177.30	1229.78	1285.80	1313.55	1369.57	1418.01	1449.80	1489.67	1513.89
Anthem Blue Cross	CaliforniaCare HMO	HMO B	437.80	476.72	491.60	506.48	522.50	538.52	555.12	572.29	572.29	572.29	572.29	574.58	586.02	599.76	622.08	640.39	649.55	663.28	677.02	685.60	694.76	699.34	703.92	708.50	713.07	722.23	731.39	745.12	758.28	776.60	799.49	826.39	858.44	894.49	935.69	976.33	1022.11	1067.32	1117.11	1167.47	1221.84	1276.21	1335.15	1394.67	1458.19	1489.67	1553.20	1608.13	1644.19	1689.40	1716.87
Anthem Blue Cross	CaliforniaCare HMO	HMO D	437.25	476.12	490.98	505.84	521.84	537.85	554.42	571.57	571.57	571.57	571.57	573.86	585.29	599.01	621.30	639.59	648.73	662.45	676.17	684.74	693.89	698.46	703.03	707.60	712.18	721.32	730.47	744.18	757.33	775.62	798.48	825.35	857.36	893.36	934.52	975.10	1020.82	1065.98	1115.70	1166.00	1220.30	1274.60	1333.47	1392.92	1456.36	1487.80	1551.24	1606.11	1642.12	1687.27	1714.71
Anthem Blue Cross	Select PPO	PPO B	447.57	487.35	502.57	517.78	534.16	550.54	567.51	585.06	585.06	585.06	585.06	587.40	599.10	613.14	635.96	654.68	664.04	678.08	692.13	700.90	710.26	714.94	719.62	724.30	728.98	738.35	747.71	761.75	775.20	793.93	817.33	844.83	877.59	914.45	956.57	998.11	1044.92	1091.14	1142.04	1193.52	1249.10	1304.68	1364.94	1425.79	1490.73	1522.91	1587.85	1644.02	1680.88	1727.10	1755.18
Anthem Blue Cross	Prudent Buyer - Small Group	PPO C	512.73	558.30	575.73	593.15	611.92	630.69	650.12	670.23	670.23	670.23	670.23	672.91	686.32	702.40	728.54	749.99	760.71	776.80	792.88	802.94	813.66	819.02	824.38	829.74	835.11	845.83	856.55	872.64	888.05	909.50	936.31	967.81	1005.35	1047.57	1095.83	1143.41	1197.03	1249.98	1308.29	1367.27	1430.94	1494.61	1563.65	1633.35	1707.75	1744.61	1819.00	1883.35	1925.57	1978.52	2010.69
Anthem Blue Cross	Prudent Buyer - Small Group	PPO D	497.14	541.33	558.23	575.13	593.32	611.52	630.36	649.86	649.86	649.86	649.86	652.46	665.46	681.05	706.40	727.19	737.59	753.19	768.78	778.53	788.93	794.13	799.33	804.53	809.73	820.12	830.52	846.12	861.06	881.86	907.85	938.40	974.79	1015.73	1062.52	1108.66	1160.65	1211.99	1268.53	1325.71	1387.45	1449.19	1516.12	1583.71	1655.84	1691.59	1763.72	1826.11	1867.05	1918.39	1949.58
Anthem Blue Cross	Select PPO	PPO E	433.98	472.55	487.30	502.05	517.94	533.82	550.27	567.29	567.29	567.29	567.29	569.56	580.90	594.52	616.64	634.80	643.87	657.49	671.10	679.61	688.69	693.23	697.77	702.31	706.84	715.92	725.00	738.61	751.66	769.81	792.50	819.17	850.94	886.67	927.52	967.80	1013.18	1058.00	1107.35	1157.27	1211.16	1265.06	1323.49	1382.49	1445.45	1476.66	1539.63	1594.08	1629.82	1674.64	1701.87
Anthem Blue Cross	Prudent Buyer - Small Group	PPO F	514.81	560.57	578.06	595.56	614.40	633.25	652.76	672.95	672.95	672.95	672.95	675.64	689.10	705.25	731.50	753.03	763.80	779.95	796.10	806.19	816.96	822.34	827.73	833.11	838.50	849.26	860.03	876.18	891.66	913.19	940.11	971.74	1009.43	1051.82	1100.27	1148.05	1201.89	1255.05	1313.60	1372.82	1436.75	1500.68	1569.99	1639.98	1714.68	1751.69	1826.39	1890.99	1933.39	1986.55	2018.85
Kaiser Permanente	Full	HMO A	386.62	419.72	432.38	445.03	458.66	458.02	472.14	486.74	486.74	486.74	486.74	488.68	498.42	510.10	529.08	544.66	552.45	564.13	575.81	583.11	590.90	594.79	598.69	602.58	606.48	614.26	622.05	633.73	644.93	660.50	679.97	702.85	730.11	760.77	795.82	830.37	869.31	907.77	950.11	992.95	1039.19	1085.43	1135.56	1186.18	1240.21	1266.98	1321.01	1367.73	1398.40	1436.85	1460.22
Kaiser Permanente	Full	HMO B	391.75	425.30	438.13	450.96	464.78	464.33	478.64	493.44	493.44	493.44	493.44	495.41	505.28	517.12	536.37	552.16	560.05	571.90	583.74	591.14	599.03	602.98	606.93	610.88	614.82	622.72	630.61	642.46	653.81	669.60	689.33	712.53	740.16	771.24	806.77	841.81	881.28	920.26	963.19	1006.61	1053.49	1100.37	1151.19	1202.51	1257.28	1284.42	1339.19	1386.56	1417.65	1456.63	1480.32
Kaiser Permanente	Full	HMO C	388.95	422.26	434.99	447.73	461.44	460.88	475.09	489.78	489.78	489.78	489.78	491.74	501.53	513.29	532.39	548.06	555.90	567.65	579.41	586.76	594.59	598.51	602.43	606.35	610.27	618.10	625.94	637.69	648.96	664.63	684.22	707.24	734.67	765.53	800.79	835.56	874.75	913.44	956.05	999.15	1045.68	1092.21	1142.66	1193.59	1247.96	1274.90	1329.26	1376.28	1407.14	1445.83	1469.34
Kaiser Permanente	Full	HMO D	357.19	387.67	399.32	410.98	423.53	421.81	434.81	448.26	448.26	448.26	448.26	450.05	459.01	469.77	487.26	501.60	508.77	519.53	530.29	537.01	544.18	547.77	551.36	554.94	558.53	565.70	572.87	583.63	593.94	608.28	626.21	647.28	672.39	700.63	732.90	764.73	800.59	836.00	875.00	914.44	957.03	999.61	1045.78	1092.40	1142.16	1166.81	1216.57	1259.60	1287.84	1323.25	1344.78
Kaiser Permanente	Full	HMO E	372.50	404.34	416.52	428.69	441.81	440.65	454.23	468.28	468.28	468.28	468.28	470.15	479.51	490.75	509.02	524.00	531.49	542.73	553.97	560.99	568.49	572.23	575.98	579.73	583.47	590.96	598.46	609.70	620.47	635.45	654.18	676.19	702.41	731.92	765.63	798.88	836.34	873.33	914.07	955.28	999.77	1044.26	1092.49	1141.19	1193.17	1218.92	1270.90	1315.86	1345.36	1382.35	1404.84
Sharp Health Plan	Premier	HMO A	285.29	310.65	320.35	330.04	340.49	350.93	361.74	372.93	372.93	372.93	372.93	374.42	381.88	390.83	405.37	417.31	423.28	432.23	441.18	446.77	452.74	455.72	458.70	461.69	464.67	470.64	476.60	485.55	494.13	506.07	520.98	538.51	559.40	582.89	609.74	636.22	666.05	695.51	727.96	760.78	796.21	831.63	870.05	908.83	950.23	970.74	1012.13	1047.93	1071.43	1100.89	1118.79
Sharp Health Plan	Performance	HMO B	294.75	320.95	330.96	340.98	351.77	362.56	373.73	385.29	385.29	385.29	385.29	386.83	394.54	403.78	418.81	431.14	437.30	446.55	455.80	461.58	467.74	470.82	473.91	476.99	480.07	486.24	492.40	501.65	510.51	522.84	538.25	556.36	577.94	602.21	629.95	657.30	688.13	718.57	752.09	785.99	822.59	859.20	898.88	938.95	981.72	1002.91	1045.68	1082.66	1106.94	1137.38	1155.87
Sharp Health Plan	Premier	HMO C	268.76	292.65	301.78	310.92	320.76	330.59	340.78	351.32	351.32	351.32	351.32	352.73	359.75	368.18	381.88	393.13	398.75	407.18	415.61	420.88	426.50	429.31	432.12	434.93	437.74	443.37	448.99	457.42	465.50	476.74	490.79	507.31	526.98	549.11	574.41	599.35	627.46	655.21	685.78	716.69	750.07	783.44	819.63	856.17	895.16	914.49	953.48	987.21	1009.34	1037.10	1053.96
Sutter Health Plan	Sutter Health Plan	HMO B	600.39	653.76	674.17	694.57	716.55	738.52	761.28	784.84	784.84	784.84	784.84	787.97	803.66	822.50	853.11	878.22	890.78	909.62	928.45	940.23	952.78	959.06	965.34	971.62	977.90	990.45	1003.01	1021.85	1039.90	1065.01	1096.41	1133.29	1177.24	1226.69	1283.20	1338.92	1401.70	1463.71	1531.99	1601.05	1675.61	1750.17	1831.01	1912.63	1999.74	2042.91	2130.03	2205.37	2254.81	2316.81	2354.48
Sutter Health Plan	Sutter Health Plan	HMO C	520.01	566.23	583.90	601.58	620.61	639.64	659.35	679.76	679.76	679.76	679.76	682.47	696.06	712.38	738.89	760.64	771.51	787.83	804.14	814.34	825.21	830.65	836.09	841.53	846.97	857.84	868.72	885.03	900.67	922.42	949.61	981.56	1019.62	1062.45	1111.39	1159.65	1214.03	1267.73	1326.87	1386.68	1451.26	1515.84	1585.85	1656.54	1732.00	1769.38	1844.83	1910.09	1952.91	2006.61	2039.23
UnitedHealthcare	SignatureValue	HMO A	496.82	540.98	557.87	574.75	592.94	611.12	629.96	649.44	649.44	649.44	649.44	652.04	665.03	680.61	705.94	726.72	737.11	752.70	768.29	778.03	788.42	793.62	798.81	804.01	809.20	819.59	829.98	845.57	860.51	881.29	907.27	937.79	974.16	1015.07	1061.83	1107.94	1159.90	1211.21	1267.71	1324.86	1386.55	1448.25	1515.14	1582.69	1654.77	1690.49	1762.58	1824.93	1865.84	1917.15	1948.32
Western Health	Full	HMO B	362.81	395.06	407.40	419.73	433.01	446.29	460.04	474.27	474.27	474.27	474.27	476.16	485.65	497.03	515.53	530.71	538.29	549.68	561.06	568.17	575.76	579.56	583.35	587.14	590.94	598.53	606.11	617.50	628.40	643.58	662.55	684.84	711.40	741.28	775.43	809.10	847.04	884.51	925.77	967.51	1012.56	1057.62	1106.47	1155.79	1208.43	1234.52	1287.16	1332.69	1362.57	1400.04	1422.80
Western Health	Full	HMO C	342.86	373.34	384.99	396.64	409.19	421.74	434.74	448.18	448.18	448.18	448.18	449.98	458.94	469.70	487.18	501.52	508.69	519.45	530.20	536.93	544.10	547.68	551.27	554.85	558.44	565.61	572.78	583.54	593.84	608.19	626.11	647.18	672.28	700.51	732.78	764.60	800.46	835.86	874.86	914.30	956.87	999.45	1045.62	1092.23	1141.97	1166.63	1216.37	1259.40	1287.64	1323.04	1344.54
Western Health	Full	HMO D	330.78	360.19	371.43	382.67	394.78	406.88	419.42	432.40	432.40	432.40	432.40	434.12	442.77	453.15	470.01	483.85	490.77	501.15	511.52	518.01	524.93	528.39	531.85	535.31	538.76	545.68	552.60	562.98	572.92	586.76	604.06	624.38	648.59	675.83	706.97	737.67	772.26	806.42	844.04	882.09	923.16	964.24	1008.78	1053.75	1101.74	1125.52	1173.52	1215.03	1242.27	1276.43	1297.19

Health Care Service Plan rates will vary by county

THE INFORMATION PROVIDED HEREIN, INCLUDING THE RATING INFORMATION IS PROVIDED ON TO YOU ON AN "AS IS" "AS AVAILABLE" BASIS WITHOUT WARRANTY OF ANY KIND, EXPRESS OR IMPLIED. WE FURTHER DISCLAIM ALL LIABILITY RELATED TO THE INFORMATION, INCLUDING THOSE CAUSED BY RATING DISCREPANCIES. FINAL RATES AND RATING AREAS ARE BASED UPON ACTUAL ENROLLMENT AND UNDERWRITING AND MUST BE APPROVED BY THE APPLICABLE INSURANCE CARRIER.

Continued

Gold		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																																																			
Anthem Blue Cross	Select HMO	HMO A	494.91	538.90	555.72	572.54	590.66	608.77	627.53	646.94	646.94	646.94	646.94	649.53	662.47	677.99	703.22	723.93	734.28	749.80	765.33	775.03	785.39	790.56	795.74	800.91	806.09	816.44	826.79	842.32	857.20	877.90	903.78	934.18	970.41	1011.17	1057.75	1103.68	1155.43	1206.54	1262.83	1319.76	1381.22	1442.68	1509.31	1576.59	1648.40	1683.98	1755.80	1817.90	1858.66	1909.77	1940.82
Anthem Blue Cross	CaliforniaCare HMO	HMO B	561.30	611.20	630.27	649.35	669.90	690.44	711.72	733.73	733.73	733.73	733.73	736.66	751.34	768.95	797.56	821.04	832.78	850.39	868.00	879.01	890.75	896.62	902.49	908.36	914.23	925.97	937.71	955.32	972.19	995.67	1025.02	1059.51	1100.60	1146.82	1199.65	1251.74	1310.44	1368.41	1432.24	1496.81	1566.51	1636.22	1711.79	1788.10	1869.54	1909.90	1991.34	2061.78	2108.01	2165.97	2201.19
Anthem Blue Cross	Priority Select HMO	HMO C	417.71	454.83	469.03	483.23	498.52	513.80	529.64	546.02	546.02	546.02	546.02	548.20	559.12	572.23	593.52	611.00	619.73	632.84	645.94	654.13	662.87	667.24	671.60	675.97	680.34	689.08	697.81	710.92	723.48	740.95	762.79	788.45	819.03	853.43	892.74	931.51	975.19	1018.33	1065.83	1113.88	1165.75	1217.62	1273.86	1330.65	1391.26	1421.29	1481.90	1534.32	1568.72	1611.85	1638.06
Anthem Blue Cross	Select PPO	PPO B	529.85	576.94	594.95	612.96	632.35	651.75	671.83	692.61	692.61	692.61	692.61	695.38	709.23	725.86	752.87	775.03	786.11	802.73	819.36	829.75	840.83	846.37	851.91	857.45	862.99	874.07	885.16	901.78	917.71	939.87	967.58	1000.13	1038.92	1082.55	1132.42	1181.59	1237.00	1291.72	1351.97	1412.92	1478.72	1544.52	1615.86	1687.89	1764.77	1802.86	1879.74	1946.23	1989.87	2044.58	2077.83
Anthem Blue Cross	Select PPO	PPO C	546.67	595.26	613.84	632.42	652.43	672.44	693.16	714.60	714.60	714.60	714.60	717.46	731.75	748.90	776.77	799.64	811.07	828.22	845.37	856.09	867.52	873.24	878.96	884.67	890.39	901.83	913.26	930.41	946.85	969.71	998.30	1031.88	1071.90	1116.92	1168.37	1219.11	1276.28	1332.73	1394.90	1457.78	1525.67	1593.56	1667.16	1741.48	1820.80	1860.10	1939.42	2008.03	2053.05	2109.50	2143.80
Anthem Blue Cross	Select PPO	PPO D	525.98	572.73	590.61	608.48	627.73	646.98	666.92	687.55	687.55	687.55	687.55	690.30	704.05	720.55	747.37	769.37	780.37	796.87	813.37	823.68	834.69	840.19	845.69	851.19	856.69	867.69	878.69	895.19	911.00	933.01	960.51	992.82	1031.33	1074.64	1124.14	1172.96	1227.96	1282.28	1342.10	1402.60	1467.92	1533.24	1604.05	1675.56	1751.88	1789.69	1866.01	1932.02	1975.33	2029.65	2062.65
Anthem Blue Cross	Prudent Buyer - Small Group	PPO E	626.26	681.93	703.21	724.50	747.42	770.34	794.08	818.64	818.64	818.64	818.64	821.91	838.29	857.93	889.86	916.06	929.16	948.80	968.45	980.73	993.83	1000.38	1006.93	1013.48	1020.03	1033.12	1046.22	1065.87	1084.70	1110.89	1143.64	1182.12	1227.96	1279.53	1338.48	1396.60	1462.09	1526.76	1597.99	1670.03	1747.80	1825.57	1909.89	1995.03	2085.89	2130.92	2221.79	2300.38	2351.95	2416.63	2455.92
Anthem Blue Cross	Prudent Buyer - Small Group	PPO H	602.59	656.15	676.63	697.11	719.17	741.23	764.07	787.70	787.70	787.70	787.70	790.85	806.60	825.51	856.23	881.44	894.04	912.94	931.85	943.66	956.27	962.57	968.87	975.17	981.47	994.08	1006.68	1025.59	1043.70	1068.91	1100.42	1137.44	1181.55	1231.18	1287.89	1343.82	1406.83	1469.06	1537.59	1606.91	1681.74	1756.57	1837.70	1919.62	2007.06	2050.38	2137.82	2213.44	2263.06	2325.29	2363.10
Anthem Blue Cross	Prudent Buyer - Small Group	PPO I	611.47	665.83	686.61	707.39	729.77	752.15	775.33	799.31	799.31	799.31	799.31	802.51	818.49	837.68	868.85	894.43	907.22	926.40	945.58	957.57	970.36	976.76	983.15	989.55	995.94	1008.73	1021.52	1040.70	1059.09	1084.66	1116.64	1154.20	1198.97	1249.32	1306.87	1363.62	1427.57	1490.71	1560.25	1630.59	1706.53	1782.46	1864.79	1947.92	2036.64	2080.60	2169.33	2246.06	2296.42	2359.56	2397.93
Kaiser Permanente	Full	HMO B	465.18	505.26	520.58	535.91	552.41	554.64	571.74	589.42	589.42	589.42	589.42	591.78	603.56	617.71	640.70	659.56	668.99	683.14	697.28	706.12	715.55	720.27	724.99	729.70	734.42	743.85	753.28	767.42	780.98	799.84	823.42	851.12	884.13	921.26	963.70	1005.55	1052.70	1099.27	1150.55	1202.41	1258.41	1314.40	1375.11	1436.41	1501.84	1534.26	1599.68	1656.27	1693.40	1739.96	1768.26
Kaiser Permanente	Full	HMO C	478.65	519.93	535.71	551.50	568.49	571.22	588.82	607.03	607.03	607.03	607.03	609.46	621.60	636.17	659.85	679.27	688.98	703.55	718.12	727.23	736.94	741.80	746.65	751.51	756.36	766.08	775.79	790.36	804.32	823.75	848.03	876.56	910.55	948.79	992.50	1035.60	1084.16	1132.12	1184.93	1238.35	1296.02	1353.69	1416.21	1479.34	1546.72	1580.11	1647.49	1705.77	1744.01	1791.97	1821.09
Kaiser Permanente	Full	HMO D	451.79	490.68	505.55	520.42	536.43	538.18	554.76	571.92	571.92	571.92	571.92	574.21	585.64	599.37	621.68	639.98	649.13	662.85	676.58	685.16	694.31	698.88	703.46	708.04	712.61	721.76	730.91	744.64	757.79	776.09	798.97	825.85	857.88	893.91	935.09	975.69	1021.45	1066.63	1116.39	1166.71	1221.05	1275.38	1334.29	1393.77	1457.25	1488.70	1552.19	1607.09	1643.12	1688.30	1715.76
Kaiser Permanente	Full	HMO E	403.84	438.46	451.70	464.94	479.20	479.19	493.96	509.24	509.24	509.24	509.24	511.27	521.46	533.68	553.54	569.84	577.98	590.21	602.43	610.07	618.21	622.29	626.36	630.44	634.51	642.66	650.80	663.03	674.74	691.03	711.40	735.34	763.86	795.94	832.60	868.76	909.50	949.73	994.03	1038.84	1087.22	1135.60	1188.05	1241.01	1297.54	1325.54	1382.07	1430.96	1463.04	1503.27	1527.72
Kaiser Permanente	Full	HMO F	461.28	501.01	516.21	531.40	547.76	549.85	566.80	584.33	584.33	584.33	584.33	586.66	598.35	612.38	635.16	653.86	663.21	677.24	691.26	700.02	709.37	714.05	718.72	723.40	728.07	737.42	746.77	760.79	774.23	792.93	816.31	843.77	876.49	913.30	955.38	996.86	1043.61	1089.77	1140.61	1192.03	1247.54	1303.05	1363.24	1424.01	1488.87	1521.00	1585.86	1641.96	1678.77	1724.93	1752.99
Sharp Health Plan	Performance	HMO A	366.15	398.70	411.14	423.59	436.99	450.39	464.27	478.63	478.63	478.63	478.63	480.54	490.12	501.60	520.27	535.59	543.25	554.73	566.22	573.40	581.06	584.89	588.71	592.54	596.37	604.03	611.69	623.18	634.18	649.50	668.65	691.14	717.95	748.10	782.56	816.54	854.83	892.64	934.29	976.41	1021.88	1067.34	1116.64	1166.42	1219.55	1245.87	1299.00	1344.95	1375.10	1412.92	1435.89
Sharp Health Plan	Premier	HMO B	345.92	376.67	388.42	400.18	412.84	425.50	438.61	452.18	452.18	452.18	452.18	453.99	463.03	473.88	491.52	505.99	513.22	524.08	534.93	541.71	548.95	552.56	556.18	559.80	563.42	570.65	577.89	588.74	599.14	613.61	631.70	652.95	678.27	706.76	739.31	771.42	807.59	843.32	882.66	922.45	965.40	1008.36	1054.94	1101.96	1152.15	1177.02	1227.22	1270.63	1299.11	1334.84	1356.54
Sharp Health Plan	Performance	HMO D	377.08	410.59	423.41	436.23	450.03	463.83	478.12	492.91	492.91	492.91	492.91	494.88	504.74	516.57	535.79	551.57	559.45	571.28	583.11	590.51	598.39	602.34	606.28	610.22	614.17	622.05	629.94	641.77	653.11	668.88	688.60	711.76	739.37	770.42	805.91	840.90	880.34	919.28	962.16	1005.54	1052.36	1099.19	1149.96	1201.22	1255.93	1283.04	1337.76	1385.08	1416.13	1455.07	1478.73
Sutter Health Plan	Sutter Health Plan	HMO A	657.73	716.19	738.55	760.90	784.97	809.05	833.98	859.78	859.78	859.78	859.78	863.21	880.41	901.04	934.57	962.09	975.84	996.48	1017.11	1030.01	1043.76	1050.64	1057.52	1064.40	1071.28	1085.03	1098.79	1119.42	1139.20	1166.71	1201.10	1241.51	1289.66	1343.83	1405.73	1466.77	1535.55	1603.48	1678.28	1753.94	1835.62	1917.29	2005.85	2095.27	2190.70	2237.99	2333.42	2415.96	2470.13	2538.05	2579.31
Sutter Health Plan	Sutter Health Plan	HMO B	705.48	768.19	792.17	816.14	841.96	867.79	894.53	922.21	922.21	922.21	922.21	925.88	944.33	966.46	1002.43	1031.94	1046.69	1068.82	1090.96	1104.79	1119.55	1126.92	1134.30	1141.68	1149.06	1163.81	1178.57	1200.70	1221.91	1251.42	1288.31	1331.65	1383.29	1441.39	1507.79	1573.27	1647.04	1719.90	1800.13	1881.28	1968.89	2056.50	2151.48	2247.39	2349.75	2400.48	2502.84	2591.37	2649.47	2722.32	2766.58
Sutter Health Plan	Sutter Health Plan	HMO C	599.39	652.67	673.04	693.41	715.35	737.29	760.01	783.53	783.53	783.53	783.53	786.65	802.32	821.13	851.68	876.76	889.29	908.10	926.90	938.65	951.19	957.46	963.73	969.99	976.26	988.80	1001.33	1020.14	1038.16	1063.23	1094.57	1131.40	1175.28	1224.64	1281.05	1336.68	1399.36	1461.26	1529.43	1598.38	1672.81	1747.24	1827.95	1909.43	1996.40	2039.50	2126.47	2201.68	2251.04	2312.94	2350.54
UnitedHealthcare	SignatureValue	HMO A	543.94	592.29	610.77	629.26	649.17	669.08	689.70	711.03	711.03	711.03	711.03	713.87	728.09	745.16	772.89	795.64	807.02	824.08	841.15	851.81	863.19	868.88	874.57	880.26	885.94	897.32	908.70	925.76	942.11	964.87	993.31	1026.73	1066.55	1111.34	1162.53	1213.02	1269.90	1326.07	1387.93	1450.50	1518.05	1585.60	1658.83	1732.78	1811.70	1850.81	1929.74	1997.99	2042.79	2098.96	2133.09
UnitedHealthcare	SignatureValue	HMO C	582.34	634.10	653.90	673.69	695.00	716.32	738.39	761.23	761.23	761.23	761.23	764.27	779.50	797.77	827.46	851.82	864.00	882.27	900.54	911.95	924.13	930.22	936.31	942.40	948.49	960.67	972.85	991.12	1008.63	1032.99	1063.44	1099.22	1141.85	1189.80	1244.61	1298.66	1359.56	1419.69	1485.92	1552.91	1625.23	1697.54	1775.95	1855.12	1939.61	1981.48	2065.98	2139.06	2187.01	2247.15	2283.69
UnitedHealthcare	SignatureValue	HMO F	602.34	655.88	676.35	696.82	718.87	740.92	763.75	787.37	787.37	787.37	787.37	790.52	806.27	825.16	855.87	881.07	893.66	912.56	931.46	943.27	955.87	962.17	968.47	974.76	981.06	993.66	1006.26	1025.16	1043.27	1068.46	1099.96	1136.96	1181.06	1230.66	1287.35	1343.25	1406.24	1468.45	1536.95	1606.23	1681.03	1755.84	1836.93	1918.82	2006.22	2049.52	2136.92	2212.51	2262.11	2324.32	2362.11
UnitedHealthcare	SignatureValue	HMO H	564.47	614.65	633.83	653.01	673.68	694.34	715.73	737.87	737.87	737.87	737.87	740.82	755.58	773.29	802.06	825.68	837.48	855.19	872.90	883.97	895.77	901.68	907.58	913.48	919.39	931.19	943.00	960.71	977.68	1001.29	1030.80	1065.48	1106.81	1153.29	1206.42	1258.81	1317.84	1376.13	1440.32	1505.25	1575.35	1645.45	1721.45	1798.19	1880.09	1920.68	2002.58	2073.41	2119.90	2178.19	2213.61
Western Health	Full	HMO A	406.47	442.60	456.41	470.23	485.10	499.98	515.39	531.33	531.33	531.33	531.33	533.45	544.08	556.83	577.55	594.56	603.06	615.81	628.56	636.53	645.03	649.28	653.53	657.78	662.04	670.54	679.04	691.79	704.01	721.01	742.27	767.24	796.99	830.47	868.72	906.45	948.95	990.93	1037.15	1083.91	1134.39	1184.86	1239.59	1294.85	1353.83	1383.05	1442.03	1493.03	1526.51	1568.48	1593.99
Western Health	Full	HMO B	426.53	464.44	478.93	493.43	509.04	524.65	540.82	557.55	557.55	557.55	557.55	559.78	570.93	584.31	606.06	623.90	632.82	646.20	659.58	667.94	676.86	681.33	685.79	690.25	694.71	703.63	712.55	725.93	738.75	756.59	778.90	805.10	836.32	871.45	911.59	951.18	995.78	1039.83	1088.34	1137.40	1190.37	1243.34	1300.76	1358.75	1420.64	1451.30	1513.19	1566.71	1601.84	1645.89	1672.65
Western Health	Full	HMO C	397.43	432.76	446.27	459.77	474.32	488.87	503.93	519.52	519.52	519.52	519.52	521.60	531.99	544.46	564.72	581.34	589.65	602.12	614.59	622.38	630.70	634.85	639.01	643.16	647.32	655.63	663.94	676.41	688.36	704.99	725.77	750.18	779.28	812.01	849.41	886.30	927.86	968.90	1014.10	1059.82	1109.17	1158.53	1212.04	1266.07	1323.73	1352.31	1409.97	1459.85	1492.58	1533.62	1558.56
Western Health	Full	HMO D	382.67	416.69	429.69	442.70	456.70	470.71	485.22	500.22	500.22	500.22	500.22	502.22	512.23	524.23	543.74	559.75	567.75	579.76	591.76	599.27	607.27	611.27	615.27	619.28	623.28	631.28	639.28	651.29	662.79	678.80	698.81	722.32	750.33	781.85	817.86	853.38	893.40	932.91	976.43	1020.45	1067.97	1115.50	1167.02	1219.04	1274.57	1302.08	1357.60	1405.62	1437.14	1476.66	1500.66

Platinum		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																																																		
Anthem Blue Cross	Select HMO	HMO A	536.94	584.67	602.91	621.16	640.82	660.47	680.82	701.88	701.88	701.88	701.88	704.69	718.73	735.57	762.94	785.40	796.63	813.48	830.32	840.85	852.08	857.70	863.31	868.93	874.54	885.77	897.00	913.85	929.99	952.45	980.53	1013.51	1052.82	1097.04	1147.57	1197.41	1253.56	1309.01	1370.07	1431.84	1498.51	1565.19	1637.49	1710.48	1788.39	1826.99	1904.90	1972.28	2016.50	2071.95	2105.64
Anthem Blue Cross	Vivity	HMO B	608.00	662.04	682.71	703.37	725.63	747.88	770.93	794.77	794.77	794.77	794.77	797.95	813.84	832.92	863.91	889.35	902.06	921.14	940.21	952.13	964.85	971.21	977.57	983.93	990.28	1003.00	1015.72	1034.79	1053.07	1078.50	1110.29	1147.65	1192.16	1242.23	1299.45	1355.88	1419.46	1482.25	1551.39	1621.33	1696.83	1772.34	1854.20	1936.85	2025.07	2068.79	2157.01	2233.30	2283.37	2346.16	2384.31
Anthem Blue Cross	Vivity	HMO C	595.29	648.21	668.44	688.67	710.46	732.25	754.82	778.16	778.16	778.16	778.16	781.27	796.84	815.51	845.86	870.76	883.21	901.89	920.56	932.24	944.69	950.91	957.14	963.36	969.59	982.04	994.49	1013.16	1031.06	1055.96	1087.09	1123.66	1167.24	1216.26	1272.29	1327.54	1389.79	1451.27	1518.97	1587.45	1661.37	1735.30	1815.45	1896.38	1982.75	2025.55	2111.93	2186.63	2235.65	2297.13	2334.48
Anthem Blue Cross	CaliforniaCare HMO	HMO D	608.84	662.96	683.65	704.34	726.63	748.91	771.99	795.87	795.87	795.87	795.87	799.05	814.97	834.07	865.11	890.58	903.31	922.41	941.51	953.45	966.19	972.55	978.92	985.29	991.65	1004.39	1017.12	1036.22	1054.53	1080.00	1111.83	1149.24	1193.81	1243.94	1301.25	1357.75	1421.42	1484.30	1553.54	1623.57	1699.18	1774.79	1856.76	1939.54	2027.88	2071.65	2159.99	2236.39	2286.53	2349.41	2387.61
Anthem Blue Cross	Prudent Buyer - Small Group	PPO B	706.54	769.34	793.36	817.37	843.23	869.09	895.87	923.58	923.58	923.58	923.58	927.27	945.75	967.91	1003.93	1033.49	1048.26	1070.43	1092.60	1106.45	1121.23	1128.61	1136.00	1143.39	1150.78	1165.56	1180.34	1202.50	1223.74	1253.30	1290.24	1333.65	1385.37	1443.56	1510.05	1575.63	1649.51	1722.48	1802.83	1884.10	1971.84	2059.58	2154.71	2250.76	2353.28	2404.08	2506.60	2595.26	2653.45	2726.41	2770.74
Kaiser Permanente	Full	HMO A	515.34	559.88	576.91	593.93	612.27	616.34	635.34	654.99	654.99	654.99	654.99	657.61	670.71	686.43	711.97	732.93	743.41	759.13	774.85	784.68	795.16	800.40	805.64	810.88	816.12	826.60	837.08	852.80	867.86	888.82	915.02	945.80	982.48	1023.75	1070.91	1117.41	1169.81	1221.55	1278.54	1336.18	1398.40	1460.62	1528.09	1596.21	1668.91	1704.94	1777.64	1840.52	1881.78	1933.53	1964.97
Kaiser Permanente	Full	HMO B	501.81	545.15	561.72	578.29	596.13	599.71	618.19	637.31	637.31	637.31	637.31	639.86	652.60	667.90	692.75	713.15	723.34	738.64	753.94	763.50	773.69	778.79	783.89	788.99	794.09	804.28	814.48	829.78	844.43	864.83	890.32	920.27	955.96	996.11	1042.00	1087.25	1138.23	1188.58	1244.03	1300.11	1360.65	1421.20	1486.84	1553.12	1623.86	1658.91	1729.65	1790.84	1830.99	1881.33	1911.93
Kaiser Permanente	Full	HMO C	481.91	523.48	539.37	555.26	572.38	575.23	592.95	611.29	611.29	611.29	611.29	613.74	625.96	640.63	664.47	684.04	693.82	708.49	723.16	732.33	742.11	747.00	751.89	756.78	761.67	771.45	781.23	795.90	809.96	829.52	853.97	882.71	916.94	955.45	999.46	1042.86	1091.77	1140.06	1193.24	1247.03	1305.11	1363.18	1426.14	1489.72	1557.57	1591.19	1659.05	1717.73	1756.24	1804.53	1833.87
Sharp Health Plan	Premier	HMO A	387.44	421.88	435.05	448.22	462.40	476.58	491.27	506.46	506.46	506.46	506.46	508.49	518.62	530.77	550.52	566.73	574.83	586.99	599.14	606.74	614.84	618.89	622.95	627.00	631.05	639.15	647.26	659.41	671.06	687.27	707.52	731.33	759.69	791.60	828.06	864.02	904.54	944.55	988.61	1033.18	1081.29	1129.41	1181.57	1234.24	1290.46	1318.32	1374.53	1423.15	1455.06	1495.07	1519.38
Sharp Health Plan	Performance	HMO B	415.31	452.23	466.34	480.46	495.66	510.86	526.60	542.89	542.89	542.89	542.89	545.06	555.92	568.95	590.12	607.49	616.18	629.21	642.24	650.38	659.07	663.41	667.75	672.10	676.44	685.13	693.81	706.84	719.33	736.70	758.42	783.93	814.34	848.54	887.63	926.17	969.60	1012.49	1059.72	1107.50	1159.07	1210.64	1266.56	1323.02	1383.28	1413.14	1473.40	1525.52	1559.72	1602.61	1628.67
Sharp Health Plan	Premier	HMO C	388.91	423.48	436.70	449.92	464.15	478.39	493.13	508.38	508.38	508.38	508.38	510.41	520.58	532.78	552.61	568.88	577.01	589.21	601.41	609.04	617.17	621.24	625.31	629.37	633.44	641.58	649.71	661.91	673.60	689.87	710.21	734.10	762.57	794.60	831.20	867.30	907.97	948.13	992.36	1037.10	1085.39	1133.69	1186.05	1238.92	1295.35	1323.31	1379.74	1428.55	1460.58	1500.74	1525.14
Sutter Health Plan	Sutter Health Plan	HMO A	766.25	834.36	860.40	886.44	914.49	942.53	971.58	1001.64	1001.64	1001.64	1001.64	1005.64	1025.67	1049.71	1088.77	1120.82	1136.85	1160.89	1184.93	1199.95	1215.98	1223.99	1232.00	1240.02	1248.03	1264.06	1280.08	1304.12	1327.16	1359.21	1399.28	1446.35	1502.45	1565.55	1637.67	1708.78	1788.91	1868.04	1955.18	2043.33	2138.48	2233.63	2336.80	2440.97	2552.15	2607.24	2718.42	2814.58	2877.68	2956.81	3004.88
UnitedHealthcare	SignatureValue	HMO A	604.38	658.10	678.64	699.19	721.31	743.43	766.34	790.04	790.04	790.04	790.04	793.20	809.00	827.96	858.77	884.05	896.70	915.66	934.62	946.47	959.11	965.43	971.75	978.07	984.39	997.03	1009.67	1028.63	1046.80	1072.08	1103.69	1140.82	1185.06	1234.83	1291.72	1347.81	1411.01	1473.42	1542.16	1611.68	1686.74	1761.79	1843.16	1925.33	2013.02	2056.47	2144.17	2220.01	2269.78	2332.20	2370.12
UnitedHealthcare	SignatureValue	HMO B	654.61	712.80	735.05	757.29	781.25	805.21	830.03	855.70	855.70	855.70	855.70	859.12	876.24	896.77	930.15	957.53	971.22	991.76	1012.29	1025.13	1038.82	1045.67	1052.51	1059.36	1066.20	1079.89	1093.58	1114.12	1133.80	1161.18	1195.41	1235.63	1283.55	1337.46	1399.07	1459.82	1528.28	1595.88	1670.33	1745.63	1826.92	1908.21	1996.35	2085.34	2180.32	2227.39	2322.37	2404.52	2458.43	2526.03	2567.10
UnitedHealthcare	SignatureValue	HMO D	628.21	684.05	705.40	726.75	749.75	772.74	796.55	821.19	821.19	821.19	821.19	824.47	840.90	860.61	892.63	918.91	932.05	951.76	971.47	983.79	996.92	1003.49	1010.06	1016.63	1023.20	1036.34	1049.48	1069.19	1088.08	1114.35	1147.20	1185.80	1231.79	1283.52	1342.65	1400.95	1466.65	1531.52	1602.96	1675.23	1753.24	1831.25	1915.84	2001.24	2092.39	2137.56	2228.71	2307.54	2359.28	2424.15	2463.57
UnitedHealthcare	SignatureValue	HMO E	644.21	701.47	723.36	745.26	768.84	792.42	816.84	842.10	842.10	842.10	842.10	845.47	862.31	882.52	915.36	942.31	955.78	975.99	996.20	1008.84	1022.31	1029.05	1035.78	1042.52	1049.26	1062.73	1076.20	1096.41	1115.78	1142.73	1176.41	1215.99	1263.15	1316.20	1376.83	1436.62	1503.99	1570.52	1643.78	1717.88	1797.88	1877.88	1964.62	2052.20	2145.67	2191.99	2285.46	2366.30	2419.35	2485.88	2526.30
Western Health	Full	HMO B	464.61	505.91	521.70	537.49	554.49	571.50	589.11	607.33	607.33	607.33	607.33	609.76	621.91	636.48	660.17	679.60	689.32	703.90	718.47	727.58	737.30	742.16	747.02	751.88	756.73	766.45	776.17	790.75	804.71	824.15	848.44	876.99	911.00	949.26	992.99	1036.11	1084.69	1132.67	1185.51	1238.96	1296.65	1354.35	1416.90	1480.07	1547.48	1580.88	1648.30	1706.60	1744.86	1792.84	1821.99
Western Health	Full	HMO C	459.94	500.82	516.45	532.08	548.92	565.75	583.19	601.22	601.22	601.22	601.22	603.63	615.65	630.08	653.53	672.77	682.39	696.82	711.25	720.27	729.89	734.70	739.51	744.32	749.13	758.75	768.36	782.79	796.62	815.86	839.91	868.17	901.84	939.71	983.00	1025.69	1073.79	1121.28	1173.59	1226.50	1283.61	1340.73	1402.66	1465.18	1531.92	1564.99	1631.72	1689.44	1727.32	1774.81	1803.66
Western Health	Full	HMO D	434.40	473.01	487.78	502.54	518.44	534.34	550.81	567.84	567.84	567.84	567.84	570.11	581.47	595.10	617.24	635.42	644.50	658.13	671.76	680.28	689.36	693.90	698.45	702.99	707.53	716.62	725.70	739.33	752.39	770.56	793.28	819.96	851.76	887.54	928.42	968.74	1014.17	1059.03	1108.43	1158.40	1212.34	1266.29	1324.78	1383.83	1446.86	1478.09	1541.12	1595.64	1631.41	1676.27	1703.52

Health Care Service Plan rates will vary by county

THE INFORMATION PROVIDED HEREIN, INCLUDING THE RATING INFORMATION IS PROVIDED ON TO YOU ON AN “AS IS” “AS AVAILABLE” BASIS WITHOUT WARRANTY OF ANY KIND, EXPRESS OR IMPLIED. WE FURTHER DISCLAIM ALL LIABILITY RELATED TO THE INFORMATION, INCLUDING THOSE CAUSED BY RATING DISCREPANCIES. FINAL RATES AND RATING AREAS ARE BASED UPON ACTUAL ENROLLMENT AND UNDERWRITING AND MUST BE APPROVED BY THE APPLICABLE INSURANCE CARRIER.

USE EMPLOYER ZIP CODE FOR RATING

AREA 8

02/01/27 - 03/01/27

Bronze		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																																																	
Anthem Blue Cross	Prudent Buyer - Small Group	PPO A	503.66	548.43	565.55	582.67	601.10	619.54	638.63	658.38	658.38	658.38	658.38	661.01	674.18	689.98	715.66	736.73	747.26	763.06	778.86	788.74	799.27	804.54	809.81	815.07	820.34	830.88	841.41	857.21	872.35	893.42	919.76	950.70	987.57	1029.05	1076.45	1123.20	1175.87	1227.88	1285.16	1343.10	1405.64	1468.19	1536.00	1604.47	1677.55	1713.76	1786.84	1850.05	1891.53	1943.54	1975.14
Anthem Blue Cross	Select PPO	PPO B	467.75	509.33	525.23	541.12	558.24	575.37	593.10	611.44	611.44	611.44	611.44	613.89	626.11	640.79	664.64	684.20	693.98	708.66	723.33	732.51	742.29	747.18	752.07	756.96	761.85	771.64	781.42	796.09	810.16	829.72	854.18	882.92	917.16	955.68	999.70	1043.12	1092.03	1140.34	1193.53	1247.34	1305.42	1363.51	1426.49	1490.08	1557.95	1591.58	1659.45	1718.15	1756.67	1804.97	1834.32
Anthem Blue Cross	Prudent Buyer - Small Group	PPO C	503.05	547.76	564.86	581.96	600.37	618.78	637.85	657.58	657.58	657.58	657.58	660.21	673.36	689.14	714.79	735.83	746.35	762.14	777.92	787.78	798.30	803.56	808.82	814.08	819.34	829.87	840.39	856.17	871.29	892.34	918.64	949.55	986.37	1027.80	1075.14	1121.83	1174.44	1226.39	1283.60	1341.46	1403.93	1466.40	1534.13	1602.52	1675.51	1711.68	1784.67	1847.80	1889.23	1941.18	1972.74
Anthem Blue Cross	Select PPO	PPO D	467.14	508.66	524.54	540.42	557.51	574.61	592.32	610.64	610.64	610.64	610.64	613.08	625.30	639.95	663.77	683.31	693.08	707.73	722.39	731.55	741.32	746.20	751.09	755.97	760.86	770.63	780.40	795.05	809.10	828.64	853.06	881.76	915.96	954.43	998.40	1041.75	1090.60	1138.84	1191.97	1245.71	1303.72	1361.73	1424.62	1488.13	1555.91	1589.50	1657.28	1715.90	1754.37	1802.61	1831.92
Kaiser Permanente	Full	HMO A	361.00	391.82	403.61	415.39	428.08	426.51	439.65	453.25	453.25	453.25	453.25	455.06	464.13	475.00	492.68	507.18	514.44	525.31	536.19	542.99	550.24	553.87	557.49	561.12	564.75	572.00	579.25	590.13	600.55	615.06	633.19	654.49	679.87	708.43	741.06	773.24	809.50	845.31	884.74	924.62	967.68	1010.74	1057.43	1104.56	1154.87	1179.80	1230.11	1273.62	1302.18	1337.99	1359.75
Kaiser Permanente	Full	HMO C	350.95	380.87	392.31	403.76	416.08	414.13	426.90	440.10	440.10	440.10	440.10	441.86	450.66	461.22	478.39	492.47	499.51	510.07	520.64	527.24	534.28	537.80	541.32	544.84	548.36	555.40	562.45	573.01	583.13	597.21	614.82	635.50	660.15	687.87	719.56	750.81	786.02	820.78	859.07	897.80	939.61	981.42	1026.75	1072.52	1121.37	1145.58	1194.43	1236.68	1264.40	1299.17	1320.30
Sharp Health Plan	Premier	HMO A	272.80	297.05	306.32	315.59	325.58	335.56	345.90	356.60	356.60	356.60	356.60	358.03	365.16	373.72	387.62	399.04	404.74	413.30	421.86	427.21	432.91	435.77	438.62	441.47	444.32	450.03	455.73	464.29	472.50	483.91	498.17	514.93	534.90	557.37	583.04	608.36	636.89	665.06	696.08	727.46	761.34	795.22	831.95	869.03	908.62	928.23	967.81	1002.05	1024.51	1052.68	1069.80
Sharp Health Plan	Performance	HMO B	291.24	317.12	327.02	336.92	347.58	358.24	369.28	380.70	380.70	380.70	380.70	382.22	389.84	398.97	413.82	426.00	432.09	441.23	450.37	456.08	462.17	465.22	468.26	471.31	474.35	480.44	486.53	495.67	504.43	516.61	531.84	549.73	571.05	595.03	622.44	649.47	679.93	710.01	743.13	776.63	812.79	848.96	888.17	927.77	970.02	990.96	1033.22	1069.77	1093.75	1123.83	1142.10
Sutter Health Plan	Sutter Health Plan	HMO A	402.45	438.22	451.90	465.58	480.31	495.04	510.30	526.09	526.09	526.09	526.09	528.18	538.70	551.33	571.85	588.68	597.10	609.73	622.35	630.24	638.66	642.87	647.08	651.29	655.49	663.91	672.33	684.95	697.05	713.89	734.93	759.66	789.12	822.26	860.14	897.49	939.58	981.14	1026.91	1073.20	1123.18	1173.16	1227.34	1282.05	1340.45	1369.38	1427.78	1478.28	1511.42	1552.98	1578.23
Sutter Health Plan	Sutter Health Plan	HMO B	402.65	438.44	452.12	465.81	480.55	495.28	510.55	526.35	526.35	526.35	526.35	528.44	538.97	551.60	572.13	588.97	597.39	610.03	622.66	630.55	638.98	643.19	647.40	651.61	655.82	664.24	672.66	685.29	697.40	714.24	735.30	760.03	789.51	822.67	860.56	897.93	940.04	981.62	1027.41	1073.73	1123.73	1173.74	1227.95	1282.69	1341.11	1370.06	1428.48	1479.01	1512.17	1553.75	1579.01
Western Health	Full	HMO B	316.71	344.87	355.63	366.39	377.99	389.58	401.59	414.01	414.01	414.01	414.01	415.66	423.94	433.88	450.02	463.27	469.90	479.83	489.77	495.98	502.60	505.91	509.23	512.54	515.85	522.47	529.10	539.03	548.56	561.81	578.37	597.82	621.01	647.09	676.90	706.29	739.41	772.12	808.14	844.57	883.90	923.23	965.87	1008.93	1054.89	1077.66	1123.61	1163.36	1189.44	1222.14	1242.02
Western Health	Full	HMO C	330.55	359.93	371.17	382.40	394.50	406.60	419.13	432.09	432.09	432.09	432.09	433.82	442.46	452.83	469.68	483.51	490.42	500.79	511.16	517.64	524.56	528.01	531.47	534.93	538.38	545.30	552.21	562.58	572.52	586.35	603.63	623.94	648.13	675.36	706.47	737.15	771.71	805.85	843.44	881.46	922.51	963.56	1008.07	1053.00	1100.97	1124.73	1172.69	1214.17	1241.39	1275.53	1296.27

Silver		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																																																	
Anthem Blue Cross	Select HMO	HMO A	450.92	491.00	506.33	521.65	538.16	554.66	571.76	589.44	589.44	589.44	589.44	591.80	603.59	617.73	640.72	659.58	669.01	683.16	697.31	706.15	715.58	720.30	725.01	729.73	734.44	743.87	753.30	767.45	781.01	799.87	823.45	851.15	884.16	921.29	963.73	1005.58	1052.74	1099.31	1150.59	1202.46	1258.45	1314.45	1375.16	1436.47	1501.89	1534.31	1599.74	1656.33	1693.46	1740.03	1768.32
Anthem Blue Cross	CaliforniaCare HMO	HMO B	518.20	564.27	581.88	599.49	618.46	637.42	657.07	677.39	677.39	677.39	677.39	680.10	693.65	709.90	736.32	758.00	768.84	785.10	801.35	811.51	822.35	827.77	833.19	838.61	844.03	854.87	865.70	881.96	897.54	919.22	946.31	978.15	1016.09	1058.76	1107.53	1155.63	1209.82	1263.33	1322.27	1381.88	1446.23	1510.58	1580.35	1650.80	1725.99	1763.25	1838.44	1903.47	1946.14	1999.66	2032.17
Anthem Blue Cross	CaliforniaCare HMO	HMO D	517.54	563.54	581.13	598.72	617.66	636.61	656.22	676.52	676.52	676.52	676.52	679.23	692.76	708.99	735.38	757.03	767.85	784.09	800.32	810.47	821.30	826.71	832.12	837.53	842.94	853.77	864.59	880.83	896.39	918.04	945.10	976.89	1014.78	1057.40	1106.11	1154.14	1208.26	1261.71	1320.57	1380.10	1444.37	1508.64	1578.32	1648.68	1723.77	1760.98	1836.08	1901.02	1943.64	1997.09	2029.56
Anthem Blue Cross	Select PPO	PPO B	504.50	549.35	566.49	583.64	602.11	620.57	639.70	659.48	659.48	659.48	659.48	662.12	675.31	691.14	716.85	737.96	748.51	764.34	780.16	790.06	800.61	805.88	811.16	816.44	821.71	832.26	842.82	858.64	873.81	894.91	921.29	952.29	989.22	1030.77	1078.25	1125.07	1177.83	1229.93	1287.30	1345.34	1407.99	1470.64	1538.57	1607.15	1680.36	1716.63	1789.83	1853.14	1894.69	1946.78	1978.44
Anthem Blue Cross	Prudent Buyer - Small Group	PPO C	543.20	591.49	609.95	628.41	648.29	668.18	688.77	710.07	710.07	710.07	710.07	712.91	727.11	744.15	771.85	794.57	805.93	822.97	840.01	850.66	862.02	867.71	873.39	879.07	884.75	896.11	907.47	924.51	940.84	963.56	991.97	1025.34	1065.11	1109.84	1160.96	1211.38	1268.19	1324.28	1386.06	1448.54	1516.00	1583.46	1656.59	1730.44	1809.26	1848.31	1927.13	1995.30	2040.03	2096.13	2130.21
Anthem Blue Cross	Prudent Buyer - Small Group	PPO D	526.71	573.53	591.43	609.33	628.61	647.89	667.85	688.51	688.51	688.51	688.51	691.26	705.03	721.56	748.41	770.44	781.46	797.98	814.51	824.83	835.85	841.36	846.87	852.38	857.88	868.90	879.92	896.44	912.28	934.31	961.85	994.21	1032.77	1076.14	1125.71	1174.60	1229.68	1284.07	1343.97	1404.56	1469.97	1535.38	1606.29	1677.90	1754.32	1792.19	1868.62	1934.71	1978.09	2032.48	2065.53
Anthem Blue Cross	Select PPO	PPO E	489.18	532.66	549.29	565.91	583.82	601.72	620.27	639.45	639.45	639.45	639.45	642.01	654.80	670.14	695.08	715.54	725.78	741.12	756.47	766.06	776.29	781.41	786.52	791.64	796.75	806.99	817.22	832.56	847.27	867.73	893.31	923.37	959.18	999.46	1045.50	1090.90	1142.06	1192.57	1248.21	1304.48	1365.23	1425.97	1491.84	1558.34	1629.32	1664.49	1735.47	1796.85	1837.14	1887.66	1918.35
Anthem Blue Cross	Prudent Buyer - Small Group	PPO F	545.50	593.99	612.53	631.07	651.03	671.00	691.68	713.07	713.07	713.07	713.07	715.92	730.18	747.30	775.11	797.93	809.33	826.45	843.56	854.26	865.67	871.37	877.08	882.78	888.49	899.89	911.30	928.42	944.82	967.64	996.16	1029.67	1069.61	1114.53	1165.87	1216.50	1273.54	1329.88	1391.91	1454.66	1522.40	1590.15	1663.59	1737.75	1816.90	1856.12	1935.27	2003.73	2048.65	2104.98	2139.21
Kaiser Permanente	Full	HMO A	393.85	427.60	440.50	453.40	467.29	466.91	481.30	496.19	496.19	496.19	496.19	498.17	508.10	520.01	539.36	555.24	563.17	575.08	586.99	594.43	602.37	606.34	610.31	614.28	618.25	626.19	634.13	646.04	657.45	673.33	693.18	716.50	744.28	775.54	811.27	846.50	886.19	925.39	968.56	1012.23	1059.36	1106.50	1157.61	1209.21	1264.29	1291.58	1346.66	1394.29	1425.55	1464.75	1488.57
Kaiser Permanente	Full	HMO B	399.08	433.29	446.36	459.44	473.53	473.34	487.93	503.02	503.02	503.02	503.02	505.03	515.09	527.16	546.78	562.88	570.93	583.00	595.07	602.62	610.67	614.69	618.71	622.74	626.76	634.81	642.86	654.93	666.50	682.60	702.72	726.36	754.53	786.22	822.44	858.15	898.39	938.13	981.89	1026.16	1073.95	1121.73	1173.55	1225.86	1281.69	1309.36	1365.20	1413.49	1445.18	1484.91	1509.06
Kaiser Permanente	Full	HMO C	396.23	430.18	443.16	456.14	470.12	469.83	484.31	499.29	499.29	499.29	499.29	501.29	511.27	523.26	542.73	558.71	566.69	578.68	590.66	598.15	606.14	610.13	614.13	618.12	622.12	630.10	638.09	650.08	661.56	677.54	697.51	720.98	748.94	780.39	816.34	851.79	891.73	931.18	974.61	1018.55	1065.98	1113.42	1164.84	1216.77	1272.19	1299.65	1355.07	1403.01	1434.46	1473.90	1497.87
Kaiser Permanente	Full	HMO D	363.85	394.92	406.80	418.68	431.48	430.00	443.25	456.96	456.96	456.96	456.96	458.79	467.93	478.89	496.72	511.34	518.65	529.62	540.58	547.44	554.75	558.41	562.06	565.72	569.37	576.68	584.00	594.96	605.47	620.10	638.37	659.85	685.44	714.23	747.13	779.58	816.13	852.23	891.99	932.20	975.61	1019.02	1066.09	1113.61	1164.34	1189.47	1240.19	1284.06	1312.85	1348.95	1370.88
Kaiser Permanente	Full	HMO E	379.46	411.92	424.33	436.74	450.11	449.20	463.05	477.37	477.37	477.37	477.37	479.28	488.83	500.28	518.90	534.18	541.81	553.27	564.73	571.89	579.53	583.34	587.16	590.98	594.80	602.44	610.08	621.53	632.51	647.79	666.88	689.32	716.05	746.13	780.50	814.39	852.58	890.29	931.82	973.83	1019.18	1064.53	1113.70	1163.35	1216.34	1242.59	1295.58	1341.41	1371.48	1409.19	1432.11
Sharp Health Plan	Premier	HMO A	285.29	310.65	320.35	330.04	340.49	350.93	361.74	372.93	372.93	372.93	372.93	374.42	381.88	390.83	405.37	417.31	423.28	432.23	441.18	446.77	452.74	455.72	458.70	461.69	464.67	470.64	476.60	485.55	494.13	506.07	520.98	538.51	559.40	582.89	609.74	636.22	666.05	695.51	727.96	760.78	796.21	831.63	870.05	908.83	950.23	970.74	1012.13	1047.93	1071.43	1100.89	1118.79
Sharp Health Plan	Performance	HMO B	294.75	320.95	330.96	340.98	351.77	362.56	373.73	385.29	385.29	385.29	385.29	386.83	394.54	403.78	418.81	431.14	437.30	446.55	455.80	461.58	467.74	470.82	473.91	476.99	480.07	486.24	492.40	501.65	510.51	522.84	538.25	556.36	577.94	602.21	629.95	657.30	688.13	718.57	752.09	785.99	822.59	859.20	898.88	938.95	981.72	1002.91	1045.68	1082.66	1106.94	1137.38	1155.87
Sharp Health Plan	Premier	HMO C	268.76	292.65	301.78	310.92	320.76	330.59	340.78	351.32	351.32	351.32	351.32	352.73	359.75	368.18	381.88	393.13	398.75	407.18	415.61	420.88	426.50	429.31	432.12	434.93	437.74	443.37	448.99	457.42	465.50	476.74	490.79	507.31	526.98	549.11	574.41	599.35	627.46	655.21	685.78	716.69	750.07	783.44	819.63	856.17	895.16	914.49	953.48	987.21	1009.34	1037.10	1053.96
Sutter Health Plan	Sutter Health Plan	HMO B	491.98	535.71	552.43	569.15	587.16	605.16	623.81	643.12	643.12	643.12	643.12	645.68	658.54	673.98	699.06	719.64	729.93	745.36	760.80	770.44	780.73	785.88	791.02	796.17	801.31	811.60	821.89	837.33	852.12	872.70	898.42	928.65	964.66	1005.18	1051.48	1097.14	1148.59	1199.40	1255.35	1311.94	1373.04	1434.13	1500.37	1567.25	1638.64	1674.01	1745.40	1807.13	1847.65	1898.46	1929.31
Sutter Health Plan	Sutter Health Plan	HMO C	426.11	463.98	478.46	492.95	508.54	524.14	540.29	557.01	557.01	557.01	557.01	559.23	570.37	583.74	605.46	623.29	632.20	645.57	658.93	667.29	676.20	680.66	685.11	689.57	694.02	702.94	711.85	725.22	738.03	755.85	778.13	804.31	835.50	870.59	910.70	950.25	994.81	1038.81	1087.27	1136.28	1189.20	1242.11	1299.49	1357.41	1419.24	1449.88	1511.70	1565.18	1600.27	1644.27	1671.00
UnitedHealthcare	SignatureValue	HMO A	574.42	625.48	645.01	664.53	685.55	706.58	728.35	750.88	750.88	750.88	750.88	753.88	768.90	786.92	816.21	840.23	852.25	870.27	888.29	899.55	911.57	917.58	923.58	929.59	935.60	947.61	959.62	977.65	994.92	1018.94	1048.98	1084.27	1126.32	1173.63	1227.69	1281.00	1341.07	1400.39	1465.72	1531.80	1603.13	1674.46	1751.80	1829.89	1913.24	1954.54	2037.89	2109.97	2157.28	2216.60	2252.64
Western Health	Full	HMO B	362.81	395.06	407.40	419.73	433.01	446.29	460.04	474.27	474.27	474.27	474.27	476.16	485.65	497.03	515.53	530.71	538.29	549.68	561.06	568.17	575.76	579.56	583.35	587.14	590.94	598.53	606.11	617.50	628.40	643.58	662.55	684.84	711.40	741.28	775.43	809.10	847.04	884.51	925.77	967.51	1012.56	1057.62	1106.47	1155.79	1208.43	1234.52	1287.16	1332.69	1362.57	1400.04	1422.80
Western Health	Full	HMO C	342.86	373.34	384.99	396.64	409.19	421.74	434.74	448.18	448.18	448.18	448.18	449.98	458.94	469.70	487.18	501.52	508.69	519.45	530.20	536.93	544.10	547.68	551.27	554.85	558.44	565.61	572.78	583.54	593.84	608.19	626.11	647.18	672.28	700.51	732.78	764.60	800.46	835.86	874.86	914.30	956.87	999.45	1045.62	1092.23	1141.97	1166.63	1216.37	1259.40	1287.64	1323.04	1344.54
Western Health	Full	HMO D	330.78	360.19	371.43	382.67	394.78	406.88	419.42	432.40	432.40	432.40	432.40	434.12	442.77	453.15	470.01	483.85	490.77	501.15	511.52	518.01	524.93	528.39	531.85	535.31	538.76	545.68	552.60	562.98	572.92	586.76	604.06	624.38	648.59	675.83	706.97	737.67	772.26	806.42	844.04	882.09	923.16	964.24	1008.78	1053.75	1101.74	1125.52	1173.52	1215.03	1242.27	1276.43	1297.19

Health Care Service Plan rates will vary by county

THE INFORMATION PROVIDED HEREIN, INCLUDING THE RATING INFORMATION IS PROVIDED ON TO YOU ON AN "AS IS" "AS AVAILABLE" BASIS WITHOUT WARRANTY OF ANY KIND, EXPRESS OR IMPLIED. WE FURTHER DISCLAIM ALL LIABILITY RELATED TO THE INFORMATION, INCLUDING THOSE CAUSED BY RATING DISCREPANCIES. FINAL RATES AND RATING AREAS ARE BASED UPON ACTUAL ENROLLMENT AND UNDERWRITING AND MUST BE APPROVED BY THE APPLICABLE INSURANCE CARRIER.

Continued

Gold

CARRIER	NETWORK	PLAN	0-14	15	16	17	18	19	20	21	22	23	24
Anthem Blue Cross	Select HMO	HMO A	578.11	629.50	649.15	668.79	689.95	711.11	733.03	755.70	755.70	755.70	755.70
Anthem Blue Cross	CaliforniaCare HMO	HMO B	664.41	723.47	746.05	768.63	792.95	817.27	842.45	868.51	868.51	868.51	868.51
Anthem Blue Cross	Priority Select HMO	HMO C	405.67	441.73	455.52	469.31	484.15	499.00	514.38	530.29	530.29	530.29	530.29
Anthem Blue Cross	Select PPO	PPO B	597.24	650.32	670.62	690.92	712.78	734.64	757.28	780.70	780.70	780.70	780.70
Anthem Blue Cross	Select PPO	PPO C	616.20	670.97	691.92	712.86	735.41	757.97	781.33	805.49	805.49	805.49	805.49
Anthem Blue Cross	Select PPO	PPO D	592.88	645.58	665.73	685.88	707.58	729.28	751.75	775.00	775.00	775.00	775.00
Anthem Blue Cross	Prudent Buyer - Small Group	PPO E	663.52	722.49	745.05	767.60	791.88	816.17	841.32	867.34	867.34	867.34	867.34
Anthem Blue Cross	Prudent Buyer - Small Group	PPO H	638.46	695.21	716.91	738.61	761.98	785.35	809.55	834.59	834.59	834.59	834.59
Anthem Blue Cross	Prudent Buyer - Small Group	PPO I	647.86	705.44	727.46	749.48	773.19	796.90	821.46	846.87	846.87	846.87	846.87
Kaiser Permanente	Full	HMO B	473.93	514.79	530.41	546.03	562.86	565.41	582.84	600.86	600.86	600.86	600.86
Kaiser Permanente	Full	HMO C	487.67	529.75	545.84	561.93	579.25	582.31	600.26	618.82	618.82	618.82	618.82
Kaiser Permanente	Full	HMO D	460.28	499.93	515.09	530.25	546.57	548.63	565.53	583.02	583.02	583.02	583.02
Kaiser Permanente	Full	HMO E	411.40	446.70	460.20	473.70	488.23	488.50	503.55	519.12	519.12	519.12	519.12
Kaiser Permanente	Full	HMO F	469.96	510.47	525.95	541.44	558.12	560.53	577.80	595.67	595.67	595.67	595.67
Sharp Health Plan	Performance	HMO A	366.15	398.70	411.14	423.59	436.99	450.39	464.27	478.63	478.63	478.63	478.63
Sharp Health Plan	Premier	HMO B	345.92	376.67	388.42	400.18	412.84	425.50	438.61	452.18	452.18	452.18	452.18
Sharp Health Plan	Performance	HMO D	377.08	410.59	423.41	436.23	450.03	463.83	478.12	492.91	492.91	492.91	492.91
Sutter Health Plan	Sutter Health Plan	HMO A	538.96	586.86	605.18	623.50	643.23	662.95	683.38	704.53	704.53	704.53	704.53
Sutter Health Plan	Sutter Health Plan	HMO B	578.09	629.47	649.12	668.77	689.93	711.09	733.00	755.68	755.68	755.68	755.68
Sutter Health Plan	Sutter Health Plan	HMO C	491.16	534.81	551.51	568.20	586.18	604.15	622.77	642.04	642.04	642.04	642.04
UnitedHealthcare	SignatureValue	HMO A	628.89	684.79	706.17	727.54	750.56	773.58	797.42	822.08	822.08	822.08	822.08
UnitedHealthcare	SignatureValue	HMO C	673.29	733.14	756.02	778.91	803.55	828.19	853.72	880.12	880.12	880.12	880.12
UnitedHealthcare	SignatureValue	HMO F	696.42	758.32	781.99	805.66	831.15	856.64	883.04	910.35	910.35	910.35	910.35
UnitedHealthcare	SignatureValue	HMO H	652.64	710.65	732.83	755.01	778.90	802.79	827.53	853.12	853.12	853.12	853.12
Western Health	Full	HMO A	406.47	442.60	456.41	470.23	485.10	499.98	515.39	531.33	531.33	531.33	531.33
Western Health	Full	HMO B	426.53	464.44	478.93	493.43	509.04	524.65	540.82	557.55	557.55	557.55	557.55
Western Health	Full	HMO C	397.43	432.76	446.27	459.77	474.32	488.87	503.93	519.52	519.52	519.52	519.52
Western Health	Full	HMO D	382.67	416.69	429.69	442.70	456.70	470.71	485.22	500.22	500.22	500.22	500.22

CARRIER	NETWORK	PLAN	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45
Anthem Blue Cross	Select HMO	HMO A	758.72	773.84	791.97	821.45	845.63	857.72	875.86	893.99	905.33	917.42	923.47	929.51	935.56	941.60	953.69	965.78	983.92	1001.30	1025.48	1055.71	1091.23
Anthem Blue Cross	CaliforniaCare HMO	HMO B	871.98	889.35	910.20	944.07	971.86	985.76	1006.60	1027.45	1040.47	1054.37	1061.32	1068.27	1075.22	1082.16	1096.06	1109.96	1130.80	1150.78	1178.57	1213.31	1254.13
Anthem Blue Cross	Priority Select HMO	HMO C	532.41	543.02	555.74	576.43	593.39	601.88	614.61	627.33	635.29	643.77	648.01	652.26	656.50	660.74	669.23	677.71	690.44	702.63	719.60	740.82	765.74
Anthem Blue Cross	Select PPO	PPO B	783.82	799.44	818.17	848.62	873.60	886.09	904.83	923.57	935.28	947.77	954.02	960.26	966.51	972.75	985.24	997.73	1016.47	1034.43	1059.41	1090.64	1127.33
Anthem Blue Cross	Select PPO	PPO C	808.71	824.82	844.15	875.57	901.34	914.23	933.56	952.89	964.98	977.86	984.31	990.75	997.20	1003.64	1016.53	1029.42	1048.75	1067.27	1093.05	1125.27	1163.13
Anthem Blue Cross	Select PPO	PPO D	778.10	793.60	812.20	842.43	867.23	879.63	898.23	916.83	928.45	940.85	947.05	953.25	959.45	965.65	978.05	990.45	1009.05	1026.88	1051.68	1082.68	1119.10
Anthem Blue Cross	Prudent Buyer - Small Group	PPO E	870.81	888.16	908.97	942.80	970.55	984.43	1005.25	1026.06	1039.07	1052.95	1059.89	1066.83	1073.77	1080.71	1094.58	1108.46	1129.28	1149.23	1176.98	1211.67	1252.44
Anthem Blue Cross	Prudent Buyer - Small Group	PPO H	837.93	854.62	874.65	907.20	933.91	947.26	967.29	987.32	999.84	1013.19	1019.87	1026.55	1033.22	1039.90	1053.25	1066.61	1086.64	1105.83	1132.54	1165.92	1205.15
Anthem Blue Cross	Prudent Buyer - Small Group	PPO I	850.26	867.19	887.52	920.55	947.65	961.20	981.52	1001.85	1014.55	1028.10	1034.88	1041.65	1048.43	1055.20	1068.75	1082.30	1102.62	1122.10	1149.20	1183.08	1222.88
Kaiser Permanente	Full	HMO B	603.27	615.28	629.71	653.14	672.37	681.98	696.40	710.82	719.83	729.45	734.26	739.06	743.87	748.68	758.29	767.90	782.32	796.14	815.37	839.41	867.65
Kaiser Permanente	Full	HMO C	621.30	633.67	648.52	672.66	692.46	702.36	717.21	732.07	741.35	751.25	756.20	761.15	766.10	771.05	780.95	790.85	805.71	819.94	839.74	864.49	893.58
Kaiser Permanente	Full	HMO D	585.36	597.02	611.01	633.75	652.40	661.73	675.72	689.72	698.46	707.79	712.46	717.12	721.78	726.45	735.78	745.10	759.10	772.51	791.16	814.48	841.89
Kaiser Permanente	Full	HMO E	521.20	531.58	544.04	564.29	580.90	589.21	601.67	614.12	621.91	630.22	634.37	638.52	642.68	646.83	655.14	663.44	675.90	687.84	704.45	725.22	749.62
Kaiser Permanente	Full	HMO F	598.06	609.97	624.27	647.50	666.56	676.09	690.39	704.68	713.62	723.15	727.91	732.68	737.44	742.21	751.74	761.27	775.57	789.27	808.33	832.16	860.15
Sharp Health Plan	Performance	HMO A	480.54	490.12	501.60	520.27	535.59	543.25	554.73	566.22	573.40	581.06	584.89	588.71	592.54	596.37	604.03	611.69	623.18	634.18	649.50	668.65	691.14
Sharp Health Plan	Premier	HMO B	453.99	463.03	473.88	491.52	505.99	513.22	524.08	534.93	541.71	548.95	552.56	556.18	559.80	563.42	570.65	577.89	588.74	599.14	613.61	631.70	652.95
Sharp Health Plan	Performance	HMO D	494.88	504.74	516.57	535.79	551.57	559.45	571.28	583.11	590.51	598.39	602.34	606.28	610.22	614.17	622.05	629.94	641.77	653.11	668.88	688.60	711.76
Sutter Health Plan	Sutter Health Plan	HMO A	707.34	721.43	738.34	765.81	788.36	799.63	816.54	833.45	844.01	855.29	860.92	866.56	872.20	877.83	889.10	900.38	917.28	933.49	956.03	984.21	1017.33
Sutter Health Plan	Sutter Health Plan	HMO B	758.69	773.81	791.94	821.41	845.59	857.69	875.82	893.96	905.29	917.38	923.43	929.47	935.52	941.56	953.66	965.75	983.88	1001.26	1025.44	1055.67	1091.19
Sutter Health Plan	Sutter Health Plan	HMO C	644.60	657.44	672.85	697.89	718.44	728.71	744.12	759.53	769.16	779.43	784.56	789.70	794.84	799.97	810.25	820.52	835.93	850.69	871.24	896.92	927.10
UnitedHealthcare	SignatureValue	HMO A	825.37	841.81	861.54	893.60	919.91	933.06	952.79	972.52	984.85	998.01	1004.58	1011.16	1017.74	1024.31	1037.46	1050.62	1070.35	1089.26	1115.56	1148.45	1187.08
UnitedHealthcare	SignatureValue	HMO C	883.64	901.24	922.37	956.69	984.85	998.94	1020.06	1041.18	1054.38	1068.47	1075.51	1082.55	1089.59	1096.63	1110.71	1124.79	1145.92	1166.16	1194.32	1229.53	1270.89
UnitedHealthcare	SignatureValue	HMO F	913.99	932.20	954.05	989.55	1018.68	1033.25	1055.10	1076.94	1090.60	1105.16	1112.45	1119.73	1127.01	1134.30	1148.86	1163.43	1185.28	1206.21	1235.34	1271.76	1314.55
UnitedHealthcare	SignatureValue	HMO H	856.53	873.59	894.07	927.34	954.64	968.29	988.77	1009.24	1022.04	1035.69	1042.51	1049.34	1056.16	1062.99	1076.64	1090.29	1110.76	1130.38	1157.68	1191.81	1231.91
Western Health	Full	HMO A	533.45	544.08	556.83	577.55	594.56	603.06	615.81	628.56	636.53	645.03	649.28	653.53	657.78	662.04	670.54	679.04	691.79	704.01	721.01	742.27	767.24
Western Health	Full	HMO B	559.78	570.93	584.31	606.06	623.90	632.82	646.20	659.58	667.94	676.86	681.33	685.79	690.25	694.71	703.63	712.55	725.93	738.75	756.59	778.90	805.10
Western Health	Full	HMO C	521.60	531.99	544.46	564.72	581.34	589.65	602.12	614.59	622.38	630.70	634.85	639.01	643.16	647.32	655.63	663.94	676.41	688.36	704.99	725.77	750.18
Western Health	Full	HMO D	502.22	512.23	524.23	543.74	559.75	567.75	579.76	591.76	599.27	607.27	611.27	615.27	619.28	623.28	631.28	639.28	651.29	662.79	678.80	698.81	722.32

CARRIER	NETWORK	PLAN	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
Anthem Blue Cross	Select HMO	HMO A	1133.55	1181.16	1235.57	1289.22	1349.68	1409.38	1475.13	1541.63	1613.42	1685.21	1763.05	1841.64	1925.52	1967.09	2050.97	2123.52	2171.13	2230.83	2267.10
Anthem Blue Cross	CaliforniaCare HMO	HMO B	1302.77	1357.48	1420.01	1481.68	1551.16	1619.77	1695.33	1771.76	1854.27	1936.78	2026.23	2116.56	2212.96	2260.73	2357.14	2440.51	2495.23	2563.84	2605.53
Anthem Blue Cross	Priority Select HMO	HMO C	795.44	828.84	867.02	904.67	947.10	988.99	1035.13	1081.79	1132.17	1182.55	1237.17	1292.32	1351.18	1380.34	1439.21	1490.11	1523.52	1565.42	1590.87
Anthem Blue Cross	Select PPO	PPO B	1171.05	1220.23	1276.44	1331.87	1394.33	1456.01	1523.93	1592.63	1666.79	1740.96	1821.37	1902.57	1989.22	2032.16	2118.82	2193.77	2242.95	2304.63	2342.10
Anthem Blue Cross	Select PPO	PPO C	1208.24	1258.98	1316.98	1374.17	1438.61	1502.24	1572.32	1643.20	1719.72	1796.24	1879.21	1962.98	2052.39	2096.69	2186.10	2263.43	2314.17	2377.81	2416.47
Anthem Blue Cross	Select PPO	PPO D	1162.50	1211.33	1267.13	1322.15	1384.15	1445.38	1512.80	1581.00	1654.63	1728.25	1808.08	1888.68	1974.70	2017.33	2103.35	2177.75	2226.58	2287.80	2325.00
Anthem Blue Cross	Prudent Buyer - Small Group	PPO E	1301.01	1355.65	1418.10	1479.68	1549.07	1617.59	1693.05	1769.37	1851.77	1934.17	2023.50	2113.71	2209.98	2257.69	2353.96	2437.23	2491.87	2560.39	2602.02
Anthem Blue Cross	Prudent Buyer - Small Group	PPO H	1251.89	1304.46	1364.55	1423.81	1490.58	1556.51	1629.12	1702.56	1781.85	1861.14	1947.10	2033.90	2126.54	2172.44	2265.08	2345.20	2397.78	2463.71	2503.77
Anthem Blue Cross	Prudent Buyer - Small Group	PPO I	1270.31	1323.66	1384.63	1444.76	1512.51	1579.41	1653.09	1727.61	1808.07	1888.52	1975.75	2063.82	2157.82	2204.40	2298.41	2379.70	2433.06	2499.96	2540.61
Kaiser Permanente	Full	HMO B	901.30	939.15	982.41	1025.07	1073.14	1120.61	1172.89	1225.76	1282.84	1339.93	1401.82	1464.31	1531.00	1564.05	1630.74	1688.43	1726.28	1773.75	1802.58
Kaiser Permanente	Full	HMO C	928.23	967.22	1011.77	1055.71	1105.22	1154.10	1207.94	1262.40	1321.18	1379.97	1443.71	1508.07	1576.76	1610.79	1679.48	1738.89	1777.87	1826.76	1856.46
Kaiser Permanente	Full	HMO D	874.54	911.27	953.24	994.64	1041.28	1087.34	1138.06	1189.37	1244.76	1300.14	1360.19	1420.83	1485.54	1517.61	1582.33	1638.30	1675.03	1721.09	1749.06
Kaiser Permanente	Full	HMO E	778.69	811.39	848.77	885.63	927.16	968.17	1013.33	1059.01	1108.33	1157.65	1211.12	1265.11	1322.73	1351.28	1408.91	1458.74	1491.45	1532.46	1557.36
Kaiser Permanente	Full	HMO F	893.51	931.04	973.93	1016.22	1063.87	1110.93	1162.75	1215.17	1271.76	1328.35	1389.71	1451.66	1517.78	1550.54	1616.66	1673.84	1711.37	1758.43	1787.01
Sharp Health Plan	Performance	HMO A	717.95	748.10	782.56	816.54	854.83	892.64	934.29	976.41	1021.88	1067.34	1116.64	1166.42	1219.55	1245.87	1299.00	1344.95	1375.10	1412.92	1435.89
Sharp Health Plan	Premier	HMO B	678.27	706.76	739.31	771.42	807.59	843.32	882.66	922.45	965.40	1008.36	1054.94	1101.96	1152.15	1177.02	1227.22	1270.63	1299.11	1334.84	1356.54
Sharp Health Plan	Performance	HMO D	739.37	770.42	805.91	840.90	880.34	919.28	962.16	1005.54	1052.36	1099.19	1149.96	1201.22	1255.93	1283.04	1337.76	1385.08	1416.13	1455.07	1478.73
Sutter Health Plan	Sutter Health Plan	HMO A	1056.78	1101.16	1151.89	1201.91	1258.27	1313.93	1375.22	1437.22	1504.15	1571.08	1643.64	1716.91	1795.12	1833.86	1912.07	1979.70	2024.08	2079.74	2113.55
Sutter Health Plan	Sutter Health Plan	HMO B	1133.51	1181.11	1235.52	1289.17	1349.63	1409.32	1475.07	1541.57	1613.36	1685.14	1762.98	1841.57	1925.45	1967.01	2050.89	2123.43	2171.04	2230.74	2267.00
Sutter Health Plan	Sutter Health Plan	HMO C	963.05	1003.50	1049.72	1095.31	1146.67	1197.39	1253.25	1309.75	1370.74	1431.73	1497.86	1564.64	1635.90	1671.21	1742.48	1804.11	1844.56	1895.28	1926.09
UnitedHealthcare	SignatureValue	HMO A	1233.12	1284.91	1344.10	1402.47	1468.23	1533.18	1604.70	1677.04	1755.14	1833.24	1917.91	2003.41	2094.66	2139.87	2231.13	2310.04	2361.84	2426.78	2466.24
UnitedHealthcare	SignatureValue	HMO C	1320.18	1375.63	1439.00	1501.48	1571.89	1641.42	1717.99	1795.44	1879.06	1962.67	2053.32	2144.85	2242.55	2290.95	2388.65	2473.14	2528.58	2598.11	2640.36
UnitedHealthcare	SignatureValue	HMO F	1365.53	1422.88	1488.42	1553.06	1625.89	1697.80	1777.00	1857.11	1943.60	2030.08	2123.85	2218.52	2319.57	2369.64	2470.69	2558.08	2615.44	2687.35	2731.05
UnitedHealthcare	SignatureValue	HMO H	1279.68	1333.43	1394.85	1455.42	1523.67	1591.07	1665.29	1740.36	1821.41	1902.46	1990.33	2079.05	2173.75	2220.67	2315.37	2397.27	2451.01	2518.41	2559.36
Western Health	Full	HMO A	796.99	830.47	868.72	906.45	948.95	990.93	1037.15	1083.91	1134.39	1184.86	1239.59	1294.85	1353.83	1383.05	1442.03	1493.03	1526.51	1568.48	1593.99
Western Health	Full	HMO B	836.32	871.45	911.59	951.18	995.78	1039.83	1088.34	1137.40	1190.37	1243.34	1300.76	1358.75	1420.64	1451.30	1513.19	1566.71	1601.84	1645.89	1672.65
Western Health	Full	HMO C	779.28	812.01	849.41	886.30	927.86	968.90	1014.10	1059.82	1109.17	1158.53	1212.04	1266.07	1323.73	1352.31	1409.97	1459.85	1492.58	1533.62	1558.56
Western Health	Full	HMO D	750.33	781.85	817.86	853.38	893.40	932.91	976.43	1020.45	1067.97	1115.50	1167.02	1219.04	1274.57	1302.08	1357.60	1405.62	1437.14	1476.66	1500.66

Platinum

CARRIER	NETWORK	PLAN	0-14	15	16	17	18	19	20	21	22	23	24
Anthem Blue Cross	Select HMO	HMO A	627.22	682.97	704.29	725.60	748.56	771.52	795.29	819.89	819.89	819.89	819.89
Anthem Blue Cross	Vivity	HMO B	719.67	783.64	808.10	832.56	858.90	885.25	912.53	940.75	940.75	940.75	940.75
Anthem Blue Cross	Vivity	HMO C	704.68	767.32	791.27	815.22	841.01	866.80	893.52	921.15	921.15	921.15	921.15
Anthem Blue Cross	CaliforniaCare HMO	HMO D	720.68	784.74	809.23	833.72	860.10	886.48	913.80	942.06	942.06	942.06	942.06
Anthem Blue Cross	Prudent Buyer - Small Group	PPO B	748.59	815.13	840.57	866.02	893.42	920.82	949.19	978.55	978.55	978.55	978.55
Kaiser Permanente	Full	HMO A	525.07	570.47	587.83	605.19	623.89	628.31	647.68	667.71	667.71	667.71	667.71
Kaiser Permanente	Full	HMO B	511.28	555.46	572.35	589.24	607.43	611.35	630.19	649.68	649.68	649.68	649.68
Kaiser Permanente	Full	HMO C	490.99	533.36	549.57	565.77	583.22	586.39	604.47	623.16	623.16	623.16	623.16
Sharp Health Plan	Premier	HMO A	387.44	421.88	435.05	448.22	462.40	476.58	491.27	506.46	506.46	506.46	506.46
Sharp Health Plan	Performance	HMO B	415.31	452.23	466.34	480.46	495.66	510.86	526.60	542.89	542.89	542.89	542.89
Sharp Health Plan	Premier	HMO C	388.91	423.48	436.70	449.92	464.15	478.39	493.13	508.38	508.38	508.38	508.38
Sutter Health Plan	Sutter Health Plan	HMO A	627.88	683.69	705.03	726.37	749.35	772.34	796.14	820.77	820.77	820.77	820.77
UnitedHealthcare	SignatureValue	HMO A	698.78	760.90	784.64	808.39	833.97	859.55	886.04	913.44	913.44	913.44	913.44
UnitedHealthcare	SignatureValue	HMO B	756.85	824.13	849.85	875.57	903.28	930.98	959.67	989.35	989.35	989.35	989.35
UnitedHealthcare	SignatureValue	HMO D	726.32	790.88	815.57	840.25	866.84	893.42	920.96	949.44	949.44	949.44	949.44
UnitedHealthcare	SignatureValue	HMO E	744.83	811.03	836.35	861.66	888.92	916.19	944.42	973.63	973.63	973.63	973.63
Western Health	Full	HMO B	464.61	505.91	521.70	537.49	554.49	571.50	589.11	607.33	607.33	607.33	607.33
Western Health	Full	HMO C	459.94	500.82	516.45	532.08	548.92	565.75	583.19	601.22	601.22	601.22	601.22
Western Health	Full	HMO D	434.40	473.01	487.78	502.54	518.44	534.34	550.81	567.84	567.84	567.84	567.84

CARRIER	NETWORK	PLAN	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45
Anthem Blue Cross	Select HMO	HMO A	823.17	839.57	859.24	891.22	917.46	930.58	950.25	969.93	982.23	995.35	1001.91	1008.46	1015.02	1021.58	1034.70	1047.82	1067.50	1086.35	1112.59	1145.39	1183.92
Anthem Blue Cross	Vivity	HMO B	944.51	963.33	985.91	1022.60	1052.70	1067.75	1090.33	1112.91	1127.02	1142.07	1149.60	1157.12	1164.65	1172.17	1187.23	1202.28	1224.86	1246.49	1276.60	1314.23	1358.44
Anthem Blue Cross	Vivity	HMO C	924.83	943.26	965.37	1001.29	1030.77	1045.51	1067.61	1089.72	1103.54	1118.28	1125.65	1133.01	1140.38	1147.75	1162.49	1177.23	1199.34	1220.52	1250.00	1286.85	1330.14
Anthem Blue Cross	CaliforniaCare HMO	HMO D	945.83	964.67	987.28	1024.02	1054.17	1069.24	1091.85	1114.46	1128.59	1143.66	1151.20	1158.73	1166.27	1173.81	1188.88	1203.95	1226.56	1248.23	1278.38	1316.06	1360.33
Anthem Blue Cross	Prudent Buyer - Small Group	PPO B	982.46	1002.04	1025.52	1063.68	1095.00	1110.65	1134.14	1157.62	1172.30	1187.96	1195.79	1203.62	1211.44	1219.27	1234.93	1250.59	1274.07	1296.58	1327.89	1367.03	1413.03
Kaiser Permanente	Full	HMO A	670.38	683.73	699.76	725.80	747.16	757.85	773.87	789.90	799.91	810.60	815.94	821.28	826.62	831.96	842.65	853.33	869.35	884.71	906.08	932.79	964.17
Kaiser Permanente	Full	HMO B	652.28	665.28	680.87	706.21	727.00	737.39	752.98	768.58	778.32	788.72	793.91	799.11	804.31	809.51	819.90	830.29	845.89	860.83	881.62	907.61	938.14
Kaiser Permanente	Full	HMO C	625.65	638.12	653.07	677.38	697.32	707.29	722.24	737.20	746.55	756.52	761.50	766.49	771.47	776.46	786.43	796.40	811.36	825.69	845.63	870.56	899.84
Sharp Health Plan	Premier	HMO A	508.49	518.62	530.77	550.52	566.73	574.83	586.99	599.14	606.74	614.84	618.89	622.95	627.00	631.05	639.15	647.26	659.41	671.06	687.27	707.52	731.33
Sharp Health Plan	Performance	HMO B	545.06	555.92	568.95	590.12	607.49	616.18	629.21	642.24	650.38	659.07	663.41	667.75	672.10	676.44	685.13	693.81	706.84	719.33	736.70	758.42	783.93
Sharp Health Plan	Premier	HMO C	510.41	520.58	532.78	552.61	568.88	577.01	589.21	601.41	609.04	617.17	621.24	625.31	629.37	633.44	641.58	649.71	661.91	673.60	689.87	710.21	734.10
Sutter Health Plan	Sutter Health Plan	HMO A	824.04	840.46	860.16	892.17	918.43	931.56	951.26	970.96	983.27	996.40	1002.97	1009.54	1016.10	1022.67	1035.80	1048.93	1068.63	1087.51	1113.77	1146.60	1185.18
UnitedHealthcare	SignatureValue	HMO A	917.09	935.36	957.29	992.91	1022.14	1036.75	1058.68	1080.60	1094.30	1108.92	1116.22	1123.53	1130.84	1138.15	1152.76	1167.38	1189.30	1210.31	1239.54	1276.08	1319.01
UnitedHealthcare	SignatureValue	HMO B	993.31	1013.09	1036.84	1075.42	1107.08	1122.91	1146.66	1170.40	1185.24	1201.07	1208.99	1216.90	1224.82	1232.73	1248.56	1264.39	1288.13	1310.89	1342.55	1382.12	1428.62
UnitedHealthcare	SignatureValue	HMO D	953.24	972.23	995.01	1032.04	1062.42	1077.61	1100.40	1123.19	1137.43	1152.62	1160.22	1167.81	1175.41	1183.00	1198.19	1213.38	1236.17	1258.01	1288.39	1326.37	1370.99
UnitedHealthcare	SignatureValue	HMO E	977.52	997.00	1020.36	1058.34	1089.49	1105.07	1128.44	1151.80	1166.41	1181.99	1189.78	1197.56	1205.35	1213.14	1228.72	1244.30	1267.67	1290.06	1321.22	1360.16	1405.92
Western Health	Full	HMO B	609.76	621.91	636.48	660.17	679.60	689.32	703.90	718.47	727.58	737.30	742.16	747.02	751.88	756.73	766.45	776.17	790.75	804.71	824.15	848.44	876.99
Western Health	Full	HMO C	603.63	615.65	630.08	653.53	672.77	682.39	696.82	711.25	720.27	729.89	734.70	739.51	744.32	749.13	758.75	768.36	782.79	796.62	815.86	839.91	868.17
Western Health	Full	HMO D	570.11	581.47	595.10	617.24	635.42	644.50	658.13	671.76	680.28	689.36	693.90	698.45	702.99	707.53	716.62	725.70	739.33	752.39	770.56	793.28	819.96

CARRIER	NETWORK	PLAN	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
Anthem Blue Cross	Select HMO	HMO A	1229.84	1281.49	1340.52	1398.73	1464.32	1529.09	1600.43	1672.58	1750.47	1828.35	1912.80	1998.07	2089.08	2134.17	2225.18	2303.89	2355.54	2420.32	2459.67
Anthem Blue Cross	Vivity	HMO B	1411.13	1470.39	1538.13	1604.92	1680.18	1754.50	1836.34	1919.13	2008.50	2097.87	2194.77	2292.61	2397.03	2448.77	2553.20	2643.51	2702.77	2777.09	2822.25
Anthem Blue Cross	Vivity	HMO C	1381.73	1439.76	1506.08	1571.48	1645.17	1717.94	1798.08	1879.15	1966.66	2054.16	2149.04	2244.84	2347.09	2397.75	2500.00	2588.43	2646.46	2719.23	2763.45
Anthem Blue Cross	CaliforniaCare HMO	HMO D	1413.09	1472.44	1540.27	1607.15	1682.52	1756.94	1838.90	1921.80	2011.30	2100.79	2197.83	2295.80	2400.37	2452.18	2556.75	2647.19	2706.54	2780.96	2826.18
Anthem Blue Cross	Prudent Buyer - Small Group	PPO B	1467.83	1529.47	1599.93	1669.41	1747.69	1825.00	1910.13	1996.24	2089.20	2182.17	2282.96	2384.73	2493.35	2547.17	2655.78	2749.73	2811.37	2888.68	2935.65
Kaiser Permanente	Full	HMO A	1001.56	1043.63	1091.70	1139.11	1192.52	1245.27	1303.36	1362.12	1425.55	1488.99	1557.76	1627.20	1701.32	1738.04	1812.16	1876.26	1918.32	1971.07	2003.13
Kaiser Permanente	Full	HMO B	974.52	1015.45	1062.23	1108.36	1160.33	1211.66	1268.18	1325.35	1387.07	1448.79	1515.71	1583.28	1655.39	1691.12	1763.24	1825.61	1866.54	1917.86	1949.04
Kaiser Permanente	Full	HMO C	934.74	974.00	1018.87	1063.11	1112.97	1162.20	1216.41	1271.25	1330.45	1389.65	1453.84	1518.64	1587.81	1622.09	1691.26	1751.08	1790.34	1839.57	1869.48
Sharp Health Plan	Premier	HMO A	759.69	791.60	828.06	864.02	904.54	944.55	988.61	1033.18	1081.29	1129.41	1181.57	1234.24	1290.46	1318.32	1374.53	1423.15	1455.06	1495.07	1519.38
Sharp Health Plan	Performance	HMO B	814.34	848.54	887.63	926.17	969.60	1012.49	1059.72	1107.50	1159.07	1210.64	1266.56	1323.02	1383.28	1413.14	1473.40	1525.52	1559.72	1602.61	1628.67
Sharp Health Plan	Premier	HMO C	762.57	794.60	831.20	867.30	907.97	948.13	992.36	1037.10	1085.39	1133.69	1186.05	1238.92	1295.35	1323.31	1379.74	1428.55	1460.58	1500.74	1525.14
Sutter Health Plan	Sutter Health Plan	HMO A	1231.14	1282.85	1341.94	1400.22	1465.88	1530.72	1602.12	1674.35	1752.32	1830.30	1914.83	2000.19	2091.30	2136.44	2227.54	2306.34	2358.04	2422.88	2462.27
UnitedHealthcare	SignatureValue	HMO A	1370.16	1427.71	1493.47	1558.33	1631.40	1703.57	1783.03	1863.42	1950.19	2036.97	2131.06	2226.05	2327.45	2377.68	2479.08	2566.77	2624.31	2696.47	2740.32
UnitedHealthcare	SignatureValue	HMO B	1484.03	1546.35	1617.59	1687.83	1766.98	1845.14	1931.21	2018.27	2112.26	2206.25	2308.15	2411.05	2520.86	2575.28	2685.10	2780.07	2842.40	2920.56	2968.05
UnitedHealthcare	SignatureValue	HMO D	1424.16	1483.97	1552.33	1619.74	1695.70	1770.71	1853.31	1936.86	2027.05	2117.25	2215.04	2313.79	2419.17	2471.39	2576.78	2667.93	2727.74	2802.75	2848.32
UnitedHealthcare	SignatureValue	HMO E	1460.45	1521.78	1591.89	1661.01	1738.90	1815.82	1900.53	1986.21	2078.70	2171.19	2271.48	2372.74	2480.81	2534.36	2642.43	2735.90	2797.24	2874.16	2920.89
Western Health	Full	HMO B	911.00	949.26	992.99	1036.11	1084.69	1132.67	1185.51	1238.96	1296.65	1354.35	1416.90	1480.07	1547.48	1580.88	1648.30	1706.60	1744.86	1792.84	1821.99
Western Health	Full	HMO C	901.84	939.71	983.00	1025.69	1073.79	1121.28	1173.59	1226.50	1283.61	1340.73	1402.66	1465.18	1531.92	1564.99	1631.72	1689.44	1727.32	1774.81	1803.66
Western Health	Full	HMO D	851.76	887.54	928.42	968.74	1014.17	1059.03	1108.43	1158.40	1212.34	1266.29	1324.78	1383.83	1446.86	1478.09	1541.12	1595.64	1631.41	1676.27	1703.52

Health Care Service Plan rates will vary by county

THE INFORMATION PROVIDED HEREIN, INCLUDING THE RATING INFORMATION IS PROVIDED ON TO YOU ON AN “AS IS” “AS AVAILABLE” BASIS WITHOUT WARRANTY OF ANY KIND, EXPRESS OR IMPLIED. WE FURTHER DISCLAIM ALL LIABILITY RELATED TO THE INFORMATION, INCLUDING THOSE CAUSED BY RATING DISCREPANCIES. FINAL RATES AND RATING AREAS ARE BASED UPON ACTUAL ENROLLMENT AND UNDERWRITING AND MUST BE APPROVED BY THE APPLICABLE INSURANCE CARRIER.

USE EMPLOYER ZIP CODE FOR RATING

AREA 9

02/01/27 - 03/01/27

Bronze		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																																																	
Anthem Blue Cross	Prudent Buyer - Small Group	PPO A	528.66	575.65	593.62	611.59	630.94	650.29	670.33	691.06	691.06	691.06	691.06	693.82	707.65	724.23	751.18	773.30	784.35	800.94	817.52	827.89	838.95	844.48	850.00	855.53	861.06	872.12	883.17	899.76	915.65	937.77	965.41	997.89	1036.59	1080.13	1129.88	1178.95	1234.23	1288.83	1348.95	1409.76	1475.41	1541.06	1612.24	1684.11	1760.82	1798.83	1875.54	1941.88	1985.42	2040.01	2073.18
Anthem Blue Cross	Select PPO	PPO B	483.50	526.48	542.91	559.35	577.04	594.74	613.07	632.03	632.03	632.03	632.03	634.56	647.20	662.37	687.02	707.24	717.35	732.52	747.69	757.17	767.28	772.34	777.40	782.45	787.51	797.62	807.73	822.90	837.44	857.66	882.95	912.65	948.05	987.86	1033.37	1078.24	1128.81	1178.74	1233.72	1289.34	1349.38	1409.43	1474.53	1540.26	1610.41	1645.17	1715.33	1776.00	1815.82	1865.75	1896.09
Anthem Blue Cross	Prudent Buyer - Small Group	PPO C	528.03	574.96	592.91	610.85	630.18	649.51	669.52	690.23	690.23	690.23	690.23	692.99	706.80	723.36	750.28	772.37	783.41	799.98	816.54	826.90	837.94	843.46	848.98	854.50	860.03	871.07	882.11	898.68	914.55	936.64	964.25	996.69	1035.35	1078.83	1128.53	1177.53	1232.75	1287.28	1347.33	1408.07	1473.64	1539.21	1610.31	1682.09	1758.71	1796.67	1873.28	1939.55	1983.03	2037.56	2070.69
Anthem Blue Cross	Select PPO	PPO D	482.87	525.79	542.20	558.61	576.29	593.96	612.26	631.20	631.20	631.20	631.20	633.72	646.35	661.50	686.11	706.31	716.41	731.56	746.71	756.18	766.28	771.33	776.38	781.43	786.48	796.57	806.67	821.82	836.34	856.54	881.79	911.45	946.80	986.57	1032.01	1076.83	1127.32	1177.19	1232.10	1287.65	1347.61	1407.58	1472.59	1538.23	1608.30	1643.01	1713.08	1773.67	1813.44	1863.30	1893.60
Kaiser Permanente	Full	HMO A	341.07	370.12	381.23	392.34	404.30	401.99	414.38	427.20	427.20	427.20	427.20	428.90	437.45	447.70	464.36	478.03	484.87	495.12	505.37	511.78	518.61	522.03	525.45	528.87	532.29	539.12	545.96	556.21	566.03	579.70	596.79	616.87	640.79	667.71	698.46	728.79	762.97	796.72	833.88	871.48	912.06	952.65	996.65	1041.07	1088.49	1111.99	1159.41	1200.42	1227.33	1261.08	1281.60
Kaiser Permanente	Full	HMO C	331.59	359.80	370.58	381.37	392.98	390.33	402.36	414.80	414.80	414.80	414.80	416.46	424.76	434.71	450.89	464.16	470.80	480.76	490.71	496.93	503.57	506.89	510.21	513.52	516.84	523.48	530.12	540.07	549.61	562.89	579.48	598.97	622.20	648.34	678.20	707.65	740.84	773.61	809.69	846.20	885.60	925.01	967.73	1010.87	1056.92	1079.73	1125.77	1165.59	1191.73	1224.49	1244.40
Sharp Health Plan	Premier	HMO A	272.80	297.05	306.32	315.59	325.58	335.56	345.90	356.60	356.60	356.60	356.60	358.03	365.16	373.72	387.62	399.04	404.74	413.30	421.86	427.21	432.91	435.77	438.62	441.47	444.32	450.03	455.73	464.29	472.50	483.91	498.17	514.93	534.90	557.37	583.04	608.36	636.89	665.06	696.08	727.46	761.34	795.22	831.95	869.03	908.62	928.23	967.81	1002.05	1024.51	1052.68	1069.80
Sharp Health Plan	Performance	HMO B	291.24	317.12	327.02	336.92	347.58	358.24	369.28	380.70	380.70	380.70	380.70	382.22	389.84	398.97	413.82	426.00	432.09	441.23	450.37	456.08	462.17	465.22	468.26	471.31	474.35	480.44	486.53	495.67	504.43	516.61	531.84	549.73	571.05	595.03	622.44	649.47	679.93	710.01	743.13	776.63	812.79	848.96	888.17	927.77	970.02	990.96	1033.22	1069.77	1093.75	1123.83	1142.10
Sutter Health Plan	Sutter Health Plan	HMO A	437.33	476.20	491.06	505.93	521.93	537.94	554.52	571.68	571.68	571.68	571.68	573.95	585.39	599.11	621.40	639.70	648.84	662.56	676.28	684.86	694.00	698.58	703.15	707.72	712.30	721.44	730.59	744.31	757.46	775.75	798.62	825.49	857.50	893.52	934.68	975.26	1021.00	1066.16	1115.89	1166.20	1220.51	1274.82	1333.70	1393.15	1456.61	1488.05	1551.50	1606.38	1642.40	1687.56	1714.99
Sutter Health Plan	Sutter Health Plan	HMO B	437.54	476.43	491.30	506.18	522.19	538.20	554.79	571.96	571.96	571.96	571.96	574.24	585.68	599.40	621.71	640.01	649.16	662.89	676.62	685.20	694.35	698.92	703.50	708.07	712.65	721.80	730.95	744.68	757.83	776.14	799.01	825.89	857.92	893.96	935.14	975.75	1021.50	1066.69	1116.44	1166.78	1221.11	1275.45	1334.36	1393.84	1457.33	1488.78	1552.27	1607.18	1643.21	1688.39	1715.84
Western Health	Full	HMO B	316.71	344.87	355.63	366.39	377.99	389.58	401.59	414.01	414.01	414.01	414.01	415.66	423.94	433.88	450.02	463.27	469.90	479.83	489.77	495.98	502.60	505.91	509.23	512.54	515.85	522.47	529.10	539.03	548.56	561.81	578.37	597.82	621.01	647.09	676.90	706.29	739.41	772.12	808.14	844.57	883.90	923.23	965.87	1008.93	1054.89	1077.66	1123.61	1163.36	1189.44	1222.14	1242.02
Western Health	Full	HMO C	330.55	359.93	371.17	382.40	394.50	406.60	419.13	432.09	432.09	432.09	432.09	433.82	442.46	452.83	469.68	483.51	490.42	500.79	511.16	517.64	524.56	528.01	531.47	534.93	538.38	545.30	552.21	562.58	572.52	586.35	603.63	623.94	648.13	675.36	706.47	737.15	771.71	805.85	843.44	881.46	922.51	963.56	1008.07	1053.00	1100.97	1124.73	1172.69	1214.17	1241.39	1275.53	1296.27

Silver		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																																																	
Anthem Blue Cross	Select HMO	HMO A	417.71	454.84	469.04	483.24	498.53	513.81	529.65	546.03	546.03	546.03	546.03	548.21	559.13	572.24	593.53	611.01	619.74	632.85	645.95	654.14	662.88	667.25	671.62	675.99	680.35	689.09	697.83	710.93	723.49	740.96	762.80	788.47	819.05	853.44	892.76	931.53	975.21	1018.35	1065.85	1113.90	1165.77	1217.65	1273.89	1330.68	1391.28	1421.32	1481.93	1534.34	1568.74	1611.88	1638.09
Anthem Blue Cross	CaliforniaCare HMO	HMO B	428.47	466.55	481.12	495.68	511.36	527.04	543.29	560.09	560.09	560.09	560.09	562.33	573.53	586.97	608.82	626.74	635.70	649.14	662.59	670.99	679.95	684.43	688.91	693.39	697.87	706.83	715.80	729.24	742.12	760.04	782.45	808.77	840.14	875.42	915.75	955.51	1000.32	1044.57	1093.30	1142.58	1195.79	1249.00	1306.69	1364.94	1427.11	1457.91	1520.08	1573.85	1609.14	1653.39	1680.27
Anthem Blue Cross	CaliforniaCare HMO	HMO D	427.95	465.99	480.53	495.08	510.74	526.40	542.63	559.41	559.41	559.41	559.41	561.65	572.84	586.26	608.08	625.98	634.93	648.36	661.78	670.17	679.12	683.60	688.07	692.55	697.02	705.98	714.93	728.35	741.22	759.12	781.50	807.79	839.12	874.36	914.64	954.35	999.11	1043.30	1091.97	1141.20	1194.34	1247.48	1305.10	1363.28	1425.38	1456.14	1518.24	1571.94	1607.18	1651.38	1678.23
Anthem Blue Cross	Select PPO	PPO B	521.49	567.85	585.57	603.30	622.38	641.47	661.24	681.69	681.69	681.69	681.69	684.42	698.05	714.41	741.00	762.81	773.72	790.08	806.44	816.66	827.57	833.03	838.48	843.93	849.39	860.29	871.20	887.56	903.24	925.05	952.32	984.36	1022.54	1065.48	1114.56	1162.96	1217.50	1271.35	1330.66	1390.65	1455.41	1520.17	1590.38	1661.28	1736.95	1774.44	1850.11	1915.55	1958.50	2012.35	2045.07
Anthem Blue Cross	Prudent Buyer - Small Group	PPO C	570.17	620.85	640.23	659.61	680.48	701.35	722.96	745.32	745.32	745.32	745.32	748.30	763.21	781.10	810.16	834.01	845.94	863.83	881.71	892.89	904.82	910.78	916.74	922.71	928.67	940.59	952.52	970.41	987.55	1011.40	1041.21	1076.24	1117.98	1164.94	1218.60	1271.52	1331.14	1390.02	1454.86	1520.45	1591.26	1662.06	1738.83	1816.34	1899.08	1940.07	2022.80	2094.35	2141.30	2200.18	2235.96
Anthem Blue Cross	Prudent Buyer - Small Group	PPO D	552.88	602.03	620.82	639.61	659.84	680.08	701.04	722.72	722.72	722.72	722.72	725.61	740.07	757.41	785.60	808.72	820.29	837.63	854.98	865.82	877.38	883.16	888.95	894.73	900.51	912.07	923.64	940.98	957.60	980.73	1009.64	1043.61	1084.08	1129.61	1181.65	1232.96	1290.78	1347.87	1410.75	1474.35	1543.01	1611.67	1686.11	1761.27	1841.49	1881.24	1961.46	2030.84	2076.37	2133.47	2168.16
Anthem Blue Cross	Select PPO	PPO E	505.65	550.60	567.78	584.97	603.47	621.98	641.15	660.98	660.98	660.98	660.98	663.62	676.84	692.71	718.49	739.64	750.21	766.08	781.94	791.85	802.43	807.72	813.01	818.29	823.58	834.16	844.73	860.60	875.80	896.95	923.39	954.46	991.47	1033.11	1080.70	1127.63	1180.51	1232.73	1290.23	1348.40	1411.19	1473.99	1542.07	1610.81	1684.18	1720.53	1793.90	1857.35	1899.00	1951.21	1982.94
Anthem Blue Cross	Prudent Buyer - Small Group	PPO F	572.54	623.43	642.89	662.35	683.31	704.26	725.97	748.42	748.42	748.42	748.42	751.41	766.38	784.34	813.53	837.48	849.46	867.42	885.38	896.61	908.58	914.57	920.56	926.54	932.53	944.51	956.48	974.44	991.66	1015.61	1045.54	1080.72	1122.63	1169.78	1223.67	1276.80	1336.68	1395.80	1460.92	1526.78	1597.88	1668.98	1746.06	1823.90	1906.97	1948.14	2031.21	2103.06	2150.21	2209.34	2245.26
Kaiser Permanente	Full	HMO A	372.04	403.84	416.00	428.16	441.25	440.08	453.64	467.67	467.67	467.67	467.67	469.54	478.89	490.12	508.36	523.32	530.80	542.03	553.25	560.27	567.75	571.49	575.23	578.97	582.72	590.20	597.68	608.90	619.66	634.63	653.33	675.31	701.50	730.97	764.64	797.84	835.26	872.20	912.89	954.04	998.47	1042.90	1091.07	1139.71	1191.62	1217.34	1269.25	1314.15	1343.61	1380.56	1403.01
Kaiser Permanente	Full	HMO B	376.96	409.20	421.53	433.85	447.13	446.13	459.88	474.11	474.11	474.11	474.11	476.00	485.49	496.86	515.35	530.53	538.11	549.49	560.87	567.98	575.57	579.36	583.15	586.94	590.74	598.32	605.91	617.29	628.19	643.36	662.33	684.61	711.16	741.03	775.16	808.83	846.75	884.21	925.46	967.18	1012.22	1057.26	1106.09	1155.40	1208.02	1234.10	1286.73	1332.24	1362.11	1399.56	1422.33
Kaiser Permanente	Full	HMO C	374.27	406.27	418.51	430.74	443.92	442.83	456.47	470.59	470.59	470.59	470.59	472.47	481.89	493.18	511.53	526.59	534.12	545.42	556.71	563.77	571.30	575.06	578.83	582.59	586.36	593.89	601.42	612.71	623.53	638.59	657.42	679.53	705.89	735.53	769.42	802.83	840.48	877.65	918.59	960.01	1004.71	1049.42	1097.89	1146.83	1199.07	1224.95	1277.19	1322.36	1352.01	1389.19	1411.77
Kaiser Permanente	Full	HMO D	343.75	373.04	384.24	395.44	407.49	405.28	417.77	430.70	430.70	430.70	430.70	432.42	441.03	451.37	468.17	481.95	488.84	499.18	509.51	515.97	522.86	526.31	529.76	533.20	536.65	543.54	550.43	560.77	570.67	584.45	601.68	621.92	646.04	673.18	704.19	734.77	769.22	803.25	840.72	878.62	919.53	960.45	1004.81	1049.60	1097.41	1121.10	1168.91	1210.25	1237.39	1271.41	1292.10
Kaiser Permanente	Full	HMO E	358.47	389.06	400.76	412.46	425.06	423.38	436.43	449.93	449.93	449.93	449.93	451.73	460.73	471.53	489.07	503.47	510.67	521.47	532.27	539.02	546.21	549.81	553.41	557.01	560.61	567.81	575.01	585.81	596.16	610.55	628.55	649.70	674.89	703.24	735.64	767.58	803.57	839.12	878.26	917.86	960.60	1003.34	1049.69	1096.48	1146.42	1171.17	1221.11	1264.30	1292.65	1328.19	1349.79
Sharp Health Plan	Premier	HMO A	285.29	310.65	320.35	330.04	340.49	350.93	361.74	372.93	372.93	372.93	372.93	374.42	381.88	390.83	405.37	417.31	423.28	432.23	441.18	446.77	452.74	455.72	458.70	461.69	464.67	470.64	476.60	485.55	494.13	506.07	520.98	538.51	559.40	582.89	609.74	636.22	666.05	695.51	727.96	760.78	796.21	831.63	870.05	908.83	950.23	970.74	1012.13	1047.93	1071.43	1100.89	1118.79
Sharp Health Plan	Performance	HMO B	294.75	320.95	330.96	340.98	351.77	362.56	373.73	385.29	385.29	385.29	385.29	386.83	394.54	403.78	418.81	431.14	437.30	446.55	455.80	461.58	467.74	470.82	473.91	476.99	480.07	486.24	492.40	501.65	510.51	522.84	538.25	556.36	577.94	602.21	629.95	657.30	688.13	718.57	752.09	785.99	822.59	859.20	898.88	938.95	981.72	1002.91	1045.68	1082.66	1106.94	1137.38	1155.87
Sharp Health Plan	Premier	HMO C	268.76	292.65	301.78	310.92	320.76	330.59	340.78	351.32	351.32	351.32	351.32	352.73	359.75	368.18	381.88	393.13	398.75	407.18	415.61	420.88	426.50	429.31	432.12	434.93	437.74	443.37	448.99	457.42	465.50	476.74	490.79	507.31	526.98	549.11	574.41	599.35	627.46	655.21	685.78	716.69	750.07	783.44	819.63	856.17	895.16	914.49	953.48	987.21	1009.34	1037.10	1053.96
Sutter Health Plan	Sutter Health Plan	HMO B	534.61	582.13	600.30	618.47	638.04	657.61	677.87	698.85	698.85	698.85	698.85	701.63	715.61	732.38	759.64	782.00	793.18	809.95	826.72	837.21	848.39	853.98	859.57	865.16	870.75	881.93	893.11	909.89	925.96	948.32	976.28	1009.12	1048.26	1092.28	1142.60	1192.22	1248.12	1303.33	1364.13	1425.63	1492.02	1558.41	1630.39	1703.07	1780.64	1819.07	1896.65	1963.73	2007.76	2062.97	2096.50
Sutter Health Plan	Sutter Health Plan	HMO C	463.03	504.19	519.93	535.66	552.61	569.56	587.11	605.28	605.28	605.28	605.28	607.69	619.80	634.32	657.93	677.30	686.98	701.51	716.03	725.11	734.80	739.64	744.48	749.32	754.17	763.85	773.53	788.06	801.98	821.35	845.56	874.01	907.90	946.04	989.62	1032.59	1081.01	1128.83	1181.49	1234.75	1292.25	1349.75	1412.09	1475.04	1542.23	1575.52	1642.70	1700.81	1738.94	1786.76	1815.80
UnitedHealthcare	SignatureValue	HMO A	587.68	639.92	659.89	679.87	701.38	722.89	745.16	768.21	768.21	768.21	768.21	771.28	786.65	805.08	835.04	859.63	871.92	890.36	908.79	920.32	932.61	938.75	944.90	951.04	957.19	969.48	981.77	1000.21	1017.88	1042.46	1073.19	1109.30	1152.32	1200.71	1256.02	1310.57	1372.02	1432.71	1499.55	1567.15	1640.13	1713.11	1792.23	1872.13	1957.40	1999.65	2084.92	2158.67	2207.07	2267.76	2304.63
Western Health	Full	HMO B	362.81	395.06	407.40	419.73	433.01	446.29	460.04	474.27	474.27	474.27	474.27	476.16	485.65	497.03	515.53	530.71	538.29	549.68	561.06	568.17	575.76	579.56	583.35	587.14	590.94	598.53	606.11	617.50	628.40	643.58	662.55	684.84	711.40	741.28	775.43	809.10	847.04	884.51	925.77	967.51	1012.56	1057.62	1106.47	1155.79	1208.43	1234.52	1287.16	1332.69	1362.57	1400.04	1422.80
Western Health	Full	HMO C	342.86	373.34	384.99	396.64	409.19	421.74	434.74	448.18	448.18	448.18	448.18	449.98	458.94	469.70	487.18	501.52	508.69	519.45	530.20	536.93	544.10	547.68	551.27	554.85	558.44	565.61	572.78	583.54	593.84	608.19	626.11	647.18	672.28	700.51	732.78	764.60	800.46	835.86	874.86	914.30	956.87	999.45	1045.62	1092.23	1141.97	1166.63	1216.37	1259.40	1287.64	1323.04	1344.54
Western Health	Full	HMO D	330.78	360.19	371.43	382.67	394.78	406.88	419.42	432.40	432.40	432.40	432.40	434.12	442.77	453.15	470.01	483.85	490.77	501.15	511.52	518.01	524.93	528.39	531.85	535.31	538.76	545.68	552.60	562.98	572.92	586.76	604.06	624.38	648.59	675.83	706.97	737.67	772.26	806.42	844.04	882.09	923.16	964.24	1008.78	1053.75	1101.74	1125.52	1173.52	1215.03	1242.27	1276.43	1297.19

Health Care Service Plan rates will vary by county

THE INFORMATION PROVIDED HEREIN, INCLUDING THE RATING INFORMATION IS PROVIDED ON TO YOU ON AN "AS IS" "AS AVAILABLE" BASIS WITHOUT WARRANTY OF ANY KIND, EXPRESS OR IMPLIED. WE FURTHER DISCLAIM ALL LIABILITY RELATED TO THE INFORMATION, INCLUDING THOSE CAUSED BY RATING DISCREPANCIES. FINAL RATES AND RATING AREAS ARE BASED UPON ACTUAL ENROLLMENT AND UNDERWRITING AND MUST BE APPROVED BY THE APPLICABLE INSURANCE CARRIER.

Continued

Gold

CARRIER	NETWORK	PLAN	0-14	15	16	17	18	19	20	21	22	23	24	25	26
Anthem Blue Cross	Select HMO	HMO A	535.54	583.14	601.34	619.54	639.15	658.75	679.05	700.05	700.05	700.05	700.05	702.85	716.85
Anthem Blue Cross	CaliforniaCare HMO	HMO B	549.30	598.13	616.80	635.47	655.57	675.68	696.50	718.04	718.04	718.04	718.04	720.91	735.27
Anthem Blue Cross	Priority Select HMO	HMO C	362.56	394.78	407.11	419.43	432.70	445.97	459.71	473.93	473.93	473.93	473.93	475.83	485.30
Anthem Blue Cross	Select PPO	PPO B	617.35	672.22	693.20	714.19	736.78	759.38	782.78	806.99	806.99	806.99	806.99	810.22	826.36
Anthem Blue Cross	Select PPO	PPO C	636.95	693.56	715.21	736.86	760.17	783.49	807.63	832.61	832.61	832.61	832.61	835.94	852.59
Anthem Blue Cross	Select PPO	PPO D	612.84	667.32	688.14	708.97	731.40	753.84	777.07	801.10	801.10	801.10	801.10	804.30	820.33
Anthem Blue Cross	Prudent Buyer - Small Group	PPO E	696.49	758.40	782.08	805.75	831.24	856.73	883.14	910.45	910.45	910.45	910.45	914.09	932.30
Anthem Blue Cross	Prudent Buyer - Small Group	PPO H	670.13	729.70	752.48	775.25	799.78	824.31	849.71	875.99	875.99	875.99	875.99	879.49	897.01
Anthem Blue Cross	Prudent Buyer - Small Group	PPO I	680.02	740.46	763.57	786.69	811.57	836.46	862.24	888.91	888.91	888.91	888.91	892.47	910.24
Kaiser Permanente	Full	HMO B	447.51	486.02	500.74	515.47	531.33	532.91	549.34	566.33	566.33	566.33	566.33	568.59	579.92
Kaiser Permanente	Full	HMO C	460.46	500.12	515.28	530.45	546.78	548.84	565.75	583.25	583.25	583.25	583.25	585.59	597.25
Kaiser Permanente	Full	HMO D	434.65	472.01	486.30	500.59	515.97	517.09	533.03	549.51	549.51	549.51	549.51	551.71	562.70
Kaiser Permanente	Full	HMO E	388.57	421.85	434.57	447.29	460.99	460.42	474.61	489.29	489.29	489.29	489.29	491.24	501.03
Kaiser Permanente	Full	HMO F	443.77	481.95	496.54	511.14	526.86	528.31	544.59	561.43	561.43	561.43	561.43	563.68	574.91
Sharp Health Plan	Performance	HMO A	366.15	398.70	411.14	423.59	436.99	450.39	464.27	478.63	478.63	478.63	478.63	480.54	490.12
Sharp Health Plan	Premier	HMO B	345.92	376.67	388.42	400.18	412.84	425.50	438.61	452.18	452.18	452.18	452.18	453.99	463.03
Sharp Health Plan	Performance	HMO D	377.08	410.59	423.41	436.23	450.03	463.83	478.12	492.91	492.91	492.91	492.91	494.88	504.74
Sutter Health Plan	Sutter Health Plan	HMO A	585.66	637.72	657.63	677.53	698.97	720.40	742.60	765.58	765.58	765.58	765.58	768.63	783.94
Sutter Health Plan	Sutter Health Plan	HMO B	628.18	684.02	705.37	726.72	749.71	772.71	796.52	821.16	821.16	821.16	821.16	824.44	840.86
Sutter Health Plan	Sutter Health Plan	HMO C	533.72	581.16	599.30	617.44	636.97	656.51	676.74	697.68	697.68	697.68	697.68	700.46	714.41
UnitedHealthcare	SignatureValue	HMO A	643.41	700.60	722.47	744.34	767.89	791.44	815.83	841.06	841.06	841.06	841.06	844.42	861.25
UnitedHealthcare	SignatureValue	HMO C	688.83	750.06	773.47	796.88	822.09	847.30	873.42	900.43	900.43	900.43	900.43	904.03	922.04
UnitedHealthcare	SignatureValue	HMO F	712.49	775.82	800.04	824.25	850.33	876.41	903.42	931.36	931.36	931.36	931.36	935.09	953.71
UnitedHealthcare	SignatureValue	HMO H	667.70	727.05	749.74	772.44	796.88	821.31	846.63	872.81	872.81	872.81	872.81	876.30	893.76
Western Health	Full	HMO A	406.47	442.60	456.41	470.23	485.10	499.98	515.39	531.33	531.33	531.33	531.33	533.45	544.08
Western Health	Full	HMO B	426.53	464.44	478.93	493.43	509.04	524.65	540.82	557.55	557.55	557.55	557.55	559.78	570.93
Western Health	Full	HMO C	397.43	432.76	446.27	459.77	474.32	488.87	503.93	519.52	519.52	519.52	519.52	521.60	531.99
Western Health	Full	HMO D	382.67	416.69	429.69	442.70	456.70	470.71	485.22	500.22	500.22	500.22	500.22	502.22	512.23

CARRIER	NETWORK	PLAN	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45
Anthem Blue Cross	Select HMO	HMO A	733.65	760.95	783.36	794.56	811.36	828.16	838.66	849.86	855.46	861.06	866.66	872.26	883.46	894.66	911.47	927.57	949.97	977.97	1010.87
Anthem Blue Cross	CaliforniaCare HMO	HMO B	752.51	780.51	803.49	814.98	832.21	849.44	860.21	871.70	877.44	883.19	888.93	894.68	906.17	917.66	934.89	951.40	974.38	1003.10	1036.85
Anthem Blue Cross	Priority Select HMO	HMO C	496.68	515.16	530.33	537.91	549.28	560.66	567.77	575.35	579.14	582.93	586.73	590.52	598.10	605.68	617.06	627.96	643.12	662.08	684.35
Anthem Blue Cross	Select PPO	PPO B	845.73	877.20	903.02	915.93	935.30	954.67	966.77	979.69	986.14	992.60	999.05	1005.51	1018.42	1031.33	1050.70	1069.26	1095.09	1127.37	1165.29
Anthem Blue Cross	Select PPO	PPO C	872.58	905.05	931.69	945.01	964.99	984.98	997.47	1010.79	1017.45	1024.11	1030.77	1037.43	1050.75	1064.08	1084.06	1103.21	1129.85	1163.16	1202.29
Anthem Blue Cross	Select PPO	PPO D	839.55	870.80	896.43	909.25	928.47	947.70	959.72	972.54	978.94	985.35	991.76	998.17	1010.99	1023.81	1043.03	1061.46	1087.09	1119.14	1156.79
Anthem Blue Cross	Prudent Buyer - Small Group	PPO E	954.15	989.66	1018.79	1033.36	1055.21	1077.06	1090.72	1105.29	1112.57	1119.85	1127.14	1134.42	1148.99	1163.56	1185.41	1206.35	1235.48	1271.90	1314.69
Anthem Blue Cross	Prudent Buyer - Small Group	PPO H	918.04	952.20	980.23	994.25	1015.27	1036.30	1049.44	1063.45	1070.46	1077.47	1084.48	1091.48	1105.50	1119.52	1140.54	1160.69	1188.72	1223.76	1264.93
Anthem Blue Cross	Prudent Buyer - Small Group	PPO I	931.58	966.25	994.69	1008.91	1030.25	1051.58	1064.91	1079.14	1086.25	1093.36	1100.47	1107.58	1121.80	1136.03	1157.36	1177.81	1206.25	1241.81	1283.59
Kaiser Permanente	Full	HMO B	593.51	615.60	633.72	642.78	656.37	669.96	678.46	687.52	692.05	696.58	701.11	705.64	714.70	723.77	737.36	750.38	768.51	791.16	817.78
Kaiser Permanente	Full	HMO C	611.25	634.00	652.66	661.99	675.99	689.99	698.74	708.07	712.73	717.40	722.07	726.73	736.06	745.40	759.39	772.81	791.47	814.80	842.22
Kaiser Permanente	Full	HMO D	575.89	597.32	614.90	623.70	636.88	650.07	658.32	667.11	671.50	675.90	680.30	684.69	693.48	702.28	715.46	728.10	745.69	767.67	793.50
Kaiser Permanente	Full	HMO E	512.77	531.85	547.51	555.34	567.08	578.83	586.16	593.99	597.91	601.82	605.74	609.65	617.48	625.31	637.05	648.30	663.96	683.53	706.53
Kaiser Permanente	Full	HMO F	588.38	610.28	628.25	637.23	650.70	664.18	672.60	681.58	686.07	690.56	695.06	699.55	708.53	717.51	730.99	743.90	761.87	784.32	810.71
Sharp Health Plan	Performance	HMO A	501.60	520.27	535.59	543.25	554.73	566.22	573.40	581.06	584.89	588.71	592.54	596.37	604.03	611.69	623.18	634.18	649.50	668.65	691.14
Sharp Health Plan	Premier	HMO B	473.88	491.52	505.99	513.22	524.08	534.93	541.71	548.95	552.56	556.18	559.80	563.42	570.65	577.89	588.74	599.14	613.61	631.70	652.95
Sharp Health Plan	Performance	HMO D	516.57	535.79	551.57	559.45	571.28	583.11	590.51	598.39	602.34	606.28	610.22	614.17	622.05	629.94	641.77	653.11	668.88	688.60	711.76
Sutter Health Plan	Sutter Health Plan	HMO A	802.32	832.18	856.67	868.92	887.30	905.67	917.15	929.40	935.53	941.65	947.78	953.90	966.15	978.40	996.77	1014.38	1038.88	1069.50	1105.48
Sutter Health Plan	Sutter Health Plan	HMO B	860.57	892.59	918.87	932.01	951.72	971.42	983.74	996.88	1003.45	1010.02	1016.59	1023.16	1036.30	1049.43	1069.14	1088.03	1114.31	1147.15	1185.75
Sutter Health Plan	Sutter Health Plan	HMO C	731.16	758.37	780.69	791.86	808.60	825.34	835.81	846.97	852.55	858.13	863.72	869.30	880.46	891.62	908.37	924.41	946.74	974.64	1007.43
UnitedHealthcare	SignatureValue	HMO A	881.43	914.23	941.15	954.60	974.79	994.97	1007.59	1021.05	1027.78	1034.50	1041.23	1047.96	1061.42	1074.87	1095.06	1114.40	1141.32	1174.96	1214.49
UnitedHealthcare	SignatureValue	HMO C	943.65	978.77	1007.58	1021.99	1043.60	1065.21	1078.72	1093.12	1100.33	1107.53	1114.73	1121.94	1136.34	1150.75	1172.36	1193.07	1221.88	1257.90	1300.22
UnitedHealthcare	SignatureValue	HMO F	976.07	1012.39	1042.19	1057.09	1079.45	1101.80	1115.77	1130.67	1138.12	1145.57	1153.02	1160.47	1175.38	1190.28	1212.63	1234.05	1263.86	1301.11	1344.88
UnitedHealthcare	SignatureValue	HMO H	914.70	948.74	976.67	990.64	1011.59	1032.53	1045.63	1059.59	1066.57	1073.56	1080.54	1087.52	1101.49	1115.45	1136.40	1156.47	1184.40	1219.32	1260.34
Western Health	Full	HMO A	556.83	577.55	594.56	603.06	615.81	628.56	636.53	645.03	649.28	653.53	657.78	662.04	670.54	679.04	691.79	704.01	721.01	742.27	767.24
Western Health	Full	HMO B	584.31	606.06	623.90	632.82	646.20	659.58	667.94	676.86	681.33	685.79	690.25	694.71	703.63	712.55	725.93	738.75	756.59	778.90	805.10
Western Health	Full	HMO C	544.46	564.72	581.34	589.65	602.12	614.59	622.38	630.70	634.85	639.01	643.16	647.32	655.63	663.94	676.41	688.36	704.99	725.77	750.18
Western Health	Full	HMO D	524.23	543.74	559.75	567.75	579.76	591.76	599.27	607.27	611.27	615.27	619.28	623.28	631.28	639.28	651.29	662.79	678.80	698.81	722.32

CARRIER	NETWORK	PLAN	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
Anthem Blue Cross	Select HMO	HMO A	1050.08	1094.18	1144.58	1194.29	1250.29	1305.59	1366.50	1428.10	1494.61	1561.11	1633.22	1706.02	1783.73	1822.23	1899.94	1967.14	2011.24	2066.55	2100.15
Anthem Blue Cross	CaliforniaCare HMO	HMO B	1077.06	1122.30	1174.00	1224.98	1282.42	1339.14	1401.61	1464.80	1533.02	1601.23	1675.19	1749.86	1829.57	1869.06	1948.76	2017.69	2062.93	2119.65	2154.12
Anthem Blue Cross	Priority Select HMO	HMO C	710.90	740.75	774.88	808.52	846.44	883.88	925.11	966.82	1011.84	1056.86	1105.68	1154.97	1207.57	1233.64	1286.25	1331.74	1361.60	1399.04	1421.79
Anthem Blue Cross	Select PPO	PPO B	1210.49	1261.33	1319.43	1376.72	1441.28	1505.04	1575.24	1646.26	1722.92	1799.59	1882.71	1966.63	2056.21	2100.59	2190.17	2267.64	2318.48	2382.23	2420.97
Anthem Blue Cross	Select PPO	PPO C	1248.92	1301.37	1361.32	1420.43	1487.04	1552.82	1625.25	1698.52	1777.62	1856.72	1942.48	2029.07	2121.49	2167.28	2259.70	2339.63	2392.09	2457.86	2497.83
Anthem Blue Cross	Select PPO	PPO D	1201.65	1252.12	1309.80	1366.68	1430.76	1494.05	1563.75	1634.24	1710.35	1786.45	1868.97	1952.28	2041.20	2085.26	2174.19	2251.09	2301.56	2364.85	2403.30
Anthem Blue Cross	Prudent Buyer - Small Group	PPO E	1365.68	1423.03	1488.59	1553.23	1626.06	1697.99	1777.20	1857.32	1943.81	2030.30	2124.08	2218.77	2319.83	2369.90	2470.96	2558.36	2615.72	2687.65	2731.35
Anthem Blue Cross	Prudent Buyer - Small Group	PPO H	1313.99	1369.17	1432.24	1494.44	1564.52	1633.72	1709.93	1787.02	1870.24	1953.46	2043.68	2134.79	2232.02	2280.20	2377.44	2461.53	2516.72	2585.92	2627.97
Anthem Blue Cross	Prudent Buyer - Small Group	PPO I	1333.37	1389.37	1453.37	1516.48	1587.59	1657.82	1735.15	1813.38	1897.82	1982.27	2073.83	2166.27	2264.94	2313.83	2412.50	2497.84	2553.84	2624.06	2666.73
Kaiser Permanente	Full	HMO B	849.49	885.17	925.94	966.15	1011.46	1056.20	1105.47	1155.31	1209.11	1262.91	1321.24	1380.14	1443.00	1474.15	1537.01	1591.38	1627.06	1671.80	1698.99
Kaiser Permanente	Full	HMO C	874.88	911.62	953.62	995.03	1041.69	1087.77	1138.51	1189.83	1245.24	1300.65	1360.73	1421.39	1486.13	1518.21	1582.95	1638.94	1675.68	1721.76	1749.75
Kaiser Permanente	Full	HMO D	824.27	858.89	898.45	937.47	981.43	1024.84	1072.65	1121.01	1173.21	1225.41	1282.01	1339.16	1400.16	1430.38	1491.38	1544.13	1578.75	1622.16	1648.53
Kaiser Permanente	Full	HMO E	733.93	764.75	799.98	834.72	873.87	912.52	955.09	998.14	1044.63	1091.11	1141.50	1192.39	1246.70	1273.61	1327.92	1374.89	1405.72	1444.37	1467.87
Kaiser Permanente	Full	HMO F	842.15	877.52	917.95	957.81	1002.72	1047.08	1095.92	1145.33	1198.66	1252.00	1309.83	1368.22	1430.54	1461.41	1523.73	1577.63	1613.00	1657.36	1684.29
Sharp Health Plan	Performance	HMO A	717.95	748.10	782.56	816.54	854.83	892.64	934.29	976.41	1021.88	1067.34	1116.64	1166.42	1219.55	1245.87	1299.00	1344.95	1375.10	1412.92	1435.89
Sharp Health Plan	Premier	HMO B	678.27	706.76	739.31	771.42	807.59	843.32	882.66	922.45	965.40	1008.36	1054.94	1101.96	1152.15	1177.02	1227.22	1270.63	1299.11	1334.84	1356.54
Sharp Health Plan	Performance	HMO D	739.37	770.42	805.91	840.90	880.34	919.28	962.16	1005.54	1052.36	1099.19	1149.96	1201.22	1255.93	1283.04	1337.76	1385.08	1416.13	1455.07	1478.73
Sutter Health Plan	Sutter Health Plan	HMO A	1148.36	1196.59	1251.71	1306.06	1367.31	1427.79	1494.39	1561.76	1634.49	1707.22	1786.08	1865.70	1950.67	1992.78	2077.76	2151.25	2199.48	2259.96	2296.70
Sutter Health Plan	Sutter Health Plan	HMO B	1231.73	1283.46	1342.59	1400.89	1466.58	1531.45	1602.89	1675.15	1753.16	1831.17	1915.75	2001.15	2092.30	2137.46	2228.61	2307.44	2359.17	2424.05	2463.45
Sutter Health Plan	Sutter Health Plan	HMO C	1046.50	1090.46	1140.69	1190.22	1246.04	1301.15	1361.85	1423.25	1489.52	1555.80	1627.66	1700.22	1777.66	1816.03	1893.48	1960.45	2004.40	2059.52	2093.00
UnitedHealthcare	SignatureValue	HMO A	1261.59	1314.58	1375.13	1434.85	1502.13	1568.58	1641.75	1715.76	1795.66	1875.56	1962.19	2049.66	2143.02	2189.28	2282.64	2363.38	2416.37	2482.81	2523.18
UnitedHealthcare	SignatureValue	HMO C	1350.65	1407.37	1472.20	1536.13	1608.17	1679.30	1757.64	1836.88	1922.42	2007.96	2100.70	2194.35	2294.30	2343.82	2443.77	2530.21	2586.94	2658.07	2701.29
UnitedHealthcare	SignatureValue	HMO F	1397.04	1455.72	1522.77	1588.90	1663.41	1736.99	1818.01	1899.97	1988.45	2076.93	2172.86	2269.72	2373.11	2424.33	2527.71	2617.12	2675.80	2749.37	2794.08
UnitedHealthcare	SignatureValue	HMO H	1309.22	1364.20	1427.04	1489.01	1558.84	1627.79	1703.73	1780.53	1863.45	1946.37	2036.27	2127.04	2223.92	2271.92	2368.81	2452.60	2507.58	2576.54	2618.43
Western Health	Full	HMO A	796.99	830.47	868.72	906.45	948.95	990.93	1037.15	1083.91	1134.39	1184.86	1239.59	1294.85	1353.83	1383.05	1442.03	1493.03	1526.51	1568.48	1593.99
Western Health	Full	HMO B	836.32	871.45	911.59	951.18	995.78	1039.83	1088.34	1137.40	1190.37	1243.34	1300.76	1358.75	1420.64	1451.30	1513.19	1566.71	1601.84	1645.89	1672.65
Western Health	Full	HMO C	779.28	812.01	849.41	886.30	927.86	968.90	1014.10	1059.82	1109.17	1158.53	1212.04	1266.07	1323.73	1352.31	1409.97	1459.85	1492.58	1533.62	1558.56
Western Health	Full	HMO D	750.33	781.85	817.86	853.38	893.40	932.91	976.43	1020.45	1067.97	1115.50	1167.02	1219.04	1274.57	1302.08	1357.60	1405.62	1437.14	1476.66	1500.66

Platinum

CARRIER	NETWORK	PLAN	0-14	15	16	17	18	19	20	21	22	23	24	25	26
Anthem Blue Cross	Select HMO	HMO A	581.04	632.69	652.44	672.18	693.45	714.72	736.74	759.53	759.53	759.53	759.53	762.57	777.76
Anthem Blue Cross	Vivity	HMO B	595.03	647.92	668.15	688.37	710.15	731.93	754.49	777.82	777.82	777.82	777.82	780.93	796.49
Anthem Blue Cross	Vivity	HMO C	582.60	634.39	654.19	673.99	695.31	716.64	738.72	761.57	761.57	761.57	761.57	764.62	779.85
Anthem Blue Cross	CaliforniaCare HMO	HMO D	595.84	648.81	669.06	689.31	711.12	732.93	755.51	778.88	778.88	778.88	778.88	782.00	797.57
Anthem Blue Cross	Prudent Buyer - Small Group	PPO B	785.76	855.61	882.31	909.02	937.78	966.54	996.33	1027.14	1027.14	1027.14	1027.14	1031.25	1051.79
Kaiser Permanente	Full	HMO A	495.71	538.50	554.86	571.23	588.85	592.20	610.45	629.33	629.33	629.33	629.33	631.85	644.43
Kaiser Permanente	Full	HMO B	482.71	524.35	540.27	556.19	573.34	576.21	593.97	612.34	612.34	612.34	612.34	614.79	627.04
Kaiser Permanente	Full	HMO C	463.59	503.53	518.80	534.07	550.51	552.69	569.72	587.34	587.34	587.34	587.34	589.69	601.44
Sharp Health Plan	Premier	HMO A	387.44	421.88	435.05	448.22	462.40	476.58	491.27	506.46	506.46	506.46	506.46	508.49	518.62
Sharp Health Plan	Performance	HMO B	415.31	452.23	466.34	480.46	495.66	510.86	526.60	542.89	542.89	542.89	542.89	545.06	555.92
Sharp Health Plan	Premier	HMO C	388.91	423.48	436.70	449.92	464.15	478.39	493.13	508.38	508.38	508.38	508.38	510.41	520.58
Sutter Health Plan	Sutter Health Plan	HMO A	682.29	742.94	766.13	789.32	814.29	839.26	865.13	891.89	891.89	891.89	891.89	895.45	913.29
UnitedHealthcare	SignatureValue	HMO A	714.91	778.46	802.75	827.05	853.22	879.38	906.48	934.52	934.52	934.52	934.52	938.26	956.95
UnitedHealthcare	SignatureValue	HMO B	774.32	843.15	869.46	895.78	924.12	952.46	981.81	1012.18	1012.18	1012.18	1012.18	1016.23	1036.47
UnitedHealthcare	SignatureValue	HMO D	743.09	809.14	834.40	859.65	886.85	914.05	942.22	971.36	971.36	971.36	971.36	975.25	994.67
UnitedHealthcare	SignatureValue	HMO E	762.02	829.75	855.65	881.55	909.44	937.33	966.22	996.10	996.10	996.10	996.10	1000.08	1020.01
Western Health	Full	HMO B	464.61	505.91	521.70	537.49	554.49	571.50	589.11	607.33	607.33	607.33	607.33	609.76	621.91
Western Health	Full	HMO C	459.94	500.82	516.45	532.08	548.92	565.75	583.19	601.22	601.22	601.22	601.22	603.63	615.65
Western Health	Full	HMO D	434.40	473.01	487.78	502.54	518.44	534.34	550.81	567.84	567.84	567.84	567.84	570.11	581.47

CARRIER	NETWORK	PLAN	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45
Anthem Blue Cross	Select HMO	HMO A	795.99	825.61	849.91	862.07	880.30	898.52	909.92	922.07	928.15	934.22	940.30	946.37	958.53	970.68	988.91	1006.38	1030.68	1061.06	1096.76
Anthem Blue Cross	Vivity	HMO B	815.16	845.49	870.38	882.83	901.49	920.16	931.83	944.27	950.50	956.72	962.94	969.16	981.61	994.05	1012.72	1030.61	1055.50	1086.61	1123.17
Anthem Blue Cross	Vivity	HMO C	798.13	827.83	852.20	864.38	882.66	900.94	912.36	924.55	930.64	936.73	942.82	948.92	961.10	973.29	991.56	1009.08	1033.45	1063.91	1099.71
Anthem Blue Cross	CaliforniaCare HMO	HMO D	816.27	846.64	871.57	884.03	902.72	921.42	933.10	945.56	951.79	958.02	964.25	970.48	982.95	995.41	1014.10	1032.02	1056.94	1088.10	1124.70
Anthem Blue Cross	Prudent Buyer - Small Group	PPO B	1076.44	1116.50	1149.37	1165.80	1190.46	1215.11	1230.51	1246.95	1255.17	1263.38	1271.60	1279.82	1296.25	1312.68	1337.34	1360.96	1393.83	1434.91	1483.19
Kaiser Permanente	Full	HMO A	659.54	684.08	704.22	714.29	729.39	744.49	753.93	764.00	769.04	774.07	779.11	784.14	794.21	804.28	819.38	833.86	854.00	879.17	908.75
Kaiser Permanente	Full	HMO B	641.73	665.61	685.21	695.01	709.70	724.40	733.58	743.38	748.28	753.18	758.08	762.98	772.77	782.57	797.27	811.35	830.95	855.44	884.22
Kaiser Permanente	Full	HMO C	615.54	638.44	657.24	666.63	680.73	694.83	703.64	713.03	717.73	722.43	727.13	731.83	741.23	750.62	764.72	778.23	797.02	820.52	848.12
Sharp Health Plan	Premier	HMO A	530.77	550.52	566.73	574.83	586.99	599.14	606.74	614.84	618.89	622.95	627.00	631.05	639.15	647.26	659.41	671.06	687.27	707.52	731.33
Sharp Health Plan	Performance	HMO B	568.95	590.12	607.49	616.18	629.21	642.24	650.38	659.07	663.41	667.75	672.10	676.44	685.13	693.81	706.84	719.33	736.70	758.42	783.93
Sharp Health Plan	Premier	HMO C	532.78	552.61	568.88	577.01	589.21	601.41	609.04	617.17	621.24	625.31	629.37	633.44	641.58	649.71	661.91	673.60	689.87	710.21	734.10
Sutter Health Plan	Sutter Health Plan	HMO A	934.70	969.48	998.02	1012.29	1033.69	1055.10	1068.48	1082.75	1089.88	1097.02	1104.15	1111.29	1125.56	1139.83	1161.23	1181.75	1210.29	1245.96	1287.88
UnitedHealthcare	SignatureValue	HMO A	979.38	1015.82	1045.73	1060.68	1083.11	1105.54	1119.55	1134.51	1141.98	1149.46	1156.94	1164.41	1179.36	1194.32	1216.75	1238.24	1268.14	1305.52	1349.45
UnitedHealthcare	SignatureValue	HMO B	1060.76	1100.24	1132.63	1148.82	1173.12	1197.41	1212.59	1228.79	1236.88	1244.98	1253.08	1261.18	1277.37	1293.57	1317.86	1341.14	1373.53	1414.02	1461.59
UnitedHealthcare	SignatureValue	HMO D	1017.99	1055.87	1086.95	1102.49	1125.81	1149.12	1163.69	1179.23	1187.00	1194.77	1202.54	1210.31	1225.86	1241.40	1264.71	1287.05	1318.14	1356.99	1402.64
UnitedHealthcare	SignatureValue	HMO E	1043.91	1082.76	1114.64	1130.57	1154.48	1178.39	1193.33	1209.27	1217.23	1225.20	1233.17	1241.14	1257.08	1273.02	1296.92	1319.83	1351.71	1391.55	1438.37
Western Health	Full	HMO B	636.48	660.17	679.60	689.32	703.90	718.47	727.58	737.30	742.16	747.02	751.88	756.73	766.45	776.17	790.75	804.71	824.15	848.44	876.99
Western Health	Full	HMO C	630.08	653.53	672.77	682.39	696.82	711.25	720.27	729.89	734.70	739.51	744.32	749.13	758.75	768.36	782.79	796.62	815.86	839.91	868.17
Western Health	Full	HMO D	595.10	617.24	635.42	644.50	658.13	671.76	680.28	689.36	693.90	698.45	702.99	707.53	716.62	725.70	739.33	752.39	770.56	793.28	819.96

CARRIER	NETWORK	PLAN	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
Anthem Blue Cross	Select HMO	HMO A	1139.30	1187.15	1241.83	1295.76	1356.52	1416.52	1482.60	1549.44	1621.60	1693.75	1771.98	1850.97	1935.28	1977.06	2061.36	2134.28	2182.13	2242.13	2278.59
Anthem Blue Cross	Vivity	HMO B	1166.73	1215.73	1271.74	1326.96	1389.19	1450.63	1518.30	1586.75	1660.65	1734.54	1814.65	1895.55	1981.89	2024.67	2111.00	2185.67	2234.68	2296.12	2333.46
Anthem Blue Cross	Vivity	HMO C	1142.36	1190.33	1245.17	1299.24	1360.16	1420.33	1486.58	1553.60	1625.95	1698.30	1776.74	1855.95	1940.48	1982.37	2066.90	2140.01	2187.99	2248.15	2284.71
Anthem Blue Cross	CaliforniaCare HMO	HMO D	1168.32	1217.39	1273.47	1328.77	1391.08	1452.61	1520.37	1588.92	1662.91	1736.90	1817.13	1898.13	1984.59	2027.42	2113.88	2188.65	2237.72	2299.25	2336.64
Anthem Blue Cross	Prudent Buyer - Small Group	PPO B	1540.71	1605.42	1679.37	1752.30	1834.47	1915.62	2004.98	2095.37	2192.94	2290.52	2396.32	2503.14	2617.15	2673.65	2787.66	2886.26	2950.97	3032.12	3081.42
Kaiser Permanente	Full	HMO A	943.99	983.64	1028.95	1073.63	1123.98	1173.70	1228.45	1283.83	1343.61	1403.40	1468.22	1533.67	1603.53	1638.14	1708.00	1768.41	1808.06	1857.78	1887.99
Kaiser Permanente	Full	HMO B	918.51	957.09	1001.18	1044.65	1093.64	1142.01	1195.29	1249.17	1307.35	1365.52	1428.59	1492.27	1560.24	1593.92	1661.89	1720.68	1759.25	1807.63	1837.02
Kaiser Permanente	Full	HMO C	881.01	918.02	960.31	1002.01	1048.99	1095.39	1146.49	1198.18	1253.98	1309.77	1370.27	1431.35	1496.55	1528.85	1594.05	1650.43	1687.44	1733.84	1762.02
Sharp Health Plan	Premier	HMO A	759.69	791.60	828.06	864.02	904.54	944.55	988.61	1033.18	1081.29	1129.41	1181.57	1234.24	1290.46	1318.32	1374.53	1423.15	1455.06	1495.07	1519.38
Sharp Health Plan	Performance	HMO B	814.34	848.54	887.63	926.17	969.60	1012.49	1059.72	1107.50	1159.07	1210.64	1266.56	1323.02	1383.28	1413.14	1473.40	1525.52	1559.72	1602.61	1628.67
Sharp Health Plan	Premier	HMO C	762.57	794.60	831.20	867.30	907.97	948.13	992.36	1037.10	1085.39	1133.69	1186.05	1238.92	1295.35	1323.31	1379.74	1428.55	1460.58	1500.74	1525.14
Sutter Health Plan	Sutter Health Plan	HMO A	1337.83	1394.02	1458.23	1521.56	1592.91	1663.36	1740.96	1819.44	1904.17	1988.90	2080.77	2173.52	2272.52	2321.58	2420.57	2506.20	2562.38	2632.84	2675.64
UnitedHealthcare	SignatureValue	HMO A	1401.78	1460.65	1527.94	1594.29	1669.05	1742.88	1824.18	1906.42	1995.20	2083.98	2180.24	2277.43	2381.16	2432.56	2536.29	2626.00	2684.88	2758.70	2803.56
UnitedHealthcare	SignatureValue	HMO B	1518.27	1582.04	1654.91	1726.78	1807.75	1887.72	1975.78	2064.85	2161.00	2257.16	2361.42	2466.68	2579.03	2634.70	2747.06	2844.23	2907.99	2987.96	3036.54
UnitedHealthcare	SignatureValue	HMO D	1457.04	1518.24	1588.17	1657.14	1734.85	1811.59	1896.09	1981.57	2073.85	2166.13	2266.18	2367.20	2475.03	2528.45	2636.27	2729.52	2790.72	2867.45	2914.08
UnitedHealthcare	SignatureValue	HMO E	1494.15	1556.90	1628.62	1699.35	1779.03	1857.73	1944.39	2032.04	2126.67	2221.30	2323.90	2427.50	2538.06	2592.85	2703.42	2799.04	2861.80	2940.49	2988.30
Western Health	Full	HMO B	911.00	949.26	992.99	1036.11	1084.69	1132.67	1185.51	1238.96	1296.65	1354.35	1416.90	1480.07	1547.48	1580.88	1648.30	1706.60	1744.86	1792.84	1821.99
Western Health	Full	HMO C	901.84	939.71	983.00	1025.69	1073.79	1121.28	1173.59	1226.50	1283.61	1340.73	1402.66	1465.18	1531.92	1564.99	1631.72	1689.44	1727.32	1774.81	1803.66
Western Health	Full	HMO D	851.76	887.54	928.42	968.74	1014.17	1059.03	1108.43	1158.40	1212.34	1266.29	1324.78	1383.83	1446.86	1478.09	1541.12	1595.64	1631.41	1676.27	1703.52

Health Care Service Plan rates will vary by county

THE INFORMATION PROVIDED HEREIN, INCLUDING THE RATING INFORMATION IS PROVIDED ON TO YOU ON AN “AS IS” “AS AVAILABLE” BASIS WITHOUT WARRANTY OF ANY KIND, EXPRESS OR IMPLIED. WE FURTHER DISCLAIM ALL LIABILITY RELATED TO THE INFORMATION, INCLUDING THOSE CAUSED BY RATING DISCREPANCIES. FINAL RATES AND RATING AREAS ARE BASED UPON ACTUAL ENROLLMENT AND UNDERWRITING AND MUST BE APPROVED BY THE APPLICABLE INSURANCE CARRIER.

USE EMPLOYER ZIP CODE FOR RATING | AREA 10 | 02/01/27 - 03/01/27

Bronze		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																																																	
Anthem Blue Cross	Prudent Buyer - Small Group	PPO A	393.68	428.67	442.05	455.43	469.84	484.25	499.17	514.61	514.61	514.61	514.61	516.67	526.96	539.31	559.38	575.85	584.08	596.43	608.78	616.50	624.74	628.85	632.97	637.09	641.20	649.44	657.67	670.02	681.86	698.33	718.91	743.10	771.92	804.34	841.39	877.92	919.09	959.75	1004.52	1049.80	1098.69	1147.58	1200.59	1254.10	1311.23	1339.53	1396.65	1446.05	1478.47	1519.13	1543.83
Anthem Blue Cross	Select PPO	PPO B	360.80	392.87	405.13	417.39	430.60	443.80	457.48	471.63	471.63	471.63	471.63	473.52	482.95	494.27	512.66	527.75	535.30	546.62	557.94	565.01	572.56	576.33	580.10	583.88	587.65	595.20	602.74	614.06	624.91	640.00	658.87	681.03	707.45	737.16	771.12	804.60	842.33	879.59	920.62	962.13	1006.93	1051.73	1100.31	1149.36	1201.71	1227.65	1280.00	1325.28	1354.99	1392.25	1414.89
Anthem Blue Cross	Prudent Buyer - Small Group	PPO C	393.20	428.15	441.52	454.88	469.27	483.66	498.57	513.99	513.99	513.99	513.99	516.05	526.33	538.66	558.71	575.15	583.38	595.71	608.05	615.76	623.98	628.10	632.21	636.32	640.43	648.66	656.88	669.21	681.04	697.48	718.04	742.20	770.99	803.37	840.37	876.87	917.99	958.59	1003.31	1048.54	1097.37	1146.20	1199.14	1252.59	1309.65	1337.92	1394.97	1444.31	1476.69	1517.30	1541.97
Anthem Blue Cross	Select PPO	PPO D	360.32	392.35	404.60	416.84	430.03	443.22	456.88	471.01	471.01	471.01	471.01	472.89	482.31	493.62	511.99	527.06	534.60	545.90	557.20	564.27	571.81	575.57	579.34	583.11	586.88	594.41	601.95	613.26	624.09	639.16	658.00	680.14	706.52	736.19	770.10	803.54	841.22	878.43	919.41	960.86	1005.61	1050.35	1098.87	1147.85	1200.13	1226.04	1278.32	1323.54	1353.21	1390.42	1413.03
Kaiser Permanente	Full	HMO A	311.47	337.89	347.99	358.09	368.97	365.58	376.84	388.50	388.50	388.50	388.50	390.05	397.82	407.15	422.30	434.73	440.94	450.27	459.59	465.42	471.64	474.74	477.85	480.96	484.07	490.28	496.50	505.82	514.76	527.19	542.73	560.99	582.75	607.22	635.19	662.78	693.86	724.55	758.35	792.54	829.44	866.35	906.37	946.77	989.89	1011.26	1054.38	1091.68	1116.15	1146.85	1165.50
Kaiser Permanente	Full	HMO C	302.85	328.50	338.31	348.12	358.68	354.97	365.91	377.23	377.23	377.23	377.23	378.74	386.28	395.33	410.05	422.12	428.15	437.21	446.26	451.92	457.95	460.97	463.99	467.01	470.02	476.06	482.10	491.15	499.83	511.90	526.99	544.72	565.84	589.61	616.77	643.55	673.73	703.53	736.35	769.54	805.38	841.22	880.07	919.30	961.17	981.92	1023.79	1060.01	1083.77	1113.57	1131.69
Sharp Health Plan	Premier	HMO A	272.80	297.05	306.32	315.59	325.58	335.56	345.90	356.60	356.60	356.60	356.60	358.03	365.16	373.72	387.62	399.04	404.74	413.30	421.86	427.21	432.91	435.77	438.62	441.47	444.32	450.03	455.73	464.29	472.50	483.91	498.17	514.93	534.90	557.37	583.04	608.36	636.89	665.06	696.08	727.46	761.34	795.22	831.95	869.03	908.62	928.23	967.81	1002.05	1024.51	1052.68	1069.80
Sharp Health Plan	Performance	HMO B	291.24	317.12	327.02	336.92	347.58	358.24	369.28	380.70	380.70	380.70	380.70	382.22	389.84	398.97	413.82	426.00	432.09	441.23	450.37	456.08	462.17	465.22	468.26	471.31	474.35	480.44	486.53	495.67	504.43	516.61	531.84	549.73	571.05	595.03	622.44	649.47	679.93	710.01	743.13	776.63	812.79	848.96	888.17	927.77	970.02	990.96	1033.22	1069.77	1093.75	1123.83	1142.10
Sutter Health Plan	Sutter Health Plan	HMO A	346.81	377.64	389.42	401.21	413.90	426.60	439.75	453.36	453.36	453.36	453.36	455.16	464.23	475.11	492.79	507.29	514.55	525.43	536.31	543.11	550.36	553.99	557.62	561.24	564.87	572.12	579.38	590.26	600.68	615.19	633.32	654.63	680.02	708.58	741.22	773.41	809.68	845.49	884.93	924.83	967.89	1010.96	1057.66	1104.80	1155.13	1180.06	1230.38	1273.90	1302.46	1338.28	1360.03
Sutter Health Plan	Sutter Health Plan	HMO B	346.98	377.82	389.62	401.41	414.11	426.81	439.96	453.58	453.58	453.58	453.58	455.38	464.46	475.34	493.03	507.54	514.80	525.69	536.57	543.38	550.63	554.26	557.89	561.52	565.15	572.41	579.66	590.55	600.98	615.49	633.64	654.96	680.36	708.93	741.59	773.79	810.08	845.91	885.37	925.28	968.37	1011.46	1058.18	1105.35	1155.70	1180.64	1230.99	1274.53	1303.11	1338.94	1360.70
Western Health	Full	HMO B	316.71	344.87	355.63	366.39	377.99	389.58	401.59	414.01	414.01	414.01	414.01	415.66	423.94	433.88	450.02	463.27	469.90	479.83	489.77	495.98	502.60	505.91	509.23	512.54	515.85	522.47	529.10	539.03	548.56	561.81	578.37	597.82	621.01	647.09	676.90	706.29	739.41	772.12	808.14	844.57	883.90	923.23	965.87	1008.93	1054.89	1077.66	1123.61	1163.36	1189.44	1222.14	1242.02
Western Health	Full	HMO C	330.55	359.93	371.17	382.40	394.50	406.60	419.13	432.09	432.09	432.09	432.09	433.82	442.46	452.83	469.68	483.51	490.42	500.79	511.16	517.64	524.56	528.01	531.47	534.93	538.38	545.30	552.21	562.58	572.52	586.35	603.63	623.94	648.13	675.36	706.47	737.15	771.71	805.85	843.44	881.46	922.51	963.56	1008.07	1053.00	1100.97	1124.73	1172.69	1214.17	1241.39	1275.53	1296.27

Silver		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																																																	
Anthem Blue Cross	Select HMO	HMO A	354.63	386.15	398.21	410.26	423.24	436.22	449.66	463.57	463.57	463.57	463.57	465.42	474.70	485.82	503.90	518.73	526.15	537.28	548.40	555.36	562.77	566.48	570.19	573.90	577.61	585.03	592.44	603.57	614.23	629.06	647.61	669.40	695.36	724.56	757.94	790.85	827.94	864.56	904.89	945.68	989.72	1033.76	1081.51	1129.72	1181.18	1206.67	1258.13	1302.63	1331.84	1368.46	1390.71
Anthem Blue Cross	CaliforniaCare HMO	HMO B	416.20	453.19	467.34	481.48	496.72	511.95	527.73	544.05	544.05	544.05	544.05	546.23	557.11	570.16	591.38	608.79	617.50	630.55	643.61	651.77	660.48	664.83	669.18	673.53	677.89	686.59	695.30	708.35	720.87	738.28	760.04	785.61	816.08	850.35	889.52	928.15	971.67	1014.65	1061.99	1109.86	1161.55	1213.23	1269.27	1325.85	1386.24	1416.16	1476.55	1528.78	1563.06	1606.04	1632.15
Anthem Blue Cross	CaliforniaCare HMO	HMO D	415.63	452.58	466.70	480.83	496.04	511.25	527.01	543.31	543.31	543.31	543.31	545.48	556.35	569.39	590.58	607.96	616.66	629.70	642.74	650.89	659.58	663.92	668.27	672.62	676.96	685.66	694.35	707.39	719.89	737.27	759.00	784.54	814.97	849.19	888.31	926.89	970.35	1013.27	1060.54	1108.35	1159.97	1211.58	1267.54	1324.05	1384.35	1414.24	1474.54	1526.70	1560.93	1603.85	1629.93
Anthem Blue Cross	Select PPO	PPO B	389.15	423.74	436.96	450.19	464.43	478.68	493.43	508.69	508.69	508.69	508.69	510.72	520.90	533.11	552.95	569.22	577.36	589.57	601.78	609.41	617.55	621.62	625.69	629.76	633.83	641.97	650.11	662.31	674.01	690.29	710.64	734.55	763.04	795.08	831.71	867.83	908.52	948.71	992.96	1037.73	1086.05	1134.38	1186.77	1239.68	1296.14	1324.12	1380.58	1429.42	1461.47	1501.65	1526.07
Anthem Blue Cross	Prudent Buyer - Small Group	PPO C	424.65	462.40	476.83	491.26	506.81	522.35	538.45	555.10	555.10	555.10	555.10	557.32	568.42	581.74	603.39	621.16	630.04	643.36	656.68	665.01	673.89	678.33	682.77	687.21	691.65	700.54	709.42	722.74	735.51	753.27	775.47	801.56	832.65	867.62	907.59	947.00	991.41	1035.26	1083.56	1132.40	1185.14	1237.87	1295.05	1352.78	1414.39	1444.93	1506.54	1559.83	1594.80	1638.66	1665.30
Anthem Blue Cross	Prudent Buyer - Small Group	PPO D	411.71	448.30	462.30	476.29	491.36	506.43	522.03	538.18	538.18	538.18	538.18	540.33	551.10	564.01	585.00	602.22	610.83	623.75	636.67	644.74	653.35	657.66	661.96	666.27	670.57	679.18	687.79	700.71	713.09	730.31	751.84	777.13	807.27	841.18	879.92	918.14	961.19	1003.71	1050.53	1097.89	1149.01	1200.14	1255.57	1311.54	1371.28	1400.88	1460.62	1512.29	1546.19	1588.71	1614.54
Anthem Blue Cross	Select PPO	PPO E	377.32	410.86	423.68	436.51	450.32	464.13	478.43	493.23	493.23	493.23	493.23	495.20	505.07	516.91	536.14	551.92	559.82	571.65	583.49	590.89	598.78	602.73	606.67	610.62	614.56	622.46	630.35	642.19	653.53	669.31	689.04	712.22	739.85	770.92	806.43	841.45	880.91	919.87	962.78	1006.19	1053.05	1099.90	1150.71	1202.00	1256.75	1283.88	1338.63	1385.98	1417.05	1456.01	1479.69
Anthem Blue Cross	Prudent Buyer - Small Group	PPO F	426.37	464.27	478.76	493.25	508.86	524.47	540.63	557.35	557.35	557.35	557.35	559.58	570.73	584.10	605.84	623.67	632.59	645.97	659.35	667.71	676.62	681.08	685.54	690.00	694.46	703.38	712.29	725.67	738.49	756.32	778.62	804.81	836.03	871.14	911.27	950.84	995.43	1039.46	1087.95	1136.99	1189.94	1242.89	1300.30	1358.26	1420.13	1450.78	1512.65	1566.15	1601.27	1645.30	1672.05
Kaiser Permanente	Full	HMO A	339.63	368.55	379.61	390.66	402.57	400.21	412.55	425.30	425.30	425.30	425.30	427.01	435.51	445.72	462.31	475.92	482.72	492.93	503.14	509.52	516.32	519.72	523.13	526.53	529.93	536.73	543.54	553.75	563.53	577.14	594.15	614.14	637.96	664.75	695.37	725.57	759.59	793.19	830.20	867.62	908.03	948.43	992.24	1036.47	1083.68	1107.07	1154.28	1195.11	1221.90	1255.50	1275.90
Kaiser Permanente	Full	HMO B	344.11	373.43	384.64	395.85	407.92	405.72	418.22	431.16	431.16	431.16	431.16	432.88	441.51	451.86	468.67	482.47	489.37	499.71	510.06	516.53	523.43	526.88	530.33	533.78	537.23	544.12	551.02	561.37	571.29	585.08	602.33	622.59	646.74	673.90	704.95	735.56	770.05	804.11	841.62	879.57	920.53	961.49	1005.90	1050.74	1098.60	1122.31	1170.17	1211.56	1238.72	1272.78	1293.48
Kaiser Permanente	Full	HMO C	341.66	370.76	381.89	393.02	405.00	402.71	415.12	427.96	427.96	427.96	427.96	429.67	438.23	448.51	465.20	478.89	485.74	496.01	506.28	512.70	519.55	522.97	526.39	529.82	533.24	540.09	546.94	557.21	567.05	580.75	597.86	617.98	641.94	668.91	699.72	730.10	764.34	798.15	835.38	873.04	913.70	954.36	998.44	1042.95	1090.45	1113.99	1161.49	1202.58	1229.54	1263.35	1283.88
Kaiser Permanente	Full	HMO D	313.91	340.54	350.72	360.91	371.87	368.57	379.93	391.68	391.68	391.68	391.68	393.25	401.08	410.48	425.76	438.29	444.56	453.96	463.36	469.23	475.50	478.63	481.77	484.90	488.03	494.30	500.57	509.97	518.98	531.51	547.18	565.59	587.52	612.20	640.40	668.21	699.54	730.48	764.56	799.03	836.24	873.45	913.79	954.53	998.00	1019.54	1063.02	1100.62	1125.30	1156.24	1175.04
Kaiser Permanente	Full	HMO E	327.29	355.11	365.75	376.39	387.84	385.03	396.90	409.17	409.17	409.17	409.17	410.81	418.99	428.81	444.77	457.86	464.41	474.23	484.05	490.19	496.74	500.01	503.28	506.56	509.83	516.38	522.92	532.74	542.15	555.25	571.61	590.85	613.76	639.54	669.00	698.05	730.78	763.11	798.71	834.71	873.58	912.46	954.60	997.15	1042.57	1065.08	1110.50	1149.78	1175.55	1207.88	1227.51
Sharp Health Plan	Premier	HMO A	285.29	310.65	320.35	330.04	340.49	350.93	361.74	372.93	372.93	372.93	372.93	374.42	381.88	390.83	405.37	417.31	423.28	432.23	441.18	446.77	452.74	455.72	458.70	461.69	464.67	470.64	476.60	485.55	494.13	506.07	520.98	538.51	559.40	582.89	609.74	636.22	666.05	695.51	727.96	760.78	796.21	831.63	870.05	908.83	950.23	970.74	1012.13	1047.93	1071.43	1100.89	1118.79
Sharp Health Plan	Performance	HMO B	294.75	320.95	330.96	340.98	351.77	362.56	373.73	385.29	385.29	385.29	385.29	386.83	394.54	403.78	418.81	431.14	437.30	446.55	455.80	461.58	467.74	470.82	473.91	476.99	480.07	486.24	492.40	501.65	510.51	522.84	538.25	556.36	577.94	602.21	629.95	657.30	688.13	718.57	752.09	785.99	822.59	859.20	898.88	938.95	981.72	1002.91	1045.68	1082.66	1106.94	1137.38	1155.87
Sharp Health Plan	Premier	HMO C	268.76	292.65	301.78	310.92	320.76	330.59	340.78	351.32	351.32	351.32	351.32	352.73	359.75	368.18	381.88	393.13	398.75	407.18	415.61	420.88	426.50	429.31	432.12	434.93	437.74	443.37	448.99	457.42	465.50	476.74	490.79	507.31	526.98	549.11	574.41	599.35	627.46	655.21	685.78	716.69	750.07	783.44	819.63	856.17	895.16	914.49	953.48	987.21	1009.34	1037.10	1053.96
Sutter Health Plan	Sutter Health Plan	HMO B	423.96	461.65	476.05	490.46	505.98	521.50	537.57	554.21	554.21	554.21	554.21	556.41	567.50	580.80	602.41	620.15	629.01	642.31	655.61	663.93	672.79	677.23	681.66	686.09	690.53	699.40	708.26	721.56	734.31	752.04	774.21	800.26	831.29	866.21	906.11	945.46	989.79	1033.58	1081.79	1130.56	1183.21	1235.86	1292.94	1350.58	1412.09	1442.57	1504.09	1557.29	1592.20	1635.99	1662.58
Sutter Health Plan	Sutter Health Plan	HMO C	367.20	399.83	412.31	424.79	438.23	451.67	465.59	480.00	480.00	480.00	480.00	481.91	491.51	503.03	521.75	537.11	544.79	556.31	567.83	575.03	582.71	586.55	590.39	594.23	598.07	605.75	613.43	624.95	635.99	651.35	670.55	693.11	719.99	750.23	784.79	818.87	857.27	895.19	936.95	979.19	1024.79	1070.39	1119.83	1169.75	1223.02	1249.42	1302.70	1348.78	1379.02	1416.94	1439.97
UnitedHealthcare	SignatureValue	HMO A	582.06	633.80	653.58	673.36	694.67	715.97	738.03	760.86	760.86	760.86	760.86	763.90	779.12	797.38	827.05	851.40	863.58	881.84	900.10	911.51	923.68	929.77	935.86	941.94	948.03	960.21	972.38	990.64	1008.14	1032.49	1062.92	1098.68	1141.29	1189.22	1244.01	1298.03	1358.90	1419.00	1485.20	1552.15	1624.44	1696.72	1775.09	1854.22	1938.67	1980.52	2064.97	2138.02	2185.95	2246.06	2282.58
Western Health	Full	HMO B	362.81	395.06	407.40	419.73	433.01	446.29	460.04	474.27	474.27	474.27	474.27	476.16	485.65	497.03	515.53	530.71	538.29	549.68	561.06	568.17	575.76	579.56	583.35	587.14	590.94	598.53	606.11	617.50	628.40	643.58	662.55	684.84	711.40	741.28	775.43	809.10	847.04	884.51	925.77	967.51	1012.56	1057.62	1106.47	1155.79	1208.43	1234.52	1287.16	1332.69	1362.57	1400.04	1422.80
Western Health	Full	HMO C	342.86	373.34	384.99	396.64	409.19	421.74	434.74	448.18	448.18	448.18	448.18	449.98	458.94	469.70	487.18	501.52	508.69	519.45	530.20	536.93	544.10	547.68	551.27	554.85	558.44	565.61	572.78	583.54	593.84	608.19	626.11	647.18	672.28	700.51	732.78	764.60	800.46	835.86	874.86	914.30	956.87	999.45	1045.62	1092.23	1141.97	1166.63	1216.37	1259.40	1287.64	1323.04	1344.54
Western Health	Full	HMO D	330.78	360.19	371.43	382.67	394.78	406.88	419.42	432.40	432.40	432.40	432.40	434.12	442.77	453.15	470.01	483.85	490.77	501.15	511.52	518.01	524.93	528.39	531.85	535.31	538.76	545.68	552.60	562.98	572.92	586.76	604.06	624.38	648.59	675.83	706.97	737.67	772.26	806.42	844.04	882.09	923.16	964.24	1008.78	1053.75	1101.74	1125.52	1173.52	1215.03	1242.27	1276.43	1297.19

Health Care Service Plan rates will vary by county

THE INFORMATION PROVIDED HEREIN, INCLUDING THE RATING INFORMATION IS PROVIDED ON TO YOU ON AN "AS IS" "AS AVAILABLE" BASIS WITHOUT WARRANTY OF ANY KIND, EXPRESS OR IMPLIED. WE FURTHER DISCLAIM ALL LIABILITY RELATED TO THE INFORMATION, INCLUDING THOSE CAUSED BY RATING DISCREPANCIES. FINAL RATES AND RATING AREAS ARE BASED UPON ACTUAL ENROLLMENT AND UNDERWRITING AND MUST BE APPROVED BY THE APPLICABLE INSURANCE CARRIER.

Continued

Gold AGE -->

CARRIER	NETWORK	PLAN	0-14	15	16	17	18	19	20	21	22	23	24
Anthem Blue Cross	Select HMO	HMO A	454.68	495.09	510.55	526.00	542.64	559.28	576.52	594.35	594.35	594.35	594.35
Anthem Blue Cross	CaliforniaCare HMO	HMO B	533.59	581.02	599.15	617.29	636.82	656.35	676.58	697.50	697.50	697.50	697.50
Anthem Blue Cross	Priority Select HMO	HMO C	384.40	418.57	431.63	444.69	458.76	472.83	487.41	502.48	502.48	502.48	502.48
Anthem Blue Cross	Select PPO	PPO B	460.68	501.62	517.28	532.94	549.80	566.66	584.12	602.19	602.19	602.19	602.19
Anthem Blue Cross	Select PPO	PPO C	475.30	517.55	533.71	549.86	567.26	584.65	602.67	621.31	621.31	621.31	621.31
Anthem Blue Cross	Select PPO	PPO D	457.31	497.96	513.50	529.04	545.78	562.52	579.86	597.79	597.79	597.79	597.79
Anthem Blue Cross	Prudent Buyer - Small Group	PPO E	518.65	564.76	582.38	600.01	619.00	637.98	657.64	677.98	677.98	677.98	677.98
Anthem Blue Cross	Prudent Buyer - Small Group	PPO H	499.07	543.43	560.39	577.36	595.62	613.89	632.81	652.38	652.38	652.38	652.38
Anthem Blue Cross	Prudent Buyer - Small Group	PPO I	506.41	551.42	568.63	585.84	604.38	622.91	642.11	661.97	661.97	661.97	661.97
Kaiser Permanente	Full	HMO B	408.27	443.29	456.68	470.07	484.49	484.64	499.58	515.03	515.03	515.03	515.03
Kaiser Permanente	Full	HMO C	420.04	456.11	469.90	483.69	498.54	499.12	514.51	530.42	530.42	530.42	530.42
Kaiser Permanente	Full	HMO D	396.57	430.55	443.54	456.54	470.53	470.25	484.74	499.73	499.73	499.73	499.73
Kaiser Permanente	Full	HMO E	354.67	384.93	396.49	408.06	420.52	418.71	431.62	444.96	444.96	444.96	444.96
Kaiser Permanente	Full	HMO F	404.86	439.58	452.86	466.13	480.43	480.45	495.26	510.58	510.58	510.58	510.58
Sharp Health Plan	Performance	HMO A	366.15	398.70	411.14	423.59	436.99	450.39	464.27	478.63	478.63	478.63	478.63
Sharp Health Plan	Premier	HMO B	345.92	376.67	388.42	400.18	412.84	425.50	438.61	452.18	452.18	452.18	452.18
Sharp Health Plan	Performance	HMO D	377.08	410.59	423.41	436.23	450.03	463.83	478.12	492.91	492.91	492.91	492.91
Sutter Health Plan	Sutter Health Plan	HMO A	464.44	505.73	521.51	537.30	554.30	571.30	588.90	607.13	607.13	607.13	607.13
Sutter Health Plan	Sutter Health Plan	HMO B	498.16	542.45	559.38	576.31	594.54	612.77	631.66	651.21	651.21	651.21	651.21
Sutter Health Plan	Sutter Health Plan	HMO C	423.25	460.87	475.26	489.64	505.14	520.63	536.67	553.28	553.28	553.28	553.28
UnitedHealthcare	SignatureValue	HMO A	637.25	693.90	715.56	737.21	760.54	783.86	808.02	833.01	833.01	833.01	833.01
UnitedHealthcare	SignatureValue	HMO C	682.24	742.89	766.07	789.26	814.23	839.20	865.07	891.82	891.82	891.82	891.82
UnitedHealthcare	SignatureValue	HMO F	705.67	768.40	792.38	816.37	842.20	868.03	894.78	922.45	922.45	922.45	922.45
UnitedHealthcare	SignatureValue	HMO H	661.31	720.10	742.57	765.05	789.25	813.46	838.53	864.46	864.46	864.46	864.46
Western Health	Full	HMO A	406.47	442.60	456.41	470.23	485.10	499.98	515.39	531.33	531.33	531.33	531.33
Western Health	Full	HMO B	426.53	464.44	478.93	493.43	509.04	524.65	540.82	557.55	557.55	557.55	557.55
Western Health	Full	HMO C	397.43	432.76	446.27	459.77	474.32	488.87	503.93	519.52	519.52	519.52	519.52
Western Health	Full	HMO D	382.67	416.69	429.69	442.70	456.70	470.71	485.22	500.22	500.22	500.22	500.22

CARRIER	NETWORK	PLAN	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45
Anthem Blue Cross	Select HMO	HMO A	596.73	608.61	622.88	646.06	665.08	674.59	688.85	703.12	712.03	721.54	726.30	731.05	735.81	740.56	750.07	759.58	773.84	787.51	806.53	830.31	858.24
Anthem Blue Cross	CaliforniaCare HMO	HMO B	700.29	714.24	730.98	758.18	780.50	791.66	808.40	825.14	835.61	846.77	852.35	857.93	863.51	869.09	880.25	891.41	908.15	924.19	946.51	974.41	1007.19
Anthem Blue Cross	Priority Select HMO	HMO C	504.49	514.54	526.60	546.20	562.28	570.31	582.37	594.43	601.97	610.01	614.03	618.05	622.07	626.09	634.13	642.17	654.23	665.79	681.87	701.96	725.58
Anthem Blue Cross	Select PPO	PPO B	604.60	616.64	631.10	654.58	673.85	683.49	697.94	712.39	721.42	731.06	735.88	740.69	745.51	750.33	759.96	769.60	784.05	797.90	817.17	841.26	869.56
Anthem Blue Cross	Select PPO	PPO C	623.80	636.22	651.13	675.36	695.25	705.19	720.10	735.01	744.33	754.27	759.24	764.21	769.18	774.15	784.09	794.03	808.95	823.24	843.12	867.97	897.17
Anthem Blue Cross	Select PPO	PPO D	600.18	612.14	626.48	649.80	668.93	678.49	692.84	707.19	716.15	725.72	730.50	735.28	740.06	744.85	754.41	763.98	778.32	792.07	811.20	835.11	863.21
Anthem Blue Cross	Prudent Buyer - Small Group	PPO E	680.69	694.25	710.52	736.96	758.66	769.51	785.78	802.05	812.22	823.07	828.49	833.92	839.34	844.76	855.61	866.46	882.73	898.32	920.02	947.14	979.00
Anthem Blue Cross	Prudent Buyer - Small Group	PPO H	654.99	668.04	683.69	709.14	730.01	740.45	756.11	771.77	781.55	791.99	797.21	802.43	807.65	812.87	823.30	833.74	849.40	864.40	885.28	911.37	942.04
Anthem Blue Cross	Prudent Buyer - Small Group	PPO I	664.62	677.86	693.74	719.56	740.74	751.34	767.22	783.11	793.04	803.63	808.93	814.22	819.52	824.81	835.41	846.00	861.88	877.11	898.29	924.77	955.88
Kaiser Permanente	Full	HMO B	517.09	527.39	539.75	559.83	576.31	584.55	596.92	609.28	617.00	625.24	629.36	633.48	637.60	641.72	649.96	658.20	670.56	682.41	698.89	719.49	743.70
Kaiser Permanente	Full	HMO C	532.54	543.15	555.88	576.56	593.54	602.02	614.75	627.48	635.44	643.93	648.17	652.41	656.66	660.90	669.39	677.87	690.60	702.80	719.78	740.99	765.92
Kaiser Permanente	Full	HMO D	501.73	511.73	523.72	543.21	559.20	567.20	579.19	591.19	598.68	606.68	610.68	614.67	618.67	622.67	630.67	638.66	650.65	662.15	678.14	698.13	721.62
Kaiser Permanente	Full	HMO E	446.74	455.64	466.32	483.68	497.92	505.03	515.71	526.39	533.07	540.19	543.75	547.31	550.87	554.43	561.54	568.66	579.34	589.58	603.82	621.62	642.53
Kaiser Permanente	Full	HMO F	512.62	522.83	535.08	555.00	571.34	579.51	591.76	604.01	611.67	619.84	623.93	628.01	632.09	636.18	644.35	652.52	664.77	676.51	692.85	713.28	737.27
Sharp Health Plan	Performance	HMO A	480.54	490.12	501.60	520.27	535.59	543.25	554.73	566.22	573.40	581.06	584.89	588.71	592.54	596.37	604.03	611.69	623.18	634.18	649.50	668.65	691.14
Sharp Health Plan	Premier	HMO B	453.99	463.03	473.88	491.52	505.99	513.22	524.08	534.93	541.71	548.95	552.56	556.18	559.80	563.42	570.65	577.89	588.74	599.14	613.61	631.70	652.95
Sharp Health Plan	Performance	HMO D	494.88	504.74	516.57	535.79	551.57	559.45	571.28	583.11	590.51	598.39	602.34	606.28	610.22	614.17	622.05	629.94	641.77	653.11	668.88	688.60	711.76
Sutter Health Plan	Sutter Health Plan	HMO A	609.55	621.69	636.26	659.94	679.36	689.08	703.65	718.22	727.33	737.04	741.90	746.75	751.61	756.47	766.18	775.90	790.47	804.43	823.86	848.14	876.68
Sutter Health Plan	Sutter Health Plan	HMO B	653.80	666.82	682.45	707.85	728.69	739.11	754.74	770.36	780.13	790.55	795.76	800.97	806.18	811.39	821.81	832.23	847.86	862.83	883.67	909.72	940.33
Sutter Health Plan	Sutter Health Plan	HMO C	555.48	566.55	579.83	601.40	619.11	627.96	641.24	654.52	662.82	671.67	676.10	680.52	684.95	689.37	698.23	707.08	720.36	733.08	750.79	772.92	798.92
UnitedHealthcare	SignatureValue	HMO A	836.34	853.00	872.99	905.48	932.14	945.47	965.46	985.45	997.95	1011.27	1017.94	1024.60	1031.27	1037.93	1051.26	1064.59	1084.58	1103.74	1130.39	1163.71	1202.87
UnitedHealthcare	SignatureValue	HMO C	895.39	913.22	934.63	969.41	997.95	1012.22	1033.62	1055.02	1068.40	1082.67	1089.80	1096.94	1104.07	1111.21	1125.48	1139.75	1161.15	1181.66	1210.20	1245.87	1287.79
UnitedHealthcare	SignatureValue	HMO F	926.14	944.59	966.73	1002.70	1032.22	1046.98	1069.12	1091.26	1105.10	1119.85	1127.23	1134.61	1141.99	1149.37	1164.13	1178.89	1201.03	1222.25	1251.76	1288.66	1332.02
UnitedHealthcare	SignatureValue	HMO H	867.92	885.21	905.95	939.67	967.33	981.16	1001.91	1022.66	1035.62	1049.45	1056.37	1063.29	1070.20	1077.12	1090.95	1104.78	1125.53	1145.41	1173.07	1207.65	1248.28
Western Health	Full	HMO A	533.45	544.08	556.83	577.55	594.56	603.06	615.81	628.56	636.53	645.03	649.28	653.53	657.78	662.04	670.54	679.04	691.79	704.01	721.01	742.27	767.24
Western Health	Full	HMO B	559.78	570.93	584.31	606.06	623.90	632.82	646.20	659.58	667.94	676.86	681.33	685.79	690.25	694.71	703.63	712.55	725.93	738.75	756.59	778.90	805.10
Western Health	Full	HMO C	521.60	531.99	544.46	564.72	581.34	589.65	602.12	614.59	622.38	630.70	634.85	639.01	643.16	647.32	655.63	663.94	676.41	688.36	704.99	725.77	750.18
Western Health	Full	HMO D	502.22	512.23	524.23	543.74	559.75	567.75	579.76	591.76	599.27	607.27	611.27	615.27	619.28	623.28	631.28	639.28	651.29	662.79	678.80	698.81	722.32

CARRIER	NETWORK	PLAN	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
Anthem Blue Cross	Select HMO	HMO A	891.53	928.97	971.76	1013.96	1061.51	1108.46	1160.17	1212.47	1268.94	1325.40	1386.62	1448.43	1514.40	1547.09	1613.07	1670.12	1707.57	1754.52	1783.05
Anthem Blue Cross	CaliforniaCare HMO	HMO B	1046.25	1090.19	1140.41	1189.94	1245.74	1300.84	1361.52	1422.90	1489.16	1555.43	1627.27	1699.81	1777.23	1815.59	1893.02	1959.98	2003.92	2059.02	2092.50
Anthem Blue Cross	Priority Select HMO	HMO C	753.72	785.38	821.55	857.23	897.43	937.13	980.84	1025.06	1072.79	1120.53	1172.29	1224.54	1280.32	1307.96	1363.73	1411.97	1443.63	1483.32	1507.44
Anthem Blue Cross	Select PPO	PPO B	903.29	941.22	984.58	1027.34	1075.51	1123.08	1175.47	1228.47	1285.68	1342.88	1404.91	1467.54	1534.38	1567.50	1634.34	1692.15	1730.09	1777.66	1806.57
Anthem Blue Cross	Select PPO	PPO C	931.97	971.11	1015.84	1059.95	1109.66	1158.74	1212.80	1267.47	1326.50	1385.52	1449.52	1514.13	1583.10	1617.27	1686.24	1745.88	1785.02	1834.11	1863.93
Anthem Blue Cross	Select PPO	PPO D	896.69	934.35	977.39	1019.83	1067.65	1114.88	1166.89	1219.49	1276.28	1333.07	1394.64	1456.81	1523.17	1556.05	1622.40	1679.79	1717.45	1764.68	1793.37
Anthem Blue Cross	Prudent Buyer - Small Group	PPO E	1016.97	1059.68	1108.50	1156.63	1210.87	1264.43	1323.42	1383.08	1447.49	1511.90	1581.73	1652.24	1727.49	1764.78	1840.04	1905.12	1947.84	2001.40	2033.94
Anthem Blue Cross	Prudent Buyer - Small Group	PPO H	978.57	1019.67	1066.64	1112.96	1165.15	1216.69	1273.45	1330.86	1392.83	1454.81	1522.00	1589.85	1662.26	1698.15	1770.56	1833.19	1874.29	1925.83	1957.14
Anthem Blue Cross	Prudent Buyer - Small Group	PPO I	992.96	1034.66	1082.32	1129.32	1182.28	1234.57	1292.17	1350.42	1413.31	1476.19	1544.38	1613.22	1686.70	1723.11	1796.59	1860.14	1901.84	1954.14	1985.91
Kaiser Permanente	Full	HMO B	772.54	804.99	842.07	878.63	919.84	960.52	1005.33	1050.65	1099.58	1148.51	1201.56	1255.12	1312.29	1340.61	1397.78	1447.22	1479.67	1520.36	1545.09
Kaiser Permanente	Full	HMO C	795.63	829.04	867.23	904.89	947.33	989.23	1035.38	1082.05	1132.44	1182.83	1237.47	1292.63	1351.51	1380.68	1439.56	1490.48	1523.89	1565.79	1591.26
Kaiser Permanente	Full	HMO D	749.60	781.09	817.07	852.55	892.53	932.01	975.48	1019.46	1066.93	1114.41	1165.88	1217.85	1273.32	1300.81	1356.28	1404.25	1435.74	1475.22	1499.19
Kaiser Permanente	Full	HMO E	667.45	695.48	727.52	759.11	794.71	829.86	868.57	907.73	950.00	992.27	1038.10	1084.38	1133.77	1158.24	1207.63	1250.35	1278.38	1313.53	1334.88
Kaiser Permanente	Full	HMO F	765.87	798.03	834.79	871.04	911.89	952.23	996.65	1041.58	1090.08	1138.59	1191.18	1244.28	1300.95	1329.03	1385.71	1434.72	1466.89	1507.22	1531.74
Sharp Health Plan	Performance	HMO A	717.95	748.10	782.56	816.54	854.83	892.64	934.29	976.41	1021.88	1067.34	1116.64	1166.42	1219.55	1245.87	1299.00	1344.95	1375.10	1412.92	1435.89
Sharp Health Plan	Premier	HMO B	678.27	706.76	739.31	771.42	807.59	843.32	882.66	922.45	965.40	1008.36	1054.94	1101.96	1152.15	1177.02	1227.22	1270.63	1299.11	1334.84	1356.54
Sharp Health Plan	Performance	HMO D	739.37	770.42	805.91	840.90	880.34	919.28	962.16	1005.54	1052.36	1099.19	1149.96	1201.22	1255.93	1283.04	1337.76	1385.08	1416.13	1455.07	1478.73
Sutter Health Plan	Sutter Health Plan	HMO A	910.67	948.92	992.64	1035.74	1084.31	1132.27	1185.09	1238.52	1296.19	1353.87	1416.40	1479.54	1546.93	1580.32	1647.71	1706.00	1744.25	1792.21	1821.34
Sutter Health Plan	Sutter Health Plan	HMO B	976.79	1017.82	1064.70	1110.94	1163.03	1214.48	1271.13	1328.44	1390.30	1452.17	1519.24	1586.96	1659.25	1695.06	1767.34	1829.86	1870.88	1922.33	1953.58
Sutter Health Plan	Sutter Health Plan	HMO C	829.90	864.76	904.60	943.88	988.14	1031.85	1079.98	1128.67	1181.23	1233.79	1290.78	1348.32	1409.73	1440.16	1501.57	1554.69	1589.54	1633.25	1659.80
UnitedHealthcare	SignatureValue	HMO A	1249.52	1301.99	1361.97	1421.12	1487.76	1553.56	1626.04	1699.34	1778.48	1857.61	1943.41	2030.05	2122.51	2168.33	2260.79	2340.76	2393.24	2459.05	2499.03
UnitedHealthcare	SignatureValue	HMO C	1337.73	1393.91	1458.13	1521.44	1592.79	1663.24	1740.83	1819.31	1904.04	1988.76	2080.62	2173.37	2272.36	2321.41	2420.40	2506.01	2562.20	2632.65	2675.46
UnitedHealthcare	SignatureValue	HMO F	1383.68	1441.79	1508.21	1573.70	1647.50	1720.37	1800.62	1881.80	1969.43	2057.06	2152.08	2248.01	2350.40	2401.14	2503.53	2592.08	2650.20	2723.07	2767.35
UnitedHealthcare	SignatureValue	HMO H	1296.69	1351.15	1413.39	1474.77	1543.93	1612.22	1687.43	1763.50	1845.62	1927.75	2016.79	2106.69	2202.64	2250.19	2346.14	2429.13	2483.59	2551.89	2593.38
Western Health	Full	HMO A	796.99	830.47	868.72	906.45	948.95	990.93	1037.15	1083.91	1134.39	1184.86	1239.59	1294.85	1353.83	1383.05	1442.03	1493.03	1526.51	1568.48	1593.99
Western Health	Full	HMO B	836.32	871.45	911.59	951.18	995.78	1039.83	1088.34	1137.40	1190.37	1243.34	1300.76	1358.75	1420.64	1451.30	1513.19	1566.71	1601.84	1645.89	1672.65
Western Health	Full	HMO C	779.28	812.01	849.41	886.30	927.86	968.90	1014.10	1059.82	1109.17	1158.53	1212.04	1266.07	1323.73	1352.31	1409.97	1459.85	1492.58	1533.62	1558.56
Western Health	Full	HMO D	750.33	781.85	817.86	853.38	893.40	932.91	976.43	1020.45	1067.97	1115.50	1167.02	1219.04	1274.57	1302.08	1357.60	1405.62	1437.14	1476.66	1500.66

Platinum AGE -->

CARRIER	NETWORK	PLAN	0-14	15	16	17	18	19	20	21	22	23	24
Anthem Blue Cross	Select HMO	HMO A	493.29	537.14	553.90	570.67	588.72	606.78	625.48	644.82	644.82	644.82	644.82
Anthem Blue Cross	Vivity	HMO B	578.02	629.40	649.04	668.69	689.84	711.00	732.91	755.58	755.58	755.58	755.58
Anthem Blue Cross	Vivity	HMO C	565.94	616.25	635.48	654.71	675.43	696.14	717.60	739.79	739.79	739.79	739.79
Anthem Blue Cross	CaliforniaCare HMO	HMO D	578.80	630.25	649.92	669.59	690.78	711.96	733.90	756.60	756.60	756.60	756.60
Anthem Blue Cross	Prudent Buyer - Small Group	PPO B	585.19	637.20	657.09	676.98	698.40	719.82	742.00	764.95	764.95	764.95	764.95
Kaiser Permanente	Full	HMO A	452.09	491.01	505.89	520.77	536.80	538.55	555.15	572.32	572.32	572.32	572.32
Kaiser Permanente	Full	HMO B	440.28	478.14	492.62	507.10	522.69	524.02	540.17	556.87	556.87	556.87	556.87
Kaiser Permanente	Full	HMO C	422.89	459.21	473.09	486.98	501.94	502.62	518.11	534.14	534.14	534.14	534.14
Sharp Health Plan	Premier	HMO A	387.44	421.88	435.05	448.22	462.40	476.58	491.27	506.46	506.46	506.46	506.46
Sharp Health Plan	Performance	HMO B	415.31	452.23	466.34	480.46	495.66	510.86	526.60	542.89	542.89	542.89	542.89
Sharp Health Plan	Premier	HMO C	388.91	423.48	436.70	449.92	464.15	478.39	493.13	508.38	508.38	508.38	508.38
Sutter Health Plan	Sutter Health Plan	HMO A	541.07	589.17	607.56	625.95	645.75	665.56	686.07	707.30	707.30	707.30	707.30
UnitedHealthcare	SignatureValue	HMO A	708.07	771.01	795.07	819.14	845.05	870.97	897.81	925.58	925.58	925.58	925.58
UnitedHealthcare	SignatureValue	HMO B	766.91	835.08	861.15	887.21	915.28	943.35	972.43	1002.50	1002.50	1002.50	1002.50
UnitedHealthcare	SignatureValue	HMO D	735.98	801.40	826.42	851.43	878.37	905.31	933.21	962.07	962.07	962.07	962.07
UnitedHealthcare	SignatureValue	HMO E	754.73	821.81	847.46	873.11	900.74	928.36	956.97	986.57	986.57	986.57	986.57
Western Health	Full	HMO B	464.61	505.91	521.70	537.49	554.49	571.50	589.11	607.33	607.33	607.33	607.33
Western Health	Full	HMO C	459.94	500.82	516.45	532.08	548.92	565.75	583.19	601.22	601.22	601.22	601.22
Western Health	Full	HMO D	434.40	473.01	487.78	502.54	518.44	534.34	550.81	567.84	567.84	567.84	567.84

CARRIER	NETWORK	PLAN	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45
Anthem Blue Cross	Select HMO	HMO A	647.40	660.30	675.77	700.92	721.55	731.87	747.35	762.82	772.49	782.81	787.97	793.13	798.29	803.45	813.76	824.08	839.56	854.39	875.02	900.81	931.12
Anthem Blue Cross	Vivity	HMO B	758.60	773.71	791.85	821.32	845.49	857.58	875.72	893.85	905.18	917.27	923.32	929.36	935.41	941.45	953.54	965.63	983.77	1001.14	1025.32	1055.55	1091.06
Anthem Blue Cross	Vivity	HMO C	742.75	757.54	775.30	804.15	827.83	839.66	857.42	875.17	886.27	898.11	904.02	909.94	915.86	921.78	933.61	945.45	963.21	980.22	1003.90	1033.49	1068.26
Anthem Blue Cross	CaliforniaCare HMO	HMO D	759.63	774.76	792.92	822.42	846.64	858.74	876.90	895.06	906.41	918.51	924.57	930.62	936.67	942.72	954.83	966.93	985.09	1002.50	1026.71	1056.97	1092.53
Anthem Blue Cross	Prudent Buyer - Small Group	PPO B	768.01	783.31	801.67	831.50	855.98	868.22	886.58	904.94	916.41	928.65	934.77	940.89	947.01	953.13	965.37	977.61	995.96	1013.56	1038.04	1068.64	1104.59
Kaiser Permanente	Full	HMO A	574.61	586.06	599.79	622.11	640.43	649.58	663.32	677.05	685.64	694.80	699.38	703.95	708.53	713.11	722.27	731.43	745.16	758.32	776.64	799.53	826.43
Kaiser Permanente	Full	HMO B	559.10	570.24	583.60	605.32	623.14	632.05	645.41	658.78	667.13	676.04	680.50	684.95	689.41	693.86	702.77	711.68	725.05	737.85	755.67	777.95	804.12
Kaiser Permanente	Full	HMO C	536.27	546.96	559.78	580.61	597.70	606.25	619.07	631.89	639.90	648.44	652.72	656.99	661.26	665.54	674.08	682.63	695.45	707.73	724.83	746.19	771.30
Sharp Health Plan	Premier	HMO A	508.49	518.62	530.77	550.52	566.73	574.83	586.99	599.14	606.74	614.84	618.89	622.95	627.00	631.05	639.15	647.26	659.41	671.06	687.27	707.52	731.33
Sharp Health Plan	Performance	HMO B	545.06	555.92	568.95	590.12	607.49	616.18	629.21	642.24	650.38	659.07	663.41	667.75	672.10	676.44	685.13	693.81	706.84	719.33	736.70	758.42	783.93
Sharp Health Plan	Premier	HMO C	510.41	520.58	532.78	552.61	568.88	577.01	589.21	601.41	609.04	617.17	621.24	625.31	629.37	633.44	641.58	649.71	661.91	673.60	689.87	710.21	734.10
Sutter Health Plan	Sutter Health Plan	HMO A	710.12	724.26	741.24	768.82	791.45	802.77	819.75	836.72	847.33	858.65	864.30	869.96	875.62	881.28	892.60	903.91	920.89	937.15	959.79	988.08	1021.32
UnitedHealthcare	SignatureValue	HMO A	929.28	947.79	970.01	1006.11	1035.72	1050.53	1072.75	1094.96	1108.84	1123.65	1131.06	1138.46	1145.87	1153.27	1168.08	1182.89	1205.11	1226.39	1256.01	1293.04	1336.54
UnitedHealthcare	SignatureValue	HMO B	1006.51	1026.56	1050.62	1089.72	1121.80	1137.84	1161.90	1185.96	1201.00	1217.04	1225.06	1233.08	1241.10	1249.12	1265.16	1281.20	1305.26	1328.31	1360.39	1400.49	1447.61
UnitedHealthcare	SignatureValue	HMO D	965.92	985.16	1008.25	1045.77	1076.56	1091.95	1115.04	1138.13	1152.56	1167.95	1175.65	1183.35	1191.04	1198.74	1214.13	1229.53	1252.62	1274.74	1305.53	1344.01	1389.23
UnitedHealthcare	SignatureValue	HMO E	990.52	1010.25	1033.93	1072.40	1103.97	1119.76	1143.43	1167.11	1181.91	1197.70	1205.59	1213.48	1221.37	1229.27	1245.05	1260.84	1284.51	1307.21	1338.78	1378.24	1424.61
Western Health	Full	HMO B	609.76	621.91	636.48	660.17	679.60	689.32	703.90	718.47	727.58	737.30	742.16	747.02	751.88	756.73	766.45	776.17	790.75	804.71	824.15	848.44	876.99
Western Health	Full	HMO C	603.63	615.65	630.08	653.53	672.77	682.39	696.82	711.25	720.27	729.89	734.70	739.51	744.32	749.13	758.75	768.36	782.79	796.62	815.86	839.91	868.17
Western Health	Full	HMO D	570.11	581.47	595.10	617.24	635.42	644.50	658.13	671.76	680.28	689.36	693.90	698.45	702.99	707.53	716.62	725.70	739.33	752.39	770.56	793.28	819.96

CARRIER	NETWORK	PLAN	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
Anthem Blue Cross	Select HMO	HMO A	967.23	1007.85	1054.28	1100.06	1151.65	1202.59	1258.69	1315.43	1376.69	1437.95	1504.37	1571.43	1643.00	1678.47	1750.04	1811.94	1852.57	1903.51	1934.46
Anthem Blue Cross	Vivity	HMO B	1133.37	1180.97	1235.37	1289.02	1349.47	1409.16	1474.89	1541.38	1613.16	1684.94	1762.77	1841.35	1925.22	1966.77	2050.64	2123.18	2170.78	2230.47	2266.74
Anthem Blue Cross	Vivity	HMO C	1109.69	1156.29	1209.56	1262.08	1321.26	1379.71	1444.07	1509.17	1579.45	1649.73	1725.93	1802.87	1884.98	1925.67	2007.79	2078.81	2125.42	2183.86	2219.37
Anthem Blue Cross	CaliforniaCare HMO	HMO D	1134.90	1182.57	1237.04	1290.76	1351.29	1411.06	1476.88	1543.46	1615.34	1687.22	1765.15	1843.83	1927.82	1969.43	2053.41	2126.05	2173.71	2233.48	2269.80
Anthem Blue Cross	Prudent Buyer - Small Group	PPO B	1147.43	1195.62	1250.69	1305.00	1366.20	1426.63	1493.18	1560.50	1633.17	1705.84	1784.63	1864.18	1949.09	1991.16	2076.07	2149.51	2197.70	2258.13	2294.85
Kaiser Permanente	Full	HMO A	858.48	894.54	935.74	976.38	1022.16	1067.38	1117.17	1167.53	1221.90	1276.27	1335.22	1394.74	1458.27	1489.75	1553.28	1608.22	1644.28	1689.49	1716.96
Kaiser Permanente	Full	HMO B	835.31	870.39	910.48	950.02	994.57	1038.56	1087.01	1136.02	1188.92	1241.82	1299.18	1357.10	1418.91	1449.54	1511.35	1564.81	1599.89	1643.88	1670.61
Kaiser Permanente	Full	HMO C	801.21	834.86	873.32	911.24	953.97	996.17	1042.64	1089.64	1140.39	1191.13	1246.14	1301.69	1360.98	1390.36	1449.65	1500.93	1534.58	1576.78	1602.42
Sharp Health Plan	Premier	HMO A	759.69	791.60	828.06	864.02	904.54	944.55	988.61	1033.18	1081.29	1129.41	1181.57	1234.24	1290.46	1318.32	1374.53	1423.15	1455.06	1495.07	1519.38
Sharp Health Plan	Performance	HMO B	814.34	848.54	887.63	926.17	969.60	1012.49	1059.72	1107.50	1159.07	1210.64	1266.56	1323.02	1383.28	1413.14	1473.40	1525.52	1559.72	1602.61	1628.67
Sharp Health Plan	Premier	HMO C	762.57	794.60	831.20	867.30	907.97	948.13	992.36	1037.10	1085.39	1133.69	1186.05	1238.92	1295.35	1323.31	1379.74	1428.55	1460.58	1500.74	1525.14
Sutter Health Plan	Sutter Health Plan	HMO A	1060.93	1105.49	1156.41	1206.63	1263.21	1319.09	1380.62	1442.87	1510.06	1577.25	1650.10	1723.66	1802.17	1841.07	1919.58	1987.48	2032.03	2087.91	2121.85
UnitedHealthcare	SignatureValue	HMO A	1388.37	1446.68	1513.32	1579.04	1653.09	1726.21	1806.73	1888.18	1976.11	2064.04	2159.38	2255.64	2358.38	2409.28	2512.02	2600.88	2659.19	2732.31	2776.74
UnitedHealthcare	SignatureValue	HMO B	1503.75	1566.91	1639.09	1710.27	1790.47	1869.66	1956.88	2045.10	2140.34	2235.58	2338.83	2443.09	2554.37	2609.51	2720.79	2817.03	2880.18	2959.38	3007.50
UnitedHealthcare	SignatureValue	HMO D	1443.11	1503.72	1572.98	1641.29	1718.26	1794.26	1877.96	1962.62	2054.02	2145.42	2244.51	2344.56	2451.35	2504.27	2611.06	2703.42	2764.03	2840.03	2886.21
UnitedHealthcare	SignatureValue	HMO E	1479.86	1542.01	1613.04	1683.09	1762.01	1839.95	1925.78	2012.60	2106.33	2200.05	2301.67	2404.27	2513.78	2568.04	2677.55	2772.26	2834.42	2912.35	2959.71
Western Health	Full	HMO B	911.00	949.26	992.99	1036.11	1084.69	1132.67	1185.51	1238.96	1296.65	1354.35	1416.90	1480.07	1547.48	1580.88	1648.30	1706.60	1744.86	1792.84	1821.99
Western Health	Full	HMO C	901.84	939.71	983.00	1025.69	1073.79	1121.28	1173.59	1226.50	1283.61	1340.73	1402.66	1465.18	1531.92	1564.99	1631.72	1689.44	1727.32	1774.81	1803.66
Western Health	Full	HMO D	851.76	887.54	928.42	968.74	1014.17	1059.03	1108.43	1158.40	1212.34	1266.29	1324.78	1383.83	1446.86	1478.09	1541.12	1595.64	1631.41	1676.27	1703.52

Health Care Service Plan rates will vary by county

THE INFORMATION PROVIDED HEREIN, INCLUDING THE RATING INFORMATION IS PROVIDED ON TO YOU ON AN “AS IS” “AS AVAILABLE” BASIS WITHOUT WARRANTY OF ANY KIND, EXPRESS OR IMPLIED. WE FURTHER DISCLAIM ALL LIABILITY RELATED TO THE INFORMATION, INCLUDING THOSE CAUSED BY RATING DISCREPANCIES. FINAL RATES AND RATING AREAS ARE BASED UPON ACTUAL ENROLLMENT AND UNDERWRITING AND MUST BE APPROVED BY THE APPLICABLE INSURANCE CARRIER.

USE EMPLOYER ZIP CODE FOR RATING

AREA 11

02/01/27 - 03/01/27

Bronze		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																																																		
Anthem Blue Cross	Prudent Buyer - Small Group	PPO A	352.26	383.57	395.54	407.52	420.41	433.30	446.66	460.47	460.47	460.47	460.47	462.31	471.52	482.57	500.53	515.27	522.63	533.68	544.74	551.64	559.01	562.69	566.38	570.06	573.75	581.11	588.48	599.53	610.12	624.86	643.28	664.92	690.71	719.71	752.87	785.56	822.40	858.78	898.84	939.36	983.10	1026.85	1074.28	1122.17	1173.28	1198.60	1249.72	1293.92	1322.93	1359.31	1381.41
Anthem Blue Cross	Select PPO	PPO B	345.76	376.50	388.25	400.00	412.66	425.31	438.42	451.98	451.98	451.98	451.98	453.79	462.83	473.68	491.30	505.77	513.00	523.84	534.69	541.47	548.70	552.32	555.94	559.55	563.17	570.40	577.63	588.48	598.87	613.34	631.42	652.66	677.97	706.44	738.99	771.08	807.24	842.94	882.26	922.04	964.98	1007.92	1054.47	1101.48	1151.65	1176.50	1226.67	1270.06	1298.54	1334.24	1355.94
Anthem Blue Cross	Prudent Buyer - Small Group	PPO C	351.85	383.12	395.08	407.04	419.92	432.79	446.13	459.93	459.93	459.93	459.93	461.77	470.97	482.01	499.94	514.66	522.02	533.06	544.10	551.00	558.36	562.03	565.71	569.39	573.07	580.43	587.79	598.83	609.41	624.13	642.52	664.14	689.90	718.87	751.99	784.64	821.43	857.77	897.78	938.26	981.95	1025.64	1073.02	1120.85	1171.90	1197.20	1248.25	1292.40	1321.38	1357.71	1379.79
Anthem Blue Cross	Select PPO	PPO D	345.31	376.01	387.74	399.48	412.12	424.76	437.85	451.39	451.39	451.39	451.39	453.20	462.22	473.06	490.66	505.11	512.33	523.16	533.99	540.77	547.99	551.60	555.21	558.82	562.43	569.65	576.88	587.71	598.09	612.54	630.59	651.81	677.09	705.52	738.02	770.07	806.18	841.84	881.11	920.84	963.72	1006.60	1053.09	1100.04	1150.14	1174.97	1225.07	1268.41	1296.84	1332.50	1354.17
Kaiser Permanente	Full	HMO A	302.55	328.18	337.98	347.78	358.33	354.61	365.54	376.84	376.84	376.84	376.84	378.35	385.89	394.93	409.63	421.69	427.72	436.76	445.80	451.46	457.49	460.50	463.52	466.53	469.55	475.58	481.61	490.65	499.32	511.38	526.45	544.16	565.26	589.01	616.14	642.89	673.04	702.81	735.60	768.76	804.56	840.36	879.17	918.37	960.20	980.92	1022.75	1058.93	1082.67	1112.44	1130.52
Kaiser Permanente	Full	HMO C	294.19	319.07	328.59	338.10	348.35	344.32	354.93	365.91	365.91	365.91	365.91	367.37	374.69	383.47	397.74	409.45	415.31	424.09	432.87	438.36	444.21	447.14	450.07	453.00	455.92	461.78	467.63	476.42	484.83	496.54	511.18	528.37	548.87	571.92	598.26	624.24	653.52	682.42	714.26	746.46	781.22	815.98	853.67	891.72	932.34	952.46	993.08	1028.21	1051.26	1080.17	1097.73
Sharp Health Plan	Premier	HMO A	272.80	297.05	306.32	315.59	325.58	335.56	345.90	356.60	356.60	356.60	356.60	358.03	365.16	373.72	387.62	399.04	404.74	413.30	421.86	427.21	432.91	435.77	438.62	441.47	444.32	450.03	455.73	464.29	472.50	483.91	498.17	514.93	534.90	557.37	583.04	608.36	636.89	665.06	696.08	727.46	761.34	795.22	831.95	869.03	908.62	928.23	967.81	1002.05	1024.51	1052.68	1069.80
Sharp Health Plan	Performance	HMO B	291.24	317.12	327.02	336.92	347.58	358.24	369.28	380.70	380.70	380.70	380.70	382.22	389.84	398.97	413.82	426.00	432.09	441.23	450.37	456.08	462.17	465.22	468.26	471.31	474.35	480.44	486.53	495.67	504.43	516.61	531.84	549.73	571.05	595.03	622.44	649.47	679.93	710.01	743.13	776.63	812.79	848.96	888.17	927.77	970.02	990.96	1033.22	1069.77	1093.75	1123.83	1142.10
Sutter Health Plan	Sutter Health Plan	HMO A	346.81	377.64	389.42	401.21	413.90	426.60	439.75	453.36	453.36	453.36	453.36	455.16	464.23	475.11	492.79	507.29	514.55	525.43	536.31	543.11	550.36	553.99	557.62	561.24	564.87	572.12	579.38	590.26	600.68	615.19	633.32	654.63	680.02	708.58	741.22	773.41	809.68	845.49	884.93	924.83	967.89	1010.96	1057.66	1104.80	1155.13	1180.06	1230.38	1273.90	1302.46	1338.28	1360.03
Sutter Health Plan	Sutter Health Plan	HMO B	346.98	377.82	389.62	401.41	414.11	426.81	439.96	453.58	453.58	453.58	453.58	455.38	464.46	475.34	493.03	507.54	514.80	525.69	536.57	543.38	550.63	554.26	557.89	561.52	565.15	572.41	579.66	590.55	600.98	615.49	633.64	654.96	680.36	708.93	741.59	773.79	810.08	845.91	885.37	925.28	968.37	1011.46	1058.18	1105.35	1155.70	1180.64	1230.99	1274.53	1303.11	1338.94	1360.70
Western Health	Full	HMO B	316.71	344.87	355.63	366.39	377.99	389.58	401.59	414.01	414.01	414.01	414.01	415.66	423.94	433.88	450.02	463.27	469.90	479.83	489.77	495.98	502.60	505.91	509.23	512.54	515.85	522.47	529.10	539.03	548.56	561.81	578.37	597.82	621.01	647.09	676.90	706.29	739.41	772.12	808.14	844.57	883.90	923.23	965.87	1008.93	1054.89	1077.66	1123.61	1163.36	1189.44	1222.14	1242.02
Western Health	Full	HMO C	330.55	359.93	371.17	382.40	394.50	406.60	419.13	432.09	432.09	432.09	432.09	433.82	442.46	452.83	469.68	483.51	490.42	500.79	511.16	517.64	524.56	528.01	531.47	534.93	538.38	545.30	552.21	562.58	572.52	586.35	603.63	623.94	648.13	675.36	706.47	737.15	771.71	805.85	843.44	881.46	922.51	963.56	1008.07	1053.00	1100.97	1124.73	1172.69	1214.17	1241.39	1275.53	1296.27

Silver		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																																																	
Anthem Blue Cross	Select HMO	HMO A	358.25	390.09	402.27	414.45	427.56	440.67	454.25	468.30	468.30	468.30	468.30	470.17	479.54	490.78	509.04	524.03	531.52	542.76	554.00	561.02	568.52	572.26	576.01	579.76	583.50	590.99	598.49	609.73	620.50	635.48	654.22	676.23	702.45	731.95	765.67	798.92	836.38	873.38	914.12	955.33	999.82	1044.31	1092.54	1141.25	1193.23	1218.98	1270.97	1315.92	1345.43	1382.42	1404.90
Anthem Blue Cross	CaliforniaCare HMO	HMO B	358.25	390.09	402.27	414.45	427.56	440.67	454.25	468.30	468.30	468.30	468.30	470.17	479.54	490.78	509.04	524.03	531.52	542.76	554.00	561.02	568.52	572.26	576.01	579.76	583.50	590.99	598.49	609.73	620.50	635.48	654.22	676.23	702.45	731.95	765.67	798.92	836.38	873.38	914.12	955.33	999.82	1044.31	1092.54	1141.25	1193.23	1218.98	1270.97	1315.92	1345.43	1382.42	1404.90
Anthem Blue Cross	CaliforniaCare HMO	HMO D	357.80	389.60	401.76	413.92	427.02	440.12	453.68	467.71	467.71	467.71	467.71	469.58	478.94	490.16	508.40	523.37	530.85	542.08	553.30	560.32	567.80	571.54	575.28	579.02	582.77	590.25	597.73	608.96	619.72	634.68	653.39	675.37	701.57	731.03	764.71	797.91	835.33	872.28	912.97	954.13	998.56	1042.99	1091.17	1139.81	1191.73	1217.45	1269.36	1314.27	1343.73	1380.68	1403.13
Anthem Blue Cross	Select PPO	PPO B	372.93	406.08	418.75	431.43	445.08	458.73	472.87	487.49	487.49	487.49	487.49	489.44	499.19	510.89	529.90	545.50	553.30	565.00	576.70	584.01	591.81	595.71	599.61	603.51	607.41	615.21	623.01	634.71	645.92	661.52	681.02	703.94	731.24	761.95	797.05	831.66	870.66	909.17	951.58	994.48	1040.79	1087.10	1137.31	1188.01	1242.12	1268.94	1323.05	1369.85	1400.56	1439.07	1462.47
Anthem Blue Cross	Prudent Buyer - Small Group	PPO C	379.91	413.68	426.60	439.51	453.41	467.32	481.72	496.62	496.62	496.62	496.62	498.61	508.54	520.46	539.83	555.72	563.66	575.58	587.50	594.95	602.90	606.87	610.84	614.82	618.79	626.73	634.68	646.60	658.02	673.91	693.78	717.12	744.93	776.22	811.97	847.23	886.96	926.20	969.40	1013.10	1060.28	1107.46	1158.61	1210.26	1265.39	1292.70	1347.83	1395.50	1426.79	1466.02	1489.86
Anthem Blue Cross	Prudent Buyer - Small Group	PPO D	368.38	401.12	413.64	426.16	439.65	453.13	467.09	481.54	481.54	481.54	481.54	483.47	493.10	504.65	523.43	538.84	546.55	558.10	569.66	576.88	584.59	588.44	592.29	596.15	600.00	607.70	615.41	626.97	638.04	653.45	672.71	695.34	722.31	752.65	787.32	821.51	860.03	898.07	939.97	982.34	1028.09	1073.83	1123.43	1173.51	1226.96	1253.45	1306.90	1353.13	1383.46	1421.51	1444.62
Anthem Blue Cross	Select PPO	PPO E	361.60	393.74	406.03	418.32	431.56	444.79	458.50	472.68	472.68	472.68	472.68	474.57	484.02	495.37	513.80	528.93	536.49	547.84	559.18	566.27	573.83	577.61	581.40	585.18	588.96	596.52	604.09	615.43	626.30	641.43	660.33	682.55	709.02	738.80	772.83	806.39	844.21	881.55	922.67	964.27	1009.17	1054.08	1102.76	1151.92	1204.39	1230.39	1282.85	1328.23	1358.01	1395.35	1418.04
Anthem Blue Cross	Prudent Buyer - Small Group	PPO F	381.49	415.40	428.37	441.33	455.29	469.26	483.72	498.68	498.68	498.68	498.68	500.67	510.65	522.62	542.07	558.02	566.00	577.97	589.94	597.42	605.40	609.39	613.38	617.37	621.36	629.33	637.31	649.28	660.75	676.71	696.66	720.09	748.02	779.44	815.34	850.75	890.64	930.04	973.42	1017.31	1064.68	1112.06	1163.42	1215.28	1270.64	1298.06	1353.42	1401.29	1432.71	1472.10	1496.04
Kaiser Permanente	Full	HMO A	329.87	357.92	368.65	379.37	390.92	388.21	400.17	412.55	412.55	412.55	412.55	414.20	422.45	432.35	448.44	461.64	468.24	478.14	488.04	494.23	500.83	504.13	507.43	510.73	514.03	520.63	527.23	537.13	546.62	559.82	576.33	595.72	618.82	644.81	674.51	703.80	736.81	769.40	805.29	841.59	880.79	919.98	962.47	1005.37	1051.17	1073.86	1119.65	1159.25	1185.24	1217.84	1237.65
Kaiser Permanente	Full	HMO B	334.21	362.65	373.53	384.40	396.11	393.55	405.68	418.22	418.22	418.22	418.22	419.90	428.26	438.30	454.61	467.99	474.69	484.72	494.76	501.03	507.73	511.07	514.42	517.76	521.11	527.80	534.49	544.53	554.15	567.53	584.26	603.92	627.34	653.69	683.80	713.49	746.95	779.99	816.38	853.18	892.91	932.64	975.72	1019.21	1065.64	1088.64	1135.06	1175.21	1201.56	1234.60	1254.66
Kaiser Permanente	Full	HMO C	331.84	360.07	370.86	381.65	393.28	390.63	402.67	415.12	415.12	415.12	415.12	416.78	425.09	435.05	451.24	464.52	471.17	481.13	491.09	497.32	503.96	507.28	510.60	513.92	517.24	523.89	530.53	540.49	550.04	563.32	579.93	599.44	622.69	648.84	678.73	708.20	741.41	774.21	810.32	846.85	886.29	925.73	968.48	1011.66	1057.74	1080.57	1126.65	1166.50	1192.65	1225.45	1245.36
Kaiser Permanente	Full	HMO D	304.92	330.75	340.63	350.51	361.15	357.51	368.53	379.93	379.93	379.93	379.93	381.45	389.05	398.17	412.98	425.14	431.22	440.34	449.46	455.16	461.24	464.27	467.31	470.35	473.39	479.47	485.55	494.67	503.41	515.57	530.76	548.62	569.90	593.83	621.19	648.16	678.56	708.57	741.62	775.06	811.15	847.24	886.38	925.89	968.06	988.96	1031.13	1067.60	1091.54	1121.55	1139.79
Kaiser Permanente	Full	HMO E	317.90	344.89	355.21	365.52	376.64	373.48	384.99	396.90	396.90	396.90	396.90	398.49	406.42	415.95	431.43	444.13	450.48	460.00	469.53	475.48	481.83	485.01	488.18	491.36	494.53	500.89	507.24	516.76	525.89	538.59	554.47	573.12	595.35	620.35	648.93	677.11	708.86	740.21	774.74	809.67	847.38	885.08	925.96	967.24	1011.30	1033.13	1077.18	1115.28	1140.29	1171.64	1190.70
Sharp Health Plan	Premier	HMO A	285.29	310.65	320.35	330.04	340.49	350.93	361.74	372.93	372.93	372.93	372.93	374.42	381.88	390.83	405.37	417.31	423.28	432.23	441.18	446.77	452.74	455.72	458.70	461.69	464.67	470.64	476.60	485.55	494.13	506.07	520.98	538.51	559.40	582.89	609.74	636.22	666.05	695.51	727.96	760.78	796.21	831.63	870.05	908.83	950.23	970.74	1012.13	1047.93	1071.43	1100.89	1118.79
Sharp Health Plan	Performance	HMO B	294.75	320.95	330.96	340.98	351.77	362.56	373.73	385.29	385.29	385.29	385.29	386.83	394.54	403.78	418.81	431.14	437.30	446.55	455.80	461.58	467.74	470.82	473.91	476.99	480.07	486.24	492.40	501.65	510.51	522.84	538.25	556.36	577.94	602.21	629.95	657.30	688.13	718.57	752.09	785.99	822.59	859.20	898.88	938.95	981.72	1002.91	1045.68	1082.66	1106.94	1137.38	1155.87
Sharp Health Plan	Premier	HMO C	268.76	292.65	301.78	310.92	320.76	330.59	340.78	351.32	351.32	351.32	351.32	352.73	359.75	368.18	381.88	393.13	398.75	407.18	415.61	420.88	426.50	429.31	432.12	434.93	437.74	443.37	448.99	457.42	465.50	476.74	490.79	507.31	526.98	549.11	574.41	599.35	627.46	655.21	685.78	716.69	750.07	783.44	819.63	856.17	895.16	914.49	953.48	987.21	1009.34	1037.10	1053.96
Sutter Health Plan	Sutter Health Plan	HMO B	423.96	461.65	476.05	490.46	505.98	521.50	537.57	554.21	554.21	554.21	554.21	556.41	567.50	580.80	602.41	620.15	629.01	642.31	655.61	663.93	672.79	677.23	681.66	686.09	690.53	699.40	708.26	721.56	734.31	752.04	774.21	800.26	831.29	866.21	906.11	945.46	989.79	1033.58	1081.79	1130.56	1183.21	1235.86	1292.94	1350.58	1412.09	1442.57	1504.09	1557.29	1592.20	1635.99	1662.58
Sutter Health Plan	Sutter Health Plan	HMO C	367.20	399.83	412.31	424.79	438.23	451.67	465.59	480.00	480.00	480.00	480.00	481.91	491.51	503.03	521.75	537.11	544.79	556.31	567.83	575.03	582.71	586.55	590.39	594.23	598.07	605.75	613.43	624.95	635.99	651.35	670.55	693.11	719.99	750.23	784.79	818.87	857.27	895.19	936.95	979.19	1024.79	1070.39	1119.83	1169.75	1223.02	1249.42	1302.70	1348.78	1379.02	1416.94	1439.97
UnitedHealthcare	SignatureValue	HMO A	457.24	497.88	513.42	528.96	545.70	562.44	579.77	597.70	597.70	597.70	597.70	600.09	612.04	626.39	649.70	668.83	678.39	692.73	707.08	716.04	725.61	730.39	735.17	739.95	744.73	754.30	763.86	778.21	791.95	811.08	834.99	863.08	896.55	934.21	977.24	1019.68	1067.49	1114.71	1166.71	1219.31	1276.09	1332.87	1394.43	1456.59	1522.94	1555.81	1622.16	1679.54	1717.19	1764.41	1793.10
UnitedHealthcare	Alliance	HMO E	395.99	431.19	444.64	458.10	472.60	487.09	502.10	517.63	517.63	517.63	517.63	519.70	530.05	542.48	562.66	579.23	587.51	599.93	612.36	620.12	628.40	632.54	636.68	640.83	644.97	653.25	661.53	673.95	685.86	702.42	723.13	747.46	776.45	809.06	846.33	883.08	924.49	965.38	1010.41	1055.97	1105.14	1154.31	1207.63	1261.46	1318.92	1347.39	1404.85	1454.54	1487.15	1528.04	1552.89
Western Health	Full	HMO B	362.81	395.06	407.40	419.73	433.01	446.29	460.04	474.27	474.27	474.27	474.27	476.16	485.65	497.03	515.53	530.71	538.29	549.68	561.06	568.17	575.76	579.56	583.35	587.14	590.94	598.53	606.11	617.50	628.40	643.58	662.55	684.84	711.40	741.28	775.43	809.10	847.04	884.51	925.77	967.51	1012.56	1057.62	1106.47	1155.79	1208.43	1234.52	1287.16	1332.69	1362.57	1400.04	1422.80
Western Health	Full	HMO C	342.86	373.34	384.99	396.64	409.19	421.74	434.74	448.18	448.18	448.18	448.18	449.98	458.94	469.70	487.18	501.52	508.69	519.45	530.20	536.93	544.10	547.68	551.27	554.85	558.44	565.61	572.78	583.54	593.84	608.19	626.11	647.18	672.28	700.51	732.78	764.60	800.46	835.86	874.86	914.30	956.87	999.45	1045.62	1092.23	1141.97	1166.63	1216.37	1259.40	1287.64	1323.04	1344.54
Western Health	Full	HMO D	330.78	360.19	371.43	382.67	394.78	406.88	419.42	432.40	432.40	432.40	432.40	434.12	442.77	453.15	470.01	483.85	490.77	501.15	511.52	518.01	524.93	528.39	531.85	535.31	538.76	545.68	552.60	562.98	572.92	586.76	604.06	624.38	648.59	675.83	706.97	737.67	772.26	806.42	844.04	882.09	923.16	964.24	1008.78	1053.75	1101.74	1125.52	1173.52	1215.03	1242.27	1276.43	1297.19

Gold		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																																																	
Anthem Blue Cross	Select HMO	HMO A	459.30	500.12	515.74	531.35	548.16	564.97	582.38	600.39	600.39	600.39	600.39	602.79	614.80	629.21	652.62	671.84	681.44	695.85	710.26	719.27	728.87	733.68	738.48	743.28	748.09	757.69	767.30	781.71	795.52	814.73	838.74	866.96	900.59	938.41	981.64	1024.27	1072.30	1119.73	1171.96	1224.80	1281.83	1338.87	1400.71	1463.15	1529.79	1562.82	1629.46	1687.10	1724.92	1772.35	1801.17
Anthem Blue Cross	CaliforniaCare HMO	HMO B	459.30	500.12	515.74	531.35	548.16	564.97	582.38	600.39	600.39	600.39	600.39	602.79	614.80	629.21	652.62	671.84	681.44	695.85	710.26	719.27	728.87	733.68	738.48	743.28	748.09	757.69	767.30	781.71	795.52	814.73	838.74	866.96	900.59	938.41	981.64	1024.27	1072.30	1119.73	1171.96	1224.80	1281.83	1338.87	1400.71	1463.15	1529.79	1562.82	1629.46	1687.10	1724.92	1772.35	1801.17
Anthem Blue Cross	Priority Select HMO	HMO C	416.05	453.04	467.18	481.32	496.54	511.77	527.54	543.86	543.86	543.86	543.86	546.04	556.91	569.97	591.18	608.58	617.28	630.33	643.39	651.54	660.25	664.60	668.95	673.30	677.65	686.35	695.05	708.11	720.61	738.02	759.77	785.33	815.79	850.05	889.21	927.83	971.33	1014.30	1061.61	1109.47	1161.14	1212.81	1268.83	1325.39	1385.76	1415.67	1476.04	1528.25	1562.51	1605.47	1631.58
Anthem Blue Cross	Select PPO	PPO B	441.48	480.72	495.73	510.73	526.89	543.05	559.79	577.10	577.10	577.10	577.10	579.41	590.95	604.80	627.31	645.77	655.01	668.86	682.71	691.37	700.60	705.22	709.83	714.45	719.07	728.30	737.53	751.38	764.66	783.12	806.21	833.33	865.65	902.01	943.56	984.53	1030.70	1076.29	1126.50	1177.28	1232.11	1286.93	1346.37	1406.39	1470.45	1502.19	1566.25	1621.65	1658.01	1703.60	1731.30
Anthem Blue Cross	Select PPO	PPO C	455.50	495.98	511.47	526.95	543.62	560.29	577.56	595.42	595.42	595.42	595.42	597.80	609.71	624.00	647.22	666.27	675.80	690.09	704.38	713.31	722.84	727.60	732.37	737.13	741.89	751.42	760.95	775.24	788.93	807.98	831.80	859.79	893.13	930.64	973.51	1015.79	1063.42	1110.46	1162.26	1214.66	1271.22	1327.79	1389.11	1451.04	1517.13	1549.88	1615.97	1673.13	1710.64	1757.68	1786.26
Anthem Blue Cross	Select PPO	PPO D	438.25	477.21	492.10	507.00	523.04	539.08	555.69	572.88	572.88	572.88	572.88	575.17	586.63	600.38	622.72	641.05	650.22	663.97	677.72	686.31	695.48	700.06	704.64	709.23	713.81	722.97	732.14	745.89	759.07	777.40	800.31	827.24	859.32	895.41	936.66	977.33	1023.16	1068.42	1118.26	1168.68	1223.10	1277.52	1336.53	1396.11	1459.70	1491.21	1554.80	1609.79	1645.88	1691.14	1718.64
Anthem Blue Cross	Prudent Buyer - Small Group	PPO E	464.05	505.30	521.07	536.84	553.83	570.81	588.40	606.60	606.60	606.60	606.60	609.03	621.16	635.72	659.37	678.79	688.49	703.05	717.61	726.71	736.41	741.27	746.12	750.97	755.82	765.53	775.23	789.79	803.75	823.16	847.42	875.93	909.90	948.12	991.79	1034.86	1083.39	1131.31	1184.08	1237.46	1295.09	1352.72	1415.20	1478.28	1545.62	1578.98	1646.31	1704.55	1742.76	1790.68	1819.80
Anthem Blue Cross	Prudent Buyer - Small Group	PPO H	446.52	486.21	501.39	516.57	532.91	549.25	566.18	583.69	583.69	583.69	583.69	586.02	597.70	611.71	634.47	653.15	662.49	676.50	690.51	699.26	708.60	713.27	717.94	722.61	727.28	736.62	745.96	759.96	773.39	792.07	815.41	842.85	875.54	912.31	954.33	995.78	1042.47	1088.58	1139.36	1190.73	1246.18	1301.63	1361.75	1422.45	1487.24	1519.35	1584.13	1640.17	1676.94	1723.05	1751.07
Anthem Blue Cross	Prudent Buyer - Small Group	PPO I	453.09	493.37	508.77	524.17	540.75	557.34	574.51	592.28	592.28	592.28	592.28	594.65	606.49	620.71	643.81	662.76	672.24	686.45	700.67	709.55	719.03	723.77	728.50	733.24	737.98	747.46	756.93	771.15	784.77	803.72	827.42	855.25	888.42	925.73	968.38	1010.43	1057.81	1104.60	1156.13	1208.25	1264.52	1320.78	1381.79	1443.39	1509.13	1541.70	1607.45	1664.31	1701.62	1748.41	1776.84
Kaiser Permanente	Full	HMO B	396.45	430.42	443.41	456.39	470.38	470.10	484.59	499.58	499.58	499.58	499.58	501.57	511.57	523.56	543.04	559.02	567.02	579.01	591.00	598.49	606.48	610.48	614.48	618.47	622.47	630.46	638.46	650.45	661.94	677.92	697.91	721.39	749.36	780.84	816.81	852.28	892.24	931.71	975.17	1019.13	1066.59	1114.05	1165.51	1217.47	1272.92	1300.39	1355.85	1403.81	1435.28	1474.75	1498.74
Kaiser Permanente	Full	HMO C	407.87	442.85	456.23	469.61	484.01	484.15	499.07	514.51	514.51	514.51	514.51	516.56	526.85	539.20	559.27	575.73	583.96	596.31	608.66	616.38	624.61	628.73	632.84	636.96	641.07	649.31	657.54	669.89	681.72	698.18	718.76	742.95	771.76	804.17	841.22	877.75	918.91	959.55	1004.32	1049.59	1098.47	1147.35	1200.34	1253.85	1310.96	1339.26	1396.37	1445.76	1478.18	1518.82	1543.53
Kaiser Permanente	Full	HMO D	385.10	418.06	430.66	443.27	456.84	456.14	470.20	484.74	484.74	484.74	484.74	486.68	496.38	508.01	526.92	542.43	550.18	561.82	573.45	580.72	588.48	592.36	596.23	600.11	603.99	611.75	619.50	631.14	642.28	657.80	677.19	699.97	727.11	757.65	792.55	826.97	865.75	904.05	946.22	988.88	1034.93	1080.98	1130.90	1181.32	1235.12	1261.79	1315.59	1362.13	1392.67	1430.96	1454.22
Kaiser Permanente	Full	HMO E	344.46	373.81	385.03	396.25	408.33	406.15	418.67	431.62	431.62	431.62	431.62	433.34	441.97	452.33	469.17	482.98	489.88	500.24	510.60	517.08	523.98	527.43	530.89	534.34	537.79	544.70	551.60	561.96	571.89	585.70	602.97	623.25	647.42	674.61	705.69	736.34	770.86	804.96	842.51	880.50	921.50	962.50	1006.96	1051.85	1099.76	1123.49	1171.40	1212.84	1240.03	1274.13	1294.86
Kaiser Permanente	Full	HMO F	393.14	426.82	439.70	452.58	466.44	466.04	480.40	495.26	495.26	495.26	495.26	497.24	507.15	519.03	538.35	554.20	562.12	574.01	585.89	593.32	601.25	605.21	609.17	613.13	617.09	625.02	632.94	644.83	656.22	672.07	691.88	715.16	742.89	774.09	809.75	844.91	884.53	923.66	966.75	1010.33	1057.38	1104.43	1155.44	1206.95	1261.92	1289.16	1344.14	1391.68	1422.88	1462.01	1485.78
Sharp Health Plan	Performance	HMO A	366.15	398.70	411.14	423.59	436.99	450.39	464.27	478.63	478.63	478.63	478.63	480.54	490.12	501.60	520.27	535.59	543.25	554.73	566.22	573.40	581.06	584.89	588.71	592.54	596.37	604.03	611.69	623.18	634.18	649.50	668.65	691.14	717.95	748.10	782.56	816.54	854.83	892.64	934.29	976.41	1021.88	1067.34	1116.64	1166.42	1219.55	1245.87	1299.00	1344.95	1375.10	1412.92	1435.89
Sharp Health Plan	Premier	HMO B	345.92	376.67	388.42	400.18	412.84	425.50	438.61	452.18	452.18	452.18	452.18	453.99	463.03	473.88	491.52	505.99	513.22	524.08	534.93	541.71	548.95	552.56	556.18	559.80	563.42	570.65	577.89	588.74	599.14	613.61	631.70	652.95	678.27	706.76	739.31	771.42	807.59	843.32	882.66	922.45	965.40	1008.36	1054.94	1101.96	1152.15	1177.02	1227.22	1270.63	1299.11	1334.84	1356.54
Sharp Health Plan	Performance	HMO D	377.08	410.59	423.41	436.23	450.03	463.83	478.12	492.91	492.91	492.91	492.91	494.88	504.74	516.57	535.79	551.57	559.45	571.28	583.11	590.51	598.39	602.34	606.28	610.22	614.17	622.05	629.94	641.77	653.11	668.88	688.60	711.76	739.37	770.42	805.91	840.90	880.34	919.28	962.16	1005.54	1052.36	1099.19	1149.96	1201.22	1255.93	1283.04	1337.76	1385.08	1416.13	1455.07	1478.73
Sutter Health Plan	Sutter Health Plan	HMO A	464.44	505.73	521.51	537.30	554.30	571.30	588.90	607.13	607.13	607.13	607.13	609.55	621.69	636.26	659.94	679.36	689.08	703.65	718.22	727.33	737.04	741.90	746.75	751.61	756.47	766.18	775.90	790.47	804.43	823.86	848.14	876.68	910.67	948.92	992.64	1035.74	1084.31	1132.27	1185.09	1238.52	1296.19	1353.87	1416.40	1479.54	1546.93	1580.32	1647.71	1706.00	1744.25	1792.21	1821.34
Sutter Health Plan	Sutter Health Plan	HMO B	498.16	542.45	559.38	576.31	594.54	612.77	631.66	651.21	651.21	651.21	651.21	653.80	666.82	682.45	707.85	728.69	739.11	754.74	770.36	780.13	790.55	795.76	800.97	806.18	811.39	821.81	832.23	847.86	862.83	883.67	909.72	940.33	976.79	1017.82	1064.70	1110.94	1163.03	1214.48	1271.13	1328.44	1390.30	1452.17	1519.24	1586.96	1659.25	1695.06	1767.34	1829.86	1870.88	1922.33	1953.58
Sutter Health Plan	Sutter Health Plan	HMO C	423.25	460.87	475.26	489.64	505.14	520.63	536.67	553.28	553.28	553.28	553.28	555.48	566.55	579.83	601.40	619.11	627.96	641.24	654.52	662.82	671.67	676.10	680.52	684.95	689.37	698.23	707.08	720.36	733.08	750.79	772.92	798.92	829.90	864.76	904.60	943.88	988.14	1031.85	1079.98	1128.67	1181.23	1233.79	1290.78	1348.32	1409.73	1440.16	1501.57	1554.69	1589.54	1633.25	1659.80
UnitedHealthcare	SignatureValue	HMO A	500.60	545.10	562.11	579.13	597.45	615.77	634.75	654.38	654.38	654.38	654.38	657.00	670.09	685.79	711.31	732.25	742.72	758.43	774.13	783.95	794.42	799.65	804.89	810.12	815.36	825.83	836.30	852.00	867.05	887.99	914.17	944.92	981.57	1022.80	1069.91	1116.37	1168.72	1220.42	1277.35	1334.94	1397.10	1459.27	1526.67	1594.72	1667.36	1703.35	1775.99	1838.81	1880.03	1931.73	1963.14
UnitedHealthcare	Alliance	HMO B	433.54	472.08	486.81	501.55	517.42	533.28	549.72	566.72	566.72	566.72	566.72	568.99	580.32	593.92	616.02	634.16	643.23	656.83	670.43	678.93	688.00	692.53	697.07	701.60	706.13	715.20	724.27	737.87	750.90	769.04	791.71	818.34	850.08	885.78	926.59	966.82	1012.16	1056.93	1106.24	1156.11	1209.95	1263.79	1322.16	1381.10	1444.00	1475.17	1538.08	1592.48	1628.19	1672.96	1700.16
UnitedHealthcare	SignatureValue	HMO C	535.94	583.58	601.80	620.01	639.63	659.25	679.56	700.58	700.58	700.58	700.58	703.38	717.39	734.21	761.53	783.95	795.16	811.97	828.79	839.29	850.50	856.11	861.71	867.32	872.92	884.13	895.34	912.16	928.27	950.69	978.71	1011.64	1050.87	1095.01	1145.45	1195.19	1251.24	1306.58	1367.53	1429.18	1495.74	1562.29	1634.45	1707.31	1785.08	1823.61	1901.37	1968.63	2012.77	2068.11	2101.74
UnitedHealthcare	Alliance	HMO D	464.15	505.41	521.18	536.96	553.94	570.93	588.53	606.73	606.73	606.73	606.73	609.16	621.29	635.85	659.52	678.93	688.64	703.20	717.76	726.86	736.57	741.42	746.28	751.13	755.99	765.69	775.40	789.96	803.92	823.33	847.60	876.12	910.10	948.32	992.00	1035.08	1083.62	1131.55	1184.34	1237.73	1295.37	1353.01	1415.50	1478.60	1545.95	1579.32	1646.67	1704.91	1743.14	1791.07	1820.19
UnitedHealthcare	SignatureValue	HMO F	554.36	603.63	622.47	641.32	661.61	681.90	702.91	724.65	724.65	724.65	724.65	727.55	742.04	759.43	787.69	810.88	822.48	839.87	857.26	868.13	879.73	885.52	891.32	897.12	902.91	914.51	926.10	943.49	960.16	983.35	1012.34	1046.39	1086.98	1132.63	1184.80	1236.25	1294.22	1351.47	1414.52	1478.29	1547.13	1615.97	1690.61	1765.97	1846.41	1886.26	1966.70	2036.27	2081.92	2139.17	2173.95
UnitedHealthcare	Alliance	HMO G	480.09	522.77	539.08	555.40	572.97	590.54	608.74	627.57	627.57	627.57	627.57	630.08	642.63	657.69	682.17	702.25	712.29	727.35	742.42	751.83	761.87	766.89	771.91	776.93	781.95	791.99	802.03	817.10	831.53	851.61	876.72	906.21	941.36	980.89	1026.08	1070.63	1120.84	1170.42	1225.02	1280.24	1339.86	1399.48	1464.12	1529.39	1599.05	1633.56	1703.22	1763.47	1803.01	1852.59	1882.71
UnitedHealthcare	SignatureValue	HMO H	519.50	565.68	583.34	600.99	620.01	639.02	658.72	679.09	679.09	679.09	679.09	681.81	695.39	711.69	738.17	759.90	770.77	787.07	803.36	813.55	824.42	829.85	835.28	840.71	846.15	857.01	867.88	884.18	899.79	921.53	948.69	980.61	1018.64	1061.42	1110.31	1158.53	1212.85	1266.50	1325.58	1385.34	1449.86	1514.37	1584.32	1654.94	1730.32	1767.67	1843.05	1908.24	1951.03	2004.67	2037.27
UnitedHealthcare	Alliance	HMO J	449.90	489.90	505.19	520.48	536.94	553.41	570.47	588.11	588.11	588.11	588.11	590.46	602.22	616.34	639.28	658.10	667.50	681.62	695.73	704.56	713.97	718.67	723.38	728.08	732.79	742.19	751.60	765.72	779.25	798.07	821.59	849.23	882.17	919.22	961.56	1003.32	1050.36	1096.83	1147.99	1199.74	1255.61	1311.49	1372.06	1433.22	1498.50	1530.85	1596.13	1652.59	1689.64	1736.10	1764.33
Western Health	Full	HMO A	406.47	442.60	456.41	470.23	485.10	499.98	515.39	531.33	531.33	531.33	531.33	533.45	544.08	556.83	577.55	594.56	603.06	615.81	628.56	636.53	645.03	649.28	653.53	657.78	662.04	670.54	679.04	691.79	704.01	721.01	742.27	767.24	796.99	830.47	868.72	906.45	948.95	990.93	1037.15	1083.91	1134.39	1184.86	1239.59	1294.85	1353.83	1383.05	1442.03	1493.03	1526.51	1568.48	1593.99
Western Health	Full	HMO B	426.53	464.44	478.93	493.43	509.04	524.65	540.82	557.55	557.55	557.55	557.55	559.78	570.93	584.31	606.06	623.90	632.82	646.20	659.58	667.94	676.86	681.33	685.79	690.25	694.71	703.63	712.55	725.93	738.75	756.59	778.90	805.10	836.32	871.45	911.59	951.18	995.78	1039.83	1088.34	1137.40	1190.37	1243.34	1300.76	1358.75	1420.64	1451.30	1513.19	1566.71	1601.84	1645.89	1672.65
Western Health	Full	HMO C	397.43	432.76	446.27	459.77	474.32	488.87	503.93	519.52	519.52	519.52	519.52	521.60	531.99	544.46	564.72	581.34	589.65	602.12	614.59	622.38	630.70	634.85	639.01	643.16	647.32	655.63	663.94	676.41	688.36	704.99	725.77	750.18	779.28	812.01	849.41	886.30	927.86	968.90	1014.10	1059.82	1109.17	1158.53	1212.04	1266.07	1323.73	1352.31	1409.97	1459.85	1492.58	1533.62	1558.56
Western Health	Full	HMO D	382.67	416.69	429.69	442.70	456.70	470.71	485.22	500.22	500.22	500.22	500.22	502.22	512.23	524.23	543.74	559.75	567.75	579.76	591.76	599.27	607.27	611.27	615.27	619.28	623.28	631.28	639.28	651.29	662.79	678.80	698.81	722.32	750.33	781.85	817.86	853.38	893.40	932.91	976.43	1020.45	1067.97	1115.50	1167.02	1219.04	1274.57	1302.08	1357.60	1405.62	1437.14	1476.66	1500.66

Health Care Service Plan rates will vary by county

THE INFORMATION PROVIDED HEREIN, INCLUDING THE RATING INFORMATION IS PROVIDED ON TO YOU ON AN "AS IS" "AS AVAILABLE" BASIS WITHOUT WARRANTY OF ANY KIND, EXPRESS OR IMPLIED. WE FURTHER DISCLAIM ALL LIABILITY RELATED TO THE INFORMATION, INCLUDING THOSE CAUSED BY RATING DISCREPANCIES. FINAL RATES AND RATING AREAS ARE BASED UPON ACTUAL ENROLLMENT AND UNDERWRITING AND MUST BE APPROVED BY THE APPLICABLE INSURANCE CARRIER.

Continued

Platinum		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																																																	
Anthem Blue Cross	Select HMO	HMO A	498.33	542.62	559.56	576.50	594.74	612.98	631.87	651.41	651.41	651.41	651.41	654.02	667.04	682.68	708.08	728.93	739.35	754.98	770.62	780.39	790.81	796.02	801.23	806.45	811.66	822.08	832.50	848.14	863.12	883.96	910.02	940.64	977.12	1018.15	1065.06	1111.31	1163.42	1214.88	1271.55	1328.88	1390.76	1452.64	1519.74	1587.49	1659.79	1695.62	1767.93	1830.46	1871.50	1922.96	1954.23
Anthem Blue Cross	Vivity	HMO B	497.54	541.77	558.68	575.59	593.80	612.01	630.87	650.38	650.38	650.38	650.38	652.98	665.99	681.60	706.96	727.78	738.18	753.79	769.40	779.16	789.56	794.76	799.97	805.17	810.37	820.78	831.19	846.79	861.75	882.57	908.58	939.15	975.57	1016.54	1063.37	1109.55	1161.58	1212.96	1269.54	1326.78	1388.56	1450.35	1517.34	1584.98	1657.17	1692.94	1765.13	1827.57	1868.54	1919.92	1951.14
Anthem Blue Cross	Vivity	HMO C	487.12	530.42	546.98	563.53	581.36	599.19	617.66	636.76	636.76	636.76	636.76	639.31	652.04	667.32	692.16	712.53	722.72	738.00	753.29	762.84	773.03	778.12	783.21	788.31	793.40	803.59	813.78	829.06	843.71	864.08	889.55	919.48	955.14	995.26	1041.10	1086.31	1137.25	1187.56	1242.96	1298.99	1359.48	1419.97	1485.56	1551.78	1622.46	1657.49	1728.17	1789.30	1829.41	1879.72	1910.28
Anthem Blue Cross	CaliforniaCare HMO	HMO D	498.21	542.49	559.42	576.36	594.59	612.83	631.71	651.25	651.25	651.25	651.25	653.86	666.88	682.51	707.91	728.75	739.17	754.80	770.43	780.20	790.62	795.83	801.04	806.25	811.46	821.88	832.30	847.93	862.91	883.75	909.80	940.41	976.88	1017.90	1064.79	1111.03	1163.13	1214.58	1271.24	1328.55	1390.42	1452.29	1519.37	1587.10	1659.39	1695.20	1767.49	1830.01	1871.04	1922.49	1953.75
Anthem Blue Cross	Prudent Buyer - Small Group	PPO B	523.55	570.09	587.88	605.68	624.84	644.00	663.85	684.38	684.38	684.38	684.38	687.12	700.81	717.23	743.92	765.82	776.77	793.20	809.62	819.89	830.84	836.31	841.79	847.26	852.74	863.69	874.64	891.06	906.80	928.70	956.08	988.24	1026.57	1069.69	1118.96	1167.55	1222.30	1276.37	1335.91	1396.14	1461.15	1526.17	1596.66	1667.83	1743.80	1781.44	1857.41	1923.11	1966.22	2020.29	2053.14
Kaiser Permanente	Full	HMO A	438.96	476.71	491.14	505.58	521.12	522.40	538.50	555.15	555.15	555.15	555.15	557.37	568.47	581.80	603.45	621.21	630.10	643.42	656.74	665.07	673.95	678.39	682.84	687.28	691.72	700.60	709.48	722.81	735.57	753.34	775.55	801.64	832.73	867.70	907.67	947.09	991.50	1035.36	1083.65	1132.51	1185.25	1237.99	1295.17	1352.90	1414.52	1445.06	1506.68	1559.97	1594.95	1638.80	1665.45
Kaiser Permanente	Full	HMO B	427.50	464.23	478.27	492.32	507.44	508.30	523.96	540.17	540.17	540.17	540.17	542.33	553.13	566.09	587.16	604.44	613.09	626.05	639.02	647.12	655.76	660.08	664.40	668.72	673.05	681.69	690.33	703.29	715.72	733.00	754.61	780.00	810.25	844.28	883.17	921.52	964.73	1007.41	1054.40	1101.94	1153.25	1204.57	1260.21	1316.38	1376.34	1406.05	1466.01	1517.86	1551.89	1594.57	1620.51
Kaiser Permanente	Full	HMO C	410.63	445.86	459.33	472.80	487.31	487.55	502.57	518.11	518.11	518.11	518.11	520.19	530.55	542.98	563.19	579.77	588.06	600.49	612.93	620.70	628.99	633.14	637.28	641.43	645.57	653.86	662.15	674.58	686.50	703.08	723.81	748.16	777.17	809.81	847.12	883.90	925.35	966.28	1011.36	1056.95	1106.17	1155.39	1208.76	1262.64	1320.15	1348.65	1406.16	1455.90	1488.54	1529.47	1554.33
Sharp Health Plan	Premier	HMO A	387.44	421.88	435.05	448.22	462.40	476.58	491.27	506.46	506.46	506.46	506.46	508.49	518.62	530.77	550.52	566.73	574.83	586.99	599.14	606.74	614.84	618.89	622.95	627.00	631.05	639.15	647.26	659.41	671.06	687.27	707.52	731.33	759.69	791.60	828.06	864.02	904.54	944.55	988.61	1033.18	1081.29	1129.41	1181.57	1234.24	1290.46	1318.32	1374.53	1423.15	1455.06	1495.07	1519.38
Sharp Health Plan	Performance	HMO B	415.31	452.23	466.34	480.46	495.66	510.86	526.60	542.89	542.89	542.89	542.89	545.06	555.92	568.95	590.12	607.49	616.18	629.21	642.24	650.38	659.07	663.41	667.75	672.10	676.44	685.13	693.81	706.84	719.33	736.70	758.42	783.93	814.34	848.54	887.63	926.17	969.60	1012.49	1059.72	1107.50	1159.07	1210.64	1266.56	1323.02	1383.28	1413.14	1473.40	1525.52	1559.72	1602.61	1628.67
Sharp Health Plan	Premier	HMO C	388.91	423.48	436.70	449.92	464.15	478.39	493.13	508.38	508.38	508.38	508.38	510.41	520.58	532.78	552.61	568.88	577.01	589.21	601.41	609.04	617.17	621.24	625.31	629.37	633.44	641.58	649.71	661.91	673.60	689.87	710.21	734.10	762.57	794.60	831.20	867.30	907.97	948.13	992.36	1037.10	1085.39	1133.69	1186.05	1238.92	1295.35	1323.31	1379.74	1428.55	1460.58	1500.74	1525.14
Sutter Health Plan	Sutter Health Plan	HMO A	541.07	589.17	607.56	625.95	645.75	665.56	686.07	707.30	707.30	707.30	707.30	710.12	724.26	741.24	768.82	791.45	802.77	819.75	836.72	847.33	858.65	864.30	869.96	875.62	881.28	892.60	903.91	920.89	937.15	959.79	988.08	1021.32	1060.93	1105.49	1156.41	1206.63	1263.21	1319.09	1380.62	1442.87	1510.06	1577.25	1650.10	1723.66	1802.17	1841.07	1919.58	1987.48	2032.03	2087.91	2121.85
UnitedHealthcare	SignatureValue	HMO A	556.24	605.68	624.59	643.49	663.85	684.21	705.30	727.11	727.11	727.11	727.11	730.02	744.56	762.01	790.37	813.64	825.27	842.72	860.17	871.08	882.71	888.53	894.35	900.16	905.98	917.61	929.25	946.70	963.42	986.69	1015.77	1049.95	1090.67	1136.47	1188.82	1240.45	1298.62	1356.06	1419.32	1483.30	1552.38	1621.46	1696.35	1771.97	1852.68	1892.67	1973.38	2043.18	2088.99	2146.43	2181.33
UnitedHealthcare	SignatureValue	HMO B	602.46	656.01	676.49	696.96	719.01	741.07	763.90	787.53	787.53	787.53	787.53	790.68	806.43	825.33	856.05	881.25	893.85	912.75	931.65	943.46	956.06	962.36	968.66	974.96	981.26	993.86	1006.46	1025.36	1043.48	1068.68	1100.18	1137.19	1181.30	1230.91	1287.61	1343.53	1406.53	1468.74	1537.26	1606.56	1681.38	1756.19	1837.31	1919.21	2006.63	2049.94	2137.36	2212.96	2262.57	2324.79	2362.59
UnitedHealthcare	Alliance	HMO C	481.72	524.54	540.91	557.28	574.92	592.55	610.81	629.70	629.70	629.70	629.70	632.22	644.81	659.93	684.48	704.63	714.71	729.82	744.94	754.38	764.46	769.49	774.53	779.57	784.61	794.68	804.76	819.87	834.35	854.50	879.69	909.29	944.55	984.22	1029.56	1074.27	1124.64	1174.39	1229.17	1284.59	1344.41	1404.23	1469.09	1534.58	1604.48	1639.11	1709.01	1769.46	1809.13	1858.87	1889.10
UnitedHealthcare	SignatureValue	HMO D	578.16	629.56	649.21	668.86	690.02	711.18	733.10	755.77	755.77	755.77	755.77	758.79	773.91	792.05	821.52	845.71	857.80	875.94	894.08	905.41	917.50	923.55	929.60	935.64	941.69	953.78	965.87	984.01	1001.40	1025.58	1055.81	1091.33	1133.66	1181.27	1235.68	1289.34	1349.81	1409.51	1475.26	1541.77	1613.57	1685.37	1763.21	1841.81	1925.70	1967.27	2051.16	2123.71	2171.33	2231.03	2267.31
UnitedHealthcare	SignatureValue	HMO E	592.89	645.59	665.74	685.89	707.59	729.29	751.77	775.02	775.02	775.02	775.02	778.12	793.62	812.22	842.45	867.25	879.65	898.25	916.85	928.47	940.87	947.07	953.27	959.47	965.67	978.08	990.48	1009.08	1026.90	1051.70	1082.70	1119.13	1162.53	1211.36	1267.16	1322.18	1384.19	1445.41	1512.84	1581.04	1654.67	1728.29	1808.12	1888.72	1974.75	2017.38	2103.40	2177.81	2226.63	2287.86	2325.06
UnitedHealthcare	Alliance	HMO F	500.71	545.22	562.23	579.25	597.58	615.90	634.88	654.52	654.52	654.52	654.52	657.14	670.23	685.94	711.46	732.41	742.88	758.59	774.30	784.11	794.59	799.82	805.06	810.30	815.53	826.00	836.48	852.19	867.24	888.18	914.36	945.13	981.78	1023.01	1070.14	1116.61	1168.97	1220.68	1277.62	1335.22	1397.40	1459.58	1527.00	1595.07	1667.72	1703.72	1776.37	1839.20	1880.44	1932.14	1963.56
UnitedHealthcare	Alliance	HMO G	513.46	559.10	576.55	594.00	612.80	631.59	651.05	671.19	671.19	671.19	671.19	673.87	687.30	703.41	729.58	751.06	761.80	777.91	794.02	804.09	814.82	820.19	825.56	830.93	836.30	847.04	857.78	873.89	889.33	910.80	937.65	969.20	1006.79	1049.07	1097.40	1145.05	1198.75	1251.77	1310.16	1369.23	1432.99	1496.75	1565.89	1635.69	1710.19	1747.11	1821.61	1886.04	1928.33	1981.35	2013.57
UnitedHealthcare	Alliance	HMO N	521.75	568.12	585.86	603.59	622.68	641.78	661.56	682.02	682.02	682.02	682.02	684.75	698.39	714.76	741.36	763.18	774.09	790.46	806.83	817.06	827.97	833.43	838.88	844.34	849.80	860.71	871.62	887.99	903.68	925.50	952.78	984.84	1023.03	1066.00	1115.10	1163.53	1218.09	1271.97	1331.30	1391.32	1456.11	1520.90	1591.15	1662.08	1737.79	1775.30	1851.00	1916.48	1959.44	2013.32	2046.06
Western Health	Full	HMO B	464.61	505.91	521.70	537.49	554.49	571.50	589.11	607.33	607.33	607.33	607.33	609.76	621.91	636.48	660.17	679.60	689.32	703.90	718.47	727.58	737.30	742.16	747.02	751.88	756.73	766.45	776.17	790.75	804.71	824.15	848.44	876.99	911.00	949.26	992.99	1036.11	1084.69	1132.67	1185.51	1238.96	1296.65	1354.35	1416.90	1480.07	1547.48	1580.88	1648.30	1706.60	1744.86	1792.84	1821.99
Western Health	Full	HMO C	459.94	500.82	516.45	532.08	548.92	565.75	583.19	601.22	601.22	601.22	601.22	603.63	615.65	630.08	653.53	672.77	682.39	696.82	711.25	720.27	729.89	734.70	739.51	744.32	749.13	758.75	768.36	782.79	796.62	815.86	839.91	868.17	901.84	939.71	983.00	1025.69	1073.79	1121.28	1173.59	1226.50	1283.61	1340.73	1402.66	1465.18	1531.92	1564.99	1631.72	1689.44	1727.32	1774.81	1803.66
Western Health	Full	HMO D	434.40	473.01	487.78	502.54	518.44	534.34	550.81	567.84	567.84	567.84	567.84	570.11	581.47	595.10	617.24	635.42	644.50	658.13	671.76	680.28	689.36	693.90	698.45	702.99	707.53	716.62	725.70	739.33	752.39	770.56	793.28	819.96	851.76	887.54	928.42	968.74	1014.17	1059.03	1108.43	1158.40	1212.34	1266.29	1324.78	1383.83	1446.86	1478.09	1541.12	1595.64	1631.41	1676.27	1703.52

Health Care Service Plan rates will vary by county

THE INFORMATION PROVIDED HEREIN, INCLUDING THE RATING INFORMATION IS PROVIDED ON TO YOU ON AN "AS IS" "AS AVAILABLE" BASIS WITHOUT WARRANTY OF ANY KIND, EXPRESS OR IMPLIED. WE FURTHER DISCLAIM ALL LIABILITY RELATED TO THE INFORMATION, INCLUDING THOSE CAUSED BY RATING DISCREPANCIES. FINAL RATES AND RATING AREAS ARE BASED UPON ACTUAL ENROLLMENT AND UNDERWRITING AND MUST BE APPROVED BY THE APPLICABLE INSURANCE CARRIER.

USE EMPLOYER ZIP CODE FOR RATING | AREA 12 | 02/01/27 - 03/01/27

Bronze		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																																																	
Anthem Blue Cross	Prudent Buyer - Small Group	PPO A	399.57	435.09	448.67	462.25	476.88	491.50	506.65	522.32	522.32	522.32	522.32	524.41	534.86	547.39	567.76	584.48	592.83	605.37	617.90	625.74	634.10	638.28	642.45	646.63	650.81	659.17	667.52	680.06	692.07	708.79	729.68	754.23	783.48	816.39	853.99	891.08	932.86	974.13	1019.57	1065.53	1115.15	1164.77	1218.57	1272.89	1330.87	1359.60	1417.58	1467.72	1500.63	1541.89	1566.96
Anthem Blue Cross	Select PPO	PPO B	384.63	418.82	431.89	444.96	459.04	473.12	487.70	502.78	502.78	502.78	502.78	504.79	514.85	526.91	546.52	562.61	570.66	582.72	594.79	602.33	610.37	614.40	618.42	622.44	626.46	634.51	642.55	654.62	666.18	682.27	702.38	726.01	754.17	785.85	822.05	857.74	897.97	937.68	981.43	1025.67	1073.44	1121.20	1172.99	1225.27	1281.08	1308.74	1364.54	1412.81	1444.49	1484.21	1508.34
Anthem Blue Cross	Prudent Buyer - Small Group	PPO C	399.07	434.54	448.11	461.67	476.28	490.88	506.01	521.66	521.66	521.66	521.66	523.75	534.18	546.70	567.04	583.74	592.08	604.60	617.12	624.95	633.30	637.47	641.64	645.82	649.99	658.33	666.68	679.20	691.20	707.89	728.76	753.28	782.49	815.35	852.91	889.95	931.68	972.90	1018.28	1064.19	1113.74	1163.30	1217.03	1271.29	1329.19	1357.88	1415.79	1465.86	1498.73	1539.94	1564.98
Anthem Blue Cross	Select PPO	PPO D	384.12	418.27	431.32	444.38	458.44	472.49	487.06	502.12	502.12	502.12	502.12	504.13	514.17	526.22	545.80	561.87	569.91	581.96	594.01	601.54	609.57	613.59	617.61	621.62	625.64	633.68	641.71	653.76	665.31	681.38	701.46	725.06	753.18	784.81	820.97	856.62	896.79	936.45	980.14	1024.32	1072.03	1119.73	1171.45	1223.67	1279.40	1307.02	1362.75	1410.96	1442.59	1482.26	1506.36
Kaiser Permanente	Full	HMO A	306.70	332.69	342.63	352.57	363.28	359.71	370.79	382.26	382.26	382.26	382.26	383.79	391.44	400.61	415.52	427.75	433.87	443.04	452.22	457.95	464.07	467.12	470.18	473.24	476.30	482.41	488.53	497.71	506.50	518.73	534.02	551.99	573.39	597.48	625.00	652.14	682.72	712.92	746.18	779.81	816.13	852.44	891.82	931.57	974.00	995.03	1037.46	1074.16	1098.24	1128.44	1146.78
Kaiser Permanente	Full	HMO C	298.22	323.46	333.11	342.76	353.15	349.27	360.04	371.17	371.17	371.17	371.17	372.66	380.08	388.99	403.46	415.34	421.28	430.19	439.10	444.66	450.60	453.57	456.54	459.51	462.48	468.42	474.36	483.27	491.80	503.68	518.53	535.97	556.76	580.14	606.87	633.22	662.91	692.24	724.53	757.19	792.45	827.71	865.95	904.55	945.75	966.16	1007.36	1042.99	1066.38	1095.70	1113.51
Sharp Health Plan	Premier	HMO A	272.80	297.05	306.32	315.59	325.58	335.56	345.90	356.60	356.60	356.60	356.60	358.03	365.16	373.72	387.62	399.04	404.74	413.30	421.86	427.21	432.91	435.77	438.62	441.47	444.32	450.03	455.73	464.29	472.50	483.91	498.17	514.93	534.90	557.37	583.04	608.36	636.89	665.06	696.08	727.46	761.34	795.22	831.95	869.03	908.62	928.23	967.81	1002.05	1024.51	1052.68	1069.80
Sharp Health Plan	Performance	HMO B	291.24	317.12	327.02	336.92	347.58	358.24	369.28	380.70	380.70	380.70	380.70	382.22	389.84	398.97	413.82	426.00	432.09	441.23	450.37	456.08	462.17	465.22	468.26	471.31	474.35	480.44	486.53	495.67	504.43	516.61	531.84	549.73	571.05	595.03	622.44	649.47	679.93	710.01	743.13	776.63	812.79	848.96	888.17	927.77	970.02	990.96	1033.22	1069.77	1093.75	1123.83	1142.10
Sutter Health Plan	Sutter Health Plan	HMO A	437.33	476.20	491.06	505.93	521.93	537.94	554.52	571.68	571.68	571.68	571.68	573.95	585.39	599.11	621.40	639.70	648.84	662.56	676.28	684.86	694.00	698.58	703.15	707.72	712.30	721.44	730.59	744.31	757.46	775.75	798.62	825.49	857.50	893.52	934.68	975.26	1021.00	1066.16	1115.89	1166.20	1220.51	1274.82	1333.70	1393.15	1456.61	1488.05	1551.50	1606.38	1642.40	1687.56	1714.99
Sutter Health Plan	Sutter Health Plan	HMO B	437.54	476.43	491.30	506.18	522.19	538.20	554.79	571.96	571.96	571.96	571.96	574.24	585.68	599.40	621.71	640.01	649.16	662.89	676.62	685.20	694.35	698.92	703.50	708.07	712.65	721.80	730.95	744.68	757.83	776.14	799.01	825.89	857.92	893.96	935.14	975.75	1021.50	1066.69	1116.44	1166.78	1221.11	1275.45	1334.36	1393.84	1457.33	1488.78	1552.27	1607.18	1643.21	1688.39	1715.84
Western Health	Full	HMO B	316.71	344.87	355.63	366.39	377.99	389.58	401.59	414.01	414.01	414.01	414.01	415.66	423.94	433.88	450.02	463.27	469.90	479.83	489.77	495.98	502.60	505.91	509.23	512.54	515.85	522.47	529.10	539.03	548.56	561.81	578.37	597.82	621.01	647.09	676.90	706.29	739.41	772.12	808.14	844.57	883.90	923.23	965.87	1008.93	1054.89	1077.66	1123.61	1163.36	1189.44	1222.14	1242.02
Western Health	Full	HMO C	330.55	359.93	371.17	382.40	394.50	406.60	419.13	432.09	432.09	432.09	432.09	433.82	442.46	452.83	469.68	483.51	490.42	500.79	511.16	517.64	524.56	528.01	531.47	534.93	538.38	545.30	552.21	562.58	572.52	586.35	603.63	623.94	648.13	675.36	706.47	737.15	771.71	805.85	843.44	881.46	922.51	963.56	1008.07	1053.00	1100.97	1124.73	1172.69	1214.17	1241.39	1275.53	1296.27

Silver		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																																																	
Anthem Blue Cross	Select HMO	HMO A	329.34	358.61	369.81	381.00	393.06	405.11	417.59	430.51	430.51	430.51	430.51	432.23	440.84	451.17	467.96	481.74	488.63	498.96	509.29	515.75	522.64	526.08	529.53	532.97	536.42	543.30	550.19	560.52	570.43	584.20	601.42	621.66	645.77	672.89	703.88	734.45	768.89	802.90	840.36	878.24	919.14	960.04	1004.38	1049.15	1096.94	1120.62	1168.40	1209.73	1236.86	1270.87	1291.53
Anthem Blue Cross	CaliforniaCare HMO	HMO B	387.39	421.82	434.99	448.16	462.33	476.51	491.20	506.39	506.39	506.39	506.39	508.42	518.54	530.70	550.45	566.65	574.75	586.91	599.06	606.66	614.76	618.81	622.86	626.91	630.96	639.06	647.17	659.32	670.97	687.17	707.43	731.23	759.59	791.49	827.95	863.90	904.41	944.42	988.47	1033.04	1081.14	1129.25	1181.41	1234.07	1290.28	1318.13	1374.34	1422.96	1454.86	1494.86	1519.17
Anthem Blue Cross	CaliforniaCare HMO	HMO D	386.88	421.26	434.41	447.56	461.72	475.88	490.55	505.72	505.72	505.72	505.72	507.74	517.86	529.99	549.72	565.90	573.99	586.13	598.27	605.85	613.94	617.99	622.04	626.08	630.13	638.22	646.31	658.45	670.08	686.26	706.49	730.26	758.58	790.44	826.85	862.76	903.22	943.17	987.17	1031.67	1079.71	1127.76	1179.84	1232.44	1288.57	1316.39	1372.52	1421.07	1452.93	1492.89	1517.16
Anthem Blue Cross	Select PPO	PPO B	414.84	451.72	465.82	479.92	495.10	510.29	526.01	542.28	542.28	542.28	542.28	544.45	555.29	568.31	589.46	606.81	615.49	628.50	641.52	649.65	658.33	662.67	667.00	671.34	675.68	684.36	693.03	706.05	718.52	735.87	757.57	783.05	813.42	847.58	886.63	925.13	968.51	1011.35	1058.53	1106.25	1157.77	1209.28	1265.14	1321.54	1381.73	1411.55	1471.75	1523.81	1557.97	1600.81	1626.84
Anthem Blue Cross	Prudent Buyer - Small Group	PPO C	430.94	469.25	483.89	498.54	514.31	530.08	546.42	563.32	563.32	563.32	563.32	565.57	576.84	590.36	612.33	630.36	639.37	652.89	666.41	674.86	683.87	688.38	692.88	697.39	701.90	710.91	719.92	733.44	746.40	764.43	786.96	813.43	844.98	880.47	921.03	961.02	1006.09	1050.59	1099.60	1149.17	1202.69	1256.20	1314.23	1372.81	1435.34	1466.32	1528.85	1582.93	1618.42	1662.92	1689.96
Anthem Blue Cross	Prudent Buyer - Small Group	PPO D	417.83	454.97	469.17	483.37	498.66	513.96	529.79	546.18	546.18	546.18	546.18	548.36	559.29	572.40	593.70	611.18	619.91	633.02	646.13	654.32	663.06	667.43	671.80	676.17	680.54	689.28	698.02	711.13	723.69	741.17	763.01	788.68	819.27	853.68	893.00	931.78	975.48	1018.63	1066.14	1114.21	1166.09	1217.98	1274.24	1331.04	1391.67	1421.71	1482.33	1534.77	1569.18	1612.32	1638.54
Anthem Blue Cross	Select PPO	PPO E	402.24	437.99	451.66	465.33	480.06	494.78	510.03	525.80	525.80	525.80	525.80	527.90	538.42	551.04	571.54	588.37	596.78	609.40	622.02	629.91	638.32	642.53	646.73	650.94	655.15	663.56	671.97	684.59	696.69	713.51	734.54	759.26	788.70	821.83	859.68	897.01	939.08	980.62	1026.36	1072.63	1122.58	1172.53	1226.69	1281.37	1339.74	1368.66	1427.02	1477.50	1510.62	1552.16	1577.40
Anthem Blue Cross	Prudent Buyer - Small Group	PPO F	432.73	471.19	485.90	500.61	516.45	532.29	548.69	565.66	565.66	565.66	565.66	567.92	579.24	592.81	614.87	632.97	642.02	655.60	669.18	677.66	686.71	691.24	695.76	700.29	704.81	713.86	722.91	736.49	749.50	767.60	790.23	816.81	848.49	884.13	924.85	965.02	1010.27	1054.96	1104.17	1153.95	1207.68	1261.42	1319.68	1378.51	1441.30	1472.41	1535.20	1589.50	1625.14	1669.83	1696.98
Kaiser Permanente	Full	HMO A	334.41	362.86	373.74	384.62	396.34	393.79	405.92	418.48	418.48	418.48	418.48	420.15	428.52	438.57	454.89	468.28	474.97	485.02	495.06	501.34	508.03	511.38	514.73	518.08	521.42	528.12	534.82	544.86	554.48	567.88	584.61	604.28	627.72	654.08	684.21	713.92	747.40	780.46	816.87	853.70	893.45	933.21	976.31	1019.83	1066.28	1089.30	1135.75	1175.92	1202.29	1235.35	1255.44
Kaiser Permanente	Full	HMO B	338.81	367.66	378.69	389.72	401.60	399.21	411.51	424.24	424.24	424.24	424.24	425.94	434.42	444.60	461.15	474.72	481.51	491.69	501.88	508.24	515.03	518.42	521.81	525.21	528.60	535.39	542.18	552.36	562.12	575.69	592.66	612.60	636.36	663.09	693.63	723.75	757.69	791.21	828.12	865.45	905.75	946.05	989.75	1033.87	1080.96	1104.30	1151.39	1192.11	1218.84	1252.36	1272.72
Kaiser Permanente	Full	HMO C	336.41	365.04	375.99	386.94	398.73	396.25	408.46	421.09	421.09	421.09	421.09	422.78	431.20	441.31	457.73	471.20	477.94	488.05	498.15	504.47	511.21	514.58	517.95	521.31	524.68	531.42	538.16	548.26	557.95	571.42	588.27	608.06	631.64	658.17	688.49	718.39	752.07	785.34	821.98	859.03	899.04	939.04	982.41	1026.21	1072.95	1096.11	1142.85	1183.27	1209.80	1243.07	1263.27
Kaiser Permanente	Full	HMO D	309.10	335.30	345.32	355.34	366.13	362.66	373.83	385.39	385.39	385.39	385.39	386.94	394.64	403.89	418.92	431.26	437.42	446.67	455.92	461.70	467.87	470.95	474.03	477.12	480.20	486.37	492.53	501.78	510.65	522.98	538.40	556.51	578.09	602.37	630.12	657.48	688.31	718.76	752.29	786.20	822.82	859.43	899.12	939.21	981.98	1003.18	1045.96	1082.96	1107.24	1137.68	1156.17
Kaiser Permanente	Full	HMO E	322.26	349.64	360.11	370.58	381.85	378.85	390.53	402.61	402.61	402.61	402.61	404.22	412.27	421.93	437.63	450.52	456.96	466.62	476.28	482.32	488.76	491.98	495.20	498.43	501.65	508.09	514.53	524.19	533.45	546.34	562.44	581.36	603.91	629.27	658.26	686.85	719.05	750.86	785.89	821.32	859.56	897.81	939.28	981.15	1025.84	1047.98	1092.67	1131.32	1156.69	1188.49	1207.83
Sharp Health Plan	Premier	HMO A	285.29	310.65	320.35	330.04	340.49	350.93	361.74	372.93	372.93	372.93	372.93	374.42	381.88	390.83	405.37	417.31	423.28	432.23	441.18	446.77	452.74	455.72	458.70	461.69	464.67	470.64	476.60	485.55	494.13	506.07	520.98	538.51	559.40	582.89	609.74	636.22	666.05	695.51	727.96	760.78	796.21	831.63	870.05	908.83	950.23	970.74	1012.13	1047.93	1071.43	1100.89	1118.79
Sharp Health Plan	Performance	HMO B	294.75	320.95	330.96	340.98	351.77	362.56	373.73	385.29	385.29	385.29	385.29	386.83	394.54	403.78	418.81	431.14	437.30	446.55	455.80	461.58	467.74	470.82	473.91	476.99	480.07	486.24	492.40	501.65	510.51	522.84	538.25	556.36	577.94	602.21	629.95	657.30	688.13	718.57	752.09	785.99	822.59	859.20	898.88	938.95	981.72	1002.91	1045.68	1082.66	1106.94	1137.38	1155.87
Sharp Health Plan	Premier	HMO C	268.76	292.65	301.78	310.92	320.76	330.59	340.78	351.32	351.32	351.32	351.32	352.73	359.75	368.18	381.88	393.13	398.75	407.18	415.61	420.88	426.50	429.31	432.12	434.93	437.74	443.37	448.99	457.42	465.50	476.74	490.79	507.31	526.98	549.11	574.41	599.35	627.46	655.21	685.78	716.69	750.07	783.44	819.63	856.17	895.16	914.49	953.48	987.21	1009.34	1037.10	1053.96
Sutter Health Plan	Sutter Health Plan	HMO B	534.61	582.13	600.30	618.47	638.04	657.61	677.87	698.85	698.85	698.85	698.85	701.63	715.61	732.38	759.64	782.00	793.18	809.95	826.72	837.21	848.39	853.98	859.57	865.16	870.75	881.93	893.11	909.89	925.96	948.32	976.28	1009.12	1048.26	1092.28	1142.60	1192.22	1248.12	1303.33	1364.13	1425.63	1492.02	1558.41	1630.39	1703.07	1780.64	1819.07	1896.65	1963.73	2007.76	2062.97	2096.50
Sutter Health Plan	Sutter Health Plan	HMO C	463.03	504.19	519.93	535.66	552.61	569.56	587.11	605.28	605.28	605.28	605.28	607.69	619.80	634.32	657.93	677.30	686.98	701.51	716.03	725.11	734.80	739.64	744.48	749.32	754.17	763.85	773.53	788.06	801.98	821.35	845.56	874.01	907.90	946.04	989.62	1032.59	1081.01	1128.83	1181.49	1234.75	1292.25	1349.75	1412.09	1475.04	1542.23	1575.52	1642.70	1700.81	1738.94	1786.76	1815.80
UnitedHealthcare	SignatureValue	HMO A	404.16	440.08	453.82	467.55	482.35	497.14	512.46	528.31	528.31	528.31	528.31	530.42	540.99	553.67	574.27	591.18	599.63	612.31	624.99	632.92	641.37	645.59	649.82	654.05	658.27	666.73	675.18	687.86	700.01	716.92	738.05	762.88	792.47	825.75	863.79	901.30	943.56	985.30	1031.26	1077.75	1127.94	1178.13	1232.55	1287.49	1346.13	1375.19	1433.83	1484.55	1517.83	1559.57	1584.93
UnitedHealthcare	Alliance	HMO E	354.85	386.39	398.45	410.51	423.50	436.48	449.93	463.85	463.85	463.85	463.85	465.71	474.98	486.11	504.20	519.05	526.47	537.60	548.73	555.69	563.11	566.82	570.54	574.25	577.96	585.38	592.80	603.93	614.60	629.44	648.00	669.80	695.78	725.00	758.39	791.33	828.44	865.08	905.44	946.25	990.32	1034.39	1082.16	1130.40	1181.89	1207.40	1258.89	1303.42	1332.64	1369.29	1391.55
Western Health	Full	HMO B	362.81	395.06	407.40	419.73	433.01	446.29	460.04	474.27	474.27	474.27	474.27	476.16	485.65	497.03	515.53	530.71	538.29	549.68	561.06	568.17	575.76	579.56	583.35	587.14	590.94	598.53	606.11	617.50	628.40	643.58	662.55	684.84	711.40	741.28	775.43	809.10	847.04	884.51	925.77	967.51	1012.56	1057.62	1106.47	1155.79	1208.43	1234.52	1287.16	1332.69	1362.57	1400.04	1422.80
Western Health	Full	HMO C	342.86	373.34	384.99	396.64	409.19	421.74	434.74	448.18	448.18	448.18	448.18	449.98	458.94	469.70	487.18	501.52	508.69	519.45	530.20	536.93	544.10	547.68	551.27	554.85	558.44	565.61	572.78	583.54	593.84	608.19	626.11	647.18	672.28	700.51	732.78	764.60	800.46	835.86	874.86	914.30	956.87	999.45	1045.62	1092.23	1141.97	1166.63	1216.37	1259.40	1287.64	1323.04	1344.54
Western Health	Full	HMO D	330.78	360.19	371.43	382.67	394.78	406.88	419.42	432.40	432.40	432.40	432.40	434.12	442.77	453.15	470.01	483.85	490.77	501.15	511.52	518.01	524.93	528.39	531.85	535.31	538.76	545.68	552.60	562.98	572.92	586.76	604.06	624.38	648.59	675.83	706.97	737.67	772.26	806.42	844.04	882.09	923.16	964.24	1008.78	1053.75	1101.74	1125.52	1173.52	1215.03	1242.27	1276.43	1297.19

Health Care Service Plan rates will vary by county

THE INFORMATION PROVIDED HEREIN, INCLUDING THE RATING INFORMATION IS PROVIDED ON TO YOU ON AN "AS IS" "AS AVAILABLE" BASIS WITHOUT WARRANTY OF ANY KIND, EXPRESS OR IMPLIED. WE FURTHER DISCLAIM ALL LIABILITY RELATED TO THE INFORMATION, INCLUDING THOSE CAUSED BY RATING DISCREPANCIES. FINAL RATES AND RATING AREAS ARE BASED UPON ACTUAL ENROLLMENT AND UNDERWRITING AND MUST BE APPROVED BY THE APPLICABLE INSURANCE CARRIER.

Continued

Gold

CARRIER	NETWORK	PLAN	0-14	15	16	17	18	19	20	21	22	23	24	25	26
Anthem Blue Cross	Select HMO	HMO A	422.20	459.73	474.08	488.43	503.88	519.34	535.34	551.90	551.90	551.90	551.90	554.11	565.15
Anthem Blue Cross	CaliforniaCare HMO	HMO B	496.62	540.76	557.64	574.52	592.69	610.87	629.69	649.17	649.17	649.17	649.17	651.77	664.75
Anthem Blue Cross	Priority Select HMO	HMO C	470.58	512.41	528.41	544.40	561.62	578.85	596.69	615.14	615.14	615.14	615.14	617.60	629.90
Anthem Blue Cross	Select PPO	PPO B	491.09	534.74	551.44	568.13	586.10	604.07	622.69	641.95	641.95	641.95	641.95	644.52	657.36
Anthem Blue Cross	Select PPO	PPO C	506.68	551.72	568.94	586.16	604.71	623.25	642.46	662.33	662.33	662.33	662.33	664.98	678.23
Anthem Blue Cross	Select PPO	PPO D	487.51	530.85	547.41	563.98	581.83	599.67	618.15	637.27	637.27	637.27	637.27	639.82	652.56
Anthem Blue Cross	Prudent Buyer - Small Group	PPO E	526.37	573.16	591.05	608.94	628.21	647.47	667.43	688.07	688.07	688.07	688.07	690.82	704.58
Anthem Blue Cross	Prudent Buyer - Small Group	PPO H	506.50	551.52	568.74	585.95	604.49	623.03	642.23	662.09	662.09	662.09	662.09	664.74	677.98
Anthem Blue Cross	Prudent Buyer - Small Group	PPO I	513.95	559.63	577.10	594.57	613.38	632.19	651.68	671.83	671.83	671.83	671.83	674.52	687.95
Kaiser Permanente	Full	HMO B	401.94	436.40	449.58	462.75	476.94	476.86	491.56	506.76	506.76	506.76	506.76	508.79	518.92
Kaiser Permanente	Full	HMO C	413.53	449.02	462.59	476.16	490.77	491.11	506.25	521.90	521.90	521.90	521.90	523.99	534.43
Kaiser Permanente	Full	HMO D	390.43	423.87	436.65	449.44	463.20	462.70	476.96	491.71	491.71	491.71	491.71	493.68	503.51
Kaiser Permanente	Full	HMO E	349.20	378.98	390.36	401.74	414.00	411.99	424.69	437.82	437.82	437.82	437.82	439.57	448.33
Kaiser Permanente	Full	HMO F	398.59	432.75	445.82	458.88	472.95	472.74	487.31	502.38	502.38	502.38	502.38	504.39	514.44
Sharp Health Plan	Performance	HMO A	366.15	398.70	411.14	423.59	436.99	450.39	464.27	478.63	478.63	478.63	478.63	480.54	490.12
Sharp Health Plan	Premier	HMO B	345.92	376.67	388.42	400.18	412.84	425.50	438.61	452.18	452.18	452.18	452.18	453.99	463.03
Sharp Health Plan	Performance	HMO D	377.08	410.59	423.41	436.23	450.03	463.83	478.12	492.91	492.91	492.91	492.91	494.88	504.74
Sutter Health Plan	Sutter Health Plan	HMO A	585.66	637.72	657.63	677.53	698.97	720.40	742.60	765.58	765.58	765.58	765.58	768.63	783.94
Sutter Health Plan	Sutter Health Plan	HMO B	628.18	684.02	705.37	726.72	749.71	772.71	796.52	821.16	821.16	821.16	821.16	824.44	840.86
Sutter Health Plan	Sutter Health Plan	HMO C	533.72	581.16	599.30	617.44	636.97	656.51	676.74	697.68	697.68	697.68	697.68	700.46	714.41
UnitedHealthcare	SignatureValue	HMO A	442.48	481.82	496.85	511.89	528.09	544.28	561.06	578.41	578.41	578.41	578.41	580.72	592.29
UnitedHealthcare	Alliance	HMO B	388.50	423.03	436.23	449.44	463.66	477.88	492.60	507.84	507.84	507.84	507.84	509.87	520.03
UnitedHealthcare	SignatureValue	HMO C	473.73	515.84	531.94	548.04	565.38	582.71	600.67	619.25	619.25	619.25	619.25	621.73	634.11
UnitedHealthcare	Alliance	HMO D	415.92	452.89	467.03	481.17	496.39	511.61	527.38	543.69	543.69	543.69	543.69	545.86	556.74
UnitedHealthcare	SignatureValue	HMO F	489.99	533.54	550.20	566.85	584.79	602.72	621.29	640.51	640.51	640.51	640.51	643.07	655.88
UnitedHealthcare	Alliance	HMO G	430.21	468.45	483.08	497.70	513.44	529.19	545.50	562.37	562.37	562.37	562.37	564.62	575.87
UnitedHealthcare	SignatureValue	HMO H	459.19	500.01	515.61	531.22	548.03	564.84	582.24	600.25	600.25	600.25	600.25	602.65	614.66
UnitedHealthcare	Alliance	HMO J	403.16	439.00	452.70	466.40	481.16	495.92	511.20	527.01	527.01	527.01	527.01	529.12	539.66
Western Health	Full	HMO A	406.47	442.60	456.41	470.23	485.10	499.98	515.39	531.33	531.33	531.33	531.33	533.45	544.08
Western Health	Full	HMO B	426.53	464.44	478.93	493.43	509.04	524.65	540.82	557.55	557.55	557.55	557.55	559.78	570.93
Western Health	Full	HMO C	397.43	432.76	446.27	459.77	474.32	488.87	503.93	519.52	519.52	519.52	519.52	521.60	531.99
Western Health	Full	HMO D	382.67	416.69	429.69	442.70	456.70	470.71	485.22	500.22	500.22	500.22	500.22	502.22	512.23

CARRIER	NETWORK	PLAN	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45
Anthem Blue Cross	Select HMO	HMO A	578.39	599.92	617.58	626.41	639.65	652.90	661.18	670.01	674.42	678.84	683.25	687.67	696.50	705.33	718.57	731.27	748.93	771.00	796.94
Anthem Blue Cross	CaliforniaCare HMO	HMO B	680.33	705.65	726.42	736.81	752.39	767.97	777.71	788.09	793.29	798.48	803.67	808.87	819.25	829.64	845.22	860.15	880.92	906.89	937.40
Anthem Blue Cross	Priority Select HMO	HMO C	644.67	668.66	688.34	698.18	712.95	727.71	736.94	746.78	751.70	756.62	761.54	766.46	776.31	786.15	800.91	815.06	834.74	859.35	888.26
Anthem Blue Cross	Select PPO	PPO B	672.76	697.80	718.34	728.61	744.02	759.43	769.06	779.33	784.46	789.60	794.73	799.87	810.14	820.41	835.82	850.58	871.13	896.80	926.98
Anthem Blue Cross	Select PPO	PPO C	694.12	719.95	741.15	751.74	767.64	783.54	793.47	804.07	809.37	814.67	819.96	825.26	835.86	846.46	862.35	877.59	898.78	925.28	956.40
Anthem Blue Cross	Select PPO	PPO D	667.86	692.71	713.11	723.30	738.60	753.89	763.45	773.65	778.74	783.84	788.94	794.04	804.23	814.43	829.73	844.38	864.78	890.27	920.22
Anthem Blue Cross	Prudent Buyer - Small Group	PPO E	721.10	747.93	769.95	780.96	797.47	813.99	824.31	835.32	840.82	846.33	851.83	857.34	868.34	879.35	895.87	911.69	933.71	961.23	993.57
Anthem Blue Cross	Prudent Buyer - Small Group	PPO H	693.87	719.69	740.88	751.47	767.36	783.25	793.18	803.78	809.07	814.37	819.67	824.96	835.56	846.15	862.04	877.27	898.46	924.94	956.06
Anthem Blue Cross	Prudent Buyer - Small Group	PPO I	704.08	730.28	751.78	762.53	778.65	794.77	804.85	815.60	820.98	826.35	831.73	837.10	847.85	858.60	874.72	890.17	911.67	938.55	970.12
Kaiser Permanente	Full	HMO B	531.08	550.85	567.06	575.17	587.33	599.50	607.10	615.21	619.26	623.31	627.37	631.42	639.53	647.64	659.80	671.46	687.67	707.94	731.76
Kaiser Permanente	Full	HMO C	546.96	567.31	584.01	592.36	604.89	617.41	625.24	633.59	637.77	641.94	646.12	650.29	658.64	666.99	679.52	691.52	708.23	729.10	753.63
Kaiser Permanente	Full	HMO D	515.32	534.49	550.23	558.10	569.90	581.70	589.07	596.94	600.87	604.81	608.74	612.68	620.54	628.41	640.21	651.52	667.26	686.92	710.03
Kaiser Permanente	Full	HMO E	458.84	475.91	489.92	496.93	507.44	517.94	524.51	531.52	535.02	538.52	542.02	545.53	552.53	559.54	570.04	580.11	594.13	611.64	632.22
Kaiser Permanente	Full	HMO F	526.50	546.09	562.17	570.20	582.26	594.32	601.85	609.89	613.91	617.93	621.95	625.97	634.01	642.04	654.10	665.66	681.73	701.83	725.44
Sharp Health Plan	Performance	HMO A	501.60	520.27	535.59	543.25	554.73	566.22	573.40	581.06	584.89	588.71	592.54	596.37	604.03	611.69	623.18	634.18	649.50	668.65	691.14
Sharp Health Plan	Premier	HMO B	473.88	491.52	505.99	513.22	524.08	534.93	541.71	548.95	552.56	556.18	559.80	563.42	570.65	577.89	588.74	599.14	613.61	631.70	652.95
Sharp Health Plan	Performance	HMO D	516.57	535.79	551.57	559.45	571.28	583.11	590.51	598.39	602.34	606.28	610.22	614.17	622.05	629.94	641.77	653.11	668.88	688.60	711.76
Sutter Health Plan	Sutter Health Plan	HMO A	802.32	832.18	856.67	868.92	887.30	905.67	917.15	929.40	935.53	941.65	947.78	953.90	966.15	978.40	996.77	1014.38	1038.88	1069.50	1105.48
Sutter Health Plan	Sutter Health Plan	HMO B	860.57	892.59	918.87	932.01	951.72	971.42	983.74	996.88	1003.45	1010.02	1016.59	1023.16	1036.30	1049.43	1069.14	1088.03	1114.31	1147.15	1185.75
Sutter Health Plan	Sutter Health Plan	HMO C	731.16	758.37	780.69	791.86	808.60	825.34	835.81	846.97	852.55	858.13	863.72	869.30	880.46	891.62	908.37	924.41	946.74	974.64	1007.43
UnitedHealthcare	SignatureValue	HMO A	606.17	628.73	647.24	656.50	670.38	684.26	692.94	702.19	706.82	711.44	716.07	720.70	729.95	739.21	753.09	766.39	784.90	808.04	835.22
UnitedHealthcare	Alliance	HMO B	532.22	552.02	568.27	576.40	588.59	600.77	608.39	616.52	620.58	624.64	628.71	632.77	640.89	649.02	661.21	672.89	689.14	709.45	733.32
UnitedHealthcare	SignatureValue	HMO C	648.97	673.12	692.94	702.85	717.71	732.57	741.86	751.77	756.72	761.68	766.63	771.59	781.49	791.40	806.26	820.51	840.32	865.09	894.20
UnitedHealthcare	Alliance	HMO D	569.79	590.99	608.39	617.09	630.14	643.19	651.34	660.04	664.39	668.74	673.09	677.44	686.14	694.84	707.88	720.39	737.79	759.53	785.09
UnitedHealthcare	SignatureValue	HMO F	671.25	696.23	716.73	726.98	742.35	757.72	767.33	777.58	782.70	787.83	792.95	798.08	808.32	818.57	833.94	848.68	869.17	894.79	924.90
UnitedHealthcare	Alliance	HMO G	589.36	611.30	629.29	638.29	651.79	665.28	673.72	682.72	687.22	691.72	696.21	700.71	709.71	718.71	732.21	745.14	763.14	785.63	812.06
UnitedHealthcare	SignatureValue	HMO H	629.06	652.47	671.68	681.28	695.69	710.10	719.10	728.70	733.51	738.31	743.11	747.91	757.52	767.12	781.53	795.33	814.54	838.55	866.76
UnitedHealthcare	Alliance	HMO J	552.31	572.86	589.72	598.16	610.80	623.45	631.36	639.79	644.01	648.22	652.44	656.65	665.09	673.52	686.17	698.29	715.15	736.23	761.00
Western Health	Full	HMO A	556.83	577.55	594.56	603.06	615.81	628.56	636.53	645.03	649.28	653.53	657.78	662.04	670.54	679.04	691.79	704.01	721.01	742.27	767.24
Western Health	Full	HMO B	584.31	606.06	623.90	632.82	646.20	659.58	667.94	676.86	681.33	685.79	690.25	694.71	703.63	712.55	725.93	738.75	756.59	778.90	805.10
Western Health	Full	HMO C	544.46	564.72	581.34	589.65	602.12	614.59	622.38	630.70	634.85	639.01	643.16	647.32	655.63	663.94	676.41	688.36	704.99	725.77	750.18
Western Health	Full	HMO D	524.23	543.74	559.75	567.75	579.76	591.76	599.27	607.27	611.27	615.27	619.28	623.28	631.28	639.28	651.29	662.79	678.80	698.81	722.32

CARRIER	NETWORK	PLAN	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
Anthem Blue Cross	Select HMO	HMO A	827.85	862.62	902.36	941.54	985.69	1029.29	1077.31	1125.88	1178.31	1230.74	1287.58	1344.98	1406.24	1436.60	1497.86	1550.84	1585.61	1629.21	1655.70
Anthem Blue Cross	CaliforniaCare HMO	HMO B	973.76	1014.65	1061.39	1107.48	1159.42	1210.70	1267.18	1324.31	1385.98	1447.65	1514.51	1582.03	1654.09	1689.79	1761.85	1824.17	1865.07	1916.35	1947.51
Anthem Blue Cross	Priority Select HMO	HMO C	922.71	961.46	1005.75	1049.43	1098.64	1147.24	1200.75	1254.89	1313.32	1371.76	1435.12	1499.10	1567.38	1601.21	1669.49	1728.54	1767.30	1815.89	1845.42
Anthem Blue Cross	Select PPO	PPO B	962.93	1003.37	1049.59	1095.17	1146.52	1197.24	1253.09	1309.58	1370.56	1431.55	1497.67	1564.43	1635.69	1671.00	1742.25	1803.88	1844.32	1895.04	1925.85
Anthem Blue Cross	Select PPO	PPO C	993.50	1035.22	1082.91	1129.93	1182.92	1235.25	1292.87	1351.15	1414.07	1477.00	1545.22	1614.10	1687.62	1724.04	1797.56	1861.15	1902.87	1955.20	1986.99
Anthem Blue Cross	Select PPO	PPO D	955.91	996.05	1041.94	1087.18	1138.16	1188.51	1243.95	1300.03	1360.57	1421.11	1486.75	1553.03	1623.76	1658.81	1729.55	1790.73	1830.88	1881.22	1911.81
Anthem Blue Cross	Prudent Buyer - Small Group	PPO E	1032.11	1075.45	1124.99	1173.85	1228.89	1283.25	1343.11	1403.66	1469.03	1534.40	1605.27	1676.83	1753.20	1791.05	1867.42	1933.48	1976.83	2031.18	2064.21
Anthem Blue Cross	Prudent Buyer - Small Group	PPO H	993.14	1034.85	1082.52	1129.53	1182.49	1234.80	1292.40	1350.66	1413.56	1476.46	1544.66	1613.51	1687.01	1723.42	1796.91	1860.47	1902.18	1954.49	1986.27
Anthem Blue Cross	Prudent Buyer - Small Group	PPO I	1007.75	1050.07	1098.44	1146.14	1199.89	1252.96	1311.41	1370.53	1434.36	1498.18	1567.38	1637.25	1711.82	1748.77	1823.35	1887.84	1930.17	1983.24	2015.49
Kaiser Permanente	Full	HMO B	760.14	792.07	828.55	864.53	905.07	945.11	989.20	1033.79	1081.93	1130.07	1182.27	1234.97	1291.22	1319.10	1375.35	1424.00	1455.92	1495.96	1520.28
Kaiser Permanente	Full	HMO C	782.86	815.74	853.31	890.37	932.12	973.35	1018.76	1064.69	1114.27	1163.85	1217.60	1271.88	1329.81	1358.52	1416.45	1466.55	1499.43	1540.66	1565.70
Kaiser Permanente	Full	HMO D	737.57	768.55	803.95	838.86	878.20	917.05	959.83	1003.10	1049.81	1096.52	1147.17	1198.31	1252.89	1279.93	1334.51	1381.72	1412.69	1451.54	1475.13
Kaiser Permanente	Full	HMO E	656.73	684.32	715.84	746.93	781.95	816.54	854.63	893.16	934.75	976.34	1021.44	1066.97	1115.57	1139.65	1188.25	1230.28	1257.86	1292.45	1313.46
Kaiser Permanente	Full	HMO F	753.57	785.22	821.40	857.06	897.25	936.94	980.65	1024.86	1072.59	1120.31	1172.06	1224.31	1280.07	1307.70	1363.47	1411.69	1443.34	1483.03	1507.14
Sharp Health Plan	Performance	HMO A	717.95	748.10	782.56	816.54	854.83	892.64	934.29	976.41	1021.88	1067.34	1116.64	1166.42	1219.55	1245.87	1299.00	1344.95	1375.10	1412.92	1435.89
Sharp Health Plan	Premier	HMO B	678.27	706.76	739.31	771.42	807.59	843.32	882.66	922.45	965.40	1008.36	1054.94	1101.96	1152.15	1177.02	1227.22	1270.63	1299.11	1334.84	1356.54
Sharp Health Plan	Performance	HMO D	739.37	770.42	805.91	840.90	880.34	919.28	962.16	1005.54	1052.36	1099.19	1149.96	1201.22	1255.93	1283.04	1337.76	1385.08	1416.13	1455.07	1478.73
Sutter Health Plan	Sutter Health Plan	HMO A	1148.36	1196.59	1251.71	1306.06	1367.31	1427.79	1494.39	1561.76	1634.49	1707.22	1786.08	1865.70	1950.67	1992.78	2077.76	2151.25	2199.48	2259.96	2296.70
Sutter Health Plan	Sutter Health Plan	HMO B	1231.73	1283.46	1342.59	1400.89	1466.58	1531.45	1602.89	1675.15	1753.16	1831.17	1915.75	2001.15	2092.30	2137.46	2228.61	2307.44	2359.17	2424.05	2463.45
Sutter Health Plan	Sutter Health Plan	HMO C	1046.50	1090.46	1140.69	1190.22	1246.04	1301.15	1361.85	1423.25	1489.52	1555.80	1627.66	1700.22	1777.66	1816.03	1893.48	1960.45	2004.40	2059.52	2093.00
UnitedHealthcare	SignatureValue	HMO A	867.62	904.05	945.70	986.77	1033.04	1078.73	1129.06	1179.96	1234.91	1289.85	1349.43	1409.59	1473.79	1505.60	1569.80	1625.33	1661.77	1707.47	1735.23
UnitedHealthcare	Alliance	HMO B	761.76	793.75	830.32	866.38	907.00	947.12	991.30	1035.99	1084.24	1132.48	1184.79	1237.61	1293.98	1321.91	1378.28	1427.03	1459.02	1499.14	1523.52
UnitedHealthcare	SignatureValue	HMO C	928.88	967.89	1012.47	1056.44	1105.98	1154.90	1208.78	1263.27	1322.10	1380.93	1444.71	1509.11	1577.85	1611.91	1680.64	1740.09	1779.11	1828.03	1857.75
UnitedHealthcare	Alliance	HMO D	815.54	849.79	888.93	927.54	971.03	1013.98	1061.28	1109.13	1160.78	1212.43	1268.43	1324.97	1385.32	1415.23	1475.57	1527.77	1562.02	1604.97	1631.07
UnitedHealthcare	SignatureValue	HMO F	960.77	1001.12	1047.23	1092.71	1143.95	1194.55	1250.28	1306.64	1367.49	1428.34	1494.31	1560.92	1632.02	1667.25	1738.34	1799.83	1840.19	1890.79	1921.53
UnitedHealthcare	Alliance	HMO G	843.56	878.98	919.47	959.40	1004.39	1048.82	1097.75	1147.23	1200.66	1254.09	1312.01	1370.50	1432.92	1463.85	1526.27	1580.26	1615.69	1660.12	1687.11
UnitedHealthcare	SignatureValue	HMO H	900.38	938.19	981.41	1024.03	1072.05	1119.47	1171.69	1224.51	1281.53	1338.56	1400.38	1462.81	1529.44	1562.45	1629.08	1686.70	1724.52	1771.94	1800.75
UnitedHealthcare	Alliance	HMO J	790.52	823.72	861.66	899.08	941.24	982.87	1028.72	1075.10	1125.17	1175.23	1229.51	1284.32	1342.82	1371.81	1430.31	1480.90	1514.10	1555.73	1581.03
Western Health	Full	HMO A	796.99	830.47	868.72	906.45	948.95	990.93	1037.15	1083.91	1134.39	1184.86	1239.59	1294.85	1353.83	1383.05	1442.03	1493.03	1526.51	1568.48	1593.99
Western Health	Full	HMO B	836.32	871.45	911.59	951.18	995.78	1039.83	1088.34	1137.40	1190.37	1243.34	1300.76	1358.75	1420.64	1451.30	1513.19	1566.71	1601.84	1645.89	1672.65
Western Health	Full	HMO C	779.28	812.01	849.41	886.30	927.86	968.90	1014.10	1059.82	1109.17	1158.53	1212.04	1266.07	1323.73	1352.31	1409.97	1459.85	1492.58	1533.62	1558.56
Western Health	Full	HMO D	750.33	781.85	817.86	853.38	893.40	932.91	976.43	1020.45	1067.97	1115.50	1167.02	1219.04	1274.57	1302.08	1357.60	1405.62	1437.14	1476.66	1500.66

Platinum

CARRIER	NETWORK	PLAN	0-14	15	16	17	18	19	20	21	22	23	24	25	26
Anthem Blue Cross	Select HMO	HMO A	458.07	498.79	514.36	529.93	546.70	563.46	580.83	598.79	598.79	598.79	598.79	601.19	613.16
Anthem Blue Cross	Vivity	HMO B	537.96	585.78	604.07	622.35	642.04	661.73	682.12	703.22	703.22	703.22	703.22	706.03	720.10
Anthem Blue Cross	Vivity	HMO C	526.74	573.56	591.46	609.37	628.65	647.93	667.89	688.55	688.55	688.55	688.55	691.30	705.08
Anthem Blue Cross	CaliforniaCare HMO	HMO D	538.70	586.58	604.89	623.20	642.92	662.63	683.05	704.18	704.18	704.18	704.18	707.00	721.08
Anthem Blue Cross	Prudent Buyer - Small Group	PPO B	593.84	646.62	666.81	686.99	708.73	730.46	752.97	776.26	776.26	776.26	776.26	779.37	794.89
Kaiser Permanente	Full	HMO A	445.07	483.36	498.00	512.64	528.41	529.91	546.24	563.13	563.13	563.13	563.13	565.39	576.65
Kaiser Permanente	Full	HMO B	433.44	470.70	484.94	499.19	514.53	515.61	531.50	547.93	547.93	547.93	547.93	550.12	561.08
Kaiser Permanente	Full	HMO C	416.33	452.07	465.73	479.40	494.11	494.56	509.80	525.57	525.57	525.57	525.57	527.67	538.18
Sharp Health Plan	Premier	HMO A	387.44	421.88	435.05	448.22	462.40	476.58	491.27	506.46	506.46	506.46	506.46	508.49	518.62
Sharp Health Plan	Performance	HMO B	415.31	452.23	466.34	480.46	495.66	510.86	526.60	542.89	542.89	542.89	542.89	545.06	555.92
Sharp Health Plan	Premier	HMO C	388.91	423.48	436.70	449.92	464.15	478.39	493.13	508.38	508.38	508.38	508.38	510.41	520.58
Sutter Health Plan	Sutter Health Plan	HMO A	682.29	742.94	766.13	789.32	814.29	839.26	865.13	891.89	891.89	891.89	891.89	895.45	913.29
UnitedHealthcare	SignatureValue	HMO A	491.66	535.36	552.07	568.78	586.78	604.77	623.41	642.69	642.69	642.69	642.69	645.26	658.11
UnitedHealthcare	SignatureValue	HMO B	532.52	579.85	597.95	616.05	635.54	655.03	675.22	696.10	696.10	696.10	696.10	698.88	712.81
UnitedHealthcare	Alliance	HMO C	431.67	470.05	484.72	499.39	515.19	530.99	547.35	564.28	564.28	564.28	564.28	566.54	577.82
UnitedHealthcare	SignatureValue	HMO D	511.04	556.46	573.83	591.20	609.90	628.61	647.98	668.02	668.02	668.02	668.02	670.69	684.05
UnitedHealthcare	SignatureValue	HMO E	524.06	570.64	588.45	606.26	625.44	644.62	664.49	685.04	685.04	685.04	685.04	687.78	701.48
UnitedHealthcare	Alliance	HMO F	448.69	488.57	503.82	519.07	535.49	551.92	568.92	586.52	586.52	586.52	586.52	588.87	600.60
UnitedHealthcare	Alliance	HMO G	460.12	501.02	516.65	532.29	549.13	565.97	583.42	601.46	601.46	601.46	601.46	603.87	615.90
UnitedHealthcare	Alliance	HMO N	467.55	509.10	525.00	540.89	558.00	575.11	592.83	611.17	611.17	611.17	611.17	613.61	625.84
Western Health	Full	HMO B	464.61	505.91	521.70	537.49	554.49	571.50	589.11	607.33	607.33	607.33	607.33	609.76	621.91
Western Health	Full	HMO C	459.94	500.82	516.45	532.08	548.92	565.75	583.19	601.22	601.22	601.22	601.22	603.63	615.65
Western Health	Full	HMO D	434.40	473.01	487.78	502.54	518.44	534.34	550.81	567.84	567.84	567.84	567.84	570.11	581.47

CARRIER	NETWORK	PLAN	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45
Anthem Blue Cross	Select HMO	HMO A	627.53	650.88	670.05	679.63	694.00	708.37	717.35	726.93	731.72	736.51	741.30	746.09	755.67	765.25	779.62	793.40	812.56	836.51	864.65
Anthem Blue Cross	Vivity	HMO B	736.97	764.40	786.90	798.15	815.03	831.91	842.46	853.71	859.33	864.96	870.59	876.21	887.46	898.72	915.59	931.77	954.27	982.40	1015.45
Anthem Blue Cross	Vivity	HMO C	721.60	748.45	770.49	781.50	798.03	814.55	824.88	835.90	841.41	846.92	852.42	857.93	868.95	879.97	896.49	912.33	934.36	961.90	994.27
Anthem Blue Cross	CaliforniaCare HMO	HMO D	737.98	765.44	787.98	799.24	816.14	833.04	843.61	854.87	860.51	866.14	871.77	877.41	888.68	899.94	916.84	933.04	955.57	983.74	1016.84
Anthem Blue Cross	Prudent Buyer - Small Group	PPO B	813.52	843.79	868.63	881.06	899.69	918.32	929.96	942.38	948.59	954.80	961.01	967.22	979.64	992.06	1010.69	1028.54	1053.38	1084.44	1120.92
Kaiser Permanente	Full	HMO A	590.16	612.13	630.15	639.16	652.67	666.19	674.63	683.64	688.15	692.66	697.16	701.67	710.68	719.69	733.20	746.15	764.17	786.70	813.17
Kaiser Permanente	Full	HMO B	574.23	595.60	613.14	621.90	635.05	648.20	656.42	665.19	669.57	673.96	678.34	682.72	691.49	700.26	713.41	726.01	743.55	765.46	791.22
Kaiser Permanente	Full	HMO C	550.79	571.29	588.11	596.52	609.13	621.74	629.63	638.04	642.24	646.45	650.65	654.85	663.26	671.67	684.29	696.37	713.19	734.21	758.92
Sharp Health Plan	Premier	HMO A	530.77	550.52	566.73	574.83	586.99	599.14	606.74	614.84	618.89	622.95	627.00	631.05	639.15	647.26	659.41	671.06	687.27	707.52	731.33
Sharp Health Plan	Performance	HMO B	568.95	590.12	607.49	616.18	629.21	642.24	650.38	659.07	663.41	667.75	672.10	676.44	685.13	693.81	706.84	719.33	736.70	758.42	783.93
Sharp Health Plan	Premier	HMO C	532.78	552.61	568.88	577.01	589.21	601.41	609.04	617.17	621.24	625.31	629.37	633.44	641.58	649.71	661.91	673.60	689.87	710.21	734.10
Sutter Health Plan	Sutter Health Plan	HMO A	934.70	969.48	998.02	1012.29	1033.69	1055.10	1068.48	1082.75	1089.88	1097.02	1104.15	1111.29	1125.56	1139.83	1161.23	1181.75	1210.29	1245.96	1287.88
UnitedHealthcare	SignatureValue	HMO A	673.54	698.60	719.17	729.45	744.88	760.30	769.94	780.23	785.37	790.51	795.65	800.79	811.07	821.36	836.78	851.56	872.13	897.84	928.04
UnitedHealthcare	SignatureValue	HMO B	729.51	756.66	778.94	790.07	806.78	823.49	833.93	845.07	850.63	856.20	861.77	867.34	878.48	889.62	906.32	922.33	944.61	972.45	1005.17
UnitedHealthcare	Alliance	HMO C	591.37	613.37	631.43	640.46	654.00	667.54	676.01	685.04	689.55	694.06	698.58	703.09	712.12	721.15	734.69	747.67	765.73	788.30	814.82
UnitedHealthcare	SignatureValue	HMO D	700.08	726.14	747.51	758.20	774.24	790.27	800.29	810.98	816.32	821.66	827.01	832.35	843.04	853.73	869.76	885.13	906.50	933.22	964.62
UnitedHealthcare	SignatureValue	HMO E	717.92	744.64	766.56	777.52	793.96	810.40	820.68	831.64	837.12	842.60	848.08	853.56	864.52	875.48	891.92	907.68	929.60	957.00	989.20
UnitedHealthcare	Alliance	HMO F	614.67	637.55	656.32	665.70	679.78	693.85	702.65	712.04	716.73	721.42	726.11	730.80	740.19	749.57	763.65	777.14	795.91	819.37	846.93
UnitedHealthcare	Alliance	HMO G	630.33	653.79	673.03	682.66	697.09	711.53	720.55	730.17	734.98	739.80	744.61	749.42	759.04	768.67	783.10	796.93	816.18	840.24	868.51
UnitedHealthcare	Alliance	HMO N	640.51	664.34	683.90	693.68	708.35	723.01	732.18	741.96	746.85	751.74	756.63	761.52	771.30	781.08	795.74	809.80	829.36	853.80	882.53
Western Health	Full	HMO B	636.48	660.17	679.60	689.32	703.90	718.47	727.58	737.30	742.16	747.02	751.88	756.73	766.45	776.17	790.75	804.71	824.15	848.44	876.99
Western Health	Full	HMO C	630.08	653.53	672.77	682.39	696.82	711.25	720.27	729.89	734.70	739.51	744.32	749.13	758.75	768.36	782.79	796.62	815.86	839.91	868.17
Western Health	Full	HMO D	595.10	617.24	635.42	644.50	658.13	671.76	680.28	689.36	693.90	698.45	702.99	707.53	716.62	725.70	739.33	752.39	770.56	793.28	819.96

CARRIER	NETWORK	PLAN	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
Anthem Blue Cross	Select HMO	HMO A	898.19	935.91	979.02	1021.54	1069.44	1116.74	1168.84	1221.53	1278.42	1335.30	1396.98	1459.25	1525.72	1558.65	1625.12	1682.60	1720.32	1767.63	1796.37
Anthem Blue Cross	Vivity	HMO B	1054.83	1099.13	1149.76	1199.69	1255.95	1311.51	1372.69	1434.57	1501.37	1568.18	1640.61	1713.75	1791.80	1830.48	1908.54	1976.05	2020.35	2075.91	2109.66
Anthem Blue Cross	Vivity	HMO C	1032.83	1076.20	1125.78	1174.67	1229.75	1284.15	1344.05	1404.64	1470.05	1535.47	1606.39	1678.00	1754.43	1792.30	1868.72	1934.83	1978.20	2032.60	2065.65
Anthem Blue Cross	CaliforniaCare HMO	HMO D	1056.27	1100.63	1151.33	1201.33	1257.67	1313.30	1374.56	1436.53	1503.42	1570.32	1642.85	1716.09	1794.25	1832.98	1911.14	1978.75	2023.11	2078.74	2112.54
Anthem Blue Cross	Prudent Buyer - Small Group	PPO B	1164.39	1213.29	1269.19	1324.30	1386.40	1447.72	1515.26	1583.57	1657.32	1731.06	1811.01	1891.75	1977.91	2020.60	2106.77	2181.29	2230.19	2291.52	2328.78
Kaiser Permanente	Full	HMO A	844.70	880.18	920.72	960.71	1005.76	1050.25	1099.24	1148.79	1202.29	1255.79	1313.79	1372.36	1434.87	1465.84	1528.35	1582.41	1617.88	1662.37	1689.39
Kaiser Permanente	Full	HMO B	821.90	856.42	895.87	934.77	978.61	1021.90	1069.57	1117.78	1169.84	1221.89	1278.33	1335.31	1396.13	1426.27	1487.09	1539.69	1574.21	1617.50	1643.79
Kaiser Permanente	Full	HMO C	788.35	821.46	859.30	896.61	938.66	980.18	1025.90	1072.15	1122.08	1172.01	1226.14	1280.80	1339.14	1368.05	1426.38	1476.84	1509.95	1551.47	1576.71
Sharp Health Plan	Premier	HMO A	759.69	791.60	828.06	864.02	904.54	944.55	988.61	1033.18	1081.29	1129.41	1181.57	1234.24	1290.46	1318.32	1374.53	1423.15	1455.06	1495.07	1519.38
Sharp Health Plan	Performance	HMO B	814.34	848.54	887.63	926.17	969.60	1012.49	1059.72	1107.50	1159.07	1210.64	1266.56	1323.02	1383.28	1413.14	1473.40	1525.52	1559.72	1602.61	1628.67
Sharp Health Plan	Premier	HMO C	762.57	794.60	831.20	867.30	907.97	948.13	992.36	1037.10	1085.39	1133.69	1186.05	1238.92	1295.35	1323.31	1379.74	1428.55	1460.58	1500.74	1525.14
Sutter Health Plan	Sutter Health Plan	HMO A	1337.83	1394.02	1458.23	1521.56	1592.91	1663.36	1740.96	1819.44	1904.17	1988.90	2080.77	2173.52	2272.52	2321.58	2420.57	2506.20	2562.38	2632.84	2675.64
UnitedHealthcare	SignatureValue	HMO A	964.04	1004.52	1050.80	1096.43	1147.84	1198.62	1254.53	1311.09	1372.14	1433.20	1499.40	1566.24	1637.57	1672.92	1744.26	1805.96	1846.45	1897.22	1928.07
UnitedHealthcare	SignatureValue	HMO B	1044.15	1088.00	1138.12	1187.55	1243.23	1298.23	1358.79	1420.04	1486.17	1552.30	1624.00	1696.40	1773.66	1811.95	1889.22	1956.04	1999.90	2054.89	2088.30
UnitedHealthcare	Alliance	HMO C	846.42	881.97	922.60	962.66	1007.80	1052.38	1101.47	1151.13	1204.74	1258.34	1316.47	1375.15	1437.79	1468.82	1531.46	1585.63	1621.18	1665.75	1692.84
UnitedHealthcare	SignatureValue	HMO D	1002.03	1044.12	1092.21	1139.64	1193.08	1245.86	1303.98	1362.76	1426.22	1489.68	1558.49	1627.96	1702.11	1738.86	1813.01	1877.14	1919.22	1972.00	2004.06
UnitedHealthcare	SignatureValue	HMO E	1027.56	1070.72	1120.04	1168.68	1223.48	1277.60	1337.20	1397.48	1462.56	1527.64	1598.20	1669.44	1745.48	1783.16	1859.20	1924.96	1968.12	2022.24	2055.12
UnitedHealthcare	Alliance	HMO F	879.78	916.73	958.96	1000.60	1047.52	1093.86	1144.89	1196.50	1252.22	1307.94	1368.35	1429.35	1494.45	1526.71	1591.82	1648.12	1685.07	1731.41	1759.56
UnitedHealthcare	Alliance	HMO G	902.19	940.08	983.39	1026.09	1074.21	1121.72	1174.05	1226.98	1284.12	1341.26	1403.21	1465.76	1532.52	1565.60	1632.36	1690.10	1727.99	1775.51	1804.38
UnitedHealthcare	Alliance	HMO N	916.76	955.26	999.26	1042.66	1091.55	1139.83	1193.00	1246.79	1304.85	1362.91	1425.86	1489.42	1557.26	1590.88	1658.72	1717.39	1755.89	1804.17	1833.51
Western Health	Full	HMO B	911.00	949.26	992.99	1036.11	1084.69	1132.67	1185.51	1238.96	1296.65	1354.35	1416.90	1480.07	1547.48	1580.88	1648.30	1706.60	1744.86	1792.84	1821.99
Western Health	Full	HMO C	901.84	939.71	983.00	1025.69	1073.79	1121.28	1173.59	1226.50	1283.61	1340.73	1402.66	1465.18	1531.92	1564.99	1631.72	1689.44	1727.32	1774.81	1803.66
Western Health	Full	HMO D	851.76	887.54	928.42	968.74	1014.17	1059.03	1108.43	1158.40	1212.34	1266.29	1324.78	1383.83	1446.86	1478.09	1541.12	1595.64	1631.41	1676.27	1703.52

Health Care Service Plan rates will vary by county

THE INFORMATION PROVIDED HEREIN, INCLUDING THE RATING INFORMATION IS PROVIDED ON TO YOU ON AN “AS IS” “AS AVAILABLE” BASIS WITHOUT WARRANTY OF ANY KIND, EXPRESS OR IMPLIED. WE FURTHER DISCLAIM ALL LIABILITY RELATED TO THE INFORMATION, INCLUDING THOSE CAUSED BY RATING DISCREPANCIES. FINAL RATES AND RATING AREAS ARE BASED UPON ACTUAL ENROLLMENT AND UNDERWRITING AND MUST BE APPROVED BY THE APPLICABLE INSURANCE CARRIER.

USE EMPLOYER ZIP CODE FOR RATING

AREA 13

02/01/27 - 03/01/27

Bronze		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																																																			
Anthem Blue Cross	Prudent Buyer - Small Group	PPO A	409.00	445.36	459.26	473.16	488.13	503.10	518.60	534.64	534.64	534.64	534.64	536.78	547.47	560.30	581.15	598.26	606.82	619.65	632.48	640.50	649.05	653.33	657.61	661.88	666.16	674.72	683.27	696.10	708.40	725.51	746.89	772.02	801.96	835.64	874.14	912.10	954.87	997.10	1043.62	1090.67	1141.46	1192.25	1247.32	1302.92	1362.26	1391.67	1451.01	1502.34	1536.02	1578.26	1603.92
Anthem Blue Cross	Select PPO	PPO B	400.85	436.48	450.11	463.73	478.40	493.07	508.27	523.99	523.99	523.99	523.99	526.09	536.57	549.14	569.58	586.34	594.73	607.30	619.88	627.74	636.12	640.32	644.51	648.70	652.89	661.28	669.66	682.23	694.29	711.05	732.01	756.64	785.99	819.00	856.72	893.93	935.85	977.24	1022.83	1068.94	1118.72	1168.50	1222.47	1276.96	1335.13	1363.95	1422.11	1472.41	1505.42	1546.82	1571.97
Anthem Blue Cross	Prudent Buyer - Small Group	PPO C	408.53	444.84	458.72	472.61	487.56	502.51	518.00	534.02	534.02	534.02	534.02	536.16	546.84	559.65	580.48	597.57	606.11	618.93	631.75	639.76	648.30	652.57	656.84	661.12	665.39	673.93	682.48	695.29	707.58	724.67	746.03	771.12	801.03	834.67	873.12	911.04	953.76	995.95	1042.41	1089.40	1140.13	1190.86	1245.87	1301.41	1360.68	1390.05	1449.33	1500.60	1534.24	1576.43	1602.06
Anthem Blue Cross	Select PPO	PPO D	400.32	435.91	449.51	463.12	477.77	492.43	507.60	523.30	523.30	523.30	523.30	525.39	535.86	548.42	568.83	585.57	593.95	606.50	619.06	626.91	635.29	639.47	643.66	647.85	652.03	660.40	668.78	681.34	693.37	710.12	731.05	755.65	784.95	817.92	855.60	892.75	934.61	975.95	1021.48	1067.53	1117.25	1166.96	1220.86	1275.28	1333.37	1362.15	1420.24	1470.47	1503.44	1544.78	1569.90
Kaiser Permanente	Full	HMO A	292.08	316.77	326.22	335.66	345.83	341.72	352.25	363.15	363.15	363.15	363.15	364.60	371.86	380.58	394.74	406.36	412.17	420.89	429.61	435.05	440.86	443.77	446.67	449.58	452.48	458.29	464.10	472.82	481.17	492.79	507.32	524.39	544.72	567.60	593.75	619.53	648.58	677.27	708.87	740.82	775.32	809.82	847.23	884.99	925.30	945.28	985.59	1020.45	1043.33	1072.02	1089.45
Kaiser Permanente	Full	HMO C	284.02	308.00	317.17	326.33	336.21	331.81	342.04	352.61	352.61	352.61	352.61	354.02	361.08	369.54	383.29	394.57	400.22	408.68	417.14	422.43	428.07	430.89	433.71	436.54	439.36	445.00	450.64	459.10	467.21	478.50	492.60	509.17	528.92	551.14	576.52	601.56	629.77	657.62	688.30	719.33	752.83	786.33	822.65	859.32	898.46	917.85	956.99	990.84	1013.06	1040.92	1057.83
Sharp Health Plan	Premier	HMO A	272.80	297.05	306.32	315.59	325.58	335.56	345.90	356.60	356.60	356.60	356.60	358.03	365.16	373.72	387.62	399.04	404.74	413.30	421.86	427.21	432.91	435.77	438.62	441.47	444.32	450.03	455.73	464.29	472.50	483.91	498.17	514.93	534.90	557.37	583.04	608.36	636.89	665.06	696.08	727.46	761.34	795.22	831.95	869.03	908.62	928.23	967.81	1002.05	1024.51	1052.68	1069.80
Sharp Health Plan	Performance	HMO B	291.24	317.12	327.02	336.92	347.58	358.24	369.28	380.70	380.70	380.70	380.70	382.22	389.84	398.97	413.82	426.00	432.09	441.23	450.37	456.08	462.17	465.22	468.26	471.31	474.35	480.44	486.53	495.67	504.43	516.61	531.84	549.73	571.05	595.03	622.44	649.47	679.93	710.01	743.13	776.63	812.79	848.96	888.17	927.77	970.02	990.96	1033.22	1069.77	1093.75	1123.83	1142.10
Sutter Health Plan	Sutter Health Plan	HMO A	346.81	377.64	389.42	401.21	413.90	426.60	439.75	453.36	453.36	453.36	453.36	455.16	464.23	475.11	492.79	507.29	514.55	525.43	536.31	543.11	550.36	553.99	557.62	561.24	564.87	572.12	579.38	590.26	600.68	615.19	633.32	654.63	680.02	708.58	741.22	773.41	809.68	845.49	884.93	924.83	967.89	1010.96	1057.66	1104.80	1155.13	1180.06	1230.38	1273.90	1302.46	1338.28	1360.03
Sutter Health Plan	Sutter Health Plan	HMO B	346.98	377.82	389.62	401.41	414.11	426.81	439.96	453.58	453.58	453.58	453.58	455.38	464.46	475.34	493.03	507.54	514.80	525.69	536.57	543.38	550.63	554.26	557.89	561.52	565.15	572.41	579.66	590.55	600.98	615.49	633.64	654.96	680.36	708.93	741.59	773.79	810.08	845.91	885.37	925.28	968.37	1011.46	1058.18	1105.35	1155.70	1180.64	1230.99	1274.53	1303.11	1338.94	1360.70
Western Health	Full	HMO B	316.71	344.87	355.63	366.39	377.99	389.58	401.59	414.01	414.01	414.01	414.01	415.66	423.94	433.88	450.02	463.27	469.90	479.83	489.77	495.98	502.60	505.91	509.23	512.54	515.85	522.47	529.10	539.03	548.56	561.81	578.37	597.82	621.01	647.09	676.90	706.29	739.41	772.12	808.14	844.57	883.90	923.23	965.87	1008.93	1054.89	1077.66	1123.61	1163.36	1189.44	1222.14	1242.02
Western Health	Full	HMO C	330.55	359.93	371.17	382.40	394.50	406.60	419.13	432.09	432.09	432.09	432.09	433.82	442.46	452.83	469.68	483.51	490.42	500.79	511.16	517.64	524.56	528.01	531.47	534.93	538.38	545.30	552.21	562.58	572.52	586.35	603.63	623.94	648.13	675.36	706.47	737.15	771.71	805.85	843.44	881.46	922.51	963.56	1008.07	1053.00	1100.97	1124.73	1172.69	1214.17	1241.39	1275.53	1296.27

Silver		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																																																			
Anthem Blue Cross	Select HMO	HMO A	442.55	481.89	496.93	511.97	528.17	544.37	561.15	578.50	578.50	578.50	578.50	580.81	592.38	606.27	628.83	647.34	656.60	670.48	684.37	693.04	702.30	706.93	711.56	716.18	720.81	730.07	739.32	753.21	766.51	785.02	808.16	835.35	867.75	904.20	945.85	986.92	1033.20	1078.90	1129.23	1180.14	1235.10	1290.06	1349.64	1409.80	1474.02	1505.84	1570.05	1625.59	1662.03	1707.73	1735.50
Anthem Blue Cross	CaliforniaCare HMO	HMO B	442.55	481.89	496.93	511.97	528.17	544.37	561.15	578.50	578.50	578.50	578.50	580.81	592.38	606.27	628.83	647.34	656.60	670.48	684.37	693.04	702.30	706.93	711.56	716.18	720.81	730.07	739.32	753.21	766.51	785.02	808.16	835.35	867.75	904.20	945.85	986.92	1033.20	1078.90	1129.23	1180.14	1235.10	1290.06	1349.64	1409.80	1474.02	1505.84	1570.05	1625.59	1662.03	1707.73	1735.50
Anthem Blue Cross	CaliforniaCare HMO	HMO D	441.98	481.27	496.29	511.31	527.49	543.66	560.42	577.75	577.75	577.75	577.75	580.06	591.62	605.48	628.01	646.50	655.75	669.61	683.48	692.14	701.39	706.01	710.63	715.25	719.88	729.12	738.36	752.23	765.52	784.01	807.12	834.27	866.63	903.02	944.62	985.64	1031.86	1077.50	1127.77	1178.61	1233.50	1288.38	1347.89	1407.98	1472.11	1503.88	1568.01	1623.48	1659.88	1705.52	1733.25
Anthem Blue Cross	Select PPO	PPO B	432.35	470.78	485.47	500.17	515.99	531.82	548.21	565.16	565.16	565.16	565.16	567.42	578.72	592.29	614.33	632.41	641.46	655.02	668.58	677.06	686.10	690.63	695.15	699.67	704.19	713.23	722.27	735.84	748.84	766.92	789.53	816.09	847.74	883.35	924.04	964.16	1009.38	1054.02	1103.19	1152.93	1206.62	1260.31	1318.52	1377.29	1440.03	1471.11	1533.84	1588.10	1623.70	1668.35	1695.48
Anthem Blue Cross	Prudent Buyer - Small Group	PPO C	441.11	480.32	495.32	510.31	526.45	542.60	559.32	576.62	576.62	576.62	576.62	578.93	590.46	604.30	626.79	645.24	654.46	668.30	682.14	690.79	700.02	704.63	709.24	713.86	718.47	727.69	736.92	750.76	764.02	782.47	805.54	832.64	864.93	901.26	942.77	983.71	1029.84	1075.40	1125.56	1176.30	1231.08	1285.86	1345.25	1405.22	1469.23	1500.94	1564.95	1620.30	1656.63	1702.18	1729.86
Anthem Blue Cross	Prudent Buyer - Small Group	PPO D	427.74	465.76	480.30	494.84	510.49	526.15	542.37	559.14	559.14	559.14	559.14	561.38	572.56	585.98	607.79	625.68	634.62	648.04	661.46	669.85	678.80	683.27	687.74	692.22	696.69	705.63	714.58	728.00	740.86	758.75	781.12	807.40	838.71	873.94	914.19	953.89	998.62	1042.80	1091.44	1140.65	1193.76	1246.88	1304.47	1362.62	1424.69	1455.44	1517.51	1571.18	1606.41	1650.58	1677.42
Anthem Blue Cross	Select PPO	PPO E	419.21	456.48	470.72	484.97	500.31	515.66	531.55	547.99	547.99	547.99	547.99	550.18	561.14	574.29	595.67	613.20	621.97	635.12	648.27	656.49	665.26	669.64	674.03	678.41	682.80	691.56	700.33	713.48	726.09	743.62	765.54	791.30	821.99	856.51	895.96	934.87	978.71	1022.00	1069.68	1117.90	1169.96	1222.02	1278.46	1335.45	1396.28	1426.42	1487.24	1539.85	1574.38	1617.67	1643.97
Anthem Blue Cross	Prudent Buyer - Small Group	PPO F	442.94	482.31	497.36	512.42	528.63	544.84	561.63	579.00	579.00	579.00	579.00	581.32	592.90	606.79	629.37	647.90	657.17	671.06	684.96	693.64	702.91	707.54	712.17	716.80	721.43	730.70	739.96	753.86	767.18	785.70	808.86	836.08	868.50	904.98	946.67	987.77	1034.09	1079.84	1130.21	1181.16	1236.17	1291.17	1350.81	1411.02	1475.29	1507.14	1571.41	1626.99	1663.47	1709.21	1737.00
Kaiser Permanente	Full	HMO A	318.40	345.43	355.77	366.11	377.24	374.10	385.63	397.55	397.55	397.55	397.55	399.14	407.10	416.64	432.14	444.86	451.22	460.77	470.31	476.27	482.63	485.81	488.99	492.17	495.35	501.71	508.07	517.62	526.76	539.48	555.38	574.07	596.33	621.38	650.00	678.23	710.03	741.44	776.03	811.01	848.78	886.55	927.50	968.84	1012.97	1034.83	1078.96	1117.13	1142.17	1173.58	1192.65
Kaiser Permanente	Full	HMO B	322.59	349.99	360.47	370.95	382.23	379.25	390.94	403.03	403.03	403.03	403.03	404.64	412.70	422.37	438.09	450.99	457.44	467.11	476.78	482.83	489.28	492.50	495.72	498.95	502.17	508.62	515.07	524.74	534.01	546.91	563.03	581.97	604.54	629.93	658.95	687.57	719.81	751.65	786.71	822.18	860.46	898.75	940.26	982.18	1026.91	1049.08	1093.82	1132.51	1157.90	1189.74	1209.09
Kaiser Permanente	Full	HMO C	320.30	347.50	357.90	368.30	379.51	376.44	388.04	400.04	400.04	400.04	400.04	401.64	409.64	419.24	434.84	447.64	454.04	463.65	473.25	479.25	485.65	488.85	492.05	495.25	498.45	504.85	511.25	520.85	530.05	542.85	558.86	577.66	600.06	625.26	654.06	682.47	714.47	746.07	780.88	816.08	854.08	892.09	933.29	974.90	1019.30	1041.30	1085.71	1124.11	1149.31	1180.92	1200.12
Kaiser Permanente	Full	HMO D	294.36	319.25	328.77	338.29	348.54	344.52	355.14	366.12	366.12	366.12	366.12	367.59	374.91	383.70	397.98	409.69	415.55	424.34	433.13	438.62	444.48	447.40	450.33	453.26	456.19	462.05	467.91	476.69	485.11	496.83	511.48	528.68	549.19	572.25	598.61	624.61	653.90	682.82	714.67	746.89	781.68	816.46	854.17	892.25	932.89	953.02	993.66	1028.81	1051.88	1080.80	1098.36
Kaiser Permanente	Full	HMO E	306.86	332.87	342.82	352.76	363.47	359.91	371.00	382.48	382.48	382.48	382.48	384.01	391.65	400.83	415.75	427.99	434.11	443.29	452.47	458.21	464.33	467.38	470.44	473.50	476.56	482.68	488.80	497.98	506.78	519.02	534.32	552.29	573.71	597.81	625.35	652.50	683.10	713.32	746.59	780.25	816.58	852.92	892.32	932.09	974.55	995.58	1038.04	1074.76	1098.85	1129.07	1147.44
Sharp Health Plan	Premier	HMO A	285.29	310.65	320.35	330.04	340.49	350.93	361.74	372.93	372.93	372.93	372.93	374.42	381.88	390.83	405.37	417.31	423.28	432.23	441.18	446.77	452.74	455.72	458.70	461.69	464.67	470.64	476.60	485.55	494.13	506.07	520.98	538.51	559.40	582.89	609.74	636.22	666.05	695.51	727.96	760.78	796.21	831.63	870.05	908.83	950.23	970.74	1012.13	1047.93	1071.43	1100.89	1118.79
Sharp Health Plan	Performance	HMO B	294.75	320.95	330.96	340.98	351.77	362.56	373.73	385.29	385.29	385.29	385.29	386.83	394.54	403.78	418.81	431.14	437.30	446.55	455.80	461.58	467.74	470.82	473.91	476.99	480.07	486.24	492.40	501.65	510.51	522.84	538.25	556.36	577.94	602.21	629.95	657.30	688.13	718.57	752.09	785.99	822.59	859.20	898.88	938.95	981.72	1002.91	1045.68	1082.66	1106.94	1137.38	1155.87
Sharp Health Plan	Premier	HMO C	268.76	292.65	301.78	310.92	320.76	330.59	340.78	351.32	351.32	351.32	351.32	352.73	359.75	368.18	381.88	393.13	398.75	407.18	415.61	420.88	426.50	429.31	432.12	434.93	437.74	443.37	448.99	457.42	465.50	476.74	490.79	507.31	526.98	549.11	574.41	599.35	627.46	655.21	685.78	716.69	750.07	783.44	819.63	856.17	895.16	914.49	953.48	987.21	1009.34	1037.10	1053.96
Sutter Health Plan	Sutter Health Plan	HMO B	423.96	461.65	476.05	490.46	505.98	521.50	537.57	554.21	554.21	554.21	554.21	556.41	567.50	580.80	602.41	620.15	629.01	642.31	655.61	663.93	672.79	677.23	681.66	686.09	690.53	699.40	708.26	721.56	734.31	752.04	774.21	800.26	831.29	866.21	906.11	945.46	989.79	1033.58	1081.79	1130.56	1183.21	1235.86	1292.94	1350.58	1412.09	1442.57	1504.09	1557.29	1592.20	1635.99	1662.58
Sutter Health Plan	Sutter Health Plan	HMO C	367.20	399.83	412.31	424.79	438.23	451.67	465.59	480.00	480.00	480.00	480.00	481.91	491.51	503.03	521.75	537.11	544.79	556.31	567.83	575.03	582.71	586.55	590.39	594.23	598.07	605.75	613.43	624.95	635.99	651.35	670.55	693.11	719.99	750.23	784.79	818.87	857.27	895.19	936.95	979.19	1024.79	1070.39	1119.83	1169.75	1223.02	1249.42	1302.70	1348.78	1379.02	1416.94	1439.97
UnitedHealthcare	SignatureValue	HMO A	458.56	499.32	514.90	530.49	547.27	564.05	581.44	599.42	599.42	599.42	599.42	601.82	613.81	628.19	651.57	670.75	680.34	694.73	709.11	718.11	727.70	732.49	737.29	742.08	746.88	756.47	766.06	780.44	794.23	813.41	837.39	865.56	899.13	936.89	980.05	1022.61	1070.56	1117.92	1170.07	1222.82	1279.76	1336.71	1398.45	1460.79	1527.32	1560.29	1626.83	1684.37	1722.13	1769.49	1798.26
Western Health	Full	HMO B	362.81	395.06	407.40	419.73	433.01	446.29	460.04	474.27	474.27	474.27	474.27	476.16	485.65	497.03	515.53	530.71	538.29	549.68	561.06	568.17	575.76	579.56	583.35	587.14	590.94	598.53	606.11	617.50	628.40	643.58	662.55	684.84	711.40	741.28	775.43	809.10	847.04	884.51	925.77	967.51	1012.56	1057.62	1106.47	1155.79	1208.43	1234.52	1287.16	1332.69	1362.57	1400.04	1422.80
Western Health	Full	HMO C	342.86	373.34	384.99	396.64	409.19	421.74	434.74	448.18	448.18	448.18	448.18	449.98	458.94	469.70	487.18	501.52	508.69	519.45	530.20	536.93	544.10	547.68	551.27	554.85	558.44	565.61	572.78	583.54	593.84	608.19	626.11	647.18	672.28	700.51	732.78	764.60	800.46	835.86	874.86	914.30	956.87	999.45	1045.62	1092.23	1141.97	1166.63	1216.37	1259.40	1287.64	1323.04	1344.54
Western Health	Full	HMO D	330.78	360.19	371.43	382.67	394.78	406.88	419.42	432.40	432.40	432.40	432.40	434.12	442.77	453.15	470.01	483.85	490.77	501.15	511.52	518.01	524.93	528.39	531.85	535.31	538.76	545.68	552.60	562.98	572.92	586.76	604.06	624.38	648.59	675.83	706.97	737.67	772.26	806.42	844.04	882.09	923.16	964.24	1008.78	1053.75	1101.74	1125.52	1173.52	1215.03	1242.27	1276.43	1297.19

Gold		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																																																			
Anthem Blue Cross	Select HMO	HMO A	567.42	617.85	637.14	656.42	677.19	697.96	719.47	741.72	741.72	741.72	741.72	744.69	759.52	777.32	806.25	829.98	841.85	859.65	877.45	888.58	900.45	906.38	912.32	918.25	924.18	936.05	947.92	965.72	982.78	1006.51	1036.18	1071.04	1112.58	1159.31	1212.71	1265.37	1324.71	1383.31	1447.84	1513.11	1583.57	1654.04	1730.43	1807.57	1889.90	1930.70	2013.03	2084.23	2130.96	2189.56	2225.16
Anthem Blue Cross	CaliforniaCare HMO	HMO B	567.42	617.85	637.14	656.42	677.19	697.96	719.47	741.72	741.72	741.72	741.72	744.69	759.52	777.32	806.25	829.98	841.85	859.65	877.45	888.58	900.45	906.38	912.32	918.25	924.18	936.05	947.92	965.72	982.78	1006.51	1036.18	1071.04	1112.58	1159.31	1212.71	1265.37	1324.71	1383.31	1447.84	1513.11	1583.57	1654.04	1730.43	1807.57	1889.90	1930.70	2013.03	2084.23	2130.96	2189.56	2225.16
Anthem Blue Cross	Priority Select HMO	HMO C	471.22	513.10	529.12	545.13	562.38	579.63	597.49	615.97	615.97	615.97	615.97	618.43	630.75	645.54	669.56	689.27	699.13	713.91	728.69	737.93	747.79	752.72	757.64	762.57	767.50	777.35	787.21	801.99	816.16	835.87	860.51	889.46	923.96	962.76	1007.11	1050.84	1100.12	1148.78	1202.37	1256.58	1315.10	1373.61	1437.06	1501.12	1569.49	1603.37	1671.74	1730.88	1769.68	1818.34	1847.91
Anthem Blue Cross	Select PPO	PPO B	511.82	557.31	574.71	592.10	610.83	629.57	648.97	669.04	669.04	669.04	669.04	671.72	685.10	701.15	727.25	748.66	759.36	775.42	791.47	801.51	812.21	817.57	822.92	828.27	833.62	844.33	855.03	871.09	886.48	907.89	934.65	966.09	1003.56	1045.71	1093.88	1141.38	1194.91	1247.76	1305.97	1364.84	1428.40	1491.96	1560.87	1630.45	1704.71	1741.51	1815.77	1880.00	1922.15	1975.01	2007.12
Anthem Blue Cross	Select PPO	PPO C	528.06	575.00	592.95	610.90	630.23	649.55	669.57	690.28	690.28	690.28	690.28	693.04	706.85	723.41	750.33	772.42	783.47	800.03	816.60	826.96	838.00	843.52	849.04	854.57	860.09	871.13	882.18	898.74	914.62	936.71	964.32	996.76	1035.42	1078.91	1128.61	1177.62	1232.84	1287.37	1347.43	1408.17	1473.75	1539.32	1610.42	1682.21	1758.83	1796.80	1873.42	1939.69	1983.17	2037.71	2070.84
Anthem Blue Cross	Select PPO	PPO D	508.07	553.24	570.50	587.77	606.37	624.97	644.23	664.15	664.15	664.15	664.15	666.81	680.09	696.03	721.93	743.18	753.81	769.75	785.69	795.65	806.28	811.59	816.90	822.22	827.53	838.16	848.78	864.72	880.00	901.25	927.82	959.03	996.23	1038.07	1085.89	1133.04	1186.17	1238.64	1296.42	1354.87	1417.96	1481.05	1549.46	1618.53	1692.25	1728.78	1802.50	1866.26	1908.10	1960.57	1992.45
Anthem Blue Cross	Prudent Buyer - Small Group	PPO E	538.80	586.70	605.01	623.32	643.04	662.77	683.19	704.32	704.32	704.32	704.32	707.14	721.22	738.13	765.60	788.13	799.40	816.31	833.21	843.78	855.04	860.68	866.31	871.95	877.58	888.85	900.12	917.02	933.22	955.76	983.94	1017.04	1056.48	1100.85	1151.56	1201.57	1257.92	1313.56	1374.83	1436.81	1503.72	1570.63	1643.18	1716.43	1794.61	1833.34	1911.52	1979.14	2023.51	2079.15	2112.96
Anthem Blue Cross	Prudent Buyer - Small Group	PPO H	518.48	564.57	582.19	599.81	618.79	637.76	657.42	677.75	677.75	677.75	677.75	680.46	694.02	710.28	736.71	758.40	769.25	785.51	801.78	811.94	822.79	828.21	833.63	839.05	844.48	855.32	866.16	882.43	898.02	919.71	946.82	978.67	1016.63	1059.32	1108.12	1156.24	1210.46	1264.00	1322.97	1382.61	1447.00	1511.38	1581.19	1651.68	1726.91	1764.18	1839.41	1904.48	1947.18	2000.72	2033.25
Anthem Blue Cross	Prudent Buyer - Small Group	PPO I	526.10	572.86	590.74	608.62	627.88	647.14	667.08	687.71	687.71	687.71	687.71	690.46	704.22	720.72	747.54	769.55	780.55	797.06	813.56	823.88	834.88	840.38	845.88	851.38	856.89	867.89	878.89	895.40	911.22	933.22	960.73	993.05	1031.57	1074.89	1124.41	1173.23	1228.25	1282.58	1342.41	1402.93	1468.26	1533.59	1604.43	1675.95	1752.29	1790.11	1866.44	1932.47	1975.79	2030.12	2063.13
Kaiser Permanente	Full	HMO B	382.56	415.29	427.81	440.33	453.81	453.02	466.98	481.42	481.42	481.42	481.42	483.35	492.98	504.53	523.31	538.71	546.41	557.97	569.52	576.74	584.45	588.30	592.15	596.00	599.85	607.55	615.26	626.81	637.88	653.29	672.55	695.17	722.13	752.46	787.12	821.31	859.82	897.85	939.74	982.10	1027.84	1073.57	1123.16	1173.23	1226.66	1253.14	1306.58	1352.80	1383.13	1421.16	1444.26
Kaiser Permanente	Full	HMO C	393.56	427.28	440.17	453.06	466.94	466.56	480.94	495.81	495.81	495.81	495.81	497.79	507.71	519.61	538.95	554.81	562.74	574.64	586.54	593.98	601.91	605.88	609.85	613.81	617.78	625.71	633.64	645.54	656.95	672.81	692.65	715.95	743.71	774.95	810.65	845.85	885.52	924.69	967.82	1011.45	1058.55	1105.66	1156.72	1208.29	1263.32	1290.59	1345.63	1393.23	1424.46	1463.63	1487.43
Kaiser Permanente	Full	HMO D	371.62	403.39	415.53	427.68	440.76	439.57	453.11	467.13	467.13	467.13	467.13	469.00	478.34	489.55	507.77	522.72	530.19	541.40	552.61	559.62	567.09	570.83	574.57	578.30	582.04	589.52	596.99	608.20	618.94	633.89	652.58	674.53	700.69	730.12	763.75	796.92	834.29	871.19	911.83	952.94	997.32	1041.70	1089.81	1138.39	1190.24	1215.93	1267.79	1312.63	1342.06	1378.96	1401.39
Kaiser Permanente	Full	HMO E	332.46	360.74	371.56	382.37	394.02	391.39	403.45	415.93	415.93	415.93	415.93	417.60	425.91	435.90	452.12	465.43	472.08	482.06	492.05	498.29	504.94	508.27	511.60	514.92	518.25	524.91	531.56	541.54	551.11	564.42	581.06	600.60	623.90	650.10	680.05	709.58	742.85	775.71	811.90	848.50	888.01	927.53	970.37	1013.62	1059.79	1082.67	1128.84	1168.77	1194.97	1227.83	1247.79
Kaiser Permanente	Full	HMO F	379.38	411.83	424.24	436.65	450.01	449.10	462.95	477.26	477.26	477.26	477.26	479.17	488.72	500.17	518.79	534.06	541.69	553.15	564.60	571.76	579.40	583.22	587.03	590.85	594.67	602.31	609.94	621.40	632.37	647.65	666.74	689.17	715.89	745.96	780.33	814.21	852.39	890.10	931.62	973.62	1018.96	1064.30	1113.46	1163.09	1216.07	1242.32	1295.29	1341.11	1371.18	1408.88	1431.78
Sharp Health Plan	Performance	HMO A	366.15	398.70	411.14	423.59	436.99	450.39	464.27	478.63	478.63	478.63	478.63	480.54	490.12	501.60	520.27	535.59	543.25	554.73	566.22	573.40	581.06	584.89	588.71	592.54	596.37	604.03	611.69	623.18	634.18	649.50	668.65	691.14	717.95	748.10	782.56	816.54	854.83	892.64	934.29	976.41	1021.88	1067.34	1116.64	1166.42	1219.55	1245.87	1299.00	1344.95	1375.10	1412.92	1435.89
Sharp Health Plan	Premier	HMO B	345.92	376.67	388.42	400.18	412.84	425.50	438.61	452.18	452.18	452.18	452.18	453.99	463.03	473.88	491.52	505.99	513.22	524.08	534.93	541.71	548.95	552.56	556.18	559.80	563.42	570.65	577.89	588.74	599.14	613.61	631.70	652.95	678.27	706.76	739.31	771.42	807.59	843.32	882.66	922.45	965.40	1008.36	1054.94	1101.96	1152.15	1177.02	1227.22	1270.63	1299.11	1334.84	1356.54
Sharp Health Plan	Performance	HMO D	377.08	410.59	423.41	436.23	450.03	463.83	478.12	492.91	492.91	492.91	492.91	494.88	504.74	516.57	535.79	551.57	559.45	571.28	583.11	590.51	598.39	602.34	606.28	610.22	614.17	622.05	629.94	641.77	653.11	668.88	688.60	711.76	739.37	770.42	805.91	840.90	880.34	919.28	962.16	1005.54	1052.36	1099.19	1149.96	1201.22	1255.93	1283.04	1337.76	1385.08	1416.13	1455.07	1478.73
Sutter Health Plan	Sutter Health Plan	HMO A	464.44	505.73	521.51	537.30	554.30	571.30	588.90	607.13	607.13	607.13	607.13	609.55	621.69	636.26	659.94	679.36	689.08	703.65	718.22	727.33	737.04	741.90	746.75	751.61	756.47	766.18	775.90	790.47	804.43	823.86	848.14	876.68	910.67	948.92	992.64	1035.74	1084.31	1132.27	1185.09	1238.52	1296.19	1353.87	1416.40	1479.54	1546.93	1580.32	1647.71	1706.00	1744.25	1792.21	1821.34
Sutter Health Plan	Sutter Health Plan	HMO B	498.16	542.45	559.38	576.31	594.54	612.77	631.66	651.21	651.21	651.21	651.21	653.80	666.82	682.45	707.85	728.69	739.11	754.74	770.36	780.13	790.55	795.76	800.97	806.18	811.39	821.81	832.23	847.86	862.83	883.67	909.72	940.33	976.79	1017.82	1064.70	1110.94	1163.03	1214.48	1271.13	1328.44	1390.30	1452.17	1519.24	1586.96	1659.25	1695.06	1767.34	1829.86	1870.88	1922.33	1953.58
Sutter Health Plan	Sutter Health Plan	HMO C	423.25	460.87	475.26	489.64	505.14	520.63	536.67	553.28	553.28	553.28	553.28	555.48	566.55	579.83	601.40	619.11	627.96	641.24	654.52	662.82	671.67	676.10	680.52	684.95	689.37	698.23	707.08	720.36	733.08	750.79	772.92	798.92	829.90	864.76	904.60	943.88	988.14	1031.85	1079.98	1128.67	1181.23	1233.79	1290.78	1348.32	1409.73	1440.16	1501.57	1554.69	1589.54	1633.25	1659.80
UnitedHealthcare	SignatureValue	HMO A	502.04	546.66	563.73	580.79	599.17	617.54	636.57	656.26	656.26	656.26	656.26	658.89	672.01	687.76	713.35	734.35	744.86	760.61	776.36	786.20	796.70	801.95	807.20	812.45	817.70	828.20	838.70	854.45	869.54	890.54	916.80	947.64	984.39	1025.73	1072.99	1119.58	1172.08	1223.92	1281.02	1338.77	1401.12	1463.46	1531.05	1599.31	1672.15	1708.24	1781.09	1844.09	1885.43	1937.28	1968.78
UnitedHealthcare	SignatureValue	HMO C	537.48	585.26	603.52	621.79	641.46	661.14	681.51	702.59	702.59	702.59	702.59	705.40	719.45	736.31	763.72	786.20	797.44	814.30	831.16	841.70	852.94	858.56	864.19	869.81	875.43	886.67	897.91	914.77	930.93	953.41	981.52	1014.54	1053.89	1098.15	1148.73	1198.62	1254.83	1310.33	1371.46	1433.28	1500.03	1566.78	1639.14	1712.21	1790.20	1828.84	1906.83	1974.28	2018.54	2074.05	2107.77
UnitedHealthcare	SignatureValue	HMO F	555.95	605.37	624.26	643.16	663.50	683.85	704.93	726.73	726.73	726.73	726.73	729.64	744.17	761.61	789.96	813.21	824.84	842.28	859.72	870.62	882.25	888.06	893.88	899.69	905.51	917.13	928.76	946.20	962.92	986.17	1015.24	1049.40	1090.10	1135.88	1188.20	1239.80	1297.94	1355.35	1418.58	1482.53	1551.57	1620.61	1695.46	1771.04	1851.71	1891.68	1972.35	2042.11	2087.90	2145.31	2180.19
UnitedHealthcare	SignatureValue	HMO H	521.00	567.31	585.01	602.72	621.79	640.86	660.61	681.04	681.04	681.04	681.04	683.76	697.38	713.73	740.29	762.08	772.98	789.33	805.67	815.89	826.78	832.23	837.68	843.13	848.58	859.47	870.37	886.71	902.38	924.17	951.41	983.42	1021.56	1064.47	1113.50	1161.85	1216.34	1270.14	1329.39	1389.32	1454.02	1518.72	1588.87	1659.69	1735.29	1772.75	1848.34	1913.72	1956.63	2010.43	2043.12
Western Health	Full	HMO A	406.47	442.60	456.41	470.23	485.10	499.98	515.39	531.33	531.33	531.33	531.33	533.45	544.08	556.83	577.55	594.56	603.06	615.81	628.56	636.53	645.03	649.28	653.53	657.78	662.04	670.54	679.04	691.79	704.01	721.01	742.27	767.24	796.99	830.47	868.72	906.45	948.95	990.93	1037.15	1083.91	1134.39	1184.86	1239.59	1294.85	1353.83	1383.05	1442.03	1493.03	1526.51	1568.48	1593.99
Western Health	Full	HMO B	426.53	464.44	478.93	493.43	509.04	524.65	540.82	557.55	557.55	557.55	557.55	559.78	570.93	584.31	606.06	623.90	632.82	646.20	659.58	667.94	676.86	681.33	685.79	690.25	694.71	703.63	712.55	725.93	738.75	756.59	778.90	805.10	836.32	871.45	911.59	951.18	995.78	1039.83	1088.34	1137.40	1190.37	1243.34	1300.76	1358.75	1420.64	1451.30	1513.19	1566.71	1601.84	1645.89	1672.65
Western Health	Full	HMO C	397.43	432.76	446.27	459.77	474.32	488.87	503.93	519.52	519.52	519.52	519.52	521.60	531.99	544.46	564.72	581.34	589.65	602.12	614.59	622.38	630.70	634.85	639.01	643.16	647.32	655.63	663.94	676.41	688.36	704.99	725.77	750.18	779.28	812.01	849.41	886.30	927.86	968.90	1014.10	1059.82	1109.17	1158.53	1212.04	1266.07	1323.73	1352.31	1409.97	1459.85	1492.58	1533.62	1558.56
Western Health	Full	HMO D	382.67	416.69	429.69	442.70	456.70	470.71	485.22	500.22	500.22	500.22	500.22	502.22	512.23	524.23	543.74	559.75	567.75	579.76	591.76	599.27	607.27	611.27	615.27	619.28	623.28	631.28	639.28	651.29	662.79	678.80	698.81	722.32	750.33	781.85	817.86	853.38	893.40	932.91	976.43	1020.45	1067.97	1115.50	1167.02	1219.04	1274.57	1302.08	1357.60	1405.62	1437.14	1476.66	1500.66

Health Care Service Plan rates will vary by county

THE INFORMATION PROVIDED HEREIN, INCLUDING THE RATING INFORMATION IS PROVIDED ON TO YOU ON AN “AS IS” “AS AVAILABLE” BASIS WITHOUT WARRANTY OF ANY KIND, EXPRESS OR IMPLIED. WE FURTHER DISCLAIM ALL LIABILITY RELATED TO THE INFORMATION, INCLUDING THOSE CAUSED BY RATING DISCREPANCIES. FINAL RATES AND RATING AREAS ARE BASED UPON ACTUAL ENROLLMENT AND UNDERWRITING AND MUST BE APPROVED BY THE APPLICABLE INSURANCE CARRIER.

Continued

USE EMPLOYER ZIP CODE FOR RATING

AREA 13 - Continued

02/01/27 - 03/01/27

Platinum		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																																																	
Anthem Blue Cross	Select HMO	HMO A	615.63	670.36	691.28	712.20	734.74	757.27	780.61	804.75	804.75	804.75	804.75	807.97	824.06	843.38	874.76	900.52	913.39	932.71	952.02	964.09	976.97	983.40	989.84	996.28	1002.72	1015.59	1028.47	1047.78	1066.29	1092.05	1124.24	1162.06	1207.13	1257.82	1315.77	1372.90	1437.28	1500.86	1570.87	1641.69	1718.14	1794.59	1877.48	1961.18	2050.50	2094.76	2184.09	2261.35	2312.05	2375.62	2414.25
Anthem Blue Cross	Vivity	HMO B	614.63	669.27	690.15	711.04	733.54	756.04	779.34	803.44	803.44	803.44	803.44	806.65	822.72	842.01	873.34	899.05	911.90	931.19	950.47	962.52	975.38	981.80	988.23	994.66	1001.09	1013.94	1026.80	1046.08	1064.56	1090.27	1122.41	1160.17	1205.16	1255.78	1313.62	1370.67	1434.94	1498.42	1568.31	1639.02	1715.34	1791.67	1874.43	1957.98	2047.17	2091.35	2180.54	2257.67	2308.28	2371.75	2410.32
Anthem Blue Cross	Vivity	HMO C	601.79	655.28	675.73	696.19	718.21	740.24	763.05	786.65	786.65	786.65	786.65	789.80	805.53	824.41	855.09	880.26	892.85	911.73	930.61	942.41	954.99	961.29	967.58	973.87	980.17	992.75	1005.34	1024.22	1042.31	1067.48	1098.95	1135.92	1179.98	1229.53	1286.17	1342.02	1404.96	1467.10	1535.54	1604.77	1679.50	1754.23	1835.25	1917.07	2004.38	2047.65	2134.97	2210.49	2260.05	2322.19	2359.95
Anthem Blue Cross	CaliforniaCare HMO	HMO D	615.49	670.20	691.12	712.04	734.56	757.09	780.42	804.56	804.56	804.56	804.56	807.78	823.87	843.18	874.56	900.30	913.18	932.49	951.79	963.86	976.74	983.17	989.61	996.05	1002.48	1015.35	1028.23	1047.54	1066.04	1091.79	1123.97	1161.78	1206.84	1257.53	1315.46	1372.58	1436.94	1500.50	1570.50	1641.30	1717.74	1794.17	1877.04	1960.71	2050.02	2094.27	2183.58	2260.81	2311.50	2375.06	2413.68
Anthem Blue Cross	Prudent Buyer - Small Group	PPO B	607.87	661.90	682.56	703.22	725.47	747.72	770.76	794.60	794.60	794.60	794.60	797.78	813.67	832.74	863.73	889.16	901.87	920.94	940.01	951.93	964.64	971.00	977.36	983.71	990.07	1002.79	1015.50	1034.57	1052.85	1078.27	1110.06	1147.40	1191.90	1241.96	1299.17	1355.59	1419.16	1481.93	1551.06	1620.98	1696.47	1771.96	1853.80	1936.44	2024.64	2068.34	2156.54	2232.83	2282.89	2345.66	2383.80
Kaiser Permanente	Full	HMO A	423.53	459.91	473.82	487.73	502.70	503.41	518.93	534.98	534.98	534.98	534.98	537.12	547.82	560.66	581.52	598.64	607.20	620.04	632.88	640.90	649.46	653.74	658.02	662.30	666.58	675.14	683.70	696.54	708.85	725.96	747.36	772.51	802.47	836.17	874.69	912.67	955.47	997.73	1044.28	1091.35	1142.18	1193.00	1248.10	1303.74	1363.12	1392.55	1451.93	1503.29	1536.99	1579.25	1604.94
Kaiser Permanente	Full	HMO B	412.48	447.88	461.41	474.94	489.52	489.82	504.92	520.54	520.54	520.54	520.54	522.62	533.03	545.52	565.82	582.48	590.81	603.30	615.79	623.60	631.93	636.10	640.26	644.42	648.59	656.92	665.25	677.74	689.71	706.37	727.19	751.65	780.80	813.60	851.08	888.04	929.68	970.80	1016.09	1061.89	1111.35	1160.80	1214.41	1268.55	1326.33	1354.96	1412.74	1462.71	1495.50	1536.62	1561.62
Kaiser Permanente	Full	HMO C	396.22	430.18	443.16	456.14	470.12	469.83	484.31	499.29	499.29	499.29	499.29	501.28	511.27	523.25	542.72	558.70	566.69	578.67	590.66	598.15	606.13	610.13	614.12	618.12	622.11	630.10	638.09	650.07	661.56	677.53	697.50	720.97	748.93	780.39	816.33	851.78	891.73	931.17	974.61	1018.55	1065.98	1113.41	1164.84	1216.76	1272.18	1299.64	1355.06	1403.00	1434.45	1473.89	1497.87
Sharp Health Plan	Premier	HMO A	387.44	421.88	435.05	448.22	462.40	476.58	491.27	506.46	506.46	506.46	506.46	508.49	518.62	530.77	550.52	566.73	574.83	586.99	599.14	606.74	614.84	618.89	622.95	627.00	631.05	639.15	647.26	659.41	671.06	687.27	707.52	731.33	759.69	791.60	828.06	864.02	904.54	944.55	988.61	1033.18	1081.29	1129.41	1181.57	1234.24	1290.46	1318.32	1374.53	1423.15	1455.06	1495.07	1519.38
Sharp Health Plan	Performance	HMO B	415.31	452.23	466.34	480.46	495.66	510.86	526.60	542.89	542.89	542.89	542.89	545.06	555.92	568.95	590.12	607.49	616.18	629.21	642.24	650.38	659.07	663.41	667.75	672.10	676.44	685.13	693.81	706.84	719.33	736.70	758.42	783.93	814.34	848.54	887.63	926.17	969.60	1012.49	1059.72	1107.50	1159.07	1210.64	1266.56	1323.02	1383.28	1413.14	1473.40	1525.52	1559.72	1602.61	1628.67
Sharp Health Plan	Premier	HMO C	388.91	423.48	436.70	449.92	464.15	478.39	493.13	508.38	508.38	508.38	508.38	510.41	520.58	532.78	552.61	568.88	577.01	589.21	601.41	609.04	617.17	621.24	625.31	629.37	633.44	641.58	649.71	661.91	673.60	689.87	710.21	734.10	762.57	794.60	831.20	867.30	907.97	948.13	992.36	1037.10	1085.39	1133.69	1186.05	1238.92	1295.35	1323.31	1379.74	1428.55	1460.58	1500.74	1525.14
Sutter Health Plan	Sutter Health Plan	HMO A	541.07	589.17	607.56	625.95	645.75	665.56	686.07	707.30	707.30	707.30	707.30	710.12	724.26	741.24	768.82	791.45	802.77	819.75	836.72	847.33	858.65	864.30	869.96	875.62	881.28	892.60	903.91	920.89	937.15	959.79	988.08	1021.32	1060.93	1105.49	1156.41	1206.63	1263.21	1319.09	1380.62	1442.87	1510.06	1577.25	1650.10	1723.66	1802.17	1841.07	1919.58	1987.48	2032.03	2087.91	2121.85
UnitedHealthcare	SignatureValue	HMO A	557.83	607.42	626.37	645.33	665.75	686.17	707.31	729.19	729.19	729.19	729.19	732.11	746.69	764.19	792.63	815.96	827.63	845.13	862.63	873.57	885.24	891.07	896.90	902.74	908.57	920.24	931.90	949.41	966.18	989.51	1018.68	1052.95	1093.79	1139.72	1192.23	1244.00	1302.33	1359.94	1423.38	1487.55	1556.82	1626.09	1701.20	1777.04	1857.98	1898.08	1979.02	2049.02	2094.96	2152.57	2187.57
UnitedHealthcare	SignatureValue	HMO B	604.19	657.90	678.43	698.96	721.08	743.19	766.10	789.79	789.79	789.79	789.79	792.95	808.74	827.70	858.50	883.78	896.41	915.37	934.32	946.17	958.81	965.12	971.44	977.76	984.08	996.71	1009.35	1028.31	1046.47	1071.75	1103.34	1140.46	1184.69	1234.44	1291.31	1347.38	1410.56	1472.96	1541.67	1611.17	1686.20	1761.23	1842.58	1924.72	2012.38	2055.82	2143.49	2219.31	2269.07	2331.46	2369.37
UnitedHealthcare	SignatureValue	HMO D	579.82	631.36	651.07	670.78	692.00	713.22	735.20	757.94	757.94	757.94	757.94	760.97	776.13	794.32	823.88	848.13	860.26	878.45	896.64	908.01	920.14	926.20	932.27	938.33	944.39	956.52	968.65	986.84	1004.27	1028.52	1058.84	1094.47	1136.91	1184.66	1239.23	1293.05	1353.68	1413.56	1479.50	1546.20	1618.20	1690.21	1768.27	1847.10	1931.23	1972.92	2057.05	2129.81	2177.56	2237.44	2273.82
UnitedHealthcare	SignatureValue	HMO E	594.59	647.44	667.65	687.86	709.62	731.38	753.92	777.24	777.24	777.24	777.24	780.35	795.89	814.55	844.86	869.73	882.17	900.82	919.47	931.13	943.57	949.79	956.01	962.22	968.44	980.88	993.31	1011.97	1029.84	1054.71	1085.80	1122.33	1165.86	1214.83	1270.79	1325.97	1388.15	1449.55	1517.17	1585.57	1659.41	1733.25	1813.30	1894.13	1980.41	2023.16	2109.43	2184.04	2233.01	2294.41	2331.72
Western Health	Full	HMO B	464.61	505.91	521.70	537.49	554.49	571.50	589.11	607.33	607.33	607.33	607.33	609.76	621.91	636.48	660.17	679.60	689.32	703.90	718.47	727.58	737.30	742.16	747.02	751.88	756.73	766.45	776.17	790.75	804.71	824.15	848.44	876.99	911.00	949.26	992.99	1036.11	1084.69	1132.67	1185.51	1238.96	1296.65	1354.35	1416.90	1480.07	1547.48	1580.88	1648.30	1706.60	1744.86	1792.84	1821.99
Western Health	Full	HMO C	459.94	500.82	516.45	532.08	548.92	565.75	583.19	601.22	601.22	601.22	601.22	603.63	615.65	630.08	653.53	672.77	682.39	696.82	711.25	720.27	729.89	734.70	739.51	744.32	749.13	758.75	768.36	782.79	796.62	815.86	839.91	868.17	901.84	939.71	983.00	1025.69	1073.79	1121.28	1173.59	1226.50	1283.61	1340.73	1402.66	1465.18	1531.92	1564.99	1631.72	1689.44	1727.32	1774.81	1803.66
Western Health	Full	HMO D	434.40	473.01	487.78	502.54	518.44	534.34	550.81	567.84	567.84	567.84	567.84	570.11	581.47	595.10	617.24	635.42	644.50	658.13	671.76	680.28	689.36	693.90	698.45	702.99	707.53	716.62	725.70	739.33	752.39	770.56	793.28	819.96	851.76	887.54	928.42	968.74	1014.17	1059.03	1108.43	1158.40	1212.34	1266.29	1324.78	1383.83	1446.86	1478.09	1541.12	1595.64	1631.41	1676.27	1703.52

Health Care Service Plan rates will vary by county

THE INFORMATION PROVIDED HEREIN, INCLUDING THE RATING INFORMATION IS PROVIDED ON TO YOU ON AN "AS IS" "AS AVAILABLE" BASIS WITHOUT WARRANTY OF ANY KIND, EXPRESS OR IMPLIED. WE FURTHER DISCLAIM ALL LIABILITY RELATED TO THE INFORMATION, INCLUDING THOSE CAUSED BY RATING DISCREPANCIES. FINAL RATES AND RATING AREAS ARE BASED UPON ACTUAL ENROLLMENT AND UNDERWRITING AND MUST BE APPROVED BY THE APPLICABLE INSURANCE CARRIER.

USE EMPLOYER ZIP CODE FOR RATING | AREA 14 | 02/01/27 - 03/01/27

Bronze		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																																																	
Anthem Blue Cross	Prudent Buyer - Small Group	PPO A	327.31	356.41	367.53	378.66	390.64	402.62	415.02	427.86	427.86	427.86	427.86	429.57	438.13	448.40	465.08	478.78	485.62	495.89	506.16	512.58	519.42	522.84	526.27	529.69	533.11	539.96	546.81	557.07	566.91	580.61	597.72	617.83	641.79	668.75	699.55	729.93	764.16	797.96	835.18	872.83	913.48	954.13	998.20	1042.69	1090.19	1113.72	1161.21	1202.29	1229.24	1263.04	1283.58
Anthem Blue Cross	Select PPO	PPO B	318.48	346.79	357.61	368.43	380.09	391.75	403.82	416.31	416.31	416.31	416.31	417.98	426.30	436.29	452.53	465.85	472.51	482.50	492.49	498.74	505.40	508.73	512.06	515.39	518.72	525.38	532.04	542.04	551.61	564.93	581.59	601.15	624.47	650.69	680.67	710.22	743.53	776.42	812.64	849.27	888.82	928.37	971.25	1014.55	1060.76	1083.65	1129.87	1169.83	1196.06	1228.95	1248.93
Anthem Blue Cross	Prudent Buyer - Small Group	PPO C	326.89	355.95	367.06	378.17	390.13	402.10	414.49	427.31	427.31	427.31	427.31	429.02	437.57	447.82	464.49	478.16	485.00	495.25	505.51	511.92	518.75	522.17	525.59	529.01	532.43	539.27	546.10	556.36	566.19	579.86	596.95	617.04	640.97	667.89	698.65	728.99	763.18	796.93	834.11	871.71	912.31	952.90	996.91	1041.35	1088.79	1112.29	1159.72	1200.74	1227.66	1261.42	1281.93
Anthem Blue Cross	Select PPO	PPO D	318.06	346.34	357.15	367.96	379.60	391.24	403.30	415.77	415.77	415.77	415.77	417.43	425.75	435.73	451.94	465.25	471.90	481.88	491.86	498.09	504.74	508.07	511.40	514.72	518.05	524.70	531.35	541.33	550.90	564.20	580.83	600.37	623.66	649.85	679.78	709.30	742.57	775.41	811.58	848.17	887.67	927.17	969.99	1013.23	1059.38	1082.25	1128.40	1168.31	1194.51	1227.35	1247.31
Kaiser Permanente	Full	HMO A	292.08	316.77	326.22	335.66	345.83	341.72	352.25	363.15	363.15	363.15	363.15	364.60	371.86	380.58	394.74	406.36	412.17	420.89	429.61	435.05	440.86	443.77	446.67	449.58	452.48	458.29	464.10	472.82	481.17	492.79	507.32	524.39	544.72	567.60	593.75	619.53	648.58	677.27	708.87	740.82	775.32	809.82	847.23	884.99	925.30	945.28	985.59	1020.45	1043.33	1072.02	1089.45
Kaiser Permanente	Full	HMO C	284.02	308.00	317.17	326.33	336.21	331.81	342.04	352.61	352.61	352.61	352.61	354.02	361.08	369.54	383.29	394.57	400.22	408.68	417.14	422.43	428.07	430.89	433.71	436.54	439.36	445.00	450.64	459.10	467.21	478.50	492.60	509.17	528.92	551.14	576.52	601.56	629.77	657.62	688.30	719.33	752.83	786.33	822.65	859.32	898.46	917.85	956.99	990.84	1013.06	1040.92	1057.83
Sharp Health Plan	Premier	HMO A	272.80	297.05	306.32	315.59	325.58	335.56	345.90	356.60	356.60	356.60	356.60	358.03	365.16	373.72	387.62	399.04	404.74	413.30	421.86	427.21	432.91	435.77	438.62	441.47	444.32	450.03	455.73	464.29	472.50	483.91	498.17	514.93	534.90	557.37	583.04	608.36	636.89	665.06	696.08	727.46	761.34	795.22	831.95	869.03	908.62	928.23	967.81	1002.05	1024.51	1052.68	1069.80
Sharp Health Plan	Performance	HMO B	291.24	317.12	327.02	336.92	347.58	358.24	369.28	380.70	380.70	380.70	380.70	382.22	389.84	398.97	413.82	426.00	432.09	441.23	450.37	456.08	462.17	465.22	468.26	471.31	474.35	480.44	486.53	495.67	504.43	516.61	531.84	549.73	571.05	595.03	622.44	649.47	679.93	710.01	743.13	776.63	812.79	848.96	888.17	927.77	970.02	990.96	1033.22	1069.77	1093.75	1123.83	1142.10
Sutter Health Plan	Sutter Health Plan	HMO A	346.81	377.64	389.42	401.21	413.90	426.60	439.75	453.36	453.36	453.36	453.36	455.16	464.23	475.11	492.79	507.29	514.55	525.43	536.31	543.11	550.36	553.99	557.62	561.24	564.87	572.12	579.38	590.26	600.68	615.19	633.32	654.63	680.02	708.58	741.22	773.41	809.68	845.49	884.93	924.83	967.89	1010.96	1057.66	1104.80	1155.13	1180.06	1230.38	1273.90	1302.46	1338.28	1360.03
Sutter Health Plan	Sutter Health Plan	HMO B	346.98	377.82	389.62	401.41	414.11	426.81	439.96	453.58	453.58	453.58	453.58	455.38	464.46	475.34	493.03	507.54	514.80	525.69	536.57	543.38	550.63	554.26	557.89	561.52	565.15	572.41	579.66	590.55	600.98	615.49	633.64	654.96	680.36	708.93	741.59	773.79	810.08	845.91	885.37	925.28	968.37	1011.46	1058.18	1105.35	1155.70	1180.64	1230.99	1274.53	1303.11	1338.94	1360.70
Western Health	Full	HMO B	316.71	344.87	355.63	366.39	377.99	389.58	401.59	414.01	414.01	414.01	414.01	415.66	423.94	433.88	450.02	463.27	469.90	479.83	489.77	495.98	502.60	505.91	509.23	512.54	515.85	522.47	529.10	539.03	548.56	561.81	578.37	597.82	621.01	647.09	676.90	706.29	739.41	772.12	808.14	844.57	883.90	923.23	965.87	1008.93	1054.89	1077.66	1123.61	1163.36	1189.44	1222.14	1242.02
Western Health	Full	HMO C	330.55	359.93	371.17	382.40	394.50	406.60	419.13	432.09	432.09	432.09	432.09	433.82	442.46	452.83	469.68	483.51	490.42	500.79	511.16	517.64	524.56	528.01	531.47	534.93	538.38	545.30	552.21	562.58	572.52	586.35	603.63	623.94	648.13	675.36	706.47	737.15	771.71	805.85	843.44	881.46	922.51	963.56	1008.07	1053.00	1100.97	1124.73	1172.69	1214.17	1241.39	1275.53	1296.27

Silver		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																																																	
Anthem Blue Cross	Select HMO	HMO A	293.04	319.09	329.05	339.01	349.73	360.46	371.57	383.06	383.06	383.06	383.06	384.59	392.25	401.45	416.39	428.64	434.77	443.97	453.16	458.91	465.03	468.10	471.16	474.23	477.29	483.42	489.55	498.74	507.55	519.81	535.13	553.14	574.59	598.72	626.30	653.50	684.15	714.41	747.73	781.44	817.83	854.22	893.68	933.52	976.04	997.11	1039.62	1076.40	1100.53	1130.79	1149.18
Anthem Blue Cross	CaliforniaCare HMO	HMO B	336.95	366.90	378.36	389.81	402.14	414.47	427.25	440.46	440.46	440.46	440.46	442.22	451.03	461.60	478.78	492.87	499.92	510.49	521.06	527.67	534.72	538.24	541.77	545.29	548.81	555.86	562.91	573.48	583.61	597.70	615.32	636.02	660.69	688.44	720.15	751.42	786.66	821.46	859.78	898.54	940.38	982.23	1027.59	1073.40	1122.29	1146.52	1195.41	1237.69	1265.44	1300.24	1321.38
Anthem Blue Cross	CaliforniaCare HMO	HMO D	336.53	366.45	377.88	389.32	401.64	413.96	426.71	439.91	439.91	439.91	439.91	441.67	450.47	461.03	478.18	492.26	499.30	509.86	520.41	527.01	534.05	537.57	541.09	544.61	548.13	555.17	562.20	572.76	582.88	596.96	614.55	635.23	659.87	687.58	719.25	750.49	785.68	820.43	858.70	897.42	939.21	981.00	1026.31	1072.06	1120.89	1145.09	1193.92	1236.15	1263.86	1298.61	1319.73
Anthem Blue Cross	Select PPO	PPO B	343.50	374.03	385.71	397.38	409.96	422.53	435.55	449.02	449.02	449.02	449.02	450.82	459.80	470.57	488.08	502.45	509.64	520.41	531.19	537.93	545.11	548.70	552.29	555.89	559.48	566.66	573.85	584.62	594.95	609.32	627.28	648.38	673.53	701.82	734.15	766.03	801.95	837.42	876.49	916.00	958.66	1001.31	1047.56	1094.26	1144.10	1168.80	1218.64	1261.75	1290.03	1325.51	1347.06
Anthem Blue Cross	Prudent Buyer - Small Group	PPO C	353.02	384.40	396.39	408.39	421.31	434.23	447.62	461.46	461.46	461.46	461.46	463.31	472.54	483.61	501.61	516.37	523.76	534.83	545.91	552.83	560.21	563.90	567.60	571.29	574.98	582.36	589.75	600.82	611.43	626.20	644.66	666.35	692.19	721.26	754.49	787.25	824.17	860.62	900.77	941.38	985.22	1029.06	1076.59	1124.58	1175.80	1201.18	1252.40	1296.70	1325.77	1362.23	1384.38
Anthem Blue Cross	Prudent Buyer - Small Group	PPO D	342.32	372.75	384.39	396.02	408.55	421.08	434.06	447.48	447.48	447.48	447.48	449.27	458.22	468.96	486.41	500.73	507.89	518.63	529.37	536.08	543.24	546.82	550.40	553.98	557.56	564.72	571.88	582.62	592.91	607.23	625.13	646.16	671.22	699.41	731.63	763.40	799.20	834.55	873.48	912.86	955.37	997.88	1043.97	1090.51	1140.18	1164.79	1214.46	1257.42	1285.61	1320.96	1342.44
Anthem Blue Cross	Select PPO	PPO E	333.07	362.67	373.99	385.31	397.50	409.69	422.32	435.38	435.38	435.38	435.38	437.12	445.83	456.28	473.26	487.19	494.16	504.61	515.05	521.59	528.55	532.03	535.52	539.00	542.48	549.45	556.42	566.86	576.88	590.81	608.23	628.69	653.07	680.50	711.85	742.76	777.59	811.98	849.86	888.18	929.54	970.90	1015.74	1061.02	1109.35	1133.29	1181.62	1223.42	1250.85	1285.24	1306.14
Anthem Blue Cross	Prudent Buyer - Small Group	PPO F	354.50	386.01	398.06	410.11	423.08	436.06	449.50	463.40	463.40	463.40	463.40	465.25	474.52	485.64	503.72	518.54	525.96	537.08	548.20	555.15	562.57	566.27	569.98	573.69	577.40	584.81	592.23	603.35	614.01	628.83	647.37	669.15	695.10	724.29	757.66	790.56	827.63	864.24	904.56	945.34	989.36	1033.38	1081.11	1129.31	1180.74	1206.23	1257.67	1302.15	1331.35	1367.96	1390.20
Kaiser Permanente	Full	HMO A	318.40	345.43	355.77	366.11	377.24	374.10	385.63	397.55	397.55	397.55	397.55	399.14	407.10	416.64	432.14	444.86	451.22	460.77	470.31	476.27	482.63	485.81	488.99	492.17	495.35	501.71	508.07	517.62	526.76	539.48	555.38	574.07	596.33	621.38	650.00	678.23	710.03	741.44	776.03	811.01	848.78	886.55	927.50	968.84	1012.97	1034.83	1078.96	1117.13	1142.17	1173.58	1192.65
Kaiser Permanente	Full	HMO B	322.59	349.99	360.47	370.95	382.23	379.25	390.94	403.03	403.03	403.03	403.03	404.64	412.70	422.37	438.09	450.99	457.44	467.11	476.78	482.83	489.28	492.50	495.72	498.95	502.17	508.62	515.07	524.74	534.01	546.91	563.03	581.97	604.54	629.93	658.95	687.57	719.81	751.65	786.71	822.18	860.46	898.75	940.26	982.18	1026.91	1049.08	1093.82	1132.51	1157.90	1189.74	1209.09
Kaiser Permanente	Full	HMO C	320.30	347.50	357.90	368.30	379.51	376.44	388.04	400.04	400.04	400.04	400.04	401.64	409.64	419.24	434.84	447.64	454.04	463.65	473.25	479.25	485.65	488.85	492.05	495.25	498.45	504.85	511.25	520.85	530.05	542.85	558.86	577.66	600.06	625.26	654.06	682.47	714.47	746.07	780.88	816.08	854.08	892.09	933.29	974.90	1019.30	1041.30	1085.71	1124.11	1149.31	1180.92	1200.12
Kaiser Permanente	Full	HMO D	294.36	319.25	328.77	338.29	348.54	344.52	355.14	366.12	366.12	366.12	366.12	367.59	374.91	383.70	397.98	409.69	415.55	424.34	433.13	438.62	444.48	447.40	450.33	453.26	456.19	462.05	467.91	476.69	485.11	496.83	511.48	528.68	549.19	572.25	598.61	624.61	653.90	682.82	714.67	746.89	781.68	816.46	854.17	892.25	932.89	953.02	993.66	1028.81	1051.88	1080.80	1098.36
Kaiser Permanente	Full	HMO E	306.86	332.87	342.82	352.76	363.47	359.91	371.00	382.48	382.48	382.48	382.48	384.01	391.65	400.83	415.75	427.99	434.11	443.29	452.47	458.21	464.33	467.38	470.44	473.50	476.56	482.68	488.80	497.98	506.78	519.02	534.32	552.29	573.71	597.81	625.35	652.50	683.10	713.32	746.59	780.25	816.58	852.92	892.32	932.09	974.55	995.58	1038.04	1074.76	1098.85	1129.07	1147.44
Sharp Health Plan	Premier	HMO A	285.29	310.65	320.35	330.04	340.49	350.93	361.74	372.93	372.93	372.93	372.93	374.42	381.88	390.83	405.37	417.31	423.28	432.23	441.18	446.77	452.74	455.72	458.70	461.69	464.67	470.64	476.60	485.55	494.13	506.07	520.98	538.51	559.40	582.89	609.74	636.22	666.05	695.51	727.96	760.78	796.21	831.63	870.05	908.83	950.23	970.74	1012.13	1047.93	1071.43	1100.89	1118.79
Sharp Health Plan	Performance	HMO B	294.75	320.95	330.96	340.98	351.77	362.56	373.73	385.29	385.29	385.29	385.29	386.83	394.54	403.78	418.81	431.14	437.30	446.55	455.80	461.58	467.74	470.82	473.91	476.99	480.07	486.24	492.40	501.65	510.51	522.84	538.25	556.36	577.94	602.21	629.95	657.30	688.13	718.57	752.09	785.99	822.59	859.20	898.88	938.95	981.72	1002.91	1045.68	1082.66	1106.94	1137.38	1155.87
Sharp Health Plan	Premier	HMO C	268.76	292.65	301.78	310.92	320.76	330.59	340.78	351.32	351.32	351.32	351.32	352.73	359.75	368.18	381.88	393.13	398.75	407.18	415.61	420.88	426.50	429.31	432.12	434.93	437.74	443.37	448.99	457.42	465.50	476.74	490.79	507.31	526.98	549.11	574.41	599.35	627.46	655.21	685.78	716.69	750.07	783.44	819.63	856.17	895.16	914.49	953.48	987.21	1009.34	1037.10	1053.96
Sutter Health Plan	Sutter Health Plan	HMO B	423.96	461.65	476.05	490.46	505.98	521.50	537.57	554.21	554.21	554.21	554.21	556.41	567.50	580.80	602.41	620.15	629.01	642.31	655.61	663.93	672.79	677.23	681.66	686.09	690.53	699.40	708.26	721.56	734.31	752.04	774.21	800.26	831.29	866.21	906.11	945.46	989.79	1033.58	1081.79	1130.56	1183.21	1235.86	1292.94	1350.58	1412.09	1442.57	1504.09	1557.29	1592.20	1635.99	1662.58
Sutter Health Plan	Sutter Health Plan	HMO C	367.20	399.83	412.31	424.79	438.23	451.67	465.59	480.00	480.00	480.00	480.00	481.91	491.51	503.03	521.75	537.11	544.79	556.31	567.83	575.03	582.71	586.55	590.39	594.23	598.07	605.75	613.43	624.95	635.99	651.35	670.55	693.11	719.99	750.23	784.79	818.87	857.27	895.19	936.95	979.19	1024.79	1070.39	1119.83	1169.75	1223.02	1249.42	1302.70	1348.78	1379.02	1416.94	1439.97
UnitedHealthcare	SignatureValue	HMO A	442.71	482.07	497.11	512.16	528.36	544.57	561.35	578.71	578.71	578.71	578.71	581.02	592.60	606.49	629.06	647.58	656.84	670.72	684.61	693.29	702.55	707.18	711.81	716.44	721.07	730.33	739.59	753.48	766.79	785.31	808.46	835.66	868.07	904.52	946.19	987.28	1033.58	1079.29	1129.64	1180.57	1235.55	1290.52	1350.13	1410.32	1474.55	1506.38	1570.62	1626.18	1662.63	1708.35	1736.13
UnitedHealthcare	Alliance	HMO E	394.01	429.04	442.43	455.82	470.24	484.66	499.60	515.05	515.05	515.05	515.05	517.11	527.41	539.77	559.86	576.34	584.58	596.94	609.30	617.03	625.27	629.39	633.51	637.63	641.75	649.99	658.23	670.60	682.44	698.92	719.52	743.73	772.58	805.02	842.11	878.68	919.88	960.57	1005.38	1050.70	1099.63	1148.56	1201.61	1255.18	1312.35	1340.68	1397.85	1447.29	1479.74	1520.43	1545.15
Western Health	Full	HMO B	362.81	395.06	407.40	419.73	433.01	446.29	460.04	474.27	474.27	474.27	474.27	476.16	485.65	497.03	515.53	530.71	538.29	549.68	561.06	568.17	575.76	579.56	583.35	587.14	590.94	598.53	606.11	617.50	628.40	643.58	662.55	684.84	711.40	741.28	775.43	809.10	847.04	884.51	925.77	967.51	1012.56	1057.62	1106.47	1155.79	1208.43	1234.52	1287.16	1332.69	1362.57	1400.04	1422.80
Western Health	Full	HMO C	342.86	373.34	384.99	396.64	409.19	421.74	434.74	448.18	448.18	448.18	448.18	449.98	458.94	469.70	487.18	501.52	508.69	519.45	530.20	536.93	544.10	547.68	551.27	554.85	558.44	565.61	572.78	583.54	593.84	608.19	626.11	647.18	672.28	700.51	732.78	764.60	800.46	835.86	874.86	914.30	956.87	999.45	1045.62	1092.23	1141.97	1166.63	1216.37	1259.40	1287.64	1323.04	1344.54
Western Health	Full	HMO D	330.78	360.19	371.43	382.67	394.78	406.88	419.42	432.40	432.40	432.40	432.40	434.12	442.77	453.15	470.01	483.85	490.77	501.15	511.52	518.01	524.93	528.39	531.85	535.31	538.76	545.68	552.60	562.98	572.92	586.76	604.06	624.38	648.59	675.83	706.97	737.67	772.26	806.42	844.04	882.09	923.16	964.24	1008.78	1053.75	1101.74	1125.52	1173.52	1215.03	1242.27	1276.43	1297.19

Health Care Service Plan rates will vary by county

THE INFORMATION PROVIDED HEREIN, INCLUDING THE RATING INFORMATION IS PROVIDED ON TO YOU ON AN "AS IS" "AS AVAILABLE" BASIS WITHOUT WARRANTY OF ANY KIND, EXPRESS OR IMPLIED. WE FURTHER DISCLAIM ALL LIABILITY RELATED TO THE INFORMATION, INCLUDING THOSE CAUSED BY RATING DISCREPANCIES. FINAL RATES AND RATING AREAS ARE BASED UPON ACTUAL ENROLLMENT AND UNDERWRITING AND MUST BE APPROVED BY THE APPLICABLE INSURANCE CARRIER.

Continued

Gold		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																																																			
Anthem Blue Cross	Select HMO	HMO A	375.68	409.07	421.84	434.61	448.36	462.11	476.35	491.08	491.08	491.08	491.08	493.04	502.87	514.65	533.80	549.52	557.38	569.16	580.95	588.31	596.17	600.10	604.03	607.96	611.89	619.74	627.60	639.39	650.68	666.40	686.04	709.12	736.62	767.56	802.92	837.78	877.07	915.86	958.59	1001.80	1048.46	1095.11	1145.69	1196.76	1251.27	1278.28	1332.79	1379.93	1410.87	1449.67	1473.24
Anthem Blue Cross	CaliforniaCare HMO	HMO B	432.00	470.40	485.09	499.77	515.58	531.39	547.77	564.71	564.71	564.71	564.71	566.97	578.26	591.82	613.84	631.91	640.95	654.50	668.05	676.52	685.56	690.08	694.59	699.11	703.63	712.66	721.70	735.25	748.24	766.31	788.90	815.44	847.07	882.64	923.30	963.40	1008.57	1053.18	1102.31	1152.01	1205.66	1259.30	1317.47	1376.20	1438.88	1469.94	1532.62	1586.84	1622.41	1667.02	1694.13
Anthem Blue Cross	Priority Select HMO	HMO C	401.92	437.64	451.30	464.96	479.67	494.38	509.62	525.38	525.38	525.38	525.38	527.48	537.99	550.60	571.09	587.90	596.31	608.92	621.52	629.41	637.81	642.01	646.22	650.42	654.62	663.03	671.44	684.04	696.13	712.94	733.96	758.65	788.07	821.17	859.00	896.30	938.33	979.83	1025.54	1071.78	1121.69	1171.60	1225.71	1280.35	1338.67	1367.56	1425.88	1476.32	1509.42	1550.92	1576.14
Anthem Blue Cross	Select PPO	PPO B	406.64	442.78	456.60	470.42	485.31	500.19	515.60	531.55	531.55	531.55	531.55	533.68	544.31	557.06	577.79	594.80	603.31	616.07	628.82	636.80	645.30	649.55	653.81	658.06	662.31	670.82	679.32	692.08	704.30	721.31	742.58	767.56	797.33	830.81	869.08	906.82	949.35	991.34	1037.59	1084.36	1134.86	1185.36	1240.11	1295.39	1354.39	1383.62	1442.63	1493.66	1527.14	1569.14	1594.65
Anthem Blue Cross	Select PPO	PPO C	419.55	456.84	471.10	485.36	500.72	516.07	531.98	548.43	548.43	548.43	548.43	550.62	561.59	574.75	596.14	613.69	622.47	635.63	648.79	657.02	665.79	670.18	674.57	678.96	683.34	692.12	700.89	714.06	726.67	744.22	766.16	791.93	822.65	857.20	896.68	935.62	979.50	1022.82	1070.54	1118.80	1170.90	1223.00	1279.49	1336.52	1397.40	1427.56	1488.44	1541.09	1575.64	1618.97	1645.29
Anthem Blue Cross	Select PPO	PPO D	403.67	439.55	453.27	466.99	481.76	496.54	511.84	527.67	527.67	527.67	527.67	529.78	540.33	553.00	573.58	590.46	598.91	611.57	624.23	632.15	640.59	644.81	649.03	653.26	657.48	665.92	674.36	687.03	699.16	716.05	737.15	761.96	791.51	824.75	862.74	900.21	942.42	984.10	1030.01	1076.45	1126.58	1176.70	1231.05	1285.93	1344.50	1373.53	1432.10	1482.75	1516.00	1557.68	1583.01
Anthem Blue Cross	Prudent Buyer - Small Group	PPO E	431.20	469.53	484.18	498.84	514.62	530.40	546.75	563.66	563.66	563.66	563.66	565.91	577.19	590.72	612.70	630.74	639.75	653.28	666.81	675.26	684.28	688.79	693.30	697.81	702.32	711.34	720.36	733.89	746.85	764.89	787.43	813.93	845.49	881.00	921.58	961.60	1006.70	1051.23	1100.26	1149.87	1203.41	1256.96	1315.02	1373.64	1436.21	1467.21	1529.77	1583.88	1619.40	1663.92	1690.98
Anthem Blue Cross	Prudent Buyer - Small Group	PPO H	414.91	451.79	465.89	479.99	495.17	510.36	526.09	542.36	542.36	542.36	542.36	544.53	555.38	568.39	589.55	606.90	615.58	628.60	641.61	649.75	658.43	662.76	667.10	671.44	675.78	684.46	693.14	706.15	718.63	735.98	757.68	783.17	813.54	847.71	886.76	925.27	968.65	1011.50	1058.69	1106.41	1157.94	1209.46	1265.33	1321.73	1381.93	1411.76	1471.97	1524.03	1558.20	1601.05	1627.08
Anthem Blue Cross	Prudent Buyer - Small Group	PPO I	421.03	458.46	472.77	487.08	502.49	517.90	533.86	550.37	550.37	550.37	550.37	552.57	563.58	576.79	598.25	615.86	624.67	637.88	651.09	659.34	668.15	672.55	676.96	681.36	685.76	694.57	703.37	716.58	729.24	746.85	768.87	794.73	825.56	860.23	899.85	938.93	982.96	1026.44	1074.32	1122.75	1175.04	1227.33	1284.01	1341.25	1402.34	1432.61	1493.70	1546.54	1581.21	1624.69	1651.11
Kaiser Permanente	Full	HMO B	382.56	415.29	427.81	440.33	453.81	453.02	466.98	481.42	481.42	481.42	481.42	483.35	492.98	504.53	523.31	538.71	546.41	557.97	569.52	576.74	584.45	588.30	592.15	596.00	599.85	607.55	615.26	626.81	637.88	653.29	672.55	695.17	722.13	752.46	787.12	821.31	859.82	897.85	939.74	982.10	1027.84	1073.57	1123.16	1173.23	1226.66	1253.14	1306.58	1352.80	1383.13	1421.16	1444.26
Kaiser Permanente	Full	HMO C	393.56	427.28	440.17	453.06	466.94	466.56	480.94	495.81	495.81	495.81	495.81	497.79	507.71	519.61	538.95	554.81	562.74	574.64	586.54	593.98	601.91	605.88	609.85	613.81	617.78	625.71	633.64	645.54	656.95	672.81	692.65	715.95	743.71	774.95	810.65	845.85	885.52	924.69	967.82	1011.45	1058.55	1105.66	1156.72	1208.29	1263.32	1290.59	1345.63	1393.23	1424.46	1463.63	1487.43
Kaiser Permanente	Full	HMO D	371.62	403.39	415.53	427.68	440.76	439.57	453.11	467.13	467.13	467.13	467.13	469.00	478.34	489.55	507.77	522.72	530.19	541.40	552.61	559.62	567.09	570.83	574.57	578.30	582.04	589.52	596.99	608.20	618.94	633.89	652.58	674.53	700.69	730.12	763.75	796.92	834.29	871.19	911.83	952.94	997.32	1041.70	1089.81	1138.39	1190.24	1215.93	1267.79	1312.63	1342.06	1378.96	1401.39
Kaiser Permanente	Full	HMO E	332.46	360.74	371.56	382.37	394.02	391.39	403.45	415.93	415.93	415.93	415.93	417.60	425.91	435.90	452.12	465.43	472.08	482.06	492.05	498.29	504.94	508.27	511.60	514.92	518.25	524.91	531.56	541.54	551.11	564.42	581.06	600.60	623.90	650.10	680.05	709.58	742.85	775.71	811.90	848.50	888.01	927.53	970.37	1013.62	1059.79	1082.67	1128.84	1168.77	1194.97	1227.83	1247.79
Kaiser Permanente	Full	HMO F	379.38	411.83	424.24	436.65	450.01	449.10	462.95	477.26	477.26	477.26	477.26	479.17	488.72	500.17	518.79	534.06	541.69	553.15	564.60	571.76	579.40	583.22	587.03	590.85	594.67	602.31	609.94	621.40	632.37	647.65	666.74	689.17	715.89	745.96	780.33	814.21	852.39	890.10	931.62	973.62	1018.96	1064.30	1113.46	1163.09	1216.07	1242.32	1295.29	1341.11	1371.18	1408.88	1431.78
Sharp Health Plan	Performance	HMO A	366.15	398.70	411.14	423.59	436.99	450.39	464.27	478.63	478.63	478.63	478.63	480.54	490.12	501.60	520.27	535.59	543.25	554.73	566.22	573.40	581.06	584.89	588.71	592.54	596.37	604.03	611.69	623.18	634.18	649.50	668.65	691.14	717.95	748.10	782.56	816.54	854.83	892.64	934.29	976.41	1021.88	1067.34	1116.64	1166.42	1219.55	1245.87	1299.00	1344.95	1375.10	1412.92	1435.89
Sharp Health Plan	Premier	HMO B	345.92	376.67	388.42	400.18	412.84	425.50	438.61	452.18	452.18	452.18	452.18	453.99	463.03	473.88	491.52	505.99	513.22	524.08	534.93	541.71	548.95	552.56	556.18	559.80	563.42	570.65	577.89	588.74	599.14	613.61	631.70	652.95	678.27	706.76	739.31	771.42	807.59	843.32	882.66	922.45	965.40	1008.36	1054.94	1101.96	1152.15	1177.02	1227.22	1270.63	1299.11	1334.84	1356.54
Sharp Health Plan	Performance	HMO D	377.08	410.59	423.41	436.23	450.03	463.83	478.12	492.91	492.91	492.91	492.91	494.88	504.74	516.57	535.79	551.57	559.45	571.28	583.11	590.51	598.39	602.34	606.28	610.22	614.17	622.05	629.94	641.77	653.11	668.88	688.60	711.76	739.37	770.42	805.91	840.90	880.34	919.28	962.16	1005.54	1052.36	1099.19	1149.96	1201.22	1255.93	1283.04	1337.76	1385.08	1416.13	1455.07	1478.73
Sutter Health Plan	Sutter Health Plan	HMO A	464.44	505.73	521.51	537.30	554.30	571.30	588.90	607.13	607.13	607.13	607.13	609.55	621.69	636.26	659.94	679.36	689.08	703.65	718.22	727.33	737.04	741.90	746.75	751.61	756.47	766.18	775.90	790.47	804.43	823.86	848.14	876.68	910.67	948.92	992.64	1035.74	1084.31	1132.27	1185.09	1238.52	1296.19	1353.87	1416.40	1479.54	1546.93	1580.32	1647.71	1706.00	1744.25	1792.21	1821.34
Sutter Health Plan	Sutter Health Plan	HMO B	498.16	542.45	559.38	576.31	594.54	612.77	631.66	651.21	651.21	651.21	651.21	653.80	666.82	682.45	707.85	728.69	739.11	754.74	770.36	780.13	790.55	795.76	800.97	806.18	811.39	821.81	832.23	847.86	862.83	883.67	909.72	940.33	976.79	1017.82	1064.70	1110.94	1163.03	1214.48	1271.13	1328.44	1390.30	1452.17	1519.24	1586.96	1659.25	1695.06	1767.34	1829.86	1870.88	1922.33	1953.58
Sutter Health Plan	Sutter Health Plan	HMO C	423.25	460.87	475.26	489.64	505.14	520.63	536.67	553.28	553.28	553.28	553.28	555.48	566.55	579.83	601.40	619.11	627.96	641.24	654.52	662.82	671.67	676.10	680.52	684.95	689.37	698.23	707.08	720.36	733.08	750.79	772.92	798.92	829.90	864.76	904.60	943.88	988.14	1031.85	1079.98	1128.67	1181.23	1233.79	1290.78	1348.32	1409.73	1440.16	1501.57	1554.69	1589.54	1633.25	1659.80
UnitedHealthcare	SignatureValue	HMO A	484.70	527.78	544.25	560.73	578.47	596.21	614.58	633.59	633.59	633.59	633.59	636.12	648.80	664.00	688.71	708.99	719.12	734.33	749.54	759.04	769.18	774.25	779.32	784.38	789.45	799.59	809.73	824.93	839.51	859.78	885.13	914.90	950.39	990.30	1035.92	1080.90	1131.59	1181.65	1236.77	1292.52	1352.71	1412.91	1478.17	1544.06	1614.39	1649.23	1719.56	1780.39	1820.30	1870.36	1900.77
UnitedHealthcare	Alliance	HMO B	431.38	469.73	484.39	499.05	514.84	530.63	546.98	563.90	563.90	563.90	563.90	566.16	577.43	590.97	612.96	631.00	640.03	653.56	667.09	675.55	684.57	689.09	693.60	698.11	702.62	711.64	720.66	734.20	747.17	765.21	787.77	814.27	845.85	881.38	921.98	962.01	1007.13	1051.67	1100.73	1150.36	1203.93	1257.50	1315.58	1374.22	1436.82	1467.83	1530.42	1584.56	1620.08	1664.63	1691.70
UnitedHealthcare	SignatureValue	HMO C	518.91	565.04	582.68	600.31	619.31	638.30	657.97	678.32	678.32	678.32	678.32	681.03	694.60	710.88	737.33	759.04	769.89	786.17	802.45	812.63	823.48	828.91	834.33	839.76	845.19	856.04	866.89	883.17	898.77	920.48	947.61	979.49	1017.48	1060.21	1109.05	1157.21	1211.48	1265.07	1324.08	1383.77	1448.21	1512.65	1582.52	1653.07	1728.36	1765.67	1840.96	1906.08	1948.81	2002.40	2034.96
UnitedHealthcare	Alliance	HMO D	461.84	502.89	518.59	534.28	551.19	568.09	585.60	603.71	603.71	603.71	603.71	606.12	618.20	632.69	656.23	675.55	685.21	699.70	714.19	723.24	732.90	737.73	742.56	747.39	752.22	761.88	771.54	786.03	799.92	819.23	843.38	871.76	905.57	943.60	987.07	1029.93	1078.23	1125.92	1178.44	1231.57	1288.92	1346.27	1408.46	1471.24	1538.25	1571.46	1638.47	1696.43	1734.46	1782.15	1811.13
UnitedHealthcare	SignatureValue	HMO F	536.73	584.44	602.68	620.92	640.57	660.22	680.56	701.61	701.61	701.61	701.61	704.42	718.45	735.29	762.65	785.10	796.33	813.17	830.00	840.53	851.75	857.37	862.98	868.59	874.21	885.43	896.66	913.50	929.63	952.08	980.15	1013.12	1052.42	1096.62	1147.13	1196.95	1253.08	1308.50	1369.54	1431.28	1497.94	1564.59	1636.86	1709.82	1787.70	1826.29	1904.17	1971.52	2015.73	2071.15	2104.83
UnitedHealthcare	Alliance	HMO G	477.70	520.16	536.39	552.63	570.11	587.60	605.71	624.44	624.44	624.44	624.44	626.94	639.43	654.41	678.77	698.75	708.74	723.73	738.71	748.08	758.07	763.07	768.06	773.06	778.05	788.04	798.03	813.02	827.38	847.37	872.34	901.69	936.66	976.00	1020.96	1065.29	1115.25	1164.58	1218.91	1273.86	1333.18	1392.50	1456.82	1521.76	1591.07	1625.42	1694.73	1754.68	1794.02	1843.35	1873.32
UnitedHealthcare	SignatureValue	HMO H	502.99	547.70	564.79	581.89	600.30	618.71	637.78	657.50	657.50	657.50	657.50	660.13	673.28	689.06	714.70	735.74	746.26	762.04	777.82	787.69	798.21	803.47	808.73	813.99	819.25	829.77	840.29	856.07	871.19	892.23	918.53	949.43	986.25	1027.67	1075.01	1121.70	1174.30	1226.24	1283.44	1341.30	1403.76	1466.23	1533.95	1602.33	1675.31	1711.47	1784.46	1847.58	1889.00	1940.94	1972.50
UnitedHealthcare	Alliance	HMO J	447.66	487.45	502.67	517.88	534.27	550.65	567.62	585.18	585.18	585.18	585.18	587.52	599.22	613.27	636.09	654.82	664.18	678.22	692.27	701.05	710.41	715.09	719.77	724.45	729.13	738.50	747.86	761.90	775.36	794.09	817.50	845.00	877.77	914.64	956.77	998.32	1045.13	1091.36	1142.27	1193.77	1249.36	1304.95	1365.22	1426.08	1491.04	1523.22	1588.18	1644.36	1681.22	1727.45	1755.54
Western Health	Full	HMO A	406.47	442.60	456.41	470.23	485.10	499.98	515.39	531.33	531.33	531.33	531.33	533.45	544.08	556.83	577.55	594.56	603.06	615.81	628.56	636.53	645.03	649.28	653.53	657.78	662.04	670.54	679.04	691.79	704.01	721.01	742.27	767.24	796.99	830.47	868.72	906.45	948.95	990.93	1037.15	1083.91	1134.39	1184.86	1239.59	1294.85	1353.83	1383.05	1442.03	1493.03	1526.51	1568.48	1593.99
Western Health	Full	HMO B	426.53	464.44	478.93	493.43	509.04	524.65	540.82	557.55	557.55	557.55	557.55	559.78	570.93	584.31	606.06	623.90	632.82	646.20	659.58	667.94	676.86	681.33	685.79	690.25	694.71	703.63	712.55	725.93	738.75	756.59	778.90	805.10	836.32	871.45	911.59	951.18	995.78	1039.83	1088.34	1137.40	1190.37	1243.34	1300.76	1358.75	1420.64	1451.30	1513.19	1566.71	1601.84	1645.89	1672.65
Western Health	Full	HMO C	397.43	432.76	446.27	459.77	474.32	488.87	503.93	519.52	519.52	519.52	519.52	521.60	531.99	544.46	564.72	581.34	589.65	602.12	614.59	622.38	630.70	634.85	639.01	643.16	647.32	655.63	663.94	676.41	688.36	704.99	725.77	750.18	779.28	812.01	849.41	886.30	927.86	968.90	1014.10	1059.82	1109.17	1158.53	1212.04	1266.07	1323.73	1352.31	1409.97	1459.85	1492.58	1533.62	1558.56
Western Health	Full	HMO D	382.67	416.69	429.69	442.70	456.70	470.71	485.22	500.22	500.22	500.22	500.22	502.22	512.23	524.23	543.74	559.75	567.75	579.76	591.76	599.27	607.27	611.27	615.27	619.28	623.28	631.28	639.28	651.29	662.79	678.80	698.81	722.32	750.33	781.85	817.86	853.38	893.40	932.91	976.43	1020.45	1067.97	1115.50	1167.02	1219.04	1274.57	1302.08	1357.60	1405.62	1437.14	1476.66	1500.66

Platinum		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																																																			
Anthem Blue Cross	Select HMO	HMO A	407.59	443.82	457.68	471.53	486.45	501.36	516.82	532.80	532.80	532.80	532.80	534.93	545.59	558.37	579.15	596.20	604.73	617.52	630.30	638.29	646.82	651.08	655.34	659.61	663.87	672.39	680.92	693.71	705.96	723.01	744.32	769.36	799.20	832.77	871.13	908.96	951.58	993.67	1040.03	1086.91	1137.53	1188.14	1243.02	1298.43	1357.57	1386.88	1446.02	1497.17	1530.73	1572.83	1598.40
Anthem Blue Cross	Vivity	HMO B	467.95	509.55	525.45	541.35	558.48	575.61	593.35	611.70	611.70	611.70	611.70	614.15	626.38	641.06	664.92	684.49	694.28	708.96	723.64	732.82	742.60	747.50	752.39	757.28	762.18	771.97	781.75	796.43	810.50	830.08	854.54	883.29	917.55	956.09	1000.13	1043.56	1092.50	1140.82	1194.04	1247.87	1305.98	1364.09	1427.10	1490.71	1558.61	1592.26	1660.15	1718.88	1757.41	1805.74	1835.10
Anthem Blue Cross	Vivity	HMO C	458.20	498.93	514.51	530.08	546.85	563.62	580.99	598.96	598.96	598.96	598.96	601.36	613.34	627.71	651.07	670.24	679.82	694.19	708.57	717.55	727.14	731.93	736.72	741.51	746.30	755.89	765.47	779.85	793.62	812.79	836.75	864.90	898.44	936.17	979.30	1021.83	1069.74	1117.06	1169.17	1221.88	1278.78	1335.68	1397.37	1459.67	1526.15	1559.09	1625.58	1683.08	1720.81	1768.13	1796.88
Anthem Blue Cross	CaliforniaCare HMO	HMO D	468.60	510.25	526.18	542.11	559.26	576.41	594.17	612.55	612.55	612.55	612.55	615.00	627.25	641.95	665.84	685.44	695.24	709.95	724.65	733.83	743.64	748.54	753.44	758.34	763.24	773.04	782.84	797.54	811.63	831.23	855.73	884.52	918.83	957.42	1001.52	1045.01	1094.01	1142.41	1195.70	1249.60	1307.79	1365.99	1429.08	1492.78	1560.78	1594.47	1662.46	1721.27	1759.86	1808.25	1837.65
Anthem Blue Cross	Prudent Buyer - Small Group	PPO B	486.49	529.74	546.27	562.81	580.61	598.42	616.86	635.94	635.94	635.94	635.94	638.48	651.20	666.47	691.27	711.62	721.79	737.05	752.32	761.86	772.03	777.12	782.21	787.29	792.38	802.56	812.73	827.99	842.62	862.97	888.41	918.30	953.91	993.97	1039.76	1084.91	1135.79	1186.03	1241.35	1297.32	1357.73	1418.15	1483.65	1549.79	1620.38	1655.35	1725.94	1786.99	1827.06	1877.29	1907.82
Kaiser Permanente	Full	HMO A	423.53	459.91	473.82	487.73	502.70	503.41	518.93	534.98	534.98	534.98	534.98	537.12	547.82	560.66	581.52	598.64	607.20	620.04	632.88	640.90	649.46	653.74	658.02	662.30	666.58	675.14	683.70	696.54	708.85	725.96	747.36	772.51	802.47	836.17	874.69	912.67	955.47	997.73	1044.28	1091.35	1142.18	1193.00	1248.10	1303.74	1363.12	1392.55	1451.93	1503.29	1536.99	1579.25	1604.94
Kaiser Permanente	Full	HMO B	412.48	447.88	461.41	474.94	489.52	489.82	504.92	520.54	520.54	520.54	520.54	522.62	533.03	545.52	565.82	582.48	590.81	603.30	615.79	623.60	631.93	636.10	640.26	644.42	648.59	656.92	665.25	677.74	689.71	706.37	727.19	751.65	780.80	813.60	851.08	888.04	929.68	970.80	1016.09	1061.89	1111.35	1160.80	1214.41	1268.55	1326.33	1354.96	1412.74	1462.71	1495.50	1536.62	1561.62
Kaiser Permanente	Full	HMO C	396.22	430.18	443.16	456.14	470.12	469.83	484.31	499.29	499.29	499.29	499.29	501.28	511.27	523.25	542.72	558.70	566.69	578.67	590.66	598.15	606.13	610.13	614.12	618.12	622.11	630.10	638.09	650.07	661.56	677.53	697.50	720.97	748.93	780.39	816.33	851.78	891.73	931.17	974.61	1018.55	1065.98	1113.41	1164.84	1216.76	1272.18	1299.64	1355.06	1403.00	1434.45	1473.89	1497.87
Sharp Health Plan	Premier	HMO A	387.44	421.88	435.05	448.22	462.40	476.58	491.27	506.46	506.46	506.46	506.46	508.49	518.62	530.77	550.52	566.73	574.83	586.99	599.14	606.74	614.84	618.89	622.95	627.00	631.05	639.15	647.26	659.41	671.06	687.27	707.52	731.33	759.69	791.60	828.06	864.02	904.54	944.55	988.61	1033.18	1081.29	1129.41	1181.57	1234.24	1290.46	1318.32	1374.53	1423.15	1455.06	1495.07	1519.38
Sharp Health Plan	Performance	HMO B	415.31	452.23	466.34	480.46	495.66	510.86	526.60	542.89	542.89	542.89	542.89	545.06	555.92	568.95	590.12	607.49	616.18	629.21	642.24	650.38	659.07	663.41	667.75	672.10	676.44	685.13	693.81	706.84	719.33	736.70	758.42	783.93	814.34	848.54	887.63	926.17	969.60	1012.49	1059.72	1107.50	1159.07	1210.64	1266.56	1323.02	1383.28	1413.14	1473.40	1525.52	1559.72	1602.61	1628.67
Sharp Health Plan	Premier	HMO C	388.91	423.48	436.70	449.92	464.15	478.39	493.13	508.38	508.38	508.38	508.38	510.41	520.58	532.78	552.61	568.88	577.01	589.21	601.41	609.04	617.17	621.24	625.31	629.37	633.44	641.58	649.71	661.91	673.60	689.87	710.21	734.10	762.57	794.60	831.20	867.30	907.97	948.13	992.36	1037.10	1085.39	1133.69	1186.05	1238.92	1295.35	1323.31	1379.74	1428.55	1460.58	1500.74	1525.14
Sutter Health Plan	Sutter Health Plan	HMO A	541.07	589.17	607.56	625.95	645.75	665.56	686.07	707.30	707.30	707.30	707.30	710.12	724.26	741.24	768.82	791.45	802.77	819.75	836.72	847.33	858.65	864.30	869.96	875.62	881.28	892.60	903.91	920.89	937.15	959.79	988.08	1021.32	1060.93	1105.49	1156.41	1206.63	1263.21	1319.09	1380.62	1442.87	1510.06	1577.25	1650.10	1723.66	1802.17	1841.07	1919.58	1987.48	2032.03	2087.91	2121.85
UnitedHealthcare	SignatureValue	HMO A	538.56	586.43	604.74	623.04	642.75	662.46	682.88	704.00	704.00	704.00	704.00	706.82	720.90	737.79	765.25	787.78	799.04	815.94	832.83	843.39	854.66	860.29	865.92	871.55	877.18	888.45	899.71	916.61	932.80	955.33	983.49	1016.58	1056.00	1100.35	1151.04	1201.02	1257.34	1312.96	1374.21	1436.16	1503.04	1569.92	1642.43	1715.65	1793.79	1832.51	1910.66	1978.24	2022.59	2078.21	2112.00
UnitedHealthcare	SignatureValue	HMO B	583.31	635.16	654.99	674.81	696.16	717.51	739.63	762.50	762.50	762.50	762.50	765.55	780.80	799.10	828.84	853.24	865.44	883.74	902.04	913.48	925.68	931.78	937.88	943.98	950.08	962.28	974.48	992.78	1010.31	1034.71	1065.21	1101.05	1143.75	1191.79	1246.69	1300.83	1361.83	1422.06	1488.40	1555.50	1627.94	1700.38	1778.91	1858.21	1942.85	1984.79	2069.43	2142.63	2190.66	2250.90	2287.50
UnitedHealthcare	Alliance	HMO C	479.32	521.92	538.22	554.51	572.05	589.59	607.76	626.56	626.56	626.56	626.56	629.07	641.60	656.63	681.07	701.12	711.15	726.18	741.22	750.62	760.64	765.66	770.67	775.68	780.69	790.72	800.74	815.78	830.19	850.24	875.30	904.75	939.84	979.31	1024.43	1068.91	1119.04	1168.53	1223.05	1278.18	1337.71	1397.23	1461.76	1526.93	1596.47	1630.94	1700.48	1760.63	1800.11	1849.61	1879.68
UnitedHealthcare	SignatureValue	HMO D	559.79	609.55	628.57	647.60	668.09	688.58	709.80	731.75	731.75	731.75	731.75	734.68	749.31	766.87	795.41	818.83	830.54	848.10	865.66	876.64	888.34	894.20	900.05	905.91	911.76	923.47	935.18	952.74	969.57	992.98	1022.25	1056.65	1097.63	1143.73	1196.41	1248.37	1306.91	1364.71	1428.38	1492.77	1562.29	1631.80	1707.17	1783.27	1864.50	1904.75	1985.97	2056.22	2102.32	2160.13	2195.25
UnitedHealthcare	SignatureValue	HMO E	574.04	625.07	644.58	664.09	685.10	706.11	727.87	750.38	750.38	750.38	750.38	753.38	768.39	786.40	815.66	839.68	851.68	869.69	887.70	898.96	910.96	916.96	922.97	928.97	934.97	946.98	958.99	976.99	994.25	1018.27	1048.28	1083.55	1125.57	1172.84	1226.87	1280.15	1340.18	1399.46	1464.74	1530.78	1602.06	1673.35	1750.64	1828.68	1911.97	1953.24	2036.53	2108.57	2155.84	2215.12	2251.14
UnitedHealthcare	Alliance	HMO F	498.21	542.50	559.43	576.37	594.60	612.84	631.72	651.26	651.26	651.26	651.26	653.87	666.89	682.52	707.92	728.76	739.18	754.81	770.44	780.21	790.63	795.84	801.05	806.26	811.47	821.89	832.31	847.94	862.92	883.76	909.81	940.42	976.89	1017.92	1064.81	1111.05	1163.15	1214.60	1271.26	1328.57	1390.44	1452.31	1519.39	1587.12	1659.41	1695.23	1767.52	1830.04	1871.07	1922.52	1953.78
UnitedHealthcare	Alliance	HMO G	510.91	556.32	573.68	591.05	609.75	628.45	647.81	667.85	667.85	667.85	667.85	670.52	683.88	699.91	725.95	747.32	758.01	774.04	790.07	800.08	810.77	816.11	821.46	826.80	832.14	842.83	853.51	869.54	884.90	906.27	932.99	964.38	1001.78	1043.85	1091.93	1139.35	1192.78	1245.54	1303.64	1362.41	1425.86	1489.31	1558.09	1627.55	1701.68	1738.41	1812.54	1876.66	1918.73	1971.49	2003.55
UnitedHealthcare	Alliance	HMO N	519.15	565.30	582.94	600.59	619.59	638.59	658.27	678.63	678.63	678.63	678.63	681.34	694.92	711.20	737.67	759.39	770.25	786.53	802.82	813.00	823.86	829.29	834.71	840.14	845.57	856.43	867.29	883.58	899.18	920.90	948.05	979.94	1017.95	1060.70	1109.56	1157.74	1212.03	1265.64	1324.69	1384.41	1448.88	1513.34	1583.24	1653.82	1729.15	1766.47	1841.80	1906.95	1949.70	2003.32	2035.89
Western Health	Full	HMO B	464.61	505.91	521.70	537.49	554.49	571.50	589.11	607.33	607.33	607.33	607.33	609.76	621.91	636.48	660.17	679.60	689.32	703.90	718.47	727.58	737.30	742.16	747.02	751.88	756.73	766.45	776.17	790.75	804.71	824.15	848.44	876.99	911.00	949.26	992.99	1036.11	1084.69	1132.67	1185.51	1238.96	1296.65	1354.35	1416.90	1480.07	1547.48	1580.88	1648.30	1706.60	1744.86	1792.84	1821.99
Western Health	Full	HMO C	459.94	500.82	516.45	532.08	548.92	565.75	583.19	601.22	601.22	601.22	601.22	603.63	615.65	630.08	653.53	672.77	682.39	696.82	711.25	720.27	729.89	734.70	739.51	744.32	749.13	758.75	768.36	782.79	796.62	815.86	839.91	868.17	901.84	939.71	983.00	1025.69	1073.79	1121.28	1173.59	1226.50	1283.61	1340.73	1402.66	1465.18	1531.92	1564.99	1631.72	1689.44	1727.32	1774.81	1803.66
Western Health	Full	HMO D	434.40	473.01	487.78	502.54	518.44	534.34	550.81	567.84	567.84	567.84	567.84	570.11	581.47	595.10	617.24	635.42	644.50	658.13	671.76	680.28	689.36	693.90	698.45	702.99	707.53	716.62	725.70	739.33	752.39	770.56	793.28	819.96	851.76	887.54	928.42	968.74	1014.17	1059.03	1108.43	1158.40	1212.34	1266.29	1324.78	1383.83	1446.86	1478.09	1541.12	1595.64	1631.41	1676.27	1703.52

Health Care Service Plan rates will vary by county

THE INFORMATION PROVIDED HEREIN, INCLUDING THE RATING INFORMATION IS PROVIDED ON TO YOU ON AN “AS IS” “AS AVAILABLE” BASIS WITHOUT WARRANTY OF ANY KIND, EXPRESS OR IMPLIED. WE FURTHER DISCLAIM ALL LIABILITY RELATED TO THE INFORMATION, INCLUDING THOSE CAUSED BY RATING DISCREPANCIES. FINAL RATES AND RATING AREAS ARE BASED UPON ACTUAL ENROLLMENT AND UNDERWRITING AND MUST BE APPROVED BY THE APPLICABLE INSURANCE CARRIER.

USE EMPLOYER ZIP CODE FOR RATING | AREA 15 | 02/01/27 - 03/01/27

Bronze		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																																																	
Anthem Blue Cross	Prudent Buyer - Small Group	PPO A	365.49	397.97	410.40	422.82	436.19	449.57	463.43	477.76	477.76	477.76	477.76	479.67	489.23	500.69	519.33	534.61	542.26	553.72	565.19	572.36	580.00	583.82	587.64	591.47	595.29	602.93	610.58	622.04	633.03	648.32	667.43	689.89	716.64	746.74	781.14	815.06	853.28	891.02	932.59	974.63	1020.02	1065.40	1114.61	1164.30	1217.33	1243.61	1296.64	1342.51	1372.60	1410.35	1433.28
Anthem Blue Cross	Select PPO	PPO B	357.61	389.40	401.56	413.71	426.80	439.89	453.45	467.47	467.47	467.47	467.47	469.34	478.69	489.91	508.14	523.10	530.58	541.80	553.02	560.03	567.51	571.25	574.99	578.73	582.47	589.95	597.43	608.65	619.40	634.36	653.06	675.03	701.21	730.66	764.31	797.50	834.90	871.83	912.50	953.64	998.05	1042.46	1090.61	1139.22	1191.11	1216.82	1268.71	1313.59	1343.04	1379.97	1402.41
Anthem Blue Cross	Prudent Buyer - Small Group	PPO C	365.01	397.46	409.86	422.27	435.63	448.99	462.83	477.14	477.14	477.14	477.14	479.05	488.59	500.04	518.65	533.92	541.55	553.01	564.46	571.61	579.25	583.07	586.88	590.70	594.52	602.15	609.78	621.24	632.21	647.48	666.56	688.99	715.71	745.77	780.12	814.00	852.17	889.87	931.38	973.37	1018.69	1064.02	1113.17	1162.79	1215.75	1242.00	1294.96	1340.76	1370.82	1408.52	1431.42
Anthem Blue Cross	Select PPO	PPO D	357.15	388.89	401.03	413.17	426.24	439.32	452.85	466.86	466.86	466.86	466.86	468.73	478.06	489.27	507.48	522.42	529.89	541.09	552.30	559.30	566.77	570.50	574.24	577.97	581.71	589.18	596.65	607.85	618.59	633.53	652.20	674.15	700.29	729.70	763.32	796.46	833.81	870.69	911.31	952.39	996.75	1041.10	1089.18	1137.74	1189.56	1215.24	1267.06	1311.88	1341.29	1378.17	1400.58
Kaiser Permanente	Full	HMO A	280.46	304.12	313.17	322.21	331.95	327.43	337.52	347.96	347.96	347.96	347.96	349.35	356.31	364.66	378.23	389.36	394.93	403.28	411.63	416.85	422.42	425.20	427.99	430.77	433.55	439.12	444.69	453.04	461.04	472.18	486.10	502.45	521.94	543.86	568.91	593.61	621.45	648.94	679.21	709.83	742.89	775.94	811.78	847.97	886.59	905.73	944.36	977.76	999.68	1027.17	1043.88
Kaiser Permanente	Full	HMO C	272.73	295.71	304.49	313.28	322.74	317.93	327.73	337.86	337.86	337.86	337.86	339.21	345.97	354.08	367.26	378.07	383.47	391.58	399.69	404.76	410.17	412.87	415.57	418.27	420.98	426.38	431.79	439.90	447.67	458.48	471.99	487.87	506.79	528.08	552.41	576.39	603.42	630.11	659.51	689.24	721.34	753.43	788.23	823.37	860.87	879.46	916.96	949.39	970.68	997.37	1013.58
Sharp Health Plan	Premier	HMO A	272.80	297.05	306.32	315.59	325.58	335.56	345.90	356.60	356.60	356.60	356.60	358.03	365.16	373.72	387.62	399.04	404.74	413.30	421.86	427.21	432.91	435.77	438.62	441.47	444.32	450.03	455.73	464.29	472.50	483.91	498.17	514.93	534.90	557.37	583.04	608.36	636.89	665.06	696.08	727.46	761.34	795.22	831.95	869.03	908.62	928.23	967.81	1002.05	1024.51	1052.68	1069.80
Sharp Health Plan	Performance	HMO B	291.24	317.12	327.02	336.92	347.58	358.24	369.28	380.70	380.70	380.70	380.70	382.22	389.84	398.97	413.82	426.00	432.09	441.23	450.37	456.08	462.17	465.22	468.26	471.31	474.35	480.44	486.53	495.67	504.43	516.61	531.84	549.73	571.05	595.03	622.44	649.47	679.93	710.01	743.13	776.63	812.79	848.96	888.17	927.77	970.02	990.96	1033.22	1069.77	1093.75	1123.83	1142.10
Sutter Health Plan	Sutter Health Plan	HMO A	335.37	365.18	376.58	387.97	400.25	412.52	425.24	438.40	438.40	438.40	438.40	440.14	448.91	459.43	476.53	490.56	497.57	508.09	518.61	525.19	532.20	535.71	539.22	542.73	546.23	553.25	560.26	570.78	580.87	594.89	612.43	633.03	657.58	685.20	716.77	747.89	782.96	817.59	855.73	894.31	935.96	977.61	1022.76	1068.35	1117.01	1141.13	1189.79	1231.87	1259.49	1294.12	1315.16
Sutter Health Plan	Sutter Health Plan	HMO B	335.53	365.36	376.76	388.17	400.45	412.73	425.45	438.62	438.62	438.62	438.62	440.36	449.13	459.66	476.76	490.80	497.82	508.34	518.87	525.45	532.47	535.98	539.48	542.99	546.50	553.52	560.54	571.06	581.15	595.19	612.73	633.35	657.91	685.54	717.12	748.26	783.35	818.00	856.16	894.75	936.42	978.09	1023.27	1068.88	1117.57	1141.69	1190.37	1232.48	1260.11	1294.76	1315.81
Western Health	Full	HMO B	316.71	344.87	355.63	366.39	377.99	389.58	401.59	414.01	414.01	414.01	414.01	415.66	423.94	433.88	450.02	463.27	469.90	479.83	489.77	495.98	502.60	505.91	509.23	512.54	515.85	522.47	529.10	539.03	548.56	561.81	578.37	597.82	621.01	647.09	676.90	706.29	739.41	772.12	808.14	844.57	883.90	923.23	965.87	1008.93	1054.89	1077.66	1123.61	1163.36	1189.44	1222.14	1242.02
Western Health	Full	HMO C	330.55	359.93	371.17	382.40	394.50	406.60	419.13	432.09	432.09	432.09	432.09	433.82	442.46	452.83	469.68	483.51	490.42	500.79	511.16	517.64	524.56	528.01	531.47	534.93	538.38	545.30	552.21	562.58	572.52	586.35	603.63	623.94	648.13	675.36	706.47	737.15	771.71	805.85	843.44	881.46	922.51	963.56	1008.07	1053.00	1100.97	1124.73	1172.69	1214.17	1241.39	1275.53	1296.27

Silver		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																																																	
Anthem Blue Cross	Select HMO	HMO A	298.82	325.38	335.53	345.69	356.63	367.56	378.89	390.61	390.61	390.61	390.61	392.17	399.98	409.36	424.59	437.09	443.34	452.72	462.09	467.95	474.20	477.33	480.45	483.58	486.70	492.95	499.20	508.57	517.56	530.06	545.68	564.04	585.92	610.52	638.65	666.38	697.63	728.49	762.47	796.84	833.95	871.06	911.29	951.92	995.27	1016.76	1060.12	1097.61	1122.22	1153.08	1171.83
Anthem Blue Cross	CaliforniaCare HMO	HMO B	325.51	354.44	365.50	376.57	388.48	400.40	412.74	425.50	425.50	425.50	425.50	427.20	435.71	445.92	462.52	476.13	482.94	493.15	503.37	509.75	516.56	519.96	523.37	526.77	530.17	536.98	543.79	554.00	563.79	577.40	594.42	614.42	638.25	665.06	695.69	725.90	759.94	793.56	830.58	868.02	908.44	948.87	992.69	1036.94	1084.17	1107.58	1154.81	1195.66	1222.46	1256.08	1276.50
Anthem Blue Cross	CaliforniaCare HMO	HMO D	325.12	354.02	365.07	376.12	388.02	399.92	412.24	424.99	424.99	424.99	424.99	426.69	435.19	445.39	461.96	475.56	482.36	492.56	502.76	509.14	515.94	519.34	522.74	526.14	529.54	536.34	543.14	553.34	563.11	576.71	593.71	613.69	637.49	664.26	694.86	725.03	759.03	792.61	829.58	866.98	907.35	947.73	991.50	1035.70	1082.87	1106.25	1153.42	1194.22	1221.00	1254.57	1274.97
Anthem Blue Cross	Select PPO	PPO B	385.71	420.00	433.11	446.22	460.33	474.45	489.07	504.20	504.20	504.20	504.20	506.22	516.30	528.40	548.07	564.20	572.27	584.37	596.47	604.03	612.10	616.13	620.17	624.20	628.23	636.30	644.37	656.47	668.07	684.20	704.37	728.06	756.30	788.06	824.37	860.17	900.50	940.33	984.20	1028.57	1076.47	1124.37	1176.30	1228.74	1284.70	1312.43	1368.40	1416.80	1448.57	1488.40	1512.60
Anthem Blue Cross	Prudent Buyer - Small Group	PPO C	394.18	429.22	442.62	456.01	470.44	484.87	499.81	515.27	515.27	515.27	515.27	517.33	527.64	540.00	560.10	576.59	584.83	597.20	609.56	617.29	625.54	629.66	633.78	637.90	642.03	650.27	658.52	670.88	682.73	699.22	719.83	744.05	772.91	805.37	842.47	879.05	920.27	960.98	1005.81	1051.15	1100.10	1149.05	1202.12	1255.71	1312.91	1341.25	1398.44	1447.91	1480.37	1521.08	1545.81
Anthem Blue Cross	Prudent Buyer - Small Group	PPO D	382.21	416.18	429.17	442.16	456.15	470.14	484.63	499.62	499.62	499.62	499.62	501.62	511.61	523.60	543.09	559.07	567.07	579.06	591.05	598.54	606.54	610.54	614.53	618.53	622.53	630.52	638.51	650.51	662.00	677.98	697.97	721.45	749.43	780.91	816.88	852.35	892.32	931.79	975.26	1019.22	1066.69	1114.15	1165.61	1217.57	1273.03	1300.51	1355.97	1403.93	1435.41	1474.88	1498.86
Anthem Blue Cross	Select PPO	PPO E	373.99	407.24	419.95	432.66	446.35	460.04	474.21	488.88	488.88	488.88	488.88	490.84	500.61	512.35	531.41	547.06	554.88	566.61	578.35	585.68	593.50	597.41	601.32	605.23	609.14	616.97	624.79	636.52	647.77	663.41	682.97	705.94	733.32	764.12	799.32	834.03	873.14	911.76	954.29	997.32	1043.76	1090.20	1140.56	1191.40	1245.67	1272.55	1326.82	1373.75	1404.55	1443.17	1466.64
Anthem Blue Cross	Prudent Buyer - Small Group	PPO F	395.80	430.99	444.44	457.89	472.38	486.86	501.87	517.39	517.39	517.39	517.39	519.46	529.81	542.22	562.40	578.96	587.24	599.66	612.07	619.83	628.11	632.25	636.39	640.53	644.67	652.95	661.22	673.64	685.54	702.10	722.79	747.11	776.09	808.68	845.93	882.67	924.06	964.93	1009.95	1055.48	1104.63	1153.78	1207.07	1260.88	1318.31	1346.77	1404.20	1453.87	1486.46	1527.34	1552.17
Kaiser Permanente	Full	HMO A	305.68	331.58	341.48	351.39	362.05	358.45	369.50	380.92	380.92	380.92	380.92	382.45	390.07	399.21	414.06	426.25	432.35	441.49	450.63	456.35	462.44	465.49	468.54	471.58	474.63	480.73	486.82	495.96	504.72	516.91	532.15	550.05	571.39	595.38	622.81	649.86	680.33	710.42	743.56	777.08	813.27	849.46	888.69	928.31	970.59	991.54	1033.83	1070.39	1094.39	1124.49	1142.76
Kaiser Permanente	Full	HMO B	309.69	335.95	345.99	356.03	366.84	363.38	374.58	386.17	386.17	386.17	386.17	387.71	395.44	404.70	419.76	432.12	438.30	447.57	456.84	462.63	468.81	471.90	474.99	478.08	481.16	487.34	493.52	502.79	511.67	524.03	539.48	557.63	579.25	603.58	631.38	658.80	689.70	720.20	753.80	787.78	824.47	861.15	900.93	941.09	983.95	1005.19	1048.06	1085.13	1109.46	1139.97	1158.51
Kaiser Permanente	Full	HMO C	307.50	333.56	343.53	353.49	364.23	360.69	371.81	383.30	383.30	383.30	383.30	384.84	392.50	401.70	416.65	428.92	435.05	444.25	453.45	459.20	465.33	468.40	471.46	474.53	477.60	483.73	489.86	499.06	507.88	520.14	535.48	553.49	574.96	599.10	626.70	653.92	684.58	714.86	748.21	781.94	818.35	854.77	894.25	934.11	976.66	997.74	1040.29	1077.08	1101.23	1131.51	1149.90
Kaiser Permanente	Full	HMO D	282.64	306.49	315.61	324.74	334.56	330.11	340.28	350.81	350.81	350.81	350.81	352.21	359.23	367.65	381.33	392.55	398.17	406.59	415.01	420.27	425.88	428.69	431.49	434.30	437.11	442.72	448.33	456.75	464.82	476.05	490.08	506.57	526.21	548.31	573.57	598.48	626.54	654.26	684.78	715.65	748.98	782.30	818.44	854.92	893.86	913.15	952.09	985.77	1007.87	1035.59	1052.43
Kaiser Permanente	Full	HMO E	294.62	319.54	329.07	338.60	348.86	344.85	355.48	366.48	366.48	366.48	366.48	367.94	375.27	384.07	398.36	410.09	415.95	424.74	433.54	439.04	444.90	447.83	450.76	453.70	456.63	462.49	468.36	477.15	485.58	497.31	511.97	529.19	549.71	572.80	599.19	625.21	654.52	683.48	715.36	747.61	782.42	817.24	854.99	893.10	933.78	953.93	994.61	1029.79	1052.88	1081.83	1099.44
Sharp Health Plan	Premier	HMO A	285.29	310.65	320.35	330.04	340.49	350.93	361.74	372.93	372.93	372.93	372.93	374.42	381.88	390.83	405.37	417.31	423.28	432.23	441.18	446.77	452.74	455.72	458.70	461.69	464.67	470.64	476.60	485.55	494.13	506.07	520.98	538.51	559.40	582.89	609.74	636.22	666.05	695.51	727.96	760.78	796.21	831.63	870.05	908.83	950.23	970.74	1012.13	1047.93	1071.43	1100.89	1118.79
Sharp Health Plan	Performance	HMO B	294.75	320.95	330.96	340.98	351.77	362.56	373.73	385.29	385.29	385.29	385.29	386.83	394.54	403.78	418.81	431.14	437.30	446.55	455.80	461.58	467.74	470.82	473.91	476.99	480.07	486.24	492.40	501.65	510.51	522.84	538.25	556.36	577.94	602.21	629.95	657.30	688.13	718.57	752.09	785.99	822.59	859.20	898.88	938.95	981.72	1002.91	1045.68	1082.66	1106.94	1137.38	1155.87
Sharp Health Plan	Premier	HMO C	268.76	292.65	301.78	310.92	320.76	330.59	340.78	351.32	351.32	351.32	351.32	352.73	359.75	368.18	381.88	393.13	398.75	407.18	415.61	420.88	426.50	429.31	432.12	434.93	437.74	443.37	448.99	457.42	465.50	476.74	490.79	507.31	526.98	549.11	574.41	599.35	627.46	655.21	685.78	716.69	750.07	783.44	819.63	856.17	895.16	914.49	953.48	987.21	1009.34	1037.10	1053.96
Sutter Health Plan	Sutter Health Plan	HMO B	409.97	446.41	460.35	474.28	489.29	504.29	519.83	535.92	535.92	535.92	535.92	538.05	548.77	561.63	582.54	599.68	608.26	621.12	633.98	642.02	650.60	654.88	659.17	663.46	667.75	676.32	684.89	697.76	710.08	727.23	748.67	773.86	803.87	837.63	876.21	914.26	957.14	999.47	1046.10	1093.26	1144.17	1195.08	1250.28	1306.02	1365.50	1394.98	1454.46	1505.91	1539.67	1582.01	1607.72
Sutter Health Plan	Sutter Health Plan	HMO C	355.08	386.64	398.71	410.78	423.78	436.77	450.23	464.17	464.17	464.17	464.17	466.01	475.30	486.44	504.54	519.39	526.82	537.96	549.10	556.06	563.49	567.20	570.91	574.63	578.34	585.77	593.19	604.33	615.01	629.86	648.43	670.24	696.24	725.48	758.90	791.85	828.99	865.65	906.04	946.88	990.98	1035.07	1082.88	1131.15	1182.67	1208.20	1259.72	1304.28	1333.52	1370.19	1392.46
UnitedHealthcare	SignatureValue	HMO A	363.43	395.73	408.09	420.44	433.74	447.04	460.82	475.07	475.07	475.07	475.07	476.97	486.47	497.87	516.40	531.60	539.20	550.61	562.01	569.13	576.73	580.54	584.34	588.14	591.94	599.54	607.14	618.54	629.47	644.67	663.67	686.00	712.61	742.53	776.74	810.47	848.48	886.01	927.34	969.14	1014.27	1059.41	1108.34	1157.75	1210.48	1236.61	1289.34	1334.95	1364.88	1402.41	1425.21
UnitedHealthcare	Alliance	HMO E	323.44	352.19	363.19	374.18	386.02	397.85	410.12	422.80	422.80	422.80	422.80	424.49	432.95	443.09	459.58	473.11	479.88	490.03	500.17	506.51	513.28	516.66	520.04	523.43	526.81	533.57	540.34	550.49	560.21	573.74	590.65	610.52	634.20	660.84	691.28	721.30	755.12	788.52	825.31	862.51	902.68	942.84	986.39	1030.36	1077.29	1100.55	1147.48	1188.07	1214.70	1248.11	1268.40
UnitedHealthcare	Harmony	HMO F	308.09	335.47	345.95	356.42	367.69	378.97	390.65	402.73	402.73	402.73	402.73	404.34	412.40	422.06	437.77	450.65	457.10	466.76	476.43	482.47	488.91	492.14	495.36	498.58	501.80	508.25	514.69	524.35	533.62	546.50	562.61	581.54	604.10	629.47	658.46	687.06	719.28	751.09	786.13	821.57	859.83	898.09	939.57	981.45	1026.16	1048.31	1093.01	1131.67	1157.04	1188.86	1208.19
UnitedHealthcare	Harmony	HMO G	277.16	301.80	311.22	320.64	330.78	340.92	351.43	362.30	362.30	362.30	362.30	363.75	371.00	379.69	393.82	405.41	411.21	419.91	428.60	434.04	439.83	442.73	445.63	448.53	451.43	457.22	463.02	471.71	480.05	491.64	506.13	523.16	543.45	566.27	592.36	618.08	647.07	675.69	707.21	739.09	773.51	807.93	845.25	882.93	923.14	943.07	983.28	1018.06	1040.89	1069.51	1086.90
Western Health	Full	HMO B	362.81	395.06	407.40	419.73	433.01	446.29	460.04	474.27	474.27	474.27	474.27	476.16	485.65	497.03	515.53	530.71	538.29	549.68	561.06	568.17	575.76	579.56	583.35	587.14	590.94	598.53	606.11	617.50	628.40	643.58	662.55	684.84	711.40	741.28	775.43	809.10	847.04	884.51	925.77	967.51	1012.56	1057.62	1106.47	1155.79	1208.43	1234.52	1287.16	1332.69	1362.57	1400.04	1422.80
Western Health	Full	HMO C	342.86	373.34	384.99	396.64	409.19	421.74	434.74	448.18	448.18	448.18	448.18	449.98	458.94	469.70	487.18	501.52	508.69	519.45	530.20	536.93	544.10	547.68	551.27	554.85	558.44	565.61	572.78	583.54	593.84	608.19	626.11	647.18	672.28	700.51	732.78	764.60	800.46	835.86	874.86	914.30	956.87	999.45	1045.62	1092.23	1141.97	1166.63	1216.37	1259.40	1287.64	1323.04	1344.54
Western Health	Full	HMO D	330.78	360.19	371.43	382.67	394.78	406.88	419.42	432.40	432.40	432.40	432.40	434.12	442.77	453.15	470.01	483.85	490.77	501.15	511.52	518.01	524.93	528.39	531.85	535.31	538.76	545.68	552.60	562.98	572.92	586.76	604.06	624.38	648.59	675.83	706.97	737.67	772.26	806.42	844.04	882.09	923.16	964.24	1008.78	1053.75	1101.74	1125.52	1173.52	1215.03	1242.27	1276.43	1297.19

Health Care Service Plan rates will vary by county

THE INFORMATION PROVIDED HEREIN, INCLUDING THE RATING INFORMATION IS PROVIDED ON TO YOU ON AN "AS IS" "AS AVAILABLE" BASIS WITHOUT WARRANTY OF ANY KIND, EXPRESS OR IMPLIED. WE FURTHER DISCLAIM ALL LIABILITY RELATED TO THE INFORMATION, INCLUDING THOSE CAUSED BY RATING DISCREPANCIES. FINAL RATES AND RATING AREAS ARE BASED UPON ACTUAL ENROLLMENT AND UNDERWRITING AND MUST BE APPROVED BY THE APPLICABLE INSURANCE CARRIER.

Continued

Gold		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																																																			
Anthem Blue Cross	Select HMO	HMO A	383.10	417.16	430.18	443.20	457.22	471.24	485.77	500.79	500.79	500.79	500.79	502.79	512.81	524.83	544.36	560.38	568.40	580.42	592.43	599.95	607.96	611.97	615.97	619.98	623.98	632.00	640.01	652.03	663.55	679.57	699.60	723.14	751.19	782.73	818.79	854.35	894.41	933.97	977.54	1021.61	1069.19	1116.76	1168.34	1220.43	1276.01	1303.56	1359.14	1407.22	1438.77	1478.33	1502.37
Anthem Blue Cross	CaliforniaCare HMO	HMO B	417.32	454.41	468.59	482.78	498.05	513.32	529.14	545.51	545.51	545.51	545.51	547.69	558.60	571.69	592.97	610.43	619.15	632.25	645.34	653.52	662.25	666.61	670.98	675.34	679.71	688.43	697.16	710.25	722.80	740.26	762.08	787.72	818.27	852.63	891.91	930.64	974.28	1017.38	1064.84	1112.84	1164.66	1216.49	1272.67	1329.41	1389.96	1419.96	1480.51	1532.88	1567.25	1610.35	1636.53
Anthem Blue Cross	Priority Select HMO	HMO C	389.56	424.19	437.43	450.67	464.93	479.19	493.95	509.23	509.23	509.23	509.23	511.27	521.45	533.67	553.53	569.83	577.98	590.20	602.42	610.06	618.21	622.28	626.35	630.43	634.50	642.65	650.80	663.02	674.73	691.03	711.39	735.33	763.85	795.93	832.59	868.75	909.48	949.71	994.02	1038.83	1087.21	1135.58	1188.03	1240.99	1297.52	1325.53	1382.05	1430.94	1463.02	1503.25	1527.69
Anthem Blue Cross	Select PPO	PPO B	456.61	497.20	512.72	528.24	544.95	561.66	578.97	596.88	596.88	596.88	596.88	599.27	611.21	625.53	648.81	667.91	677.46	691.78	706.11	715.06	724.61	729.39	734.16	738.94	743.71	753.26	762.81	777.14	790.87	809.97	833.84	861.89	895.32	932.92	975.90	1018.28	1066.03	1113.18	1165.11	1217.64	1274.34	1331.04	1392.52	1454.60	1520.85	1553.68	1619.93	1677.23	1714.84	1761.99	1790.64
Anthem Blue Cross	Select PPO	PPO C	471.11	512.99	529.00	545.01	562.25	579.50	597.36	615.83	615.83	615.83	615.83	618.29	630.61	645.39	669.41	689.11	698.97	713.75	728.53	737.76	747.62	752.54	757.47	762.40	767.32	777.18	787.03	801.81	815.97	835.68	860.31	889.26	923.75	962.54	1006.88	1050.61	1099.87	1148.52	1202.10	1256.29	1314.80	1373.30	1436.73	1500.78	1569.13	1603.01	1671.36	1730.48	1769.28	1817.93	1847.49
Anthem Blue Cross	Select PPO	PPO D	453.28	493.57	508.97	524.38	540.97	557.56	574.74	592.52	592.52	592.52	592.52	594.89	606.74	620.96	644.07	663.03	672.51	686.73	700.95	709.84	719.32	724.06	728.80	733.54	738.28	747.76	757.24	771.46	785.09	804.05	827.75	855.60	888.78	926.11	968.77	1010.84	1058.24	1105.05	1156.60	1208.74	1265.03	1321.32	1382.35	1443.97	1509.74	1542.33	1608.10	1664.98	1702.31	1749.12	1777.56
Anthem Blue Cross	Prudent Buyer - Small Group	PPO E	481.45	524.25	540.61	556.97	574.60	592.22	610.47	629.35	629.35	629.35	629.35	631.87	644.45	659.56	684.10	704.24	714.31	729.42	744.52	753.96	764.03	769.07	774.10	779.14	784.17	794.24	804.31	819.41	833.89	854.03	879.20	908.78	944.03	983.67	1028.99	1073.67	1124.02	1173.74	1228.49	1283.87	1343.66	1403.45	1468.27	1533.73	1603.58	1638.20	1708.06	1768.47	1808.12	1857.84	1888.05
Anthem Blue Cross	Prudent Buyer - Small Group	PPO H	463.28	504.46	520.21	535.96	552.91	569.87	587.43	605.60	605.60	605.60	605.60	608.02	620.13	634.67	658.29	677.67	687.36	701.89	716.42	725.51	735.20	740.04	744.89	749.73	754.58	764.27	773.96	788.49	802.42	821.80	846.02	874.49	908.40	946.55	990.16	1033.15	1081.60	1129.44	1182.13	1235.42	1292.96	1350.49	1412.86	1475.85	1543.07	1576.38	1643.60	1701.74	1739.89	1787.73	1816.80
Anthem Blue Cross	Prudent Buyer - Small Group	PPO I	470.12	511.91	527.89	543.87	561.08	578.28	596.10	614.54	614.54	614.54	614.54	617.00	629.29	644.04	668.00	687.67	697.50	712.25	727.00	736.22	746.05	750.97	755.88	760.80	765.72	775.55	785.38	800.13	814.27	833.93	858.51	887.40	921.81	960.53	1004.77	1048.41	1097.57	1146.12	1199.58	1253.66	1312.04	1370.42	1433.72	1497.63	1565.85	1599.65	1667.86	1726.86	1765.57	1814.12	1843.62
Kaiser Permanente	Full	HMO B	367.15	398.52	410.51	422.50	435.42	434.07	447.44	461.28	461.28	461.28	461.28	463.13	472.35	483.42	501.41	516.17	523.56	534.63	545.70	552.62	560.00	563.69	567.38	571.07	574.76	582.14	589.52	600.59	611.20	625.96	644.41	666.09	691.92	720.98	754.20	786.95	823.85	860.29	900.42	941.02	984.84	1028.66	1076.17	1124.14	1175.35	1200.72	1251.92	1296.20	1325.26	1361.71	1383.84
Kaiser Permanente	Full	HMO C	377.70	410.00	422.35	434.71	448.01	447.04	460.82	475.07	475.07	475.07	475.07	476.97	486.47	497.87	516.40	531.60	539.20	550.60	562.01	569.13	576.73	580.53	584.33	588.13	591.93	599.54	607.14	618.54	629.47	644.67	663.67	686.00	712.60	742.53	776.74	810.47	848.47	886.00	927.33	969.14	1014.27	1059.40	1108.33	1157.74	1210.47	1236.60	1289.33	1334.94	1364.87	1402.40	1425.21
Kaiser Permanente	Full	HMO D	356.67	387.11	398.75	410.38	422.92	421.18	434.16	447.59	447.59	447.59	447.59	449.38	458.33	469.07	486.53	500.85	508.01	518.75	529.49	536.21	543.37	546.95	550.53	554.11	557.69	564.85	572.02	582.76	593.05	607.37	625.28	646.31	671.38	699.58	731.80	763.58	799.39	834.75	873.69	913.08	955.60	998.12	1044.22	1090.77	1140.45	1165.07	1214.75	1257.72	1285.92	1321.28	1342.77
Kaiser Permanente	Full	HMO E	319.15	346.25	356.61	366.97	378.13	375.02	386.58	398.53	398.53	398.53	398.53	400.13	408.10	417.66	433.20	445.96	452.33	461.90	471.46	477.44	483.82	487.01	490.19	493.38	496.57	502.95	509.32	518.89	528.05	540.81	556.75	575.48	597.80	622.90	651.60	679.89	711.78	743.26	777.93	813.00	850.86	888.72	929.77	971.22	1015.46	1037.38	1081.61	1119.87	1144.98	1176.46	1195.59
Kaiser Permanente	Full	HMO F	364.10	395.20	407.09	418.98	431.78	430.32	443.58	457.30	457.30	457.30	457.30	459.13	468.27	479.25	497.08	511.72	519.03	530.01	540.98	547.84	555.16	558.82	562.48	566.13	569.79	577.11	584.43	595.40	605.92	620.55	638.84	660.34	685.95	714.76	747.68	780.15	816.73	852.86	892.64	932.89	976.33	1019.77	1066.88	1114.43	1165.19	1190.35	1241.11	1285.01	1313.82	1349.94	1371.90
Sharp Health Plan	Performance	HMO A	366.15	398.70	411.14	423.59	436.99	450.39	464.27	478.63	478.63	478.63	478.63	480.54	490.12	501.60	520.27	535.59	543.25	554.73	566.22	573.40	581.06	584.89	588.71	592.54	596.37	604.03	611.69	623.18	634.18	649.50	668.65	691.14	717.95	748.10	782.56	816.54	854.83	892.64	934.29	976.41	1021.88	1067.34	1116.64	1166.42	1219.55	1245.87	1299.00	1344.95	1375.10	1412.92	1435.89
Sharp Health Plan	Premier	HMO B	345.92	376.67	388.42	400.18	412.84	425.50	438.61	452.18	452.18	452.18	452.18	453.99	463.03	473.88	491.52	505.99	513.22	524.08	534.93	541.71	548.95	552.56	556.18	559.80	563.42	570.65	577.89	588.74	599.14	613.61	631.70	652.95	678.27	706.76	739.31	771.42	807.59	843.32	882.66	922.45	965.40	1008.36	1054.94	1101.96	1152.15	1177.02	1227.22	1270.63	1299.11	1334.84	1356.54
Sharp Health Plan	Performance	HMO D	377.08	410.59	423.41	436.23	450.03	463.83	478.12	492.91	492.91	492.91	492.91	494.88	504.74	516.57	535.79	551.57	559.45	571.28	583.11	590.51	598.39	602.34	606.28	610.22	614.17	622.05	629.94	641.77	653.11	668.88	688.60	711.76	739.37	770.42	805.91	840.90	880.34	919.28	962.16	1005.54	1052.36	1099.19	1149.96	1201.22	1255.93	1283.04	1337.76	1385.08	1416.13	1455.07	1478.73
Sutter Health Plan	Sutter Health Plan	HMO A	449.12	489.04	504.31	519.57	536.01	552.45	569.47	587.10	587.10	587.10	587.10	589.43	601.18	615.27	638.16	656.95	666.34	680.43	694.52	703.33	712.72	717.42	722.12	726.81	731.51	740.90	750.30	764.39	777.89	796.68	820.16	847.75	880.63	917.62	959.89	1001.57	1048.54	1094.92	1145.99	1197.66	1253.43	1309.20	1369.67	1430.73	1495.89	1528.18	1593.35	1649.71	1686.70	1733.08	1761.25
Sutter Health Plan	Sutter Health Plan	HMO B	481.73	524.55	540.92	557.29	574.93	592.56	610.82	629.72	629.72	629.72	629.72	632.23	644.82	659.94	684.50	704.65	714.72	729.83	744.95	754.39	764.47	769.51	774.54	779.58	784.62	794.69	804.77	819.88	834.37	854.52	879.71	909.30	944.57	984.24	1029.58	1074.29	1124.66	1174.41	1229.19	1284.61	1344.43	1404.25	1469.11	1534.60	1604.50	1639.14	1709.03	1769.49	1809.16	1858.90	1889.12
Sutter Health Plan	Sutter Health Plan	HMO C	409.29	445.67	459.58	473.49	488.47	503.45	518.96	535.03	535.03	535.03	535.03	537.16	547.86	560.70	581.56	598.68	607.24	620.08	632.92	640.95	649.51	653.79	658.07	662.35	666.63	675.19	683.75	696.59	708.90	726.02	747.42	772.56	802.52	836.23	874.75	912.74	955.54	997.80	1044.35	1091.43	1142.26	1193.08	1248.19	1303.83	1363.22	1392.64	1452.03	1503.39	1537.10	1579.37	1605.04
UnitedHealthcare	SignatureValue	HMO A	397.89	433.26	446.78	460.31	474.87	489.43	504.52	520.12	520.12	520.12	520.12	522.20	532.60	545.09	565.37	582.01	590.34	602.82	615.30	623.10	631.43	635.59	639.75	643.91	648.07	656.39	664.71	677.20	689.16	705.80	726.61	751.05	780.18	812.95	850.40	887.32	928.93	970.02	1015.27	1061.04	1110.46	1159.87	1213.44	1267.53	1325.27	1353.87	1411.61	1461.54	1494.30	1535.39	1560.36
UnitedHealthcare	Alliance	HMO B	354.11	385.59	397.62	409.66	422.62	435.58	449.00	462.89	462.89	462.89	462.89	464.74	474.00	485.11	503.16	517.97	525.38	536.49	547.60	554.54	561.95	565.65	569.35	573.06	576.76	584.17	591.57	602.68	613.33	628.14	646.66	668.41	694.34	723.50	756.83	789.69	826.72	863.29	903.56	944.30	988.27	1032.24	1079.92	1128.06	1179.44	1204.90	1256.28	1300.72	1329.88	1366.45	1388.67
UnitedHealthcare	SignatureValue	HMO C	425.98	463.85	478.33	492.80	508.39	523.99	540.13	556.84	556.84	556.84	556.84	559.07	570.20	583.57	605.29	623.10	632.01	645.38	658.74	667.09	676.00	680.46	684.91	689.37	693.82	702.73	711.64	725.01	737.81	755.63	777.91	804.08	835.26	870.34	910.43	949.97	994.52	1038.51	1086.95	1135.95	1188.85	1241.75	1299.11	1357.02	1418.83	1449.45	1511.26	1564.72	1599.80	1643.79	1670.52
UnitedHealthcare	Alliance	HMO D	379.11	412.81	425.69	438.58	452.46	466.33	480.70	495.57	495.57	495.57	495.57	497.55	507.46	519.36	538.68	554.54	562.47	574.37	586.26	593.69	601.62	605.59	609.55	613.52	617.48	625.41	633.34	645.23	656.63	672.49	692.31	715.60	743.36	774.58	810.26	845.44	885.09	924.24	967.35	1010.96	1058.04	1105.12	1156.16	1207.70	1262.71	1289.97	1344.98	1392.55	1423.77	1462.92	1486.71
UnitedHealthcare	Harmony	HMO E	361.12	393.22	405.49	417.76	430.98	444.20	457.89	472.05	472.05	472.05	472.05	473.94	483.38	494.71	513.12	528.22	535.78	547.11	558.44	565.52	573.07	576.85	580.62	584.40	588.17	595.73	603.28	614.61	625.47	640.57	659.45	681.64	708.08	737.81	771.80	805.32	843.08	880.37	921.44	962.98	1007.83	1052.67	1101.29	1150.39	1202.78	1228.75	1281.14	1326.46	1356.20	1393.49	1416.15
UnitedHealthcare	SignatureValue	HMO F	440.62	479.78	494.76	509.73	525.86	541.99	558.69	575.97	575.97	575.97	575.97	578.27	589.79	603.62	626.08	644.51	653.73	667.55	681.37	690.01	699.23	703.84	708.44	713.05	717.66	726.87	736.09	749.91	763.16	781.59	804.63	831.70	863.96	900.24	941.71	982.60	1028.68	1074.18	1124.29	1174.98	1229.70	1284.41	1343.74	1403.64	1467.57	1499.25	1563.18	1618.48	1654.76	1700.26	1727.91
UnitedHealthcare	Alliance	HMO G	392.13	426.99	440.31	453.64	467.99	482.35	497.21	512.59	512.59	512.59	512.59	514.64	524.89	537.19	557.19	573.59	581.79	594.09	606.39	614.08	622.28	626.38	630.49	634.59	638.69	646.89	655.09	667.39	679.18	695.58	716.09	740.18	768.89	801.18	838.08	874.48	915.49	955.98	1000.58	1045.68	1094.38	1143.08	1195.87	1249.18	1306.08	1334.27	1391.17	1440.38	1472.67	1513.17	1537.77
UnitedHealthcare	SignatureValue	HMO H	412.92	449.62	463.65	477.69	492.80	507.91	523.57	539.76	539.76	539.76	539.76	541.92	552.71	565.67	586.72	603.99	612.63	625.58	638.54	646.63	655.27	659.59	663.90	668.22	672.54	681.18	689.81	702.77	715.18	732.45	754.04	779.41	809.64	843.64	882.51	920.83	964.01	1006.65	1053.61	1101.11	1152.39	1203.66	1259.26	1315.40	1375.31	1405.00	1464.91	1516.73	1550.73	1593.37	1619.28
UnitedHealthcare	Alliance	HMO J	367.48	400.14	412.63	425.12	438.57	452.02	465.95	480.36	480.36	480.36	480.36	482.28	491.89	503.42	522.15	537.52	545.21	556.74	568.27	575.47	583.16	587.00	590.84	594.69	598.53	606.21	613.90	625.43	636.48	651.85	671.06	693.64	720.54	750.80	785.39	819.49	857.92	895.87	937.66	979.93	1025.57	1071.20	1120.68	1170.64	1223.96	1250.38	1303.70	1349.81	1380.07	1418.02	1441.08
UnitedHealthcare	Harmony	HMO L	337.30	367.29	378.75	390.21	402.56	414.91	427.69	440.92	440.92	440.92	440.92	442.68	451.50	462.08	479.28	493.39	500.44	511.03	521.61	528.22	535.28	538.80	542.33	545.86	549.39	556.44	563.50	574.08	584.22	598.33	615.97	636.69	661.38	689.16	720.90	752.21	787.48	822.32	860.68	899.48	941.36	983.25	1028.67	1074.52	1123.46	1147.71	1196.66	1238.99	1266.76	1301.60	1322.76
UnitedHealthcare	Harmony	HMO M	373.52	406.72	419.42	432.11	445.78	459.45	473.61	488.26	488.26	488.26	488.26	490.21	499.98	511.70	530.74	546.36	554.18	565.89	577.61	584.94	592.75	596.65	600.56	604.47	608.37	616.18	624.00	635.71	646.94	662.57	682.10	705.05	732.39	763.15	798.31	832.97	872.03	910.60	953.08	996.05	1042.44	1088.82	1139.11	1189.89	1244.09	1270.94	1325.14	1372.01	1402.77	1441.34	1464.78
UnitedHealthcare	Harmony	HMO N	350.03	381.15	393.04	404.94	417.75	430.56	443.83	457.56	457.56	457.56	457.56	459.39	468.54	479.52	497.37	512.01	519.33	530.31	541.29	548.16	555.48	559.14	562.80	566.46	570.12	577.44	584.76	595.74	606.27	620.91	639.21	660.72	686.34	715.17	748.11	780.60	817.20	853.35	893.16	933.42	976.89	1020.36	1067.49	1115.07	1165.86	1191.03	1241.82	1285.74	1314.57	1350.72	1372.68
Western Health	Full	HMO A	406.47	442.60	456.41	470.23	485.10	499.98	515.39	531.33	531.33	531.33	531.33	533.45	544.08	556.83	577.55	594.56	603.06	615.81	628.56	636.53	645.03	649.28	653.53	657.78	662.04	670.54	679.04	691.79	704.01	721.01	742.27	767.24	796.99	830.47	868.72	906.45	948.95	990.93	1037.15	1083.91	1134.39	1184.86	1239.59	1294.85	1353.83	1383.05	1442.03	1493.03	1526.51	1568.48	1593.99
Western Health	Full	HMO B	426.53	464.44	478.93	493.43	509.04	524.65	540.82	557.55	557.55	557.55	557.55	559.78	570.93	584.31	606.06	623.90	632.82	646.20	659.58	667.94	676.86	681.33	685.79	690.25	694.71	703.63	712.55	725.93	738.75	756.59	778.90	805.10	836.32	871.45	911.59	951.18	995.78	1039.83	1088.34	1137.40	1190.37	1243.34	1300.76	1358.75	1420.64	1451.30	1513.19	1566.71	1601.84	1645.89	1672.65
Western Health	Full	HMO C	397.43	432.76	446.27	459.77	474.32	488.87	503.93	519.52	519.52	519.52	519.52	521.60	531.99	544.46	564.72	581.34	589.65	602.12	614.59	622.38	630.70	634.85	639.01	643.16	647.32	655.63	663.94	676.41	688.36	704.99	725.77	750.18	779.28	812.01	849.41	886.30	927.86	968.90	1014.10	1059.82	1109.17	1158.53	1212.04	1266.07	1323.73	1352.31	1409.97	1459.85	1492.58	1533.62	1558.56
Western Health	Full	HMO D	382.67	416.69	429.69	442.70	456.70	470.71	485.22	500.22	500.22	500.22	500.22	502.22	512.23	524.23	543.74	559.75	567.75	579.76	591.76	599.27	607.27	611.27	615.27	619.28	623.28	631.28	639.28	651.29	662.79	678.80	698.81	722.32	750.33	781.85	817.86	853.38	893.40	932.91	976.43	1020.45	1067.97	1115.50	1167.02	1219.04	1274.57	1302.08	1357.60	1405.62	1437.14	1476.66	1500.66

Platinum		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																																																			
Anthem Blue Cross	Select HMO	HMO A	415.65	452.59	466.72	480.85	496.06	511.27	527.03	543.33	543.33	543.33	543.33	545.50	556.37	569.41	590.60	607.99	616.68	629.72	642.76	650.91	659.60	663.95	668.30	672.64	676.99	685.68	694.38	707.42	719.91	737.30	759.03	784.57	815.00	849.22	888.34	926.92	970.39	1013.31	1060.58	1108.39	1160.01	1211.63	1267.59	1324.10	1384.40	1414.29	1474.60	1526.76	1560.99	1603.91	1629.99
Anthem Blue Cross	Vivity	HMO B	403.16	439.00	452.70	466.40	481.16	495.92	511.20	527.01	527.01	527.01	527.01	529.12	539.66	552.31	572.86	589.72	598.16	610.80	623.45	631.36	639.79	644.01	648.22	652.44	656.65	665.09	673.52	686.17	698.29	715.15	736.23	761.00	790.52	823.72	861.66	899.08	941.24	982.87	1028.72	1075.10	1125.17	1175.23	1229.51	1284.32	1342.82	1371.81	1430.31	1480.90	1514.10	1555.73	1581.03
Anthem Blue Cross	Vivity	HMO C	394.73	429.82	443.24	456.65	471.10	485.55	500.51	515.99	515.99	515.99	515.99	518.05	528.37	540.76	560.88	577.39	585.65	598.03	610.42	618.16	626.41	630.54	634.67	638.80	642.92	651.18	659.44	671.82	683.69	700.20	720.84	745.09	773.99	806.49	843.64	880.28	921.56	962.32	1007.21	1052.62	1101.64	1150.66	1203.80	1257.47	1314.74	1343.12	1400.40	1449.93	1482.44	1523.20	1547.97
Anthem Blue Cross	CaliforniaCare HMO	HMO D	452.68	492.92	508.30	523.69	540.26	556.83	573.99	591.74	591.74	591.74	591.74	594.11	605.94	620.14	643.22	662.16	671.62	685.83	700.03	708.90	718.37	723.11	727.84	732.57	737.31	746.78	756.24	770.45	784.06	802.99	826.66	854.47	887.61	924.89	967.49	1009.51	1056.85	1103.60	1155.08	1207.15	1263.36	1319.58	1380.53	1442.07	1507.75	1540.30	1605.98	1662.79	1700.07	1746.82	1775.22
Anthem Blue Cross	Prudent Buyer - Small Group	PPO B	543.20	591.49	609.95	628.41	648.29	668.18	688.77	710.07	710.07	710.07	710.07	712.91	727.11	744.15	771.85	794.57	805.93	822.97	840.01	850.66	862.02	867.71	873.39	879.07	884.75	896.11	907.47	924.51	940.84	963.56	991.97	1025.34	1065.11	1109.84	1160.96	1211.38	1268.19	1324.28	1386.06	1448.54	1516.00	1583.46	1656.59	1730.44	1809.26	1848.31	1927.13	1995.30	2040.03	2096.13	2130.21
Kaiser Permanente	Full	HMO A	406.41	441.26	454.59	467.92	482.27	482.35	497.22	512.60	512.60	512.60	512.60	514.65	524.90	537.20	557.19	573.60	581.80	594.10	606.40	614.09	622.29	626.39	630.49	634.60	638.70	646.90	655.10	667.40	679.19	695.59	716.10	740.19	768.90	801.19	838.10	874.49	915.50	955.99	1000.59	1045.70	1094.40	1143.09	1195.89	1249.20	1306.10	1334.29	1391.19	1440.40	1472.69	1513.19	1537.80
Kaiser Permanente	Full	HMO B	395.82	429.74	442.71	455.67	469.64	469.33	483.80	498.76	498.76	498.76	498.76	500.76	510.73	522.70	542.15	558.11	566.09	578.06	590.03	597.52	605.50	609.49	613.48	617.47	621.46	629.44	637.42	649.39	660.86	676.82	696.77	720.21	748.14	779.56	815.47	850.89	890.79	930.19	973.58	1017.47	1064.85	1112.24	1163.61	1215.48	1270.84	1298.27	1353.64	1401.52	1432.94	1472.34	1496.28
Kaiser Permanente	Full	HMO C	380.25	412.78	425.22	437.65	451.05	450.17	464.05	478.40	478.40	478.40	478.40	480.31	489.88	501.36	520.02	535.33	542.98	554.47	565.95	573.12	580.78	584.60	588.43	592.26	596.09	603.74	611.40	622.88	633.88	649.19	668.32	690.81	717.60	747.74	782.18	816.15	854.42	892.22	933.84	975.94	1021.38	1066.83	1116.11	1165.86	1218.96	1245.27	1298.38	1344.30	1374.44	1412.24	1435.20
Sharp Health Plan	Premier	HMO A	387.44	421.88	435.05	448.22	462.40	476.58	491.27	506.46	506.46	506.46	506.46	508.49	518.62	530.77	550.52	566.73	574.83	586.99	599.14	606.74	614.84	618.89	622.95	627.00	631.05	639.15	647.26	659.41	671.06	687.27	707.52	731.33	759.69	791.60	828.06	864.02	904.54	944.55	988.61	1033.18	1081.29	1129.41	1181.57	1234.24	1290.46	1318.32	1374.53	1423.15	1455.06	1495.07	1519.38
Sharp Health Plan	Performance	HMO B	415.31	452.23	466.34	480.46	495.66	510.86	526.60	542.89	542.89	542.89	542.89	545.06	555.92	568.95	590.12	607.49	616.18	629.21	642.24	650.38	659.07	663.41	667.75	672.10	676.44	685.13	693.81	706.84	719.33	736.70	758.42	783.93	814.34	848.54	887.63	926.17	969.60	1012.49	1059.72	1107.50	1159.07	1210.64	1266.56	1323.02	1383.28	1413.14	1473.40	1525.52	1559.72	1602.61	1628.67
Sharp Health Plan	Premier	HMO C	388.91	423.48	436.70	449.92	464.15	478.39	493.13	508.38	508.38	508.38	508.38	510.41	520.58	532.78	552.61	568.88	577.01	589.21	601.41	609.04	617.17	621.24	625.31	629.37	633.44	641.58	649.71	661.91	673.60	689.87	710.21	734.10	762.57	794.60	831.20	867.30	907.97	948.13	992.36	1037.10	1085.39	1133.69	1186.05	1238.92	1295.35	1323.31	1379.74	1428.55	1460.58	1500.74	1525.14
Sutter Health Plan	Sutter Health Plan	HMO A	523.22	569.73	587.51	605.30	624.45	643.60	663.43	683.96	683.96	683.96	683.96	686.69	700.37	716.78	743.45	765.34	776.28	792.70	809.11	819.37	830.32	835.79	841.26	846.73	852.20	863.15	874.09	890.50	906.24	928.12	955.48	987.63	1025.93	1069.02	1118.26	1166.82	1221.54	1275.57	1335.07	1395.26	1460.24	1525.21	1595.66	1666.79	1742.71	1780.32	1856.24	1921.90	1964.99	2019.02	2051.84
UnitedHealthcare	SignatureValue	HMO A	442.11	481.41	496.43	511.46	527.64	543.82	560.58	577.92	577.92	577.92	577.92	580.23	591.79	605.66	628.20	646.69	655.94	669.81	683.68	692.35	701.59	706.22	710.84	715.46	720.09	729.34	738.58	752.45	765.74	784.24	807.35	834.52	866.88	903.29	944.90	985.93	1032.17	1077.82	1128.10	1178.96	1233.86	1288.76	1348.29	1408.39	1472.54	1504.33	1568.47	1623.96	1660.36	1706.02	1733.76
UnitedHealthcare	SignatureValue	HMO B	478.85	521.42	537.69	553.97	571.49	589.02	607.17	625.95	625.95	625.95	625.95	628.45	640.97	656.00	680.41	700.44	710.45	725.48	740.50	749.89	759.90	764.91	769.92	774.93	779.93	789.95	799.96	814.99	829.38	849.41	874.45	903.87	938.93	978.36	1023.43	1067.87	1117.95	1167.40	1221.85	1276.94	1336.40	1395.87	1460.34	1525.44	1594.92	1629.35	1698.83	1758.92	1798.35	1847.80	1877.85
UnitedHealthcare	Alliance	HMO C	393.46	428.44	441.81	455.18	469.58	483.98	498.90	514.33	514.33	514.33	514.33	516.39	526.67	539.02	559.08	575.54	583.76	596.11	608.45	616.17	624.40	628.51	632.63	636.74	640.86	649.08	657.31	669.66	681.49	697.95	718.52	742.69	771.50	803.90	840.93	877.45	918.59	959.23	1003.97	1049.23	1098.09	1146.96	1199.93	1253.42	1310.51	1338.80	1395.89	1445.27	1477.67	1518.30	1542.99
UnitedHealthcare	SignatureValue	HMO D	459.54	500.38	516.00	531.62	548.44	565.26	582.68	600.70	600.70	600.70	600.70	603.10	615.12	629.53	652.96	672.18	681.79	696.21	710.63	719.64	729.25	734.06	738.86	743.67	748.47	758.08	767.69	782.11	795.93	815.15	839.18	867.41	901.05	938.89	982.14	1024.79	1072.85	1120.31	1172.57	1225.43	1282.49	1339.56	1401.43	1463.91	1530.58	1563.62	1630.30	1687.97	1725.81	1773.27	1802.10
UnitedHealthcare	SignatureValue	HMO E	471.24	513.13	529.14	545.16	562.41	579.66	597.52	616.00	616.00	616.00	616.00	618.46	630.78	645.57	669.59	689.30	699.16	713.94	728.73	737.97	747.82	752.75	757.68	762.61	767.54	777.39	787.25	802.03	816.20	835.91	860.55	889.50	924.00	962.81	1007.16	1050.90	1100.18	1148.84	1202.43	1256.64	1315.16	1373.68	1437.13	1501.19	1569.57	1603.45	1671.82	1730.96	1769.77	1818.43	1848.00
UnitedHealthcare	Alliance	HMO F	408.97	445.32	459.22	473.12	488.09	503.06	518.56	534.60	534.60	534.60	534.60	536.74	547.43	560.26	581.11	598.22	606.77	619.60	632.43	640.45	649.00	653.28	657.56	661.83	666.11	674.67	683.22	696.05	708.35	725.45	746.84	771.96	801.90	835.58	874.07	912.03	954.80	997.03	1043.54	1090.58	1141.37	1192.16	1247.22	1302.82	1362.16	1391.56	1450.90	1502.23	1535.91	1578.14	1603.80
UnitedHealthcare	Alliance	HMO G	419.39	456.67	470.92	485.17	500.52	515.88	531.77	548.22	548.22	548.22	548.22	550.41	561.38	574.53	595.92	613.46	622.23	635.39	648.54	656.77	665.54	669.92	674.31	678.70	683.08	691.85	700.63	713.78	726.39	743.93	765.86	791.63	822.33	856.87	896.34	935.26	979.12	1022.43	1070.13	1118.37	1170.45	1222.53	1279.00	1336.01	1396.86	1427.02	1487.87	1540.50	1575.04	1618.35	1644.66
UnitedHealthcare	Harmony	HMO H	374.79	408.10	420.84	433.58	447.30	461.01	475.22	489.92	489.92	489.92	489.92	491.88	501.68	513.44	532.54	548.22	556.06	567.82	579.58	586.92	594.76	598.68	602.60	606.52	610.44	618.28	626.12	637.88	649.14	664.82	684.42	707.44	734.88	765.74	801.02	835.80	875.00	913.70	956.32	999.44	1045.98	1092.52	1142.98	1193.94	1248.32	1275.26	1329.64	1376.68	1407.54	1446.24	1469.76
UnitedHealthcare	Harmony	HMO I	399.48	434.99	448.57	462.15	476.77	491.39	506.53	522.20	522.20	522.20	522.20	524.29	534.73	547.27	567.63	584.34	592.70	605.23	617.76	625.60	633.95	638.13	642.31	646.48	650.66	659.02	667.37	679.90	691.92	708.63	729.51	754.06	783.30	816.20	853.80	890.87	932.65	973.90	1019.33	1065.29	1114.90	1164.51	1218.29	1272.60	1330.57	1359.29	1417.25	1467.38	1500.28	1541.53	1566.60
UnitedHealthcare	Harmony	HMO M	405.93	442.01	455.81	469.61	484.47	499.32	514.71	530.63	530.63	530.63	530.63	532.75	543.37	556.10	576.79	593.77	602.27	615.00	627.74	635.69	644.18	648.43	652.67	656.92	661.16	669.66	678.15	690.88	703.08	720.06	741.29	766.23	795.95	829.37	867.58	905.25	947.71	989.62	1035.79	1082.49	1132.90	1183.30	1237.96	1293.15	1352.05	1381.23	1440.13	1491.07	1524.50	1566.42	1591.89
UnitedHealthcare	Alliance	HMO N	426.16	464.04	478.52	493.01	508.60	524.20	540.36	557.07	557.07	557.07	557.07	559.30	570.44	583.81	605.54	623.36	632.27	645.64	659.01	667.37	676.28	680.74	685.20	689.65	694.11	703.02	711.94	725.31	738.12	755.94	778.23	804.41	835.61	870.70	910.81	950.36	994.93	1038.94	1087.40	1136.42	1189.34	1242.27	1299.64	1357.58	1419.41	1450.05	1511.89	1565.37	1600.46	1644.47	1671.21
UnitedHealthcare	Harmony	HMO O	389.56	424.19	437.43	450.67	464.93	479.19	493.95	509.23	509.23	509.23	509.23	511.27	521.45	533.67	553.53	569.83	577.98	590.20	602.42	610.06	618.21	622.28	626.35	630.43	634.50	642.65	650.80	663.02	674.73	691.03	711.39	735.33	763.85	795.93	832.59	868.75	909.48	949.71	994.02	1038.83	1087.21	1135.58	1188.03	1240.99	1297.52	1325.53	1382.05	1430.94	1463.02	1503.25	1527.69
Western Health	Full	HMO B	464.61	505.91	521.70	537.49	554.49	571.50	589.11	607.33	607.33	607.33	607.33	609.76	621.91	636.48	660.17	679.60	689.32	703.90	718.47	727.58	737.30	742.16	747.02	751.88	756.73	766.45	776.17	790.75	804.71	824.15	848.44	876.99	911.00	949.26	992.99	1036.11	1084.69	1132.67	1185.51	1238.96	1296.65	1354.35	1416.90	1480.07	1547.48	1580.88	1648.30	1706.60	1744.86	1792.84	1821.99
Western Health	Full	HMO C	459.94	500.82	516.45	532.08	548.92	565.75	583.19	601.22	601.22	601.22	601.22	603.63	615.65	630.08	653.53	672.77	682.39	696.82	711.25	720.27	729.89	734.70	739.51	744.32	749.13	758.75	768.36	782.79	796.62	815.86	839.91	868.17	901.84	939.71	983.00	1025.69	1073.79	1121.28	1173.59	1226.50	1283.61	1340.73	1402.66	1465.18	1531.92	1564.99	1631.72	1689.44	1727.32	1774.81	1803.66
Western Health	Full	HMO D	434.40	473.01	487.78	502.54	518.44	534.34	550.81	567.84	567.84	567.84	567.84	570.11	581.47	595.10	617.24	635.42	644.50	658.13	671.76	680.28	689.36	693.90	698.45	702.99	707.53	716.62	725.70	739.33	752.39	770.56	793.28	819.96	851.76	887.54	928.42	968.74	1014.17	1059.03	1108.43	1158.40	1212.34	1266.29	1324.78	1383.83	1446.86	1478.09	1541.12	1595.64	1631.41	1676.27	1703.52

Health Care Service Plan rates will vary by county

THE INFORMATION PROVIDED HEREIN, INCLUDING THE RATING INFORMATION IS PROVIDED ON TO YOU ON AN "AS IS" "AS AVAILABLE" BASIS WITHOUT WARRANTY OF ANY KIND, EXPRESS OR IMPLIED. WE FURTHER DISCLAIM ALL LIABILITY RELATED TO THE INFORMATION, INCLUDING THOSE CAUSED BY RATING DISCREPANCIES. FINAL RATES AND RATING AREAS ARE BASED UPON ACTUAL ENROLLMENT AND UNDERWRITING AND MUST BE APPROVED BY THE APPLICABLE INSURANCE CARRIER.

USE EMPLOYER ZIP CODE FOR RATING | AREA 16 | 02/01/27 - 03/01/27

Bronze		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																																																	
Anthem Blue Cross	Prudent Buyer - Small Group	PPO A	423.64	461.30	475.70	490.10	505.60	521.11	537.17	553.78	553.78	553.78	553.78	556.00	567.07	580.36	601.96	619.68	628.54	641.83	655.12	663.43	672.29	676.72	681.15	685.58	690.01	698.87	707.73	721.02	733.76	751.48	773.63	799.66	830.67	865.56	905.43	944.75	989.05	1032.80	1080.98	1129.71	1182.32	1234.93	1291.97	1349.56	1411.03	1441.49	1502.96	1556.12	1591.01	1634.76	1661.34
Anthem Blue Cross	Select PPO	PPO B	413.02	449.74	463.77	477.81	492.93	508.05	523.70	539.90	539.90	539.90	539.90	542.06	552.86	565.82	586.87	604.15	612.79	625.74	638.70	646.80	655.44	659.76	664.08	668.40	672.72	681.35	689.99	702.95	715.37	732.64	754.24	779.62	809.85	843.86	882.74	921.07	964.26	1006.91	1053.88	1101.40	1152.69	1203.98	1259.59	1315.74	1375.67	1405.36	1465.29	1517.12	1551.13	1593.78	1619.70
Anthem Blue Cross	Prudent Buyer - Small Group	PPO C	423.15	460.77	475.15	489.53	505.02	520.50	536.55	553.14	553.14	553.14	553.14	555.35	566.42	579.69	601.26	618.96	627.81	641.09	654.36	662.66	671.51	675.94	680.36	684.79	689.21	698.06	706.91	720.19	732.91	750.61	772.74	798.73	829.71	864.56	904.38	943.66	987.91	1031.61	1079.73	1128.41	1180.95	1233.50	1290.48	1348.00	1409.40	1439.82	1501.22	1554.32	1589.17	1632.87	1659.42
Anthem Blue Cross	Select PPO	PPO D	412.48	449.15	463.16	477.18	492.28	507.38	523.01	539.19	539.19	539.19	539.19	541.35	552.13	565.07	586.10	603.35	611.98	624.92	637.86	645.95	654.58	658.89	663.20	667.52	671.83	680.46	689.08	702.03	714.43	731.68	753.25	778.59	808.79	842.75	881.58	919.86	962.99	1005.59	1052.50	1099.95	1151.17	1202.39	1257.93	1314.01	1373.86	1403.51	1463.36	1515.12	1549.09	1591.69	1617.57
Kaiser Permanente	Full	HMO A	288.54	312.92	322.24	331.57	341.60	337.37	347.77	358.53	358.53	358.53	358.53	359.96	367.13	375.74	389.72	401.19	406.93	415.53	424.14	429.51	435.25	438.12	440.99	443.86	446.72	452.46	458.20	466.80	475.05	486.52	500.86	517.71	537.79	560.38	586.19	611.65	640.33	668.65	699.84	731.39	765.45	799.51	836.44	873.73	913.52	933.24	973.04	1007.46	1030.05	1058.37	1075.59
Kaiser Permanente	Full	HMO C	280.59	304.26	313.31	322.36	332.11	327.59	337.68	348.12	348.12	348.12	348.12	349.52	356.48	364.83	378.41	389.55	395.12	403.48	411.83	417.05	422.62	425.41	428.19	430.98	433.76	439.33	444.90	453.26	461.27	472.41	486.33	502.69	522.19	544.12	569.18	593.90	621.75	649.25	679.54	710.17	743.25	776.32	812.18	848.38	887.02	906.17	944.81	978.23	1000.16	1027.66	1044.36
Sharp Health Plan	Premier	HMO A	272.80	297.05	306.32	315.59	325.58	335.56	345.90	356.60	356.60	356.60	356.60	358.03	365.16	373.72	387.62	399.04	404.74	413.30	421.86	427.21	432.91	435.77	438.62	441.47	444.32	450.03	455.73	464.29	472.50	483.91	498.17	514.93	534.90	557.37	583.04	608.36	636.89	665.06	696.08	727.46	761.34	795.22	831.95	869.03	908.62	928.23	967.81	1002.05	1024.51	1052.68	1069.80
Sharp Health Plan	Performance	HMO B	291.24	317.12	327.02	336.92	347.58	358.24	369.28	380.70	380.70	380.70	380.70	382.22	389.84	398.97	413.82	426.00	432.09	441.23	450.37	456.08	462.17	465.22	468.26	471.31	474.35	480.44	486.53	495.67	504.43	516.61	531.84	549.73	571.05	595.03	622.44	649.47	679.93	710.01	743.13	776.63	812.79	848.96	888.17	927.77	970.02	990.96	1033.22	1069.77	1093.75	1123.83	1142.10
Sutter Health Plan	Sutter Health Plan	HMO A	335.37	365.18	376.58	387.97	400.25	412.52	425.24	438.40	438.40	438.40	438.40	440.14	448.91	459.43	476.53	490.56	497.57	508.09	518.61	525.19	532.20	535.71	539.22	542.73	546.23	553.25	560.26	570.78	580.87	594.89	612.43	633.03	657.58	685.20	716.77	747.89	782.96	817.59	855.73	894.31	935.96	977.61	1022.76	1068.35	1117.01	1141.13	1189.79	1231.87	1259.49	1294.12	1315.16
Sutter Health Plan	Sutter Health Plan	HMO B	335.53	365.36	376.76	388.17	400.45	412.73	425.45	438.62	438.62	438.62	438.62	440.36	449.13	459.66	476.76	490.80	497.82	508.34	518.87	525.45	532.47	535.98	539.48	542.99	546.50	553.52	560.54	571.06	581.15	595.19	612.73	633.35	657.91	685.54	717.12	748.26	783.35	818.00	856.16	894.75	936.42	978.09	1023.27	1068.88	1117.57	1141.69	1190.37	1232.48	1260.11	1294.76	1315.81
Western Health	Full	HMO B	316.71	344.87	355.63	366.39	377.99	389.58	401.59	414.01	414.01	414.01	414.01	415.66	423.94	433.88	450.02	463.27	469.90	479.83	489.77	495.98	502.60	505.91	509.23	512.54	515.85	522.47	529.10	539.03	548.56	561.81	578.37	597.82	621.01	647.09	676.90	706.29	739.41	772.12	808.14	844.57	883.90	923.23	965.87	1008.93	1054.89	1077.66	1123.61	1163.36	1189.44	1222.14	1242.02
Western Health	Full	HMO C	330.55	359.93	371.17	382.40	394.50	406.60	419.13	432.09	432.09	432.09	432.09	433.82	442.46	452.83	469.68	483.51	490.42	500.79	511.16	517.64	524.56	528.01	531.47	534.93	538.38	545.30	552.21	562.58	572.52	586.35	603.63	623.94	648.13	675.36	706.47	737.15	771.71	805.85	843.44	881.46	922.51	963.56	1008.07	1053.00	1100.97	1124.73	1172.69	1214.17	1241.39	1275.53	1296.27

Silver		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																																																	
Anthem Blue Cross	Select HMO	HMO A	325.12	354.02	365.07	376.12	388.02	399.92	412.24	424.99	424.99	424.99	424.99	426.69	435.19	445.39	461.96	475.56	482.36	492.56	502.76	509.14	515.94	519.34	522.74	526.14	529.54	536.34	543.14	553.34	563.11	576.71	593.71	613.69	637.49	664.26	694.86	725.03	759.03	792.61	829.58	866.98	907.35	947.73	991.50	1035.70	1082.87	1106.25	1153.42	1194.22	1221.00	1254.57	1274.97
Anthem Blue Cross	CaliforniaCare HMO	HMO B	377.81	411.39	424.23	437.07	450.90	464.73	479.05	493.87	493.87	493.87	493.87	495.85	505.72	517.58	536.84	552.64	560.54	572.40	584.25	591.66	599.56	603.51	607.46	611.41	615.36	623.26	631.17	643.02	654.38	670.18	689.94	713.15	740.81	771.92	807.48	842.54	882.05	921.07	964.03	1007.49	1054.41	1101.33	1152.20	1203.56	1258.38	1285.54	1340.36	1387.77	1418.89	1457.90	1481.61
Anthem Blue Cross	CaliforniaCare HMO	HMO D	377.32	410.86	423.68	436.51	450.32	464.13	478.43	493.23	493.23	493.23	493.23	495.20	505.07	516.91	536.14	551.92	559.82	571.65	583.49	590.89	598.78	602.73	606.67	610.62	614.56	622.46	630.35	642.19	653.53	669.31	689.04	712.22	739.85	770.92	806.43	841.45	880.91	919.87	962.78	1006.19	1053.05	1099.90	1150.71	1202.00	1256.75	1283.88	1338.63	1385.98	1417.05	1456.01	1479.69
Anthem Blue Cross	Select PPO	PPO B	445.47	485.07	500.21	515.35	531.66	547.96	564.85	582.32	582.32	582.32	582.32	584.65	596.30	610.27	632.98	651.62	660.93	674.91	688.88	697.62	706.94	711.60	716.25	720.91	725.57	734.89	744.20	758.18	771.57	790.21	813.50	840.87	873.48	910.17	952.09	993.44	1040.02	1086.03	1136.69	1187.93	1243.25	1298.57	1358.55	1419.11	1483.75	1515.78	1580.42	1636.32	1673.01	1719.01	1746.96
Anthem Blue Cross	Prudent Buyer - Small Group	PPO C	456.93	497.54	513.07	528.60	545.33	562.05	579.37	597.29	597.29	597.29	597.29	599.68	611.62	625.96	649.25	668.37	677.92	692.26	706.59	715.55	725.11	729.89	734.67	739.45	744.22	753.78	763.34	777.67	791.41	810.52	834.41	862.49	895.94	933.56	976.57	1018.98	1066.76	1113.95	1165.91	1218.47	1275.21	1331.96	1393.48	1455.60	1521.89	1554.75	1621.05	1678.38	1716.01	1763.20	1791.87
Anthem Blue Cross	Prudent Buyer - Small Group	PPO D	443.05	482.43	497.49	512.55	528.76	544.98	561.78	579.15	579.15	579.15	579.15	581.47	593.05	606.95	629.54	648.07	657.34	671.23	685.13	693.82	703.09	707.72	712.35	716.99	721.62	730.89	740.15	754.05	767.37	785.91	809.07	836.29	868.73	905.21	946.91	988.03	1034.36	1080.11	1130.50	1181.47	1236.49	1291.50	1351.16	1411.39	1475.67	1507.53	1571.81	1627.41	1663.90	1709.65	1737.45
Anthem Blue Cross	Select PPO	PPO E	431.94	470.34	485.02	499.70	515.51	531.32	547.69	564.63	564.63	564.63	564.63	566.89	578.18	591.73	613.75	631.82	640.86	654.41	667.96	676.43	685.46	689.98	694.49	699.01	703.53	712.56	721.60	735.15	748.13	766.20	788.79	815.33	846.95	882.52	923.17	963.26	1008.43	1053.03	1102.16	1151.85	1205.49	1259.12	1317.28	1376.00	1438.68	1469.73	1532.41	1586.61	1622.18	1666.79	1693.89
Anthem Blue Cross	Prudent Buyer - Small Group	PPO F	458.81	499.59	515.19	530.78	547.57	564.36	581.76	599.75	599.75	599.75	599.75	602.15	614.14	628.54	651.93	671.12	680.72	695.11	709.50	718.50	728.10	732.89	737.69	742.49	747.29	756.88	766.48	780.87	794.67	813.86	837.85	866.04	899.63	937.41	980.59	1023.17	1071.15	1118.53	1170.71	1223.49	1280.47	1337.44	1399.22	1461.59	1528.16	1561.15	1627.72	1685.30	1723.08	1770.46	1799.25
Kaiser Permanente	Full	HMO A	314.53	341.22	351.42	361.63	372.62	369.34	380.72	392.49	392.49	392.49	392.49	394.06	401.91	411.33	426.64	439.20	445.48	454.90	464.32	470.21	476.49	479.63	482.77	485.91	489.05	495.33	501.61	511.03	520.05	532.61	548.31	566.76	588.74	613.47	641.73	669.59	700.99	732.00	766.15	800.69	837.97	875.26	915.69	956.51	1000.07	1021.66	1065.23	1102.91	1127.63	1158.64	1177.47
Kaiser Permanente	Full	HMO B	318.66	345.72	356.06	366.41	377.55	374.42	385.96	397.90	397.90	397.90	397.90	399.49	407.45	417.00	432.51	445.25	451.61	461.16	470.71	476.68	483.05	486.23	489.41	492.60	495.78	502.15	508.51	518.06	527.21	539.95	555.86	574.56	596.85	621.91	650.56	678.81	710.64	742.08	776.69	811.71	849.51	887.31	928.29	969.67	1013.84	1035.73	1079.89	1118.09	1143.16	1174.59	1193.70
Kaiser Permanente	Full	HMO C	316.40	343.26	353.53	363.80	374.86	371.64	383.10	394.95	394.95	394.95	394.95	396.53	404.43	413.90	429.31	441.95	448.26	457.74	467.22	473.15	479.47	482.62	485.78	488.94	492.10	498.42	504.74	514.22	523.30	535.94	551.74	570.30	592.42	617.30	645.74	673.78	705.37	736.58	770.94	805.69	843.21	880.73	921.41	962.49	1006.32	1028.05	1071.89	1109.80	1134.68	1165.88	1184.85
Kaiser Permanente	Full	HMO D	290.79	315.37	324.77	334.17	344.29	340.14	350.62	361.46	361.46	361.46	361.46	362.91	370.14	378.81	392.91	404.48	410.26	418.94	427.61	433.03	438.82	441.71	444.60	447.49	450.38	456.17	461.95	470.63	478.94	490.51	504.96	521.95	542.20	564.97	590.99	616.66	645.57	674.13	705.58	737.39	771.72	806.06	843.29	880.89	921.01	940.89	981.01	1015.71	1038.48	1067.04	1084.38
Kaiser Permanente	Full	HMO E	303.14	328.82	338.63	348.45	359.02	355.33	366.28	377.61	377.61	377.61	377.61	379.12	386.67	395.73	410.46	422.54	428.58	437.65	446.71	452.37	458.41	461.43	464.46	467.48	470.50	476.54	482.58	491.64	500.33	512.41	527.52	545.26	566.41	590.20	617.39	644.20	674.40	704.24	737.09	770.32	806.19	842.06	880.96	920.23	962.14	982.91	1024.82	1061.07	1084.86	1114.69	1132.83
Sharp Health Plan	Premier	HMO A	285.29	310.65	320.35	330.04	340.49	350.93	361.74	372.93	372.93	372.93	372.93	374.42	381.88	390.83	405.37	417.31	423.28	432.23	441.18	446.77	452.74	455.72	458.70	461.69	464.67	470.64	476.60	485.55	494.13	506.07	520.98	538.51	559.40	582.89	609.74	636.22	666.05	695.51	727.96	760.78	796.21	831.63	870.05	908.83	950.23	970.74	1012.13	1047.93	1071.43	1100.89	1118.79
Sharp Health Plan	Performance	HMO B	294.75	320.95	330.96	340.98	351.77	362.56	373.73	385.29	385.29	385.29	385.29	386.83	394.54	403.78	418.81	431.14	437.30	446.55	455.80	461.58	467.74	470.82	473.91	476.99	480.07	486.24	492.40	501.65	510.51	522.84	538.25	556.36	577.94	602.21	629.95	657.30	688.13	718.57	752.09	785.99	822.59	859.20	898.88	938.95	981.72	1002.91	1045.68	1082.66	1106.94	1137.38	1155.87
Sharp Health Plan	Premier	HMO C	268.76	292.65	301.78	310.92	320.76	330.59	340.78	351.32	351.32	351.32	351.32	352.73	359.75	368.18	381.88	393.13	398.75	407.18	415.61	420.88	426.50	429.31	432.12	434.93	437.74	443.37	448.99	457.42	465.50	476.74	490.79	507.31	526.98	549.11	574.41	599.35	627.46	655.21	685.78	716.69	750.07	783.44	819.63	856.17	895.16	914.49	953.48	987.21	1009.34	1037.10	1053.96
Sutter Health Plan	Sutter Health Plan	HMO B	409.97	446.41	460.35	474.28	489.29	504.29	519.83	535.92	535.92	535.92	535.92	538.05	548.77	561.63	582.54	599.68	608.26	621.12	633.98	642.02	650.60	654.88	659.17	663.46	667.75	676.32	684.89	697.76	710.08	727.23	748.67	773.86	803.87	837.63	876.21	914.26	957.14	999.47	1046.10	1093.26	1144.17	1195.08	1250.28	1306.02	1365.50	1394.98	1454.46	1505.91	1539.67	1582.01	1607.72
Sutter Health Plan	Sutter Health Plan	HMO C	355.08	386.64	398.71	410.78	423.78	436.77	450.23	464.17	464.17	464.17	464.17	466.01	475.30	486.44	504.54	519.39	526.82	537.96	549.10	556.06	563.49	567.20	570.91	574.63	578.34	585.77	593.19	604.33	615.01	629.86	648.43	670.24	696.24	725.48	758.90	791.85	828.99	865.65	906.04	946.88	990.98	1035.07	1082.88	1131.15	1182.67	1208.20	1259.72	1304.28	1333.52	1370.19	1392.46
UnitedHealthcare	SignatureValue	HMO A	384.78	418.98	432.06	445.14	459.22	473.30	487.89	502.98	502.98	502.98	502.98	504.99	515.05	527.12	546.74	562.83	570.88	582.95	595.03	602.57	610.62	614.64	618.67	622.69	626.71	634.76	642.81	654.88	666.45	682.54	702.66	726.30	754.47	786.16	822.37	858.08	898.32	938.06	981.82	1026.08	1073.86	1121.65	1173.45	1225.76	1281.59	1309.26	1365.09	1413.37	1445.06	1484.80	1508.94
UnitedHealthcare	Alliance	HMO E	342.45	372.89	384.53	396.17	408.70	421.24	434.22	447.65	447.65	447.65	447.65	449.44	458.39	469.14	486.60	500.92	508.08	518.83	529.57	536.28	543.45	547.03	550.61	554.19	557.77	564.93	572.10	582.84	593.14	607.46	625.37	646.41	671.48	699.68	731.91	763.69	799.50	834.87	873.81	913.21	955.73	998.26	1044.37	1090.92	1140.61	1165.23	1214.92	1257.90	1286.10	1321.46	1342.95
UnitedHealthcare	Harmony	HMO F	327.96	357.11	368.25	379.40	391.40	403.41	415.84	428.70	428.70	428.70	428.70	430.41	438.99	449.28	466.00	479.72	486.57	496.86	507.15	513.58	520.44	523.87	527.30	530.73	534.16	541.02	547.88	558.17	568.03	581.75	598.89	619.04	643.05	670.06	700.92	731.36	765.66	799.53	836.82	874.55	915.27	956.00	1000.16	1044.74	1092.33	1115.91	1163.49	1204.65	1231.66	1265.52	1286.10
UnitedHealthcare	Harmony	HMO G	295.04	321.26	331.29	341.32	352.12	362.92	374.10	385.67	385.67	385.67	385.67	387.21	394.93	404.18	419.22	431.56	437.74	446.99	456.25	462.03	468.20	471.29	474.37	477.46	480.54	486.72	492.89	502.14	511.01	523.35	538.78	556.91	578.51	602.80	630.57	657.95	688.81	719.27	752.83	786.77	823.41	860.04	899.77	939.88	982.69	1003.90	1046.71	1083.73	1108.03	1138.50	1157.01
Western Health	Full	HMO B	362.81	395.06	407.40	419.73	433.01	446.29	460.04	474.27	474.27	474.27	474.27	476.16	485.65	497.03	515.53	530.71	538.29	549.68	561.06	568.17	575.76	579.56	583.35	587.14	590.94	598.53	606.11	617.50	628.40	643.58	662.55	684.84	711.40	741.28	775.43	809.10	847.04	884.51	925.77	967.51	1012.56	1057.62	1106.47	1155.79	1208.43	1234.52	1287.16	1332.69	1362.57	1400.04	1422.80
Western Health	Full	HMO C	342.86	373.34	384.99	396.64	409.19	421.74	434.74	448.18	448.18	448.18	448.18	449.98	458.94	469.70	487.18	501.52	508.69	519.45	530.20	536.93	544.10	547.68	551.27	554.85	558.44	565.61	572.78	583.54	593.84	608.19	626.11	647.18	672.28	700.51	732.78	764.60	800.46	835.86	874.86	914.30	956.87	999.45	1045.62	1092.23	1141.97	1166.63	1216.37	1259.40	1287.64	1323.04	1344.54
Western Health	Full	HMO D	330.78	360.19	371.43	382.67	394.78	406.88	419.42	432.40	432.40	432.40	432.40	434.12	442.77	453.15	470.01	483.85	490.77	501.15	511.52	518.01	524.93	528.39	531.85	535.31	538.76	545.68	552.60	562.98	572.92	586.76	604.06	624.38	648.59	675.83	706.97	737.67	772.26	806.42	844.04	882.09	923.16	964.24	1008.78	1053.75	1101.74	1125.52	1173.52	1215.03	1242.27	1276.43	1297.19

Health Care Service Plan rates will vary by county

THE INFORMATION PROVIDED HEREIN, INCLUDING THE RATING INFORMATION IS PROVIDED ON TO YOU ON AN "AS IS" "AS AVAILABLE" BASIS WITHOUT WARRANTY OF ANY KIND, EXPRESS OR IMPLIED. WE FURTHER DISCLAIM ALL LIABILITY RELATED TO THE INFORMATION, INCLUDING THOSE CAUSED BY RATING DISCREPANCIES. FINAL RATES AND RATING AREAS ARE BASED UPON ACTUAL ENROLLMENT AND UNDERWRITING AND MUST BE APPROVED BY THE APPLICABLE INSURANCE CARRIER.

Continued

USE EMPLOYER ZIP CODE FOR RATING

AREA 16 - Continued

02/01/27 - 03/01/27

Gold		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																																																			
Anthem Blue Cross	Select HMO	HMO A	416.73	453.77	467.93	482.09	497.35	512.60	528.40	544.74	544.74	544.74	544.74	546.92	557.81	570.89	592.13	609.56	618.28	631.35	644.43	652.60	661.31	665.67	670.03	674.39	678.75	687.46	696.18	709.25	721.78	739.21	761.00	786.60	817.11	851.43	890.65	929.33	972.91	1015.94	1063.33	1111.27	1163.02	1214.77	1270.88	1327.53	1388.00	1417.96	1478.42	1530.72	1565.04	1608.07	1634.22
Anthem Blue Cross	CaliforniaCare HMO	HMO B	484.34	527.39	543.85	560.31	578.04	595.77	614.13	633.12	633.12	633.12	633.12	635.65	648.31	663.51	688.20	708.46	718.59	733.79	748.98	758.48	768.61	773.67	778.74	783.80	788.87	799.00	809.13	824.32	838.88	859.14	884.47	914.23	949.68	989.57	1035.15	1080.10	1130.75	1180.77	1235.85	1291.56	1351.71	1411.86	1477.07	1542.91	1613.19	1648.01	1718.29	1779.07	1818.95	1868.97	1899.36
Anthem Blue Cross	Priority Select HMO	HMO C	456.58	497.17	512.69	528.20	544.91	561.63	578.93	596.84	596.84	596.84	596.84	599.23	611.16	625.49	648.77	667.86	677.41	691.74	706.06	715.01	724.56	729.34	734.11	738.89	743.66	753.21	762.76	777.09	790.81	809.91	833.79	861.84	895.26	932.86	975.83	1018.21	1065.96	1113.11	1165.03	1217.55	1274.25	1330.95	1392.43	1454.50	1520.75	1553.57	1619.82	1677.12	1714.72	1761.87	1790.52
Anthem Blue Cross	Select PPO	PPO B	527.35	574.23	592.15	610.07	629.38	648.68	668.67	689.35	689.35	689.35	689.35	692.11	705.89	722.44	749.32	771.38	782.41	798.96	815.50	825.84	836.87	842.39	847.90	853.42	858.93	869.96	880.99	897.53	913.39	935.45	963.02	995.42	1034.03	1077.45	1127.09	1176.03	1231.18	1285.64	1345.61	1406.27	1471.76	1537.25	1608.25	1679.95	1756.46	1794.38	1870.90	1937.07	1980.50	2034.96	2068.05
Anthem Blue Cross	Select PPO	PPO C	544.10	592.46	610.96	629.45	649.36	669.28	689.90	711.24	711.24	711.24	711.24	714.08	728.31	745.38	773.12	795.88	807.26	824.33	841.40	852.07	863.45	869.14	874.83	880.52	886.21	897.58	908.96	926.03	942.39	965.15	993.60	1027.03	1066.86	1111.67	1162.88	1213.38	1270.27	1326.46	1388.34	1450.93	1518.50	1586.07	1659.32	1733.29	1812.24	1851.36	1930.31	1998.58	2043.39	2099.58	2133.72
Anthem Blue Cross	Select PPO	PPO D	523.50	570.04	587.83	605.62	624.78	643.95	663.79	684.32	684.32	684.32	684.32	687.06	700.74	717.17	743.86	765.75	776.70	793.13	809.55	819.82	830.76	836.24	841.71	847.19	852.66	863.61	874.56	890.98	906.72	928.62	956.00	988.16	1026.48	1069.59	1118.86	1167.45	1222.20	1276.26	1335.79	1396.01	1461.02	1526.03	1596.52	1667.69	1743.65	1781.28	1857.24	1922.94	1966.05	2020.11	2052.96
Anthem Blue Cross	Prudent Buyer - Small Group	PPO E	558.12	607.73	626.70	645.67	666.10	686.53	707.68	729.57	729.57	729.57	729.57	732.49	747.08	764.59	793.04	816.39	828.06	845.57	863.08	874.02	885.70	891.53	897.37	903.21	909.04	920.72	932.39	949.90	966.68	990.03	1019.21	1053.50	1094.36	1140.32	1192.85	1244.65	1303.01	1360.65	1424.12	1488.32	1557.63	1626.94	1702.09	1777.96	1858.94	1899.07	1980.05	2050.09	2096.05	2153.69	2188.71
Anthem Blue Cross	Prudent Buyer - Small Group	PPO H	537.04	584.77	603.03	621.28	640.94	660.59	680.95	702.01	702.01	702.01	702.01	704.82	718.86	735.71	763.08	785.55	796.78	813.63	830.48	841.01	852.24	857.86	863.47	869.09	874.70	885.94	897.17	914.02	930.16	952.63	980.71	1013.70	1053.02	1097.24	1147.79	1197.63	1253.79	1309.25	1370.32	1432.10	1498.79	1565.48	1637.79	1710.80	1788.72	1827.33	1905.26	1972.65	2016.87	2072.33	2106.03
Anthem Blue Cross	Prudent Buyer - Small Group	PPO I	544.94	593.38	611.90	630.42	650.37	670.31	690.97	712.34	712.34	712.34	712.34	715.19	729.44	746.53	774.31	797.11	808.51	825.60	842.70	853.38	864.78	870.48	876.18	881.88	887.58	898.97	910.37	927.47	943.85	966.65	995.14	1028.62	1068.51	1113.39	1164.68	1215.25	1272.24	1328.51	1390.49	1453.17	1520.85	1588.52	1661.89	1735.97	1815.04	1854.22	1933.29	2001.68	2046.55	2102.83	2137.02
Kaiser Permanente	Full	HMO B	377.87	410.19	422.55	434.90	448.21	447.25	461.03	475.29	475.29	475.29	475.29	477.19	486.70	498.11	516.64	531.85	539.46	550.86	562.27	569.40	577.01	580.81	584.61	588.41	592.22	599.82	607.42	618.83	629.76	644.97	663.98	686.32	712.94	742.88	777.10	810.85	848.87	886.42	927.77	969.60	1014.75	1059.90	1108.86	1158.29	1211.05	1237.19	1289.95	1335.57	1365.52	1403.07	1425.87
Kaiser Permanente	Full	HMO C	388.74	422.02	434.75	447.48	461.18	460.62	474.81	489.50	489.50	489.50	489.50	491.46	501.25	512.99	532.08	547.75	555.58	567.33	579.08	586.42	594.25	598.17	602.08	606.00	609.91	617.75	625.58	637.33	648.58	664.25	683.83	706.83	734.25	765.09	800.33	835.08	874.24	912.91	955.50	998.58	1045.08	1091.58	1142.00	1192.91	1247.24	1274.16	1328.50	1375.49	1406.33	1445.00	1468.50
Kaiser Permanente	Full	HMO D	367.07	398.43	410.42	422.42	435.33	433.97	447.35	461.18	461.18	461.18	461.18	463.03	472.25	483.32	501.30	516.06	523.44	534.51	545.58	552.50	559.87	563.56	567.25	570.94	574.63	582.01	589.39	600.46	611.07	625.82	644.27	665.95	691.77	720.83	754.03	786.78	823.67	860.10	900.23	940.81	984.62	1028.43	1075.94	1123.90	1175.09	1200.46	1251.65	1295.92	1324.97	1361.41	1383.54
Kaiser Permanente	Full	HMO E	328.41	356.33	367.01	377.68	389.18	386.41	398.32	410.64	410.64	410.64	410.64	412.28	420.49	430.35	446.36	459.50	466.07	475.93	485.78	491.94	498.51	501.80	505.08	508.37	511.65	518.22	524.79	534.65	544.09	557.23	573.66	592.96	615.95	641.82	671.39	700.55	733.40	765.84	801.56	837.70	876.71	915.72	958.01	1000.72	1046.30	1068.89	1114.47	1153.89	1179.76	1212.20	1231.92
Kaiser Permanente	Full	HMO F	374.73	406.77	419.02	431.27	444.46	443.39	457.05	471.19	471.19	471.19	471.19	473.07	482.50	493.80	512.18	527.26	534.80	546.11	557.41	564.48	572.02	575.79	579.56	583.33	587.10	594.64	602.18	613.49	624.32	639.40	658.25	680.39	706.78	736.47	770.39	803.85	841.54	878.76	919.76	961.22	1005.99	1050.75	1099.28	1148.28	1200.59	1226.50	1278.80	1324.04	1353.72	1390.95	1413.57
Sharp Health Plan	Performance	HMO A	366.15	398.70	411.14	423.59	436.99	450.39	464.27	478.63	478.63	478.63	478.63	480.54	490.12	501.60	520.27	535.59	543.25	554.73	566.22	573.40	581.06	584.89	588.71	592.54	596.37	604.03	611.69	623.18	634.18	649.50	668.65	691.14	717.95	748.10	782.56	816.54	854.83	892.64	934.29	976.41	1021.88	1067.34	1116.64	1166.42	1219.55	1245.87	1299.00	1344.95	1375.10	1412.92	1435.89
Sharp Health Plan	Premier	HMO B	345.92	376.67	388.42	400.18	412.84	425.50	438.61	452.18	452.18	452.18	452.18	453.99	463.03	473.88	491.52	505.99	513.22	524.08	534.93	541.71	548.95	552.56	556.18	559.80	563.42	570.65	577.89	588.74	599.14	613.61	631.70	652.95	678.27	706.76	739.31	771.42	807.59	843.32	882.66	922.45	965.40	1008.36	1054.94	1101.96	1152.15	1177.02	1227.22	1270.63	1299.11	1334.84	1356.54
Sharp Health Plan	Performance	HMO D	377.08	410.59	423.41	436.23	450.03	463.83	478.12	492.91	492.91	492.91	492.91	494.88	504.74	516.57	535.79	551.57	559.45	571.28	583.11	590.51	598.39	602.34	606.28	610.22	614.17	622.05	629.94	641.77	653.11	668.88	688.60	711.76	739.37	770.42	805.91	840.90	880.34	919.28	962.16	1005.54	1052.36	1099.19	1149.96	1201.22	1255.93	1283.04	1337.76	1385.08	1416.13	1455.07	1478.73
Sutter Health Plan	Sutter Health Plan	HMO A	449.12	489.04	504.31	519.57	536.01	552.45	569.47	587.10	587.10	587.10	587.10	589.43	601.18	615.27	638.16	656.95	666.34	680.43	694.52	703.33	712.72	717.42	722.12	726.81	731.51	740.90	750.30	764.39	777.89	796.68	820.16	847.75	880.63	917.62	959.89	1001.57	1048.54	1094.92	1145.99	1197.66	1253.43	1309.20	1369.67	1430.73	1495.89	1528.18	1593.35	1649.71	1686.70	1733.08	1761.25
Sutter Health Plan	Sutter Health Plan	HMO B	481.73	524.55	540.92	557.29	574.93	592.56	610.82	629.72	629.72	629.72	629.72	632.23	644.82	659.94	684.50	704.65	714.72	729.83	744.95	754.39	764.47	769.51	774.54	779.58	784.62	794.69	804.77	819.88	834.37	854.52	879.71	909.30	944.57	984.24	1029.58	1074.29	1124.66	1174.41	1229.19	1284.61	1344.43	1404.25	1469.11	1534.60	1604.50	1639.14	1709.03	1769.49	1809.16	1858.90	1889.12
Sutter Health Plan	Sutter Health Plan	HMO C	409.29	445.67	459.58	473.49	488.47	503.45	518.96	535.03	535.03	535.03	535.03	537.16	547.86	560.70	581.56	598.68	607.24	620.08	632.92	640.95	649.51	653.79	658.07	662.35	666.63	675.19	683.75	696.59	708.90	726.02	747.42	772.56	802.52	836.23	874.75	912.74	955.54	997.80	1044.35	1091.43	1142.26	1193.08	1248.19	1303.83	1363.22	1392.64	1452.03	1503.39	1537.10	1579.37	1605.04
UnitedHealthcare	SignatureValue	HMO A	421.27	458.72	473.03	487.35	502.77	518.19	534.16	550.68	550.68	550.68	550.68	552.88	563.90	577.11	598.59	616.21	625.02	638.24	651.45	659.71	668.53	672.93	677.34	681.74	686.15	694.96	703.77	716.99	729.65	747.27	769.30	795.18	826.02	860.71	900.36	939.46	983.51	1027.02	1074.93	1123.39	1175.70	1228.02	1284.74	1342.01	1403.13	1433.42	1494.55	1547.41	1582.10	1625.61	1652.04
UnitedHealthcare	Alliance	HMO B	374.93	408.25	421.00	433.74	447.46	461.18	475.40	490.10	490.10	490.10	490.10	492.06	501.86	513.62	532.74	548.42	556.26	568.03	579.79	587.14	594.98	598.90	602.82	606.74	610.66	618.51	626.35	638.11	649.38	665.07	684.67	707.70	735.15	766.03	801.31	836.11	875.32	914.04	956.68	999.80	1046.36	1092.92	1143.40	1194.37	1248.77	1275.73	1330.13	1377.18	1408.06	1446.78	1470.30
UnitedHealthcare	SignatureValue	HMO C	451.01	491.10	506.43	521.76	538.27	554.78	571.87	589.56	589.56	589.56	589.56	591.92	603.71	617.86	640.85	659.72	669.15	683.30	697.45	706.29	715.73	720.44	725.16	729.88	734.59	744.02	753.46	767.61	781.17	800.03	823.62	851.32	884.34	921.48	963.93	1005.79	1052.95	1099.53	1150.82	1202.70	1258.71	1314.72	1375.44	1436.76	1502.20	1534.62	1600.07	1656.66	1693.81	1740.38	1768.68
UnitedHealthcare	Alliance	HMO D	401.40	437.08	450.72	464.36	479.05	493.74	508.96	524.70	524.70	524.70	524.70	526.80	537.29	549.89	570.35	587.14	595.53	608.13	620.72	628.59	636.99	641.18	645.38	649.58	653.78	662.17	670.57	683.16	695.23	712.02	733.01	757.67	787.05	820.11	857.88	895.14	937.11	978.57	1024.21	1070.39	1120.23	1170.08	1224.13	1278.69	1336.94	1365.79	1424.04	1474.41	1507.46	1548.91	1574.10
UnitedHealthcare	Harmony	HMO E	384.40	418.57	431.64	444.70	458.77	472.84	487.42	502.49	502.49	502.49	502.49	504.50	514.55	526.61	546.21	562.29	570.33	582.39	594.45	601.98	610.02	614.04	618.06	622.08	626.10	634.14	642.18	654.24	665.80	681.88	701.98	725.60	753.74	785.39	821.57	857.25	897.45	937.14	980.86	1025.08	1072.82	1120.55	1172.31	1224.57	1280.34	1307.98	1363.76	1412.00	1443.65	1483.35	1507.47
UnitedHealthcare	SignatureValue	HMO F	466.50	507.97	523.83	539.68	556.76	573.83	591.52	609.81	609.81	609.81	609.81	612.25	624.45	639.08	662.86	682.38	692.13	706.77	721.41	730.55	740.31	745.19	750.07	754.94	759.82	769.58	779.34	793.97	808.00	827.51	851.90	880.57	914.72	953.13	997.04	1040.34	1089.12	1137.30	1190.35	1244.01	1301.94	1359.88	1422.69	1486.11	1553.80	1587.34	1655.02	1713.57	1751.98	1800.16	1829.43
UnitedHealthcare	Alliance	HMO G	415.18	452.09	466.20	480.31	495.50	510.70	526.44	542.72	542.72	542.72	542.72	544.89	555.75	568.77	589.94	607.30	615.99	629.01	642.04	650.18	658.86	663.20	667.55	671.89	676.23	684.91	693.60	706.62	719.10	736.47	758.18	783.69	814.08	848.27	887.35	925.88	969.30	1012.17	1059.39	1107.15	1158.71	1210.27	1266.17	1322.61	1382.85	1412.70	1472.94	1525.04	1559.23	1602.11	1628.16
UnitedHealthcare	SignatureValue	HMO H	437.17	476.03	490.89	505.75	521.75	537.75	554.33	571.47	571.47	571.47	571.47	573.76	585.19	598.90	621.19	639.47	648.62	662.33	676.05	684.62	693.76	698.34	702.91	707.48	712.05	721.20	730.34	744.05	757.20	775.48	798.34	825.20	857.21	893.21	934.35	974.93	1020.65	1065.79	1115.51	1165.80	1220.09	1274.38	1333.24	1392.67	1456.11	1487.54	1550.97	1605.83	1641.83	1686.98	1714.41
UnitedHealthcare	Alliance	HMO J	389.08	423.66	436.89	450.11	464.35	478.59	493.34	508.60	508.60	508.60	508.60	510.63	520.81	533.01	552.85	569.12	577.26	589.47	601.67	609.30	617.44	621.51	625.58	629.65	633.72	641.85	649.99	662.20	673.90	690.17	710.51	734.42	762.90	794.94	831.56	867.67	908.36	948.54	992.79	1037.54	1085.86	1134.18	1186.56	1239.46	1295.91	1323.89	1380.34	1429.17	1461.21	1501.39	1525.80
UnitedHealthcare	Harmony	HMO L	359.06	390.98	403.18	415.38	428.53	441.67	455.28	469.36	469.36	469.36	469.36	471.24	480.62	491.89	510.19	525.21	532.72	543.99	555.25	562.29	569.80	573.56	577.31	581.07	584.82	592.33	599.84	611.11	621.90	636.92	655.70	677.76	704.04	733.61	767.40	800.73	838.28	875.36	916.19	957.49	1002.08	1046.67	1095.02	1143.83	1195.93	1221.74	1273.84	1318.90	1348.47	1385.55	1408.08
UnitedHealthcare	Harmony	HMO M	397.61	432.95	446.47	459.98	474.53	489.08	504.16	519.75	519.75	519.75	519.75	521.83	532.22	544.70	564.97	581.60	589.92	602.39	614.86	622.66	630.98	635.13	639.29	643.45	647.61	655.92	664.24	676.71	688.67	705.30	726.09	750.52	779.63	812.37	849.79	886.69	928.27	969.33	1014.55	1060.29	1109.67	1159.04	1212.58	1266.63	1324.32	1352.91	1410.60	1460.50	1493.24	1534.30	1559.25
UnitedHealthcare	Harmony	HMO N	372.62	405.74	418.40	431.07	444.70	458.34	472.47	487.08	487.08	487.08	487.08	489.03	498.77	510.46	529.46	545.04	552.84	564.53	576.22	583.52	591.32	595.21	599.11	603.01	606.90	614.69	622.49	634.18	645.38	660.97	680.45	703.34	730.62	761.31	796.38	830.96	869.92	908.40	950.78	993.64	1039.92	1086.19	1136.36	1187.01	1241.08	1267.87	1321.94	1368.69	1399.38	1437.86	1461.24
Western Health	Full	HMO A	406.47	442.60	456.41	470.23	485.10	499.98	515.39	531.33	531.33	531.33	531.33	533.45	544.08	556.83	577.55	594.56	603.06	615.81	628.56	636.53	645.03	649.28	653.53	657.78	662.04	670.54	679.04	691.79	704.01	721.01	742.27	767.24	796.99	830.47	868.72	906.45	948.95	990.93	1037.15	1083.91	1134.39	1184.86	1239.59	1294.85	1353.83	1383.05	1442.03	1493.03	1526.51	1568.48	1593.99
Western Health	Full	HMO B	426.53	464.44	478.93	493.43	509.04	524.65	540.82	557.55	557.55	557.55	557.55	559.78	570.93	584.31	606.06	623.90	632.82	646.20	659.58	667.94	676.86	681.33	685.79	690.25	694.71	703.63	712.55	725.93	738.75	756.59	778.90	805.10	836.32	871.45	911.59	951.18	995.78	1039.83	1088.34	1137.40	1190.37	1243.34	1300.76	1358.75	1420.64	1451.30	1513.19	1566.71	1601.84	1645.89	1672.65
Western Health	Full	HMO C	397.43	432.76	446.27	459.77	474.32	488.87	503.93	519.52	519.52	519.52	519.52	521.60	531.99	544.46	564.72	581.34	589.65	602.12	614.59	622.38	630.70	634.85	639.01	643.16	647.32	655.63	663.94	676.41	688.36	704.99	725.77	750.18	779.28	812.01	849.41	886.30	927.86	968.90	1014.10	1059.82	1109.17	1158.53	1212.04	1266.07	1323.73	1352.31	1409.97	1459.85	1492.58	1533.62	1558.56
Western Health	Full	HMO D	382.67	416.69	429.69	442.70	456.70	470.71	485.22	500.22	500.22	500.22	500.22	502.22	512.23	524.23	543.74	559.75	567.75	579.76	591.76	599.27	607.27	611.27	615.27	619.28	623.28	631.28	639.28	651.29	662.79	678.80	698.81	722.32	750.33	781.85	817.86	853.38	893.40	932.91	976.43	1020.45	1067.97	1115.50	1167.02	1219.04	1274.57	1302.08	1357.60	1405.62	1437.14	1476.66	1500.66

Platinum		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																																																		
Anthem Blue Cross	Select HMO	HMO A	452.14	492.33	507.69	523.06	539.61	556.16	573.30	591.03	591.03	591.03	591.03	593.39	605.21	619.40	642.45	661.36	670.82	685.00	699.19	708.05	717.51	722.24	726.97	731.70	736.42	745.88	755.34	769.52	783.11	802.03	825.67	853.45	886.55	923.78	966.33	1008.30	1055.58	1102.27	1153.69	1205.70	1261.85	1318.00	1378.87	1440.34	1505.94	1538.45	1604.06	1660.79	1698.03	1744.72	1773.09
Anthem Blue Cross	Vivity	HMO B	467.90	509.49	525.39	541.29	558.42	575.54	593.28	611.63	611.63	611.63	611.63	614.08	626.31	640.99	664.84	684.41	694.20	708.88	723.56	732.73	742.52	747.41	752.30	757.20	762.09	771.88	781.66	796.34	810.41	829.98	854.45	883.19	917.45	955.98	1000.02	1043.44	1092.37	1140.69	1193.90	1247.73	1305.83	1363.93	1426.93	1490.54	1558.43	1592.07	1659.96	1718.68	1757.21	1805.53	1834.89
Anthem Blue Cross	Vivity	HMO C	458.11	498.83	514.40	529.97	546.74	563.51	580.87	598.84	598.84	598.84	598.84	601.24	613.21	627.58	650.94	670.10	679.68	694.06	708.43	717.41	726.99	731.78	736.57	741.36	746.15	755.74	765.32	779.69	793.46	812.63	836.58	864.72	898.26	935.99	979.10	1021.62	1069.53	1116.84	1168.94	1221.63	1278.52	1335.41	1397.09	1459.37	1525.84	1558.78	1625.25	1682.74	1720.47	1767.78	1796.52
Anthem Blue Cross	CaliforniaCare HMO	HMO D	525.33	572.03	589.88	607.74	626.97	646.19	666.11	686.71	686.71	686.71	686.71	689.46	703.19	719.67	746.45	768.43	779.42	795.90	812.38	822.68	833.67	839.16	844.65	850.15	855.64	866.63	877.62	894.10	909.89	931.87	959.33	991.61	1030.07	1073.33	1122.77	1171.53	1226.46	1280.71	1340.46	1400.89	1466.13	1531.36	1602.09	1673.51	1749.74	1787.51	1863.73	1929.66	1972.92	2027.17	2060.13
Anthem Blue Cross	Prudent Buyer - Small Group	PPO B	629.69	685.66	707.06	728.46	751.51	774.56	798.43	823.12	823.12	823.12	823.12	826.41	842.87	862.63	894.73	921.07	934.24	954.00	973.75	986.10	999.27	1005.85	1012.44	1019.02	1025.61	1038.78	1051.95	1071.70	1090.63	1116.97	1149.90	1188.59	1234.68	1286.54	1345.80	1404.24	1470.09	1535.12	1606.73	1679.16	1757.36	1835.56	1920.34	2005.94	2097.31	2142.58	2233.95	2312.97	2364.82	2429.85	2469.36
Kaiser Permanente	Full	HMO A	418.32	454.23	467.97	481.70	496.49	497.01	512.32	528.17	528.17	528.17	528.17	530.28	540.84	553.52	574.12	591.02	599.47	612.15	624.82	632.74	641.19	645.42	649.65	653.87	658.10	666.55	675.00	687.67	699.82	716.72	737.85	762.67	792.25	825.53	863.55	901.05	943.31	985.03	1030.98	1077.46	1127.64	1177.81	1232.21	1287.14	1345.77	1374.82	1433.45	1484.15	1517.42	1559.15	1584.51
Kaiser Permanente	Full	HMO B	407.41	442.36	455.72	469.08	483.47	483.59	498.49	513.91	513.91	513.91	513.91	515.97	526.24	538.58	558.62	575.07	583.29	595.62	607.96	615.66	623.89	628.00	632.11	636.22	640.33	648.55	656.78	669.11	680.93	697.38	717.93	742.09	770.86	803.24	840.24	876.73	917.84	958.44	1003.15	1048.38	1097.20	1146.02	1198.95	1252.40	1309.44	1337.71	1394.75	1444.09	1476.46	1517.06	1541.73
Kaiser Permanente	Full	HMO C	391.36	424.88	437.70	450.51	464.32	463.85	478.14	492.93	492.93	492.93	492.93	494.90	504.76	516.59	535.82	551.59	559.48	571.31	583.14	590.53	598.42	602.36	606.30	610.25	614.19	622.08	629.97	641.80	653.13	668.91	688.62	711.79	739.40	770.45	805.94	840.94	880.37	919.32	962.20	1005.58	1052.41	1099.24	1150.01	1201.27	1255.99	1283.10	1337.81	1385.14	1416.19	1455.13	1478.79
Sharp Health Plan	Premier	HMO A	387.44	421.88	435.05	448.22	462.40	476.58	491.27	506.46	506.46	506.46	506.46	508.49	518.62	530.77	550.52	566.73	574.83	586.99	599.14	606.74	614.84	618.89	622.95	627.00	631.05	639.15	647.26	659.41	671.06	687.27	707.52	731.33	759.69	791.60	828.06	864.02	904.54	944.55	988.61	1033.18	1081.29	1129.41	1181.57	1234.24	1290.46	1318.32	1374.53	1423.15	1455.06	1495.07	1519.38
Sharp Health Plan	Performance	HMO B	415.31	452.23	466.34	480.46	495.66	510.86	526.60	542.89	542.89	542.89	542.89	545.06	555.92	568.95	590.12	607.49	616.18	629.21	642.24	650.38	659.07	663.41	667.75	672.10	676.44	685.13	693.81	706.84	719.33	736.70	758.42	783.93	814.34	848.54	887.63	926.17	969.60	1012.49	1059.72	1107.50	1159.07	1210.64	1266.56	1323.02	1383.28	1413.14	1473.40	1525.52	1559.72	1602.61	1628.67
Sharp Health Plan	Premier	HMO C	388.91	423.48	436.70	449.92	464.15	478.39	493.13	508.38	508.38	508.38	508.38	510.41	520.58	532.78	552.61	568.88	577.01	589.21	601.41	609.04	617.17	621.24	625.31	629.37	633.44	641.58	649.71	661.91	673.60	689.87	710.21	734.10	762.57	794.60	831.20	867.30	907.97	948.13	992.36	1037.10	1085.39	1133.69	1186.05	1238.92	1295.35	1323.31	1379.74	1428.55	1460.58	1500.74	1525.14
Sutter Health Plan	Sutter Health Plan	HMO A	523.22	569.73	587.51	605.30	624.45	643.60	663.43	683.96	683.96	683.96	683.96	686.69	700.37	716.78	743.45	765.34	776.28	792.70	809.11	819.37	830.32	835.79	841.26	846.73	852.20	863.15	874.09	890.50	906.24	928.12	955.48	987.63	1025.93	1069.02	1118.26	1166.82	1221.54	1275.57	1335.07	1395.26	1460.24	1525.21	1595.66	1666.79	1742.71	1780.32	1856.24	1921.90	1964.99	2019.02	2051.84
UnitedHealthcare	SignatureValue	HMO A	468.09	509.70	525.60	541.51	558.65	575.78	593.52	611.88	611.88	611.88	611.88	614.33	626.57	641.25	665.11	684.69	694.48	709.17	723.85	733.03	742.82	747.72	752.61	757.51	762.40	772.19	781.98	796.67	810.74	830.32	854.80	883.55	917.82	956.37	1000.42	1043.87	1092.82	1141.16	1194.39	1248.24	1306.36	1364.49	1427.52	1491.15	1559.07	1592.72	1660.64	1719.38	1757.93	1806.27	1835.64
UnitedHealthcare	SignatureValue	HMO B	506.98	552.05	569.28	586.51	605.06	623.62	642.84	662.72	662.72	662.72	662.72	665.37	678.63	694.53	720.38	741.58	752.19	768.09	784.00	793.94	804.54	809.84	815.15	820.45	825.75	836.35	846.96	862.86	878.10	899.31	925.82	956.97	994.08	1035.83	1083.55	1130.60	1183.62	1235.97	1293.63	1351.95	1414.91	1477.87	1546.13	1615.05	1688.61	1725.06	1798.62	1862.24	1903.99	1956.35	1988.16
UnitedHealthcare	Alliance	HMO C	416.59	453.62	467.78	481.94	497.18	512.43	528.22	544.56	544.56	544.56	544.56	546.74	557.63	570.70	591.94	609.36	618.08	631.15	644.21	652.38	661.10	665.45	669.81	674.17	678.52	687.23	695.95	709.02	721.54	738.97	760.75	786.34	816.84	851.15	890.36	929.02	972.58	1015.60	1062.98	1110.90	1162.64	1214.37	1270.46	1327.09	1387.54	1417.49	1477.94	1530.21	1564.52	1607.54	1633.68
UnitedHealthcare	SignatureValue	HMO D	486.53	529.78	546.32	562.85	580.66	598.47	616.91	635.99	635.99	635.99	635.99	638.53	651.25	666.52	691.32	711.67	721.85	737.11	752.38	761.92	772.09	777.18	782.27	787.36	792.44	802.62	812.80	828.06	842.69	863.04	888.48	918.37	953.99	994.05	1039.84	1085.00	1135.88	1186.12	1241.45	1297.42	1357.84	1418.26	1483.76	1549.91	1620.50	1655.48	1726.08	1787.13	1827.20	1877.44	1907.97
UnitedHealthcare	SignatureValue	HMO E	498.93	543.27	560.23	577.19	595.45	613.71	632.62	652.19	652.19	652.19	652.19	654.80	667.84	683.50	708.93	729.80	740.24	755.89	771.54	781.32	791.76	796.98	802.19	807.41	812.63	823.06	833.50	849.15	864.15	885.02	911.11	941.76	978.29	1019.37	1066.33	1112.64	1164.81	1216.33	1273.07	1330.47	1392.43	1454.38	1521.56	1589.39	1661.78	1697.65	1770.04	1832.65	1873.74	1925.26	1956.57
UnitedHealthcare	Alliance	HMO F	433.01	471.49	486.21	500.93	516.78	532.62	549.04	566.02	566.02	566.02	566.02	568.28	579.60	593.19	615.26	633.38	642.43	656.02	669.60	678.09	687.15	691.68	696.20	700.73	705.26	714.32	723.37	736.96	749.98	768.09	790.73	817.33	849.03	884.69	925.44	965.63	1010.91	1055.63	1104.87	1154.68	1208.45	1262.22	1320.52	1379.39	1442.22	1473.35	1536.18	1590.52	1626.18	1670.89	1698.06
UnitedHealthcare	Alliance	HMO G	444.04	483.51	498.60	513.69	529.94	546.19	563.03	580.44	580.44	580.44	580.44	582.76	594.37	608.30	630.94	649.51	658.80	672.73	686.66	695.37	704.65	709.30	713.94	718.58	723.23	732.52	741.80	755.73	769.08	787.66	810.87	838.16	870.66	907.23	949.02	990.23	1036.67	1082.52	1133.02	1184.10	1239.24	1294.38	1354.17	1414.53	1478.96	1510.89	1575.31	1631.04	1667.60	1713.46	1741.32
UnitedHealthcare	Harmony	HMO H	398.96	434.43	447.99	461.55	476.15	490.75	505.87	521.52	521.52	521.52	521.52	523.61	534.04	546.55	566.89	583.58	591.93	604.44	616.96	624.78	633.13	637.30	641.47	645.64	649.81	658.16	666.50	679.02	691.01	707.70	728.56	753.07	782.28	815.14	852.69	889.71	931.43	972.63	1018.01	1063.90	1113.45	1162.99	1216.71	1270.94	1328.83	1357.52	1415.41	1465.47	1498.33	1539.53	1564.56
UnitedHealthcare	Harmony	HMO I	425.25	463.05	477.50	491.95	507.52	523.08	539.20	555.88	555.88	555.88	555.88	558.10	569.22	582.56	604.24	622.03	630.92	644.26	657.61	665.94	674.84	679.29	683.73	688.18	692.63	701.52	710.41	723.76	736.54	754.33	776.56	802.69	833.82	868.84	908.86	948.33	992.80	1036.72	1085.08	1134.00	1186.80	1239.61	1296.87	1354.68	1416.38	1446.96	1508.66	1562.02	1597.04	1640.96	1667.64
UnitedHealthcare	Harmony	HMO M	432.12	470.53	485.21	499.90	515.72	531.53	547.91	564.86	564.86	564.86	564.86	567.12	578.42	591.97	614.00	632.08	641.12	654.67	668.23	676.70	685.74	690.26	694.78	699.30	703.82	712.85	721.89	735.45	748.44	766.52	789.11	815.66	847.29	882.88	923.55	963.65	1008.84	1053.46	1102.61	1152.31	1205.98	1259.64	1317.82	1376.56	1439.26	1470.33	1533.03	1587.26	1622.84	1667.47	1694.58
UnitedHealthcare	Alliance	HMO N	451.20	491.31	506.65	521.98	538.50	555.01	572.12	589.81	589.81	589.81	589.81	592.17	603.97	618.12	641.12	660.00	669.43	683.59	697.75	706.59	716.03	720.75	725.47	730.18	734.90	744.34	753.78	767.93	781.50	800.37	823.96	851.69	884.72	921.87	964.34	1006.22	1053.40	1100.00	1151.31	1203.21	1259.24	1315.28	1376.03	1437.37	1502.84	1535.28	1600.74	1657.37	1694.52	1741.12	1769.43
UnitedHealthcare	Harmony	HMO O	414.68	451.54	465.64	479.73	494.91	510.09	525.81	542.07	542.07	542.07	542.07	544.24	555.08	568.09	589.23	606.58	615.25	628.26	641.27	649.40	658.07	662.41	666.75	671.08	675.42	684.09	692.77	705.78	718.24	735.59	757.27	782.75	813.11	847.26	886.28	924.77	968.14	1010.96	1058.12	1105.82	1157.32	1208.82	1264.65	1321.02	1381.19	1411.01	1471.18	1523.22	1557.37	1600.19	1626.21
Western Health	Full	HMO B	464.61	505.91	521.70	537.49	554.49	571.50	589.11	607.33	607.33	607.33	607.33	609.76	621.91	636.48	660.17	679.60	689.32	703.90	718.47	727.58	737.30	742.16	747.02	751.88	756.73	766.45	776.17	790.75	804.71	824.15	848.44	876.99	911.00	949.26	992.99	1036.11	1084.69	1132.67	1185.51	1238.96	1296.65	1354.35	1416.90	1480.07	1547.48	1580.88	1648.30	1706.60	1744.86	1792.84	1821.99
Western Health	Full	HMO C	459.94	500.82	516.45	532.08	548.92	565.75	583.19	601.22	601.22	601.22	601.22	603.63	615.65	630.08	653.53	672.77	682.39	696.82	711.25	720.27	729.89	734.70	739.51	744.32	749.13	758.75	768.36	782.79	796.62	815.86	839.91	868.17	901.84	939.71	983.00	1025.69	1073.79	1121.28	1173.59	1226.50	1283.61	1340.73	1402.66	1465.18	1531.92	1564.99	1631.72	1689.44	1727.32	1774.81	1803.66
Western Health	Full	HMO D	434.40	473.01	487.78	502.54	518.44	534.34	550.81	567.84	567.84	567.84	567.84	570.11	581.47	595.10	617.24	635.42	644.50	658.13	671.76	680.28	689.36	693.90	698.45	702.99	707.53	716.62	725.70	739.33	752.39	770.56	793.28	819.96	851.76	887.54	928.42	968.74	1014.17	1059.03	1108.43	1158.40	1212.34	1266.29	1324.78	1383.83	1446.86	1478.09	1541.12	1595.64	1631.41	1676.27	1703.52

Health Care Service Plan rates will vary by county

THE INFORMATION PROVIDED HEREIN, INCLUDING THE RATING INFORMATION IS PROVIDED ON TO YOU ON AN "AS IS" "AS AVAILABLE" BASIS WITHOUT WARRANTY OF ANY KIND, EXPRESS OR IMPLIED. WE FURTHER DISCLAIM ALL LIABILITY RELATED TO THE INFORMATION, INCLUDING THOSE CAUSED BY RATING DISCREPANCIES. FINAL RATES AND RATING AREAS ARE BASED UPON ACTUAL ENROLLMENT AND UNDERWRITING AND MUST BE APPROVED BY THE APPLICABLE INSURANCE CARRIER.

USE EMPLOYER ZIP CODE FOR RATING | AREA 17 | 02/01/27 - 03/01/27

Bronze		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																																																	
Anthem Blue Cross	Prudent Buyer - Small Group	PPO A	387.69	422.15	435.32	448.50	462.69	476.88	491.58	506.78	506.78	506.78	506.78	508.81	518.94	531.11	550.87	567.09	575.20	587.36	599.52	607.12	615.23	619.29	623.34	627.39	631.45	639.56	647.66	659.83	671.48	687.70	707.97	731.79	760.17	792.10	828.59	864.57	905.11	945.14	989.23	1033.83	1081.98	1130.12	1182.32	1235.02	1291.28	1319.15	1375.40	1424.05	1455.98	1496.01	1520.34
Anthem Blue Cross	Select PPO	PPO B	376.40	409.85	422.65	435.44	449.21	462.99	477.26	492.02	492.02	492.02	492.02	493.99	503.83	515.64	534.83	550.57	558.44	570.25	582.06	589.44	597.31	601.25	605.18	609.12	613.06	620.93	628.80	640.61	651.93	667.67	687.35	710.48	738.03	769.03	804.45	839.39	878.75	917.62	960.42	1003.72	1050.46	1097.20	1147.88	1199.05	1253.67	1280.73	1335.34	1382.58	1413.57	1452.44	1476.06
Anthem Blue Cross	Prudent Buyer - Small Group	PPO C	387.20	421.61	434.77	447.93	462.11	476.28	490.96	506.14	506.14	506.14	506.14	508.16	518.29	530.43	550.17	566.37	574.47	586.62	598.76	606.36	614.45	618.50	622.55	626.60	630.65	638.75	646.85	658.99	670.64	686.83	707.08	730.87	759.21	791.10	827.54	863.47	903.97	943.95	987.99	1032.53	1080.61	1128.69	1180.82	1233.46	1289.64	1317.48	1373.66	1422.25	1454.14	1494.13	1518.42
Anthem Blue Cross	Select PPO	PPO D	375.90	409.31	422.09	434.86	448.62	462.38	476.63	491.37	491.37	491.37	491.37	493.34	503.16	514.96	534.12	549.84	557.70	569.50	581.29	588.66	596.52	600.45	604.39	608.32	612.25	620.11	627.97	639.76	651.07	666.79	686.44	709.54	737.06	768.01	803.39	838.28	877.59	916.41	959.15	1002.39	1049.07	1095.76	1146.37	1197.47	1252.01	1279.04	1333.58	1380.75	1411.71	1450.52	1474.11
Kaiser Permanente	Full	HMO A	292.08	316.77	326.22	335.66	345.83	341.72	352.25	363.15	363.15	363.15	363.15	364.60	371.86	380.58	394.74	406.36	412.17	420.89	429.61	435.05	440.86	443.77	446.67	449.58	452.48	458.29	464.10	472.82	481.17	492.79	507.32	524.39	544.72	567.60	593.75	619.53	648.58	677.27	708.87	740.82	775.32	809.82	847.23	884.99	925.30	945.28	985.59	1020.45	1043.33	1072.02	1089.45
Kaiser Permanente	Full	HMO C	284.02	308.00	317.17	326.33	336.21	331.81	342.04	352.61	352.61	352.61	352.61	354.02	361.08	369.54	383.29	394.57	400.22	408.68	417.14	422.43	428.07	430.89	433.71	436.54	439.36	445.00	450.64	459.10	467.21	478.50	492.60	509.17	528.92	551.14	576.52	601.56	629.77	657.62	688.30	719.33	752.83	786.33	822.65	859.32	898.46	917.85	956.99	990.84	1013.06	1040.92	1057.83
Sharp Health Plan	Premier	HMO A	272.80	297.05	306.32	315.59	325.58	335.56	345.90	356.60	356.60	356.60	356.60	358.03	365.16	373.72	387.62	399.04	404.74	413.30	421.86	427.21	432.91	435.77	438.62	441.47	444.32	450.03	455.73	464.29	472.50	483.91	498.17	514.93	534.90	557.37	583.04	608.36	636.89	665.06	696.08	727.46	761.34	795.22	831.95	869.03	908.62	928.23	967.81	1002.05	1024.51	1052.68	1069.80
Sharp Health Plan	Performance	HMO B	291.24	317.12	327.02	336.92	347.58	358.24	369.28	380.70	380.70	380.70	380.70	382.22	389.84	398.97	413.82	426.00	432.09	441.23	450.37	456.08	462.17	465.22	468.26	471.31	474.35	480.44	486.53	495.67	504.43	516.61	531.84	549.73	571.05	595.03	622.44	649.47	679.93	710.01	743.13	776.63	812.79	848.96	888.17	927.77	970.02	990.96	1033.22	1069.77	1093.75	1123.83	1142.10
Sutter Health Plan	Sutter Health Plan	HMO A	335.37	365.18	376.58	387.97	400.25	412.52	425.24	438.40	438.40	438.40	438.40	440.14	448.91	459.43	476.53	490.56	497.57	508.09	518.61	525.19	532.20	535.71	539.22	542.73	546.23	553.25	560.26	570.78	580.87	594.89	612.43	633.03	657.58	685.20	716.77	747.89	782.96	817.59	855.73	894.31	935.96	977.61	1022.76	1068.35	1117.01	1141.13	1189.79	1231.87	1259.49	1294.12	1315.16
Sutter Health Plan	Sutter Health Plan	HMO B	335.53	365.36	376.76	388.17	400.45	412.73	425.45	438.62	438.62	438.62	438.62	440.36	449.13	459.66	476.76	490.80	497.82	508.34	518.87	525.45	532.47	535.98	539.48	542.99	546.50	553.52	560.54	571.06	581.15	595.19	612.73	633.35	657.91	685.54	717.12	748.26	783.35	818.00	856.16	894.75	936.42	978.09	1023.27	1068.88	1117.57	1141.69	1190.37	1232.48	1260.11	1294.76	1315.81
Western Health	Full	HMO B	316.71	344.87	355.63	366.39	377.99	389.58	401.59	414.01	414.01	414.01	414.01	415.66	423.94	433.88	450.02	463.27	469.90	479.83	489.77	495.98	502.60	505.91	509.23	512.54	515.85	522.47	529.10	539.03	548.56	561.81	578.37	597.82	621.01	647.09	676.90	706.29	739.41	772.12	808.14	844.57	883.90	923.23	965.87	1008.93	1054.89	1077.66	1123.61	1163.36	1189.44	1222.14	1242.02
Western Health	Full	HMO C	330.55	359.93	371.17	382.40	394.50	406.60	419.13	432.09	432.09	432.09	432.09	433.82	442.46	452.83	469.68	483.51	490.42	500.79	511.16	517.64	524.56	528.01	531.47	534.93	538.38	545.30	552.21	562.58	572.52	586.35	603.63	623.94	648.13	675.36	706.47	737.15	771.71	805.85	843.44	881.46	922.51	963.56	1008.07	1053.00	1100.97	1124.73	1172.69	1214.17	1241.39	1275.53	1296.27

Silver		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																																																	
Anthem Blue Cross	Select HMO	HMO A	294.53	320.71	330.72	340.73	351.51	362.29	373.45	385.00	385.00	385.00	385.00	386.54	394.24	403.48	418.50	430.82	436.98	446.22	455.46	461.23	467.39	470.47	473.55	476.63	479.71	485.87	492.03	501.27	510.13	522.45	537.85	555.94	577.50	601.76	629.48	656.81	687.61	718.03	751.52	785.40	821.98	858.55	898.21	938.25	980.98	1002.16	1044.89	1081.85	1106.11	1136.52	1155.00
Anthem Blue Cross	CaliforniaCare HMO	HMO B	319.46	347.85	358.71	369.57	381.26	392.95	405.06	417.59	417.59	417.59	417.59	419.26	427.61	437.63	453.92	467.28	473.96	483.99	494.01	500.27	506.95	510.29	513.64	516.98	520.32	527.00	533.68	543.70	553.31	566.67	583.37	603.00	626.39	652.69	682.76	712.41	745.82	778.81	815.14	851.88	891.55	931.23	974.24	1017.67	1064.02	1086.99	1133.34	1173.43	1199.74	1232.73	1252.77
Anthem Blue Cross	CaliforniaCare HMO	HMO D	319.01	347.36	358.20	369.05	380.72	392.40	404.49	417.00	417.00	417.00	417.00	418.67	427.01	437.02	453.28	466.62	473.30	483.30	493.31	499.57	506.24	509.57	512.91	516.25	519.58	526.25	532.93	542.93	552.53	565.87	582.55	602.15	625.50	651.77	681.80	711.40	744.76	777.71	813.98	850.68	890.30	929.91	972.86	1016.23	1062.52	1085.45	1131.74	1171.77	1198.04	1230.98	1251.00
Anthem Blue Cross	Select PPO	PPO B	405.96	442.05	455.85	469.64	484.50	499.36	514.75	530.67	530.67	530.67	530.67	532.79	543.41	556.14	576.84	593.82	602.31	615.05	627.78	635.74	644.23	648.48	652.72	656.97	661.21	669.71	678.20	690.93	703.14	720.12	741.35	766.29	796.01	829.44	867.65	905.32	947.78	989.70	1035.87	1082.57	1132.98	1183.39	1238.05	1293.24	1352.15	1381.33	1440.24	1491.18	1524.61	1566.54	1592.01
Anthem Blue Cross	Prudent Buyer - Small Group	PPO C	418.11	455.28	469.49	483.70	499.00	514.30	530.15	546.55	546.55	546.55	546.55	548.74	559.67	572.78	594.10	611.59	620.33	633.45	646.57	654.77	663.51	667.88	672.26	676.63	681.00	689.75	698.49	711.61	724.18	741.67	763.53	789.22	819.83	854.26	893.61	932.41	976.14	1019.32	1066.87	1114.96	1166.88	1218.81	1275.10	1331.94	1392.61	1422.67	1483.34	1535.81	1570.24	1613.42	1639.65
Anthem Blue Cross	Prudent Buyer - Small Group	PPO D	405.42	441.46	455.24	469.01	483.85	498.69	514.06	529.96	529.96	529.96	529.96	532.08	542.68	555.40	576.07	593.03	601.50	614.22	626.94	634.89	643.37	647.61	651.85	656.09	660.33	668.81	677.29	690.01	702.20	719.16	740.35	765.26	794.94	828.33	866.48	904.11	946.51	988.38	1034.48	1081.12	1131.46	1181.81	1236.40	1291.51	1350.34	1379.49	1438.31	1489.19	1522.58	1564.44	1589.88
Anthem Blue Cross	Select PPO	PPO E	393.63	428.62	442.00	455.38	469.78	484.19	499.11	514.55	514.55	514.55	514.55	516.61	526.90	539.25	559.32	575.78	584.01	596.36	608.71	616.43	624.66	628.78	632.90	637.01	641.13	649.36	657.59	669.94	681.78	698.24	718.83	743.01	771.83	804.24	841.29	877.82	918.99	959.64	1004.40	1049.68	1098.56	1147.45	1200.45	1253.96	1311.07	1339.37	1396.49	1445.89	1478.30	1518.95	1543.65
Anthem Blue Cross	Prudent Buyer - Small Group	PPO F	419.87	457.19	471.46	485.73	501.10	516.47	532.38	548.85	548.85	548.85	548.85	551.05	562.02	575.19	596.60	614.16	622.94	636.12	649.29	657.52	666.30	670.69	675.09	679.48	683.87	692.65	701.43	714.60	727.23	744.79	766.74	792.54	823.28	857.85	897.37	936.34	980.25	1023.61	1071.36	1119.65	1171.79	1223.94	1280.47	1337.55	1398.47	1428.66	1489.58	1542.27	1576.85	1620.21	1646.55
Kaiser Permanente	Full	HMO A	318.40	345.43	355.77	366.11	377.24	374.10	385.63	397.55	397.55	397.55	397.55	399.14	407.10	416.64	432.14	444.86	451.22	460.77	470.31	476.27	482.63	485.81	488.99	492.17	495.35	501.71	508.07	517.62	526.76	539.48	555.38	574.07	596.33	621.38	650.00	678.23	710.03	741.44	776.03	811.01	848.78	886.55	927.50	968.84	1012.97	1034.83	1078.96	1117.13	1142.17	1173.58	1192.65
Kaiser Permanente	Full	HMO B	322.59	349.99	360.47	370.95	382.23	379.25	390.94	403.03	403.03	403.03	403.03	404.64	412.70	422.37	438.09	450.99	457.44	467.11	476.78	482.83	489.28	492.50	495.72	498.95	502.17	508.62	515.07	524.74	534.01	546.91	563.03	581.97	604.54	629.93	658.95	687.57	719.81	751.65	786.71	822.18	860.46	898.75	940.26	982.18	1026.91	1049.08	1093.82	1132.51	1157.90	1189.74	1209.09
Kaiser Permanente	Full	HMO C	320.30	347.50	357.90	368.30	379.51	376.44	388.04	400.04	400.04	400.04	400.04	401.64	409.64	419.24	434.84	447.64	454.04	463.65	473.25	479.25	485.65	488.85	492.05	495.25	498.45	504.85	511.25	520.85	530.05	542.85	558.86	577.66	600.06	625.26	654.06	682.47	714.47	746.07	780.88	816.08	854.08	892.09	933.29	974.90	1019.30	1041.30	1085.71	1124.11	1149.31	1180.92	1200.12
Kaiser Permanente	Full	HMO D	294.36	319.25	328.77	338.29	348.54	344.52	355.14	366.12	366.12	366.12	366.12	367.59	374.91	383.70	397.98	409.69	415.55	424.34	433.13	438.62	444.48	447.40	450.33	453.26	456.19	462.05	467.91	476.69	485.11	496.83	511.48	528.68	549.19	572.25	598.61	624.61	653.90	682.82	714.67	746.89	781.68	816.46	854.17	892.25	932.89	953.02	993.66	1028.81	1051.88	1080.80	1098.36
Kaiser Permanente	Full	HMO E	306.86	332.87	342.82	352.76	363.47	359.91	371.00	382.48	382.48	382.48	382.48	384.01	391.65	400.83	415.75	427.99	434.11	443.29	452.47	458.21	464.33	467.38	470.44	473.50	476.56	482.68	488.80	497.98	506.78	519.02	534.32	552.29	573.71	597.81	625.35	652.50	683.10	713.32	746.59	780.25	816.58	852.92	892.32	932.09	974.55	995.58	1038.04	1074.76	1098.85	1129.07	1147.44
Sharp Health Plan	Premier	HMO A	285.29	310.65	320.35	330.04	340.49	350.93	361.74	372.93	372.93	372.93	372.93	374.42	381.88	390.83	405.37	417.31	423.28	432.23	441.18	446.77	452.74	455.72	458.70	461.69	464.67	470.64	476.60	485.55	494.13	506.07	520.98	538.51	559.40	582.89	609.74	636.22	666.05	695.51	727.96	760.78	796.21	831.63	870.05	908.83	950.23	970.74	1012.13	1047.93	1071.43	1100.89	1118.79
Sharp Health Plan	Performance	HMO B	294.75	320.95	330.96	340.98	351.77	362.56	373.73	385.29	385.29	385.29	385.29	386.83	394.54	403.78	418.81	431.14	437.30	446.55	455.80	461.58	467.74	470.82	473.91	476.99	480.07	486.24	492.40	501.65	510.51	522.84	538.25	556.36	577.94	602.21	629.95	657.30	688.13	718.57	752.09	785.99	822.59	859.20	898.88	938.95	981.72	1002.91	1045.68	1082.66	1106.94	1137.38	1155.87
Sharp Health Plan	Premier	HMO C	268.76	292.65	301.78	310.92	320.76	330.59	340.78	351.32	351.32	351.32	351.32	352.73	359.75	368.18	381.88	393.13	398.75	407.18	415.61	420.88	426.50	429.31	432.12	434.93	437.74	443.37	448.99	457.42	465.50	476.74	490.79	507.31	526.98	549.11	574.41	599.35	627.46	655.21	685.78	716.69	750.07	783.44	819.63	856.17	895.16	914.49	953.48	987.21	1009.34	1037.10	1053.96
Sutter Health Plan	Sutter Health Plan	HMO B	409.97	446.41	460.35	474.28	489.29	504.29	519.83	535.92	535.92	535.92	535.92	538.05	548.77	561.63	582.54	599.68	608.26	621.12	633.98	642.02	650.60	654.88	659.17	663.46	667.75	676.32	684.89	697.76	710.08	727.23	748.67	773.86	803.87	837.63	876.21	914.26	957.14	999.47	1046.10	1093.26	1144.17	1195.08	1250.28	1306.02	1365.50	1394.98	1454.46	1505.91	1539.67	1582.01	1607.72
Sutter Health Plan	Sutter Health Plan	HMO C	355.08	386.64	398.71	410.78	423.78	436.77	450.23	464.17	464.17	464.17	464.17	466.01	475.30	486.44	504.54	519.39	526.82	537.96	549.10	556.06	563.49	567.20	570.91	574.63	578.34	585.77	593.19	604.33	615.01	629.86	648.43	670.24	696.24	725.48	758.90	791.85	828.99	865.65	906.04	946.88	990.98	1035.07	1082.88	1131.15	1182.67	1208.20	1259.72	1304.28	1333.52	1370.19	1392.46
UnitedHealthcare	SignatureValue	HMO A	358.95	390.86	403.06	415.26	428.40	441.54	455.14	469.22	469.22	469.22	469.22	471.10	480.48	491.74	510.04	525.06	532.56	543.83	555.09	562.13	569.63	573.39	577.14	580.89	584.65	592.16	599.66	610.92	621.72	636.73	655.50	677.55	703.83	733.39	767.17	800.49	838.03	875.10	915.92	957.21	1001.78	1046.36	1094.69	1143.49	1195.57	1221.38	1273.46	1318.51	1348.07	1385.14	1407.66
UnitedHealthcare	Alliance	HMO E	315.15	343.16	353.87	364.58	376.12	387.65	399.60	411.96	411.96	411.96	411.96	413.61	421.85	431.73	447.80	460.98	467.57	477.46	487.35	493.53	500.12	503.42	506.71	510.01	513.30	519.89	526.48	536.37	545.85	559.03	575.51	594.87	617.94	643.89	673.55	702.80	735.76	768.31	804.15	840.40	879.53	918.67	961.10	1003.95	1049.67	1072.33	1118.06	1157.61	1183.56	1216.11	1235.88
UnitedHealthcare	Harmony	HMO F	315.76	343.83	354.56	365.29	376.85	388.41	400.38	412.76	412.76	412.76	412.76	414.41	422.67	432.57	448.67	461.88	468.48	478.39	488.30	494.49	501.09	504.39	507.69	511.00	514.30	520.90	527.51	537.41	546.91	560.12	576.63	596.03	619.14	645.14	674.86	704.17	737.19	769.80	805.71	842.03	881.24	920.45	962.97	1005.90	1051.71	1074.41	1120.23	1159.86	1185.86	1218.47	1238.28
UnitedHealthcare	Harmony	HMO G	284.07	309.32	318.97	328.63	339.02	349.42	360.19	371.33	371.33	371.33	371.33	372.82	380.24	389.15	403.64	415.52	421.46	430.37	439.28	444.85	450.79	453.77	456.74	459.71	462.68	468.62	474.56	483.47	492.01	503.89	518.75	536.20	557.00	580.39	607.12	633.49	663.20	692.53	724.84	757.51	792.79	828.07	866.31	904.93	946.15	966.57	1007.79	1043.44	1066.83	1096.17	1113.99
Western Health	Full	HMO B	362.81	395.06	407.40	419.73	433.01	446.29	460.04	474.27	474.27	474.27	474.27	476.16	485.65	497.03	515.53	530.71	538.29	549.68	561.06	568.17	575.76	579.56	583.35	587.14	590.94	598.53	606.11	617.50	628.40	643.58	662.55	684.84	711.40	741.28	775.43	809.10	847.04	884.51	925.77	967.51	1012.56	1057.62	1106.47	1155.79	1208.43	1234.52	1287.16	1332.69	1362.57	1400.04	1422.80
Western Health	Full	HMO C	342.86	373.34	384.99	396.64	409.19	421.74	434.74	448.18	448.18	448.18	448.18	449.98	458.94	469.70	487.18	501.52	508.69	519.45	530.20	536.93	544.10	547.68	551.27	554.85	558.44	565.61	572.78	583.54	593.84	608.19	626.11	647.18	672.28	700.51	732.78	764.60	800.46	835.86	874.86	914.30	956.87	999.45	1045.62	1092.23	1141.97	1166.63	1216.37	1259.40	1287.64	1323.04	1344.54
Western Health	Full	HMO D	330.78	360.19	371.43	382.67	394.78	406.88	419.42	432.40	432.40	432.40	432.40	434.12	442.77	453.15	470.01	483.85	490.77	501.15	511.52	518.01	524.93	528.39	531.85	535.31	538.76	545.68	552.60	562.98	572.92	586.76	604.06	624.38	648.59	675.83	706.97	737.67	772.26	806.42	844.04	882.09	923.16	964.24	1008.78	1053.75	1101.74	1125.52	1173.52	1215.03	1242.27	1276.43	1297.19

Health Care Service Plan rates will vary by county

THE INFORMATION PROVIDED HEREIN, INCLUDING THE RATING INFORMATION IS PROVIDED ON TO YOU ON AN "AS IS" "AS AVAILABLE" BASIS WITHOUT WARRANTY OF ANY KIND, EXPRESS OR IMPLIED. WE FURTHER DISCLAIM ALL LIABILITY RELATED TO THE INFORMATION, INCLUDING THOSE CAUSED BY RATING DISCREPANCIES. FINAL RATES AND RATING AREAS ARE BASED UPON ACTUAL ENROLLMENT AND UNDERWRITING AND MUST BE APPROVED BY THE APPLICABLE INSURANCE CARRIER.

Continued

Gold		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																																																			
Anthem Blue Cross	Select HMO	HMO A	377.52	411.08	423.91	436.74	450.56	464.37	478.69	493.49	493.49	493.49	493.49	495.46	505.33	517.18	536.42	552.22	560.11	571.95	583.80	591.20	599.10	603.04	606.99	610.94	614.89	622.78	630.68	642.52	653.87	669.67	689.41	712.60	740.24	771.32	806.86	841.89	881.37	920.36	963.29	1006.72	1053.60	1100.48	1151.31	1202.64	1257.41	1284.55	1339.33	1386.71	1417.80	1456.78	1480.47
Anthem Blue Cross	CaliforniaCare HMO	HMO B	409.52	445.92	459.84	473.76	488.75	503.74	519.26	535.32	535.32	535.32	535.32	537.46	548.17	561.02	581.89	599.02	607.59	620.44	633.28	641.31	649.88	654.16	658.44	662.73	667.01	675.57	684.14	696.99	709.30	726.43	747.84	773.00	802.98	836.71	875.25	913.26	956.08	998.37	1044.94	1092.05	1142.91	1193.76	1248.90	1304.57	1364.00	1393.44	1452.86	1504.25	1537.97	1580.26	1605.96
Anthem Blue Cross	Priority Select HMO	HMO C	396.87	432.14	445.63	459.12	473.65	488.17	503.22	518.78	518.78	518.78	518.78	520.86	531.23	543.68	563.91	580.51	588.82	601.27	613.72	621.50	629.80	633.95	638.10	642.25	646.40	654.70	663.00	675.45	687.38	703.98	724.74	749.12	778.17	810.85	848.21	885.04	926.54	967.52	1012.66	1058.31	1107.60	1156.88	1210.31	1264.27	1321.85	1350.38	1407.97	1457.77	1490.45	1531.44	1556.34
Anthem Blue Cross	Select PPO	PPO B	480.58	523.30	539.63	555.97	573.56	591.15	609.36	628.21	628.21	628.21	628.21	630.72	643.29	658.36	682.86	702.97	713.02	728.10	743.17	752.60	762.65	767.67	772.70	777.72	782.75	792.80	802.85	817.93	832.38	852.48	877.61	907.14	942.32	981.89	1027.12	1071.73	1121.98	1171.61	1226.27	1281.55	1341.23	1400.91	1465.61	1530.95	1600.68	1635.23	1704.96	1765.27	1804.85	1854.48	1884.63
Anthem Blue Cross	Select PPO	PPO C	495.84	539.92	556.77	573.62	591.77	609.92	628.72	648.16	648.16	648.16	648.16	650.75	663.72	679.27	704.55	725.29	735.66	751.22	766.77	776.50	786.87	792.05	797.24	802.42	807.61	817.98	828.35	843.90	858.81	879.55	905.48	935.94	972.24	1013.07	1059.74	1105.76	1157.61	1208.82	1265.21	1322.25	1383.82	1445.40	1512.16	1579.57	1651.51	1687.16	1759.11	1821.33	1862.16	1913.37	1944.48
Anthem Blue Cross	Select PPO	PPO D	477.07	519.48	535.69	551.90	569.37	586.83	604.91	623.62	623.62	623.62	623.62	626.11	638.59	653.55	677.87	697.83	707.81	722.78	737.74	747.10	757.07	762.06	767.05	772.04	777.03	787.01	796.99	811.95	826.30	846.25	871.20	900.51	935.43	974.72	1019.62	1063.90	1113.79	1163.05	1217.31	1272.18	1331.43	1390.67	1454.91	1519.76	1588.98	1623.28	1692.50	1752.37	1791.66	1840.93	1870.86
Anthem Blue Cross	Prudent Buyer - Small Group	PPO E	510.74	556.14	573.49	590.85	609.55	628.24	647.60	667.63	667.63	667.63	667.63	670.30	683.65	699.68	725.71	747.08	757.76	773.78	789.81	799.82	810.50	815.84	821.18	826.53	831.87	842.55	853.23	869.25	884.61	905.97	932.68	964.06	1001.45	1043.51	1091.58	1138.98	1192.39	1245.13	1303.21	1361.97	1425.39	1488.81	1557.58	1627.01	1701.12	1737.84	1811.95	1876.04	1918.10	1970.84	2002.89
Anthem Blue Cross	Prudent Buyer - Small Group	PPO H	491.43	535.11	551.81	568.52	586.50	604.49	623.12	642.39	642.39	642.39	642.39	644.96	657.81	673.22	698.28	718.83	729.11	744.53	759.95	769.58	779.86	785.00	790.14	795.28	800.42	810.70	820.97	836.39	851.17	871.72	897.42	927.61	963.59	1004.06	1050.31	1095.92	1147.31	1198.06	1253.95	1310.48	1371.50	1432.53	1498.70	1565.50	1636.81	1672.14	1743.45	1805.12	1845.59	1896.34	1927.17
Anthem Blue Cross	Prudent Buyer - Small Group	PPO I	498.67	543.00	559.95	576.90	595.15	613.40	632.30	651.86	651.86	651.86	651.86	654.47	667.50	683.15	708.57	729.43	739.86	755.51	771.15	780.93	791.36	796.57	801.79	807.00	812.22	822.65	833.08	848.72	863.71	884.57	910.65	941.29	977.79	1018.86	1065.79	1112.07	1164.22	1215.72	1272.43	1329.79	1391.72	1453.65	1520.79	1588.58	1660.94	1696.79	1769.15	1831.73	1872.79	1924.29	1955.58
Kaiser Permanente	Full	HMO B	382.56	415.29	427.81	440.33	453.81	453.02	466.98	481.42	481.42	481.42	481.42	483.35	492.98	504.53	523.31	538.71	546.41	557.97	569.52	576.74	584.45	588.30	592.15	596.00	599.85	607.55	615.26	626.81	637.88	653.29	672.55	695.17	722.13	752.46	787.12	821.31	859.82	897.85	939.74	982.10	1027.84	1073.57	1123.16	1173.23	1226.66	1253.14	1306.58	1352.80	1383.13	1421.16	1444.26
Kaiser Permanente	Full	HMO C	393.56	427.28	440.17	453.06	466.94	466.56	480.94	495.81	495.81	495.81	495.81	497.79	507.71	519.61	538.95	554.81	562.74	574.64	586.54	593.98	601.91	605.88	609.85	613.81	617.78	625.71	633.64	645.54	656.95	672.81	692.65	715.95	743.71	774.95	810.65	845.85	885.52	924.69	967.82	1011.45	1058.55	1105.66	1156.72	1208.29	1263.32	1290.59	1345.63	1393.23	1424.46	1463.63	1487.43
Kaiser Permanente	Full	HMO D	371.62	403.39	415.53	427.68	440.76	439.57	453.11	467.13	467.13	467.13	467.13	469.00	478.34	489.55	507.77	522.72	530.19	541.40	552.61	559.62	567.09	570.83	574.57	578.30	582.04	589.52	596.99	608.20	618.94	633.89	652.58	674.53	700.69	730.12	763.75	796.92	834.29	871.19	911.83	952.94	997.32	1041.70	1089.81	1138.39	1190.24	1215.93	1267.79	1312.63	1342.06	1378.96	1401.39
Kaiser Permanente	Full	HMO E	332.46	360.74	371.56	382.37	394.02	391.39	403.45	415.93	415.93	415.93	415.93	417.60	425.91	435.90	452.12	465.43	472.08	482.06	492.05	498.29	504.94	508.27	511.60	514.92	518.25	524.91	531.56	541.54	551.11	564.42	581.06	600.60	623.90	650.10	680.05	709.58	742.85	775.71	811.90	848.50	888.01	927.53	970.37	1013.62	1059.79	1082.67	1128.84	1168.77	1194.97	1227.83	1247.79
Kaiser Permanente	Full	HMO F	379.38	411.83	424.24	436.65	450.01	449.10	462.95	477.26	477.26	477.26	477.26	479.17	488.72	500.17	518.79	534.06	541.69	553.15	564.60	571.76	579.40	583.22	587.03	590.85	594.67	602.31	609.94	621.40	632.37	647.65	666.74	689.17	715.89	745.96	780.33	814.21	852.39	890.10	931.62	973.62	1018.96	1064.30	1113.46	1163.09	1216.07	1242.32	1295.29	1341.11	1371.18	1408.88	1431.78
Sharp Health Plan	Performance	HMO A	366.15	398.70	411.14	423.59	436.99	450.39	464.27	478.63	478.63	478.63	478.63	480.54	490.12	501.60	520.27	535.59	543.25	554.73	566.22	573.40	581.06	584.89	588.71	592.54	596.37	604.03	611.69	623.18	634.18	649.50	668.65	691.14	717.95	748.10	782.56	816.54	854.83	892.64	934.29	976.41	1021.88	1067.34	1116.64	1166.42	1219.55	1245.87	1299.00	1344.95	1375.10	1412.92	1435.89
Sharp Health Plan	Premier	HMO B	345.92	376.67	388.42	400.18	412.84	425.50	438.61	452.18	452.18	452.18	452.18	453.99	463.03	473.88	491.52	505.99	513.22	524.08	534.93	541.71	548.95	552.56	556.18	559.80	563.42	570.65	577.89	588.74	599.14	613.61	631.70	652.95	678.27	706.76	739.31	771.42	807.59	843.32	882.66	922.45	965.40	1008.36	1054.94	1101.96	1152.15	1177.02	1227.22	1270.63	1299.11	1334.84	1356.54
Sharp Health Plan	Performance	HMO D	377.08	410.59	423.41	436.23	450.03	463.83	478.12	492.91	492.91	492.91	492.91	494.88	504.74	516.57	535.79	551.57	559.45	571.28	583.11	590.51	598.39	602.34	606.28	610.22	614.17	622.05	629.94	641.77	653.11	668.88	688.60	711.76	739.37	770.42	805.91	840.90	880.34	919.28	962.16	1005.54	1052.36	1099.19	1149.96	1201.22	1255.93	1283.04	1337.76	1385.08	1416.13	1455.07	1478.73
Sutter Health Plan	Sutter Health Plan	HMO A	449.12	489.04	504.31	519.57	536.01	552.45	569.47	587.10	587.10	587.10	587.10	589.43	601.18	615.27	638.16	656.95	666.34	680.43	694.52	703.33	712.72	717.42	722.12	726.81	731.51	740.90	750.30	764.39	777.89	796.68	820.16	847.75	880.63	917.62	959.89	1001.57	1048.54	1094.92	1145.99	1197.66	1253.43	1309.20	1369.67	1430.73	1495.89	1528.18	1593.35	1649.71	1686.70	1733.08	1761.25
Sutter Health Plan	Sutter Health Plan	HMO B	481.73	524.55	540.92	557.29	574.93	592.56	610.82	629.72	629.72	629.72	629.72	632.23	644.82	659.94	684.50	704.65	714.72	729.83	744.95	754.39	764.47	769.51	774.54	779.58	784.62	794.69	804.77	819.88	834.37	854.52	879.71	909.30	944.57	984.24	1029.58	1074.29	1124.66	1174.41	1229.19	1284.61	1344.43	1404.25	1469.11	1534.60	1604.50	1639.14	1709.03	1769.49	1809.16	1858.90	1889.12
Sutter Health Plan	Sutter Health Plan	HMO C	409.29	445.67	459.58	473.49	488.47	503.45	518.96	535.03	535.03	535.03	535.03	537.16	547.86	560.70	581.56	598.68	607.24	620.08	632.92	640.95	649.51	653.79	658.07	662.35	666.63	675.19	683.75	696.59	708.90	726.02	747.42	772.56	802.52	836.23	874.75	912.74	955.54	997.80	1044.35	1091.43	1142.26	1193.08	1248.19	1303.83	1363.22	1392.64	1452.03	1503.39	1537.10	1579.37	1605.04
UnitedHealthcare	SignatureValue	HMO A	393.00	427.93	441.29	454.64	469.03	483.41	498.31	513.72	513.72	513.72	513.72	515.77	526.05	538.38	558.41	574.85	583.07	595.40	607.73	615.44	623.66	627.77	631.88	635.99	640.10	648.31	656.53	668.86	680.68	697.12	717.67	741.81	770.58	802.94	839.93	876.41	917.50	958.09	1002.78	1047.99	1096.79	1145.60	1198.51	1251.94	1308.96	1337.21	1394.24	1443.55	1475.92	1516.50	1541.16
UnitedHealthcare	Alliance	HMO B	345.04	375.71	387.43	399.16	411.79	424.42	437.50	451.03	451.03	451.03	451.03	452.83	461.85	472.68	490.27	504.70	511.92	522.74	533.57	540.33	547.55	551.16	554.77	558.38	561.98	569.20	576.42	587.24	597.61	612.05	630.09	651.29	676.55	704.96	737.43	769.46	805.54	841.17	880.41	920.10	962.95	1005.80	1052.25	1099.16	1149.22	1174.03	1224.10	1267.39	1295.81	1331.44	1353.09
UnitedHealthcare	SignatureValue	HMO C	420.74	458.14	472.44	486.74	502.14	517.54	533.49	549.99	549.99	549.99	549.99	552.19	563.19	576.39	597.84	615.44	624.24	637.44	650.64	658.89	667.69	672.09	676.49	680.89	685.29	694.09	702.89	716.09	728.74	746.34	768.34	794.19	824.99	859.63	899.23	938.28	982.28	1025.73	1073.58	1121.98	1174.23	1226.48	1283.13	1340.33	1401.37	1431.62	1492.67	1545.47	1580.12	1623.57	1649.97
UnitedHealthcare	Alliance	HMO D	369.40	402.23	414.79	427.34	440.86	454.38	468.38	482.87	482.87	482.87	482.87	484.80	494.46	506.05	524.88	540.33	548.06	559.65	571.24	578.48	586.20	590.07	593.93	597.79	601.66	609.38	617.11	628.70	639.80	655.25	674.57	697.26	724.31	754.73	789.49	823.78	862.41	900.55	942.56	985.05	1030.93	1076.80	1126.54	1176.75	1230.35	1256.91	1310.51	1356.86	1387.29	1425.43	1448.61
UnitedHealthcare	Harmony	HMO E	370.11	403.01	415.59	428.17	441.72	455.27	469.30	483.81	483.81	483.81	483.81	485.75	495.42	507.03	525.90	541.38	549.12	560.74	572.35	579.60	587.35	591.22	595.09	598.96	602.83	610.57	618.31	629.92	641.05	656.53	675.88	698.62	725.72	756.20	791.03	825.38	864.08	902.31	944.40	986.97	1032.93	1078.90	1128.73	1179.04	1232.75	1259.36	1313.06	1359.51	1389.99	1428.21	1451.43
UnitedHealthcare	SignatureValue	HMO F	435.19	473.88	488.67	503.46	519.39	535.32	551.81	568.88	568.88	568.88	568.88	571.16	582.53	596.19	618.37	636.58	645.68	659.33	672.99	681.52	690.62	695.17	699.72	704.27	708.82	717.93	727.03	740.68	753.77	771.97	794.73	821.46	853.32	889.16	930.12	970.51	1016.02	1060.96	1110.45	1160.52	1214.56	1268.60	1327.20	1386.36	1449.51	1480.79	1543.94	1598.55	1634.39	1679.33	1706.64
UnitedHealthcare	Alliance	HMO G	382.08	416.04	429.03	442.01	456.00	469.98	484.47	499.45	499.45	499.45	499.45	501.45	511.44	523.42	542.90	558.88	566.88	578.86	590.85	598.34	606.33	610.33	614.32	618.32	622.31	630.31	638.30	650.28	661.77	677.75	697.73	721.21	749.18	780.64	816.60	852.06	892.02	931.47	974.93	1018.88	1066.33	1113.77	1165.22	1217.16	1272.60	1300.07	1355.51	1403.45	1434.92	1474.38	1498.35
UnitedHealthcare	SignatureValue	HMO H	407.83	444.08	457.94	471.80	486.73	501.66	517.12	533.11	533.11	533.11	533.11	535.24	545.90	558.70	579.49	596.55	605.08	617.87	630.67	638.67	647.20	651.46	655.73	659.99	664.26	672.78	681.31	694.11	706.37	723.43	744.75	769.81	799.67	833.25	871.63	909.49	952.13	994.25	1040.63	1087.54	1138.19	1188.84	1243.75	1299.19	1358.36	1387.69	1446.86	1498.04	1531.63	1573.74	1599.33
UnitedHealthcare	Alliance	HMO J	358.06	389.89	402.05	414.22	427.33	440.44	454.01	468.05	468.05	468.05	468.05	469.92	479.28	490.52	508.77	523.75	531.24	542.47	553.70	560.72	568.21	571.96	575.70	579.45	583.19	590.68	598.17	609.40	620.17	635.14	653.87	675.86	702.08	731.56	765.26	798.49	835.94	872.91	913.63	954.82	999.29	1043.75	1091.96	1140.64	1192.59	1218.33	1270.29	1315.22	1344.71	1381.68	1404.15
UnitedHealthcare	Harmony	HMO L	345.71	376.44	388.19	399.94	412.59	425.25	438.35	451.91	451.91	451.91	451.91	453.72	462.76	473.60	491.23	505.69	512.92	523.76	534.61	541.39	548.62	552.23	555.85	559.46	563.08	570.31	577.54	588.39	598.78	613.24	631.32	652.56	677.87	706.34	738.87	770.96	807.11	842.81	882.13	921.90	964.83	1007.76	1054.31	1101.30	1151.47	1176.32	1226.48	1269.87	1298.34	1334.04	1355.73
UnitedHealthcare	Harmony	HMO M	382.83	416.86	429.87	442.88	456.89	470.90	485.42	500.43	500.43	500.43	500.43	502.43	512.44	524.45	543.97	559.98	567.99	580.00	592.01	599.52	607.52	611.53	615.53	619.53	623.54	631.54	639.55	651.56	663.07	679.08	699.10	722.62	750.65	782.17	818.20	853.73	893.77	933.30	976.84	1020.88	1068.42	1115.96	1167.50	1219.55	1275.10	1302.62	1358.17	1406.21	1437.74	1477.27	1501.29
UnitedHealthcare	Harmony	HMO N	358.76	390.65	402.85	415.04	428.17	441.30	454.90	468.97	468.97	468.97	468.97	470.85	480.23	491.48	509.77	524.78	532.28	543.54	554.79	561.83	569.33	573.08	576.83	580.58	584.34	591.84	599.34	610.60	621.39	636.39	655.15	677.19	703.46	733.00	766.77	800.06	837.58	874.63	915.43	956.70	1001.25	1045.80	1094.11	1142.88	1194.94	1220.73	1272.78	1317.81	1347.35	1384.40	1406.91
Western Health	Full	HMO A	406.47	442.60	456.41	470.23	485.10	499.98	515.39	531.33	531.33	531.33	531.33	533.45	544.08	556.83	577.55	594.56	603.06	615.81	628.56	636.53	645.03	649.28	653.53	657.78	662.04	670.54	679.04	691.79	704.01	721.01	742.27	767.24	796.99	830.47	868.72	906.45	948.95	990.93	1037.15	1083.91	1134.39	1184.86	1239.59	1294.85	1353.83	1383.05	1442.03	1493.03	1526.51	1568.48	1593.99
Western Health	Full	HMO B	426.53	464.44	478.93	493.43	509.04	524.65	540.82	557.55	557.55	557.55	557.55	559.78	570.93	584.31	606.06	623.90	632.82	646.20	659.58	667.94	676.86	681.33	685.79	690.25	694.71	703.63	712.55	725.93	738.75	756.59	778.90	805.10	836.32	871.45	911.59	951.18	995.78	1039.83	1088.34	1137.40	1190.37	1243.34	1300.76	1358.75	1420.64	1451.30	1513.19	1566.71	1601.84	1645.89	1672.65
Western Health	Full	HMO C	397.43	432.76	446.27	459.77	474.32	488.87	503.93	519.52	519.52	519.52	519.52	521.60	531.99	544.46	564.72	581.34	589.65	602.12	614.59	622.38	630.70	634.85	639.01	643.16	647.32	655.63	663.94	676.41	688.36	704.99	725.77	750.18	779.28	812.01	849.41	886.30	927.86	968.90	1014.10	1059.82	1109.17	1158.53	1212.04	1266.07	1323.73	1352.31	1409.97	1459.85	1492.58	1533.62	1558.56
Western Health	Full	HMO D	382.67	416.69	429.69	442.70	456.70	470.71	485.22	500.22	500.22	500.22	500.22	502.22	512.23	524.23	543.74	559.75	567.75	579.76	591.76	599.27	607.27	611.27	615.27	619.28	623.28	631.28	639.28	651.29	662.79	678.80	698.81	722.32	750.33	781.85	817.86	853.38	893.40	932.91	976.43	1020.45	1067.97	1115.50	1167.02	1219.04	1274.57	1302.08	1357.60	1405.62	1437.14	1476.66	1500.66

Platinum		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																																																			
Anthem Blue Cross	Select HMO	HMO A	409.60	446.01	459.93	473.86	488.85	503.84	519.37	535.43	535.43	535.43	535.43	537.57	548.28	561.13	582.01	599.15	607.71	620.56	633.41	641.45	650.01	654.30	658.58	662.86	667.15	675.71	684.28	697.13	709.44	726.58	748.00	773.16	803.15	836.88	875.43	913.44	956.28	998.58	1045.16	1092.28	1143.14	1194.01	1249.16	1304.84	1364.28	1393.72	1453.16	1504.56	1538.29	1580.59	1606.29
Anthem Blue Cross	Vivity	HMO B	443.59	483.02	498.09	513.17	529.40	545.64	562.45	579.85	579.85	579.85	579.85	582.17	593.77	607.68	630.30	648.85	658.13	672.05	685.96	694.66	703.94	708.58	713.22	717.85	722.49	731.77	741.05	754.96	768.30	786.86	810.05	837.30	869.78	906.31	948.05	989.22	1035.61	1081.42	1131.87	1182.89	1237.98	1293.07	1352.79	1413.09	1477.46	1509.35	1573.71	1629.38	1665.91	1711.72	1739.55
Anthem Blue Cross	Vivity	HMO C	434.31	472.92	487.68	502.44	518.34	534.23	550.70	567.73	567.73	567.73	567.73	570.00	581.36	594.98	617.12	635.29	644.37	658.00	671.62	680.14	689.22	693.77	698.31	702.85	707.39	716.48	725.56	739.18	752.24	770.41	793.12	819.80	851.60	887.36	928.24	968.55	1013.97	1058.82	1108.21	1158.17	1212.10	1266.04	1324.51	1383.56	1446.58	1477.80	1540.82	1595.32	1631.09	1675.94	1703.19
Anthem Blue Cross	CaliforniaCare HMO	HMO D	444.22	483.71	498.80	513.90	530.16	546.42	563.26	580.68	580.68	580.68	580.68	583.00	594.62	608.55	631.20	649.78	659.07	673.01	686.94	695.65	704.95	709.59	714.24	718.88	723.53	732.82	742.11	756.05	769.40	787.98	811.21	838.50	871.02	907.60	949.41	990.64	1037.09	1082.97	1133.49	1184.59	1239.75	1294.92	1354.73	1415.12	1479.57	1511.51	1575.97	1631.71	1668.29	1714.17	1742.04
Anthem Blue Cross	Prudent Buyer - Small Group	PPO B	576.18	627.39	646.97	666.56	687.64	708.73	730.57	753.17	753.17	753.17	753.17	756.18	771.25	789.32	818.70	842.80	854.85	872.92	891.00	902.30	914.35	920.37	926.40	932.42	938.45	950.50	962.55	980.63	997.95	1022.05	1052.18	1087.58	1129.76	1177.20	1231.43	1284.91	1345.16	1404.66	1470.19	1536.47	1608.02	1679.57	1757.15	1835.48	1919.08	1960.50	2044.10	2116.41	2163.86	2223.36	2259.51
Kaiser Permanente	Full	HMO A	423.53	459.91	473.82	487.73	502.70	503.41	518.93	534.98	534.98	534.98	534.98	537.12	547.82	560.66	581.52	598.64	607.20	620.04	632.88	640.90	649.46	653.74	658.02	662.30	666.58	675.14	683.70	696.54	708.85	725.96	747.36	772.51	802.47	836.17	874.69	912.67	955.47	997.73	1044.28	1091.35	1142.18	1193.00	1248.10	1303.74	1363.12	1392.55	1451.93	1503.29	1536.99	1579.25	1604.94
Kaiser Permanente	Full	HMO B	412.48	447.88	461.41	474.94	489.52	489.82	504.92	520.54	520.54	520.54	520.54	522.62	533.03	545.52	565.82	582.48	590.81	603.30	615.79	623.60	631.93	636.10	640.26	644.42	648.59	656.92	665.25	677.74	689.71	706.37	727.19	751.65	780.80	813.60	851.08	888.04	929.68	970.80	1016.09	1061.89	1111.35	1160.80	1214.41	1268.55	1326.33	1354.96	1412.74	1462.71	1495.50	1536.62	1561.62
Kaiser Permanente	Full	HMO C	396.22	430.18	443.16	456.14	470.12	469.83	484.31	499.29	499.29	499.29	499.29	501.28	511.27	523.25	542.72	558.70	566.69	578.67	590.66	598.15	606.13	610.13	614.12	618.12	622.11	630.10	638.09	650.07	661.56	677.53	697.50	720.97	748.93	780.39	816.33	851.78	891.73	931.17	974.61	1018.55	1065.98	1113.41	1164.84	1216.76	1272.18	1299.64	1355.06	1403.00	1434.45	1473.89	1497.87
Sharp Health Plan	Premier	HMO A	387.44	421.88	435.05	448.22	462.40	476.58	491.27	506.46	506.46	506.46	506.46	508.49	518.62	530.77	550.52	566.73	574.83	586.99	599.14	606.74	614.84	618.89	622.95	627.00	631.05	639.15	647.26	659.41	671.06	687.27	707.52	731.33	759.69	791.60	828.06	864.02	904.54	944.55	988.61	1033.18	1081.29	1129.41	1181.57	1234.24	1290.46	1318.32	1374.53	1423.15	1455.06	1495.07	1519.38
Sharp Health Plan	Performance	HMO B	415.31	452.23	466.34	480.46	495.66	510.86	526.60	542.89	542.89	542.89	542.89	545.06	555.92	568.95	590.12	607.49	616.18	629.21	642.24	650.38	659.07	663.41	667.75	672.10	676.44	685.13	693.81	706.84	719.33	736.70	758.42	783.93	814.34	848.54	887.63	926.17	969.60	1012.49	1059.72	1107.50	1159.07	1210.64	1266.56	1323.02	1383.28	1413.14	1473.40	1525.52	1559.72	1602.61	1628.67
Sharp Health Plan	Premier	HMO C	388.91	423.48	436.70	449.92	464.15	478.39	493.13	508.38	508.38	508.38	508.38	510.41	520.58	532.78	552.61	568.88	577.01	589.21	601.41	609.04	617.17	621.24	625.31	629.37	633.44	641.58	649.71	661.91	673.60	689.87	710.21	734.10	762.57	794.60	831.20	867.30	907.97	948.13	992.36	1037.10	1085.39	1133.69	1186.05	1238.92	1295.35	1323.31	1379.74	1428.55	1460.58	1500.74	1525.14
Sutter Health Plan	Sutter Health Plan	HMO A	523.22	569.73	587.51	605.30	624.45	643.60	663.43	683.96	683.96	683.96	683.96	686.69	700.37	716.78	743.45	765.34	776.28	792.70	809.11	819.37	830.32	835.79	841.26	846.73	852.20	863.15	874.09	890.50	906.24	928.12	955.48	987.63	1025.93	1069.02	1118.26	1166.82	1221.54	1275.57	1335.07	1395.26	1460.24	1525.21	1595.66	1666.79	1742.71	1780.32	1856.24	1921.90	1964.99	2019.02	2051.84
UnitedHealthcare	SignatureValue	HMO A	436.67	475.48	490.33	505.17	521.15	537.13	553.69	570.81	570.81	570.81	570.81	573.09	584.51	598.21	620.47	638.74	647.87	661.57	675.27	683.83	692.96	697.53	702.10	706.66	711.23	720.36	729.50	743.19	756.32	774.59	797.42	824.25	856.22	892.18	933.27	973.80	1019.47	1064.56	1114.22	1164.45	1218.68	1272.91	1331.70	1391.06	1454.42	1485.82	1549.18	1603.98	1639.94	1685.03	1712.43
UnitedHealthcare	SignatureValue	HMO B	472.95	514.99	531.07	547.14	564.45	581.76	599.69	618.24	618.24	618.24	618.24	620.71	633.08	647.92	672.03	691.81	701.70	716.54	731.38	740.65	750.54	755.49	760.44	765.38	770.33	780.22	790.11	804.95	819.17	838.95	863.68	892.74	927.36	966.31	1010.82	1054.72	1104.18	1153.02	1206.80	1261.21	1319.94	1378.68	1442.35	1506.65	1575.28	1609.28	1677.90	1737.25	1776.20	1825.04	1854.72
UnitedHealthcare	Alliance	HMO C	383.38	417.46	430.49	443.52	457.55	471.58	486.12	501.15	501.15	501.15	501.15	503.15	513.18	525.21	544.75	560.79	568.81	580.83	592.86	600.38	608.40	612.41	616.41	620.42	624.43	632.45	640.47	652.50	664.02	680.06	700.11	723.66	751.73	783.30	819.38	854.96	895.05	934.64	978.24	1022.35	1069.96	1117.56	1169.18	1221.30	1276.93	1304.49	1360.12	1408.23	1439.80	1479.39	1503.45
UnitedHealthcare	SignatureValue	HMO D	453.88	494.23	509.65	525.08	541.69	558.30	575.51	593.31	593.31	593.31	593.31	595.68	607.55	621.79	644.93	663.91	673.41	687.65	701.89	710.79	720.28	725.02	729.77	734.52	739.26	748.76	758.25	772.49	786.14	805.12	828.85	856.74	889.97	927.34	970.06	1012.19	1059.65	1106.52	1158.14	1210.35	1266.72	1323.08	1384.19	1445.90	1511.75	1544.39	1610.24	1667.20	1704.58	1751.45	1779.93
UnitedHealthcare	SignatureValue	HMO E	465.44	506.81	522.63	538.45	555.49	572.52	590.17	608.42	608.42	608.42	608.42	610.85	623.02	637.62	661.35	680.82	690.56	705.16	719.76	728.89	738.62	743.49	748.36	753.22	758.09	767.83	777.56	792.16	806.16	825.63	849.96	878.56	912.63	950.96	994.77	1037.96	1086.64	1134.70	1187.64	1241.18	1298.98	1356.78	1419.44	1482.72	1550.25	1583.72	1651.25	1709.66	1747.99	1796.06	1825.26
UnitedHealthcare	Alliance	HMO F	398.49	433.91	447.45	461.00	475.58	490.17	505.27	520.90	520.90	520.90	520.90	522.98	533.40	545.90	566.22	582.89	591.22	603.72	616.22	624.04	632.37	636.54	640.71	644.87	649.04	657.38	665.71	678.21	690.19	706.86	727.70	752.18	781.35	814.17	851.67	888.66	930.33	971.48	1016.80	1062.64	1112.12	1161.61	1215.26	1269.43	1327.25	1355.90	1413.72	1463.73	1496.55	1537.70	1562.70
UnitedHealthcare	Alliance	HMO G	408.64	444.96	458.85	472.74	487.70	502.65	518.14	534.17	534.17	534.17	534.17	536.31	546.99	559.81	580.64	597.74	606.28	619.10	631.92	639.94	648.48	652.76	657.03	661.30	665.58	674.12	682.67	695.49	707.78	724.87	746.24	771.34	801.26	834.91	873.37	911.29	954.03	996.23	1042.70	1089.71	1140.45	1191.20	1246.22	1301.77	1361.07	1390.44	1449.74	1501.02	1534.67	1576.87	1602.51
UnitedHealthcare	Harmony	HMO H	384.13	418.27	431.33	444.39	458.44	472.50	487.07	502.13	502.13	502.13	502.13	504.14	514.18	526.23	545.82	561.88	569.92	581.97	594.02	601.55	609.59	613.60	617.62	621.64	625.65	633.69	641.72	653.77	665.32	681.39	701.48	725.08	753.20	784.83	820.98	856.63	896.80	936.47	980.16	1024.35	1072.05	1119.75	1171.47	1223.69	1279.43	1307.04	1362.78	1410.99	1442.62	1482.29	1506.39
UnitedHealthcare	Harmony	HMO I	409.44	445.83	459.75	473.66	488.65	503.63	519.15	535.21	535.21	535.21	535.21	537.35	548.06	560.90	581.77	598.90	607.46	620.31	633.15	641.18	649.74	654.03	658.31	662.59	666.87	675.44	684.00	696.84	709.15	726.28	747.69	772.84	802.82	836.53	875.07	913.07	955.89	998.17	1044.73	1091.83	1142.67	1193.52	1248.64	1304.31	1363.72	1393.15	1452.56	1503.94	1537.66	1579.94	1605.63
UnitedHealthcare	Harmony	HMO M	416.05	453.03	467.17	481.31	496.54	511.76	527.53	543.85	543.85	543.85	543.85	546.03	556.90	569.95	591.16	608.57	617.27	630.32	643.37	651.53	660.23	664.58	668.94	673.29	677.64	686.34	695.04	708.09	720.60	738.00	759.76	785.32	815.78	850.04	889.19	927.81	971.32	1014.28	1061.60	1109.45	1161.12	1212.79	1268.80	1325.36	1385.73	1415.64	1476.01	1528.22	1562.48	1605.45	1631.55
UnitedHealthcare	Alliance	HMO N	415.23	452.14	466.26	480.37	495.57	510.77	526.51	542.79	542.79	542.79	542.79	544.96	555.82	568.84	590.01	607.38	616.07	629.09	642.12	650.26	658.95	663.29	667.63	671.97	676.32	685.00	693.69	706.71	719.20	736.57	758.28	783.79	814.19	848.38	887.46	926.00	969.42	1012.30	1059.53	1107.29	1158.86	1210.42	1266.33	1322.78	1383.03	1412.88	1473.13	1525.24	1559.44	1602.32	1628.37
UnitedHealthcare	Harmony	HMO O	399.27	434.76	448.33	461.90	476.51	491.13	506.26	521.92	521.92	521.92	521.92	524.01	534.45	546.97	567.33	584.03	592.38	604.91	617.43	625.26	633.61	637.79	641.96	646.14	650.31	658.66	667.01	679.54	691.54	708.25	729.12	753.65	782.88	815.76	853.34	890.40	932.15	973.38	1018.79	1064.72	1114.30	1163.88	1217.64	1271.92	1329.85	1358.56	1416.49	1466.60	1499.48	1540.71	1565.76
Western Health	Full	HMO B	464.61	505.91	521.70	537.49	554.49	571.50	589.11	607.33	607.33	607.33	607.33	609.76	621.91	636.48	660.17	679.60	689.32	703.90	718.47	727.58	737.30	742.16	747.02	751.88	756.73	766.45	776.17	790.75	804.71	824.15	848.44	876.99	911.00	949.26	992.99	1036.11	1084.69	1132.67	1185.51	1238.96	1296.65	1354.35	1416.90	1480.07	1547.48	1580.88	1648.30	1706.60	1744.86	1792.84	1821.99
Western Health	Full	HMO C	459.94	500.82	516.45	532.08	548.92	565.75	583.19	601.22	601.22	601.22	601.22	603.63	615.65	630.08	653.53	672.77	682.39	696.82	711.25	720.27	729.89	734.70	739.51	744.32	749.13	758.75	768.36	782.79	796.62	815.86	839.91	868.17	901.84	939.71	983.00	1025.69	1073.79	1121.28	1173.59	1226.50	1283.61	1340.73	1402.66	1465.18	1531.92	1564.99	1631.72	1689.44	1727.32	1774.81	1803.66
Western Health	Full	HMO D	434.40	473.01	487.78	502.54	518.44	534.34	550.81	567.84	567.84	567.84	567.84	570.11	581.47	595.10	617.24	635.42	644.50	658.13	671.76	680.28	689.36	693.90	698.45	702.99	707.53	716.62	725.70	739.33	752.39	770.56	793.28	819.96	851.76	887.54	928.42	968.74	1014.17	1059.03	1108.43	1158.40	1212.34	1266.29	1324.78	1383.83	1446.86	1478.09	1541.12	1595.64	1631.41	1676.27	1703.52

Health Care Service Plan rates will vary by county

THE INFORMATION PROVIDED HEREIN, INCLUDING THE RATING INFORMATION IS PROVIDED ON TO YOU ON AN “AS IS” “AS AVAILABLE” BASIS WITHOUT WARRANTY OF ANY KIND, EXPRESS OR IMPLIED. WE FURTHER DISCLAIM ALL LIABILITY RELATED TO THE INFORMATION, INCLUDING THOSE CAUSED BY RATING DISCREPANCIES. FINAL RATES AND RATING AREAS ARE BASED UPON ACTUAL ENROLLMENT AND UNDERWRITING AND MUST BE APPROVED BY THE APPLICABLE INSURANCE CARRIER.

USE EMPLOYER ZIP CODE FOR RATING | AREA 18 | 02/01/27 - 03/01/27

Bronze		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																																																	
Anthem Blue Cross	Prudent Buyer - Small Group	PPO A	379.16	412.87	425.75	438.64	452.52	466.40	480.77	495.64	495.64	495.64	495.64	497.62	507.54	519.43	538.76	554.62	562.55	574.45	586.34	593.78	601.71	605.67	609.64	613.60	617.57	625.50	633.43	645.32	656.72	672.58	692.41	715.70	743.46	774.69	810.37	845.56	885.21	924.37	967.49	1011.11	1058.19	1105.28	1156.33	1207.87	1262.89	1290.15	1345.17	1392.75	1423.97	1463.13	1486.92
Anthem Blue Cross	Select PPO	PPO B	361.24	393.35	405.63	417.91	431.13	444.35	458.04	472.21	472.21	472.21	472.21	474.10	483.54	494.88	513.29	528.40	535.96	547.29	558.62	565.71	573.26	577.04	580.82	584.60	588.37	595.93	603.48	614.82	625.68	640.79	659.68	681.87	708.32	738.06	772.06	805.59	843.37	880.67	921.75	963.31	1008.17	1053.03	1101.67	1150.78	1203.19	1229.16	1281.58	1326.91	1356.66	1393.96	1416.63
Anthem Blue Cross	Prudent Buyer - Small Group	PPO C	378.69	412.35	425.22	438.09	451.95	465.81	480.17	495.02	495.02	495.02	495.02	497.00	506.90	518.78	538.09	553.93	561.85	573.73	585.61	593.03	600.95	604.91	608.87	612.83	616.79	624.72	632.64	644.52	655.90	671.74	691.54	714.81	742.53	773.72	809.36	844.50	884.11	923.21	966.28	1009.84	1056.87	1103.89	1154.88	1206.36	1261.31	1288.54	1343.48	1391.01	1422.19	1461.30	1485.06
Anthem Blue Cross	Select PPO	PPO D	360.76	392.83	405.09	417.35	430.55	443.76	457.43	471.58	471.58	471.58	471.58	473.47	482.90	494.22	512.61	527.70	535.24	546.56	557.88	564.95	572.50	576.27	580.04	583.82	587.59	595.13	602.68	614.00	624.84	639.93	658.80	680.96	707.37	737.08	771.03	804.52	842.24	879.50	920.52	962.02	1006.82	1051.62	1100.20	1149.24	1201.59	1227.52	1279.87	1325.14	1354.85	1392.10	1414.74
Kaiser Permanente	Full	HMO A	294.33	319.23	328.75	338.26	348.51	344.50	355.11	366.09	366.09	366.09	366.09	367.56	374.88	383.67	397.94	409.66	415.52	424.30	433.09	438.58	444.44	447.37	450.30	453.23	456.15	462.01	467.87	476.66	485.08	496.79	511.43	528.64	549.14	572.21	598.56	624.56	653.84	682.77	714.62	746.83	781.61	816.39	854.10	892.17	932.81	952.94	993.58	1028.73	1051.79	1080.71	1098.27
Kaiser Permanente	Full	HMO C	286.21	310.38	319.62	328.86	338.82	334.50	344.81	355.47	355.47	355.47	355.47	356.90	364.01	372.54	386.40	397.78	403.46	411.99	420.53	425.86	431.55	434.39	437.23	440.08	442.92	448.61	454.30	462.83	471.00	482.38	496.60	513.30	533.21	555.61	581.20	606.44	634.88	662.96	693.89	725.17	758.94	792.71	829.32	866.29	905.75	925.30	964.76	998.88	1021.28	1049.36	1066.41
Sharp Health Plan	Premier	HMO A	272.80	297.05	306.32	315.59	325.58	335.56	345.90	356.60	356.60	356.60	356.60	358.03	365.16	373.72	387.62	399.04	404.74	413.30	421.86	427.21	432.91	435.77	438.62	441.47	444.32	450.03	455.73	464.29	472.50	483.91	498.17	514.93	534.90	557.37	583.04	608.36	636.89	665.06	696.08	727.46	761.34	795.22	831.95	869.03	908.62	928.23	967.81	1002.05	1024.51	1052.68	1069.80
Sharp Health Plan	Performance	HMO B	291.24	317.12	327.02	336.92	347.58	358.24	369.28	380.70	380.70	380.70	380.70	382.22	389.84	398.97	413.82	426.00	432.09	441.23	450.37	456.08	462.17	465.22	468.26	471.31	474.35	480.44	486.53	495.67	504.43	516.61	531.84	549.73	571.05	595.03	622.44	649.47	679.93	710.01	743.13	776.63	812.79	848.96	888.17	927.77	970.02	990.96	1033.22	1069.77	1093.75	1123.83	1142.10
Sutter Health Plan	Sutter Health Plan	HMO A	335.37	365.18	376.58	387.97	400.25	412.52	425.24	438.40	438.40	438.40	438.40	440.14	448.91	459.43	476.53	490.56	497.57	508.09	518.61	525.19	532.20	535.71	539.22	542.73	546.23	553.25	560.26	570.78	580.87	594.89	612.43	633.03	657.58	685.20	716.77	747.89	782.96	817.59	855.73	894.31	935.96	977.61	1022.76	1068.35	1117.01	1141.13	1189.79	1231.87	1259.49	1294.12	1315.16
Sutter Health Plan	Sutter Health Plan	HMO B	335.53	365.36	376.76	388.17	400.45	412.73	425.45	438.62	438.62	438.62	438.62	440.36	449.13	459.66	476.76	490.80	497.82	508.34	518.87	525.45	532.47	535.98	539.48	542.99	546.50	553.52	560.54	571.06	581.15	595.19	612.73	633.35	657.91	685.54	717.12	748.26	783.35	818.00	856.16	894.75	936.42	978.09	1023.27	1068.88	1117.57	1141.69	1190.37	1232.48	1260.11	1294.76	1315.81
Western Health	Full	HMO B	316.71	344.87	355.63	366.39	377.99	389.58	401.59	414.01	414.01	414.01	414.01	415.66	423.94	433.88	450.02	463.27	469.90	479.83	489.77	495.98	502.60	505.91	509.23	512.54	515.85	522.47	529.10	539.03	548.56	561.81	578.37	597.82	621.01	647.09	676.90	706.29	739.41	772.12	808.14	844.57	883.90	923.23	965.87	1008.93	1054.89	1077.66	1123.61	1163.36	1189.44	1222.14	1242.02
Western Health	Full	HMO C	330.55	359.93	371.17	382.40	394.50	406.60	419.13	432.09	432.09	432.09	432.09	433.82	442.46	452.83	469.68	483.51	490.42	500.79	511.16	517.64	524.56	528.01	531.47	534.93	538.38	545.30	552.21	562.58	572.52	586.35	603.63	623.94	648.13	675.36	706.47	737.15	771.71	805.85	843.44	881.46	922.51	963.56	1008.07	1053.00	1100.97	1124.73	1172.69	1214.17	1241.39	1275.53	1296.27

Silver		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																																																	
Anthem Blue Cross	Select HMO	HMO A	308.41	335.82	346.31	356.79	368.08	379.36	391.06	403.15	403.15	403.15	403.15	404.76	412.83	422.50	438.22	451.12	457.58	467.25	476.93	482.97	489.42	492.65	495.87	499.10	502.32	508.78	515.23	524.90	534.17	547.07	563.20	582.15	604.73	630.12	659.15	687.77	720.03	751.87	786.95	822.43	860.73	899.02	940.55	982.48	1027.23	1049.40	1094.15	1132.85	1158.25	1190.10	1209.45
Anthem Blue Cross	CaliforniaCare HMO	HMO B	345.77	376.51	388.26	400.01	412.67	425.32	438.43	451.99	451.99	451.99	451.99	453.80	462.84	473.69	491.31	505.78	513.01	523.86	534.70	541.48	548.72	552.33	555.95	559.56	563.18	570.41	577.64	588.49	598.89	613.35	631.43	652.67	677.99	706.46	739.00	771.09	807.25	842.96	882.28	922.06	965.00	1007.94	1054.49	1101.50	1151.67	1176.53	1226.70	1270.09	1298.57	1334.27	1355.97
Anthem Blue Cross	CaliforniaCare HMO	HMO D	345.34	376.04	387.78	399.52	412.16	424.80	437.89	451.43	451.43	451.43	451.43	453.24	462.26	473.10	490.70	505.15	512.37	523.21	534.04	540.81	548.04	551.65	555.26	558.87	562.48	569.70	576.93	587.76	598.14	612.59	630.65	651.86	677.15	705.59	738.09	770.14	806.25	841.92	881.19	920.92	963.80	1006.69	1053.19	1100.13	1150.24	1175.07	1225.18	1268.52	1296.96	1332.62	1354.29
Anthem Blue Cross	Select PPO	PPO B	389.61	424.25	437.49	450.73	464.99	479.25	494.02	509.30	509.30	509.30	509.30	511.34	521.52	533.75	553.61	569.91	578.06	590.28	602.50	610.14	618.29	622.36	626.44	630.51	634.59	642.74	650.89	663.11	674.82	691.12	711.49	735.43	763.95	796.04	832.71	868.87	909.61	949.84	994.15	1038.97	1087.36	1135.74	1188.20	1241.16	1297.70	1325.71	1382.24	1431.13	1463.22	1503.45	1527.90
Anthem Blue Cross	Prudent Buyer - Small Group	PPO C	408.97	445.32	459.22	473.12	488.09	503.06	518.56	534.60	534.60	534.60	534.60	536.74	547.43	560.26	581.11	598.22	606.77	619.60	632.43	640.45	649.00	653.28	657.56	661.83	666.11	674.67	683.22	696.05	708.35	725.45	746.84	771.96	801.90	835.58	874.07	912.03	954.80	997.03	1043.54	1090.58	1141.37	1192.16	1247.22	1302.82	1362.16	1391.56	1450.90	1502.23	1535.91	1578.14	1603.80
Anthem Blue Cross	Prudent Buyer - Small Group	PPO D	396.53	431.78	445.25	458.73	473.24	487.76	502.79	518.34	518.34	518.34	518.34	520.41	530.78	543.22	563.44	580.02	588.32	600.76	613.20	620.97	629.26	633.41	637.56	641.70	645.85	654.15	662.44	674.88	686.80	703.39	724.12	748.48	777.51	810.17	847.49	884.29	925.76	966.70	1011.80	1057.41	1106.66	1155.90	1209.29	1263.19	1320.73	1349.24	1406.77	1456.54	1489.19	1530.14	1555.02
Anthem Blue Cross	Select PPO	PPO E	377.78	411.36	424.20	437.04	450.87	464.69	479.02	493.83	493.83	493.83	493.83	495.81	505.68	517.53	536.79	552.60	560.50	572.35	584.20	591.61	599.51	603.46	607.41	611.36	615.31	623.21	631.11	642.97	654.32	670.13	689.88	713.09	740.75	771.86	807.41	842.47	881.98	920.99	963.96	1007.41	1054.33	1101.24	1152.11	1203.46	1258.28	1285.44	1340.25	1387.66	1418.77	1457.79	1481.49
Anthem Blue Cross	Prudent Buyer - Small Group	PPO F	410.65	447.15	461.11	475.07	490.10	505.13	520.70	536.80	536.80	536.80	536.80	538.95	549.68	562.57	583.50	600.68	609.27	622.15	635.03	643.09	651.68	655.97	660.26	664.56	668.85	677.44	686.03	698.91	711.26	728.44	749.91	775.14	805.20	839.02	877.67	915.78	958.72	1001.13	1047.83	1095.07	1146.07	1197.06	1252.35	1308.18	1367.77	1397.29	1456.88	1508.41	1542.23	1584.63	1610.40
Kaiser Permanente	Full	HMO A	320.87	348.12	358.54	368.96	380.18	377.13	388.76	400.78	400.78	400.78	400.78	402.38	410.40	420.02	435.65	448.47	454.88	464.50	474.12	480.13	486.55	489.75	492.96	496.16	499.37	505.78	512.20	521.81	531.03	543.86	559.89	578.73	601.17	626.42	655.27	683.73	715.79	747.45	782.32	817.59	855.66	893.74	935.02	976.70	1021.19	1043.23	1087.72	1126.19	1151.44	1183.10	1202.34
Kaiser Permanente	Full	HMO B	325.09	352.72	363.28	373.84	385.22	382.33	394.11	406.30	406.30	406.30	406.30	407.92	416.05	425.80	441.64	454.65	461.15	470.90	480.65	486.74	493.24	496.49	499.74	503.00	506.25	512.75	519.25	529.00	538.34	551.34	567.60	586.69	609.44	635.04	664.29	693.14	725.65	757.74	793.09	828.85	867.44	906.04	947.89	990.14	1035.24	1057.59	1102.69	1141.69	1167.29	1199.39	1218.90
Kaiser Permanente	Full	HMO C	322.78	350.21	360.69	371.18	382.47	379.49	391.19	403.28	403.28	403.28	403.28	404.90	412.96	422.64	438.37	451.28	457.73	467.41	477.09	483.13	489.59	492.81	496.04	499.27	502.49	508.94	515.40	525.08	534.35	547.26	563.39	582.34	604.93	630.33	659.37	688.00	720.27	752.13	787.21	822.70	861.01	899.32	940.86	982.80	1027.57	1049.75	1094.51	1133.23	1158.64	1190.49	1209.84
Kaiser Permanente	Full	HMO D	296.63	321.73	331.32	340.92	351.25	347.32	358.02	369.09	369.09	369.09	369.09	370.57	377.95	386.81	401.21	413.02	418.92	427.78	436.64	442.17	448.08	451.03	453.99	456.94	459.89	465.80	471.70	480.56	489.05	500.86	515.62	532.97	553.64	576.89	603.47	629.67	659.20	688.36	720.47	752.95	788.02	823.08	861.10	899.48	940.45	960.75	1001.72	1037.15	1060.41	1089.57	1107.27
Kaiser Permanente	Full	HMO E	309.24	335.46	345.48	355.51	366.30	362.83	374.01	385.58	385.58	385.58	385.58	387.12	394.83	404.09	419.12	431.46	437.63	446.88	456.14	461.92	468.09	471.18	474.26	477.35	480.43	486.60	492.77	502.02	510.89	523.23	538.65	556.77	578.37	602.66	630.42	657.80	688.64	719.10	752.65	786.58	823.21	859.84	899.55	939.65	982.45	1003.66	1046.46	1083.47	1107.76	1138.23	1156.74
Sharp Health Plan	Premier	HMO A	285.29	310.65	320.35	330.04	340.49	350.93	361.74	372.93	372.93	372.93	372.93	374.42	381.88	390.83	405.37	417.31	423.28	432.23	441.18	446.77	452.74	455.72	458.70	461.69	464.67	470.64	476.60	485.55	494.13	506.07	520.98	538.51	559.40	582.89	609.74	636.22	666.05	695.51	727.96	760.78	796.21	831.63	870.05	908.83	950.23	970.74	1012.13	1047.93	1071.43	1100.89	1118.79
Sharp Health Plan	Performance	HMO B	294.75	320.95	330.96	340.98	351.77	362.56	373.73	385.29	385.29	385.29	385.29	386.83	394.54	403.78	418.81	431.14	437.30	446.55	455.80	461.58	467.74	470.82	473.91	476.99	480.07	486.24	492.40	501.65	510.51	522.84	538.25	556.36	577.94	602.21	629.95	657.30	688.13	718.57	752.09	785.99	822.59	859.20	898.88	938.95	981.72	1002.91	1045.68	1082.66	1106.94	1137.38	1155.87
Sharp Health Plan	Premier	HMO C	268.76	292.65	301.78	310.92	320.76	330.59	340.78	351.32	351.32	351.32	351.32	352.73	359.75	368.18	381.88	393.13	398.75	407.18	415.61	420.88	426.50	429.31	432.12	434.93	437.74	443.37	448.99	457.42	465.50	476.74	490.79	507.31	526.98	549.11	574.41	599.35	627.46	655.21	685.78	716.69	750.07	783.44	819.63	856.17	895.16	914.49	953.48	987.21	1009.34	1037.10	1053.96
Sutter Health Plan	Sutter Health Plan	HMO B	409.97	446.41	460.35	474.28	489.29	504.29	519.83	535.92	535.92	535.92	535.92	538.05	548.77	561.63	582.54	599.68	608.26	621.12	633.98	642.02	650.60	654.88	659.17	663.46	667.75	676.32	684.89	697.76	710.08	727.23	748.67	773.86	803.87	837.63	876.21	914.26	957.14	999.47	1046.10	1093.26	1144.17	1195.08	1250.28	1306.02	1365.50	1394.98	1454.46	1505.91	1539.67	1582.01	1607.72
Sutter Health Plan	Sutter Health Plan	HMO C	355.08	386.64	398.71	410.78	423.78	436.77	450.23	464.17	464.17	464.17	464.17	466.01	475.30	486.44	504.54	519.39	526.82	537.96	549.10	556.06	563.49	567.20	570.91	574.63	578.34	585.77	593.19	604.33	615.01	629.86	648.43	670.24	696.24	725.48	758.90	791.85	828.99	865.65	906.04	946.88	990.98	1035.07	1082.88	1131.15	1182.67	1208.20	1259.72	1304.28	1333.52	1370.19	1392.46
UnitedHealthcare	SignatureValue	HMO A	387.04	421.44	434.59	447.75	461.91	476.08	490.75	505.93	505.93	505.93	505.93	507.95	518.07	530.21	549.95	566.14	574.23	586.37	598.52	606.10	614.20	618.25	622.29	626.34	630.39	638.48	646.58	658.72	670.36	686.55	706.78	730.56	758.90	790.77	827.20	863.12	903.59	943.56	987.58	1032.10	1080.16	1128.22	1180.33	1232.95	1289.11	1316.94	1373.09	1421.66	1453.54	1493.51	1517.79
UnitedHealthcare	Alliance	HMO E	325.91	354.87	365.95	377.03	388.96	400.88	413.24	426.02	426.02	426.02	426.02	427.72	436.24	446.47	463.08	476.72	483.53	493.76	503.98	510.37	517.19	520.60	524.00	527.41	530.82	537.64	544.45	554.68	564.48	578.11	595.15	615.17	639.03	665.87	696.54	726.79	760.87	794.53	831.59	869.08	909.55	950.02	993.90	1038.21	1085.50	1108.93	1156.22	1197.12	1223.96	1257.61	1278.06
UnitedHealthcare	Harmony	HMO F	320.24	348.71	359.59	370.48	382.20	393.92	406.06	418.62	418.62	418.62	418.62	420.29	428.67	438.71	455.04	468.44	475.13	485.18	495.23	501.51	508.20	511.55	514.90	518.25	521.60	528.30	535.00	545.04	554.67	568.07	584.81	604.49	627.93	654.30	684.44	714.17	747.66	780.73	817.15	853.98	893.75	933.52	976.64	1020.18	1066.64	1089.67	1136.13	1176.32	1202.70	1235.77	1255.86
UnitedHealthcare	Harmony	HMO G	288.10	313.71	323.50	333.29	343.84	354.38	365.30	376.60	376.60	376.60	376.60	378.11	385.64	394.68	409.36	421.42	427.44	436.48	445.52	451.17	457.19	460.21	463.22	466.23	469.24	475.27	481.29	490.33	499.00	511.05	526.11	543.81	564.90	588.63	615.74	642.48	672.61	702.36	735.12	768.26	804.04	839.82	878.61	917.77	959.58	980.29	1022.09	1058.25	1081.97	1111.72	1129.80
Western Health	Full	HMO B	362.81	395.06	407.40	419.73	433.01	446.29	460.04	474.27	474.27	474.27	474.27	476.16	485.65	497.03	515.53	530.71	538.29	549.68	561.06	568.17	575.76	579.56	583.35	587.14	590.94	598.53	606.11	617.50	628.40	643.58	662.55	684.84	711.40	741.28	775.43	809.10	847.04	884.51	925.77	967.51	1012.56	1057.62	1106.47	1155.79	1208.43	1234.52	1287.16	1332.69	1362.57	1400.04	1422.80
Western Health	Full	HMO C	342.86	373.34	384.99	396.64	409.19	421.74	434.74	448.18	448.18	448.18	448.18	449.98	458.94	469.70	487.18	501.52	508.69	519.45	530.20	536.93	544.10	547.68	551.27	554.85	558.44	565.61	572.78	583.54	593.84	608.19	626.11	647.18	672.28	700.51	732.78	764.60	800.46	835.86	874.86	914.30	956.87	999.45	1045.62	1092.23	1141.97	1166.63	1216.37	1259.40	1287.64	1323.04	1344.54
Western Health	Full	HMO D	330.78	360.19	371.43	382.67	394.78	406.88	419.42	432.40	432.40	432.40	432.40	434.12	442.77	453.15	470.01	483.85	490.77	501.15	511.52	518.01	524.93	528.39	531.85	535.31	538.76	545.68	552.60	562.98	572.92	586.76	604.06	624.38	648.59	675.83	706.97	737.67	772.26	806.42	844.04	882.09	923.16	964.24	1008.78	1053.75	1101.74	1125.52	1173.52	1215.03	1242.27	1276.43	1297.19

Health Care Service Plan rates will vary by county

THE INFORMATION PROVIDED HEREIN, INCLUDING THE RATING INFORMATION IS PROVIDED ON TO YOU ON AN "AS IS" "AS AVAILABLE" BASIS WITHOUT WARRANTY OF ANY KIND, EXPRESS OR IMPLIED. WE FURTHER DISCLAIM ALL LIABILITY RELATED TO THE INFORMATION, INCLUDING THOSE CAUSED BY RATING DISCREPANCIES. FINAL RATES AND RATING AREAS ARE BASED UPON ACTUAL ENROLLMENT AND UNDERWRITING AND MUST BE APPROVED BY THE APPLICABLE INSURANCE CARRIER.

Continued

Gold		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																																																			
Anthem Blue Cross	Select HMO	HMO A	395.41	430.55	443.99	457.43	471.90	486.37	501.36	516.87	516.87	516.87	516.87	518.94	529.27	541.68	561.84	578.38	586.65	599.05	611.46	619.21	627.48	631.62	635.75	639.89	644.02	652.29	660.56	672.96	684.85	701.39	722.07	746.36	775.31	807.87	845.08	881.78	923.13	963.96	1008.93	1054.41	1103.52	1152.62	1205.86	1259.61	1316.98	1345.41	1402.79	1452.40	1484.97	1525.80	1550.61
Anthem Blue Cross	CaliforniaCare HMO	HMO B	443.31	482.72	497.78	512.85	529.07	545.30	562.11	579.49	579.49	579.49	579.49	581.81	593.40	607.31	629.91	648.45	657.72	671.63	685.54	694.23	703.50	708.14	712.77	717.41	722.04	731.32	740.59	754.50	767.82	786.37	809.55	836.78	869.24	905.74	947.47	988.61	1034.97	1080.75	1131.16	1182.16	1237.21	1292.26	1351.95	1412.22	1476.54	1508.41	1572.74	1628.37	1664.87	1710.65	1738.47
Anthem Blue Cross	Priority Select HMO	HMO C	406.16	442.26	456.07	469.87	484.74	499.61	515.00	530.93	530.93	530.93	530.93	533.05	543.67	556.41	577.12	594.11	602.61	615.35	628.09	636.05	644.55	648.80	653.04	657.29	661.54	670.03	678.53	691.27	703.48	720.47	741.71	766.66	796.40	829.84	868.07	905.77	948.24	990.18	1036.38	1083.10	1133.54	1183.97	1238.66	1293.88	1352.81	1382.01	1440.94	1491.91	1525.36	1567.31	1592.79
Anthem Blue Cross	Select PPO	PPO B	461.23	502.23	517.91	533.58	550.47	567.35	584.83	602.92	602.92	602.92	602.92	605.33	617.39	631.86	655.37	674.67	684.31	698.78	713.25	722.30	731.94	736.77	741.59	746.41	751.24	760.89	770.53	785.00	798.87	818.16	842.28	870.62	904.38	942.36	985.77	1028.58	1076.82	1124.45	1176.90	1229.96	1287.23	1344.51	1406.61	1469.32	1536.24	1569.40	1636.32	1694.21	1732.19	1779.82	1808.76
Anthem Blue Cross	Select PPO	PPO C	475.88	518.18	534.35	550.52	567.94	585.36	603.40	622.06	622.06	622.06	622.06	624.55	636.99	651.92	676.18	696.09	706.04	720.97	735.90	745.23	755.18	760.16	765.13	770.11	775.09	785.04	794.99	809.92	824.23	844.14	869.02	898.25	933.09	972.28	1017.07	1061.23	1111.00	1160.14	1214.26	1269.00	1328.10	1387.19	1451.27	1515.96	1585.01	1619.22	1688.27	1747.99	1787.18	1836.32	1866.18
Anthem Blue Cross	Select PPO	PPO D	457.87	498.57	514.13	529.69	546.45	563.21	580.56	598.52	598.52	598.52	598.52	600.91	612.88	627.25	650.59	669.74	679.32	693.68	708.05	717.03	726.60	731.39	736.18	740.97	745.76	755.33	764.91	779.27	793.04	812.19	836.13	864.26	897.78	935.49	978.58	1021.08	1068.96	1116.24	1168.31	1220.98	1277.84	1334.70	1396.35	1458.59	1525.03	1557.95	1624.38	1681.84	1719.55	1766.83	1795.56
Anthem Blue Cross	Prudent Buyer - Small Group	PPO E	499.51	543.91	560.88	577.86	596.14	614.43	633.36	652.95	652.95	652.95	652.95	655.56	668.62	684.29	709.76	730.65	741.10	756.77	772.44	782.23	792.68	797.90	803.13	808.35	813.58	824.02	834.47	850.14	865.16	886.05	912.17	942.86	979.43	1020.56	1067.57	1113.93	1166.17	1217.75	1274.56	1332.02	1394.05	1456.08	1523.33	1591.24	1663.72	1699.63	1772.11	1834.79	1875.93	1927.51	1958.85
Anthem Blue Cross	Prudent Buyer - Small Group	PPO H	480.63	523.35	539.68	556.02	573.61	591.20	609.42	628.27	628.27	628.27	628.27	630.78	643.35	658.43	682.93	703.03	713.09	728.16	743.24	752.67	762.72	767.75	772.77	777.80	782.82	792.88	802.93	818.01	832.46	852.56	877.69	907.22	942.41	981.99	1027.22	1071.83	1122.09	1171.72	1226.38	1281.67	1341.36	1401.04	1465.75	1531.09	1600.83	1635.39	1705.12	1765.44	1805.02	1854.65	1884.81
Anthem Blue Cross	Prudent Buyer - Small Group	PPO I	487.71	531.06	547.64	564.21	582.06	599.92	618.40	637.53	637.53	637.53	637.53	640.08	652.83	668.13	693.00	713.40	723.60	738.90	754.20	763.76	773.96	779.06	784.16	789.26	794.36	804.56	814.76	830.06	844.73	865.13	890.63	920.59	956.30	996.46	1042.36	1087.63	1138.63	1188.99	1244.46	1300.56	1361.13	1421.69	1487.36	1553.66	1624.43	1659.49	1730.26	1791.46	1831.62	1881.99	1912.59
Kaiser Permanente	Full	HMO B	385.54	418.55	431.17	443.78	457.37	456.69	470.77	485.33	485.33	485.33	485.33	487.27	496.97	508.62	527.55	543.08	550.85	562.49	574.14	581.42	589.19	593.07	596.95	600.83	604.72	612.48	620.25	631.90	643.06	658.59	678.00	700.81	727.99	758.57	793.51	827.97	866.79	905.13	947.36	990.07	1036.17	1082.28	1132.27	1182.74	1236.61	1263.31	1317.18	1363.77	1394.34	1432.68	1455.99
Kaiser Permanente	Full	HMO C	396.64	430.63	443.63	456.62	470.62	470.34	484.84	499.83	499.83	499.83	499.83	501.83	511.83	523.82	543.32	559.31	567.31	579.30	591.30	598.80	606.80	610.79	614.79	618.79	622.79	630.79	638.78	650.78	662.28	678.27	698.26	721.76	749.75	781.24	817.22	852.71	892.70	932.19	975.67	1019.66	1067.14	1114.62	1166.11	1218.09	1273.57	1301.06	1356.54	1404.53	1436.02	1475.50	1499.49
Kaiser Permanente	Full	HMO D	374.52	406.54	418.79	431.03	444.22	443.13	456.79	470.92	470.92	470.92	470.92	472.80	482.22	493.52	511.89	526.96	534.49	545.79	557.09	564.16	571.69	575.46	579.23	583.00	586.76	594.30	601.83	613.13	623.97	639.03	657.87	680.00	706.38	736.04	769.95	803.38	841.06	878.26	919.23	960.67	1005.41	1050.15	1098.65	1147.63	1199.90	1225.80	1278.07	1323.28	1352.94	1390.15	1412.76
Kaiser Permanente	Full	HMO E	335.04	363.55	374.45	385.35	397.10	394.57	406.73	419.31	419.31	419.31	419.31	420.98	429.37	439.43	455.78	469.20	475.91	485.97	496.04	502.33	509.04	512.39	515.75	519.10	522.45	529.16	535.87	545.94	555.58	569.00	585.77	605.48	628.96	655.37	685.56	715.33	748.88	782.00	818.48	855.38	895.22	935.05	978.24	1021.85	1068.39	1091.45	1137.99	1178.25	1204.66	1237.79	1257.93
Kaiser Permanente	Full	HMO F	382.34	415.05	427.56	440.07	453.55	452.75	466.70	481.13	481.13	481.13	481.13	483.06	492.68	504.23	522.99	538.39	546.09	557.63	569.18	576.40	584.10	587.95	591.80	595.64	599.49	607.19	614.89	626.44	637.50	652.90	672.14	694.76	721.70	752.01	786.65	820.82	859.31	897.32	939.17	981.51	1027.22	1072.93	1122.49	1172.52	1225.93	1252.39	1305.80	1351.99	1382.30	1420.31	1443.39
Sharp Health Plan	Performance	HMO A	366.15	398.70	411.14	423.59	436.99	450.39	464.27	478.63	478.63	478.63	478.63	480.54	490.12	501.60	520.27	535.59	543.25	554.73	566.22	573.40	581.06	584.89	588.71	592.54	596.37	604.03	611.69	623.18	634.18	649.50	668.65	691.14	717.95	748.10	782.56	816.54	854.83	892.64	934.29	976.41	1021.88	1067.34	1116.64	1166.42	1219.55	1245.87	1299.00	1344.95	1375.10	1412.92	1435.89
Sharp Health Plan	Premier	HMO B	345.92	376.67	388.42	400.18	412.84	425.50	438.61	452.18	452.18	452.18	452.18	453.99	463.03	473.88	491.52	505.99	513.22	524.08	534.93	541.71	548.95	552.56	556.18	559.80	563.42	570.65	577.89	588.74	599.14	613.61	631.70	652.95	678.27	706.76	739.31	771.42	807.59	843.32	882.66	922.45	965.40	1008.36	1054.94	1101.96	1152.15	1177.02	1227.22	1270.63	1299.11	1334.84	1356.54
Sharp Health Plan	Performance	HMO D	377.08	410.59	423.41	436.23	450.03	463.83	478.12	492.91	492.91	492.91	492.91	494.88	504.74	516.57	535.79	551.57	559.45	571.28	583.11	590.51	598.39	602.34	606.28	610.22	614.17	622.05	629.94	641.77	653.11	668.88	688.60	711.76	739.37	770.42	805.91	840.90	880.34	919.28	962.16	1005.54	1052.36	1099.19	1149.96	1201.22	1255.93	1283.04	1337.76	1385.08	1416.13	1455.07	1478.73
Sutter Health Plan	Sutter Health Plan	HMO A	449.12	489.04	504.31	519.57	536.01	552.45	569.47	587.10	587.10	587.10	587.10	589.43	601.18	615.27	638.16	656.95	666.34	680.43	694.52	703.33	712.72	717.42	722.12	726.81	731.51	740.90	750.30	764.39	777.89	796.68	820.16	847.75	880.63	917.62	959.89	1001.57	1048.54	1094.92	1145.99	1197.66	1253.43	1309.20	1369.67	1430.73	1495.89	1528.18	1593.35	1649.71	1686.70	1733.08	1761.25
Sutter Health Plan	Sutter Health Plan	HMO B	481.73	524.55	540.92	557.29	574.93	592.56	610.82	629.72	629.72	629.72	629.72	632.23	644.82	659.94	684.50	704.65	714.72	729.83	744.95	754.39	764.47	769.51	774.54	779.58	784.62	794.69	804.77	819.88	834.37	854.52	879.71	909.30	944.57	984.24	1029.58	1074.29	1124.66	1174.41	1229.19	1284.61	1344.43	1404.25	1469.11	1534.60	1604.50	1639.14	1709.03	1769.49	1809.16	1858.90	1889.12
Sutter Health Plan	Sutter Health Plan	HMO C	409.29	445.67	459.58	473.49	488.47	503.45	518.96	535.03	535.03	535.03	535.03	537.16	547.86	560.70	581.56	598.68	607.24	620.08	632.92	640.95	649.51	653.79	658.07	662.35	666.63	675.19	683.75	696.59	708.90	726.02	747.42	772.56	802.52	836.23	874.75	912.74	955.54	997.80	1044.35	1091.43	1142.26	1193.08	1248.19	1303.83	1363.22	1392.64	1452.03	1503.39	1537.10	1579.37	1605.04
UnitedHealthcare	SignatureValue	HMO A	423.74	461.41	475.81	490.21	505.72	521.23	537.29	553.91	553.91	553.91	553.91	556.13	567.20	580.50	602.10	619.83	628.69	641.98	655.28	663.58	672.45	676.88	681.31	685.74	690.17	699.03	707.90	721.19	733.93	751.66	773.81	799.85	830.87	865.76	905.64	944.97	989.28	1033.04	1081.23	1129.98	1182.60	1235.22	1292.27	1349.88	1411.36	1441.83	1503.31	1556.49	1591.38	1635.14	1661.73
UnitedHealthcare	Alliance	HMO B	356.81	388.53	400.65	412.78	425.84	438.90	452.43	466.42	466.42	466.42	466.42	468.29	477.61	488.81	507.00	521.92	529.39	540.58	551.77	558.77	566.23	569.97	573.70	577.43	581.16	588.62	596.08	607.28	618.01	632.93	651.59	673.51	699.63	729.01	762.60	795.71	833.03	869.87	910.45	951.50	995.81	1040.12	1088.16	1136.67	1188.44	1214.09	1265.86	1310.64	1340.02	1376.87	1399.26
UnitedHealthcare	SignatureValue	HMO C	453.66	493.99	509.40	524.82	541.43	558.03	575.23	593.02	593.02	593.02	593.02	595.39	607.25	621.48	644.61	663.59	673.08	687.31	701.54	710.44	719.93	724.67	729.41	734.16	738.90	748.39	757.88	772.11	785.75	804.73	828.45	856.32	889.53	926.89	969.59	1011.69	1059.13	1105.98	1157.58	1209.76	1266.10	1322.43	1383.52	1445.19	1511.01	1543.63	1609.46	1666.39	1703.75	1750.60	1779.06
UnitedHealthcare	Alliance	HMO D	382.00	415.96	428.94	441.92	455.91	469.89	484.37	499.35	499.35	499.35	499.35	501.35	511.33	523.32	542.79	558.77	566.76	578.75	590.73	598.22	606.21	610.21	614.20	618.20	622.19	630.18	638.17	650.15	661.64	677.62	697.59	721.06	749.03	780.48	816.44	851.89	891.84	931.29	974.73	1018.67	1066.11	1113.55	1164.98	1216.92	1272.34	1299.81	1355.24	1403.17	1434.63	1474.08	1498.05
UnitedHealthcare	Harmony	HMO E	375.36	408.73	421.49	434.24	447.98	461.72	475.95	490.67	490.67	490.67	490.67	492.63	502.45	514.22	533.36	549.06	556.91	568.69	580.46	587.82	595.67	599.60	603.52	607.45	611.37	619.23	627.08	638.85	650.14	665.84	685.47	708.53	736.01	766.92	802.25	837.08	876.34	915.10	957.79	1000.97	1047.58	1094.19	1144.73	1195.76	1250.23	1277.21	1331.68	1378.78	1409.69	1448.46	1472.01
UnitedHealthcare	SignatureValue	HMO F	469.24	510.95	526.89	542.84	560.02	577.19	594.98	613.38	613.38	613.38	613.38	615.83	628.10	642.82	666.74	686.37	696.19	710.91	725.63	734.83	744.64	749.55	754.46	759.36	764.27	774.09	783.90	798.62	812.73	832.36	856.89	885.72	920.07	958.71	1002.88	1046.43	1095.50	1143.95	1197.32	1251.30	1309.57	1367.84	1431.02	1494.81	1562.89	1596.63	1664.71	1723.60	1762.24	1810.70	1840.14
UnitedHealthcare	Alliance	HMO G	395.12	430.24	443.67	457.10	471.56	486.03	501.01	516.50	516.50	516.50	516.50	518.57	528.90	541.29	561.44	577.96	586.23	598.62	611.02	618.77	627.03	631.16	635.30	639.43	643.56	651.82	660.09	672.48	684.36	700.89	721.55	745.83	774.75	807.29	844.48	881.15	922.47	963.27	1008.21	1053.66	1102.73	1151.80	1204.99	1258.71	1316.04	1344.45	1401.78	1451.37	1483.90	1524.71	1549.50
UnitedHealthcare	SignatureValue	HMO H	439.74	478.83	493.77	508.72	524.81	540.91	557.58	574.82	574.82	574.82	574.82	577.12	588.62	602.41	624.83	643.22	652.42	666.22	680.01	688.63	697.83	702.43	707.03	711.63	716.23	725.42	734.62	748.42	761.64	780.03	803.02	830.04	862.23	898.44	939.83	980.64	1026.63	1072.04	1122.05	1172.63	1227.24	1281.85	1341.06	1400.84	1464.64	1496.26	1560.06	1615.24	1651.46	1696.87	1724.46
UnitedHealthcare	Alliance	HMO J	370.28	403.20	415.78	428.37	441.92	455.47	469.51	484.03	484.03	484.03	484.03	485.97	495.65	507.26	526.14	541.63	549.37	560.99	572.61	579.87	587.61	591.48	595.36	599.23	603.10	610.85	618.59	630.21	641.34	656.83	676.19	698.94	726.05	756.54	791.39	825.76	864.48	902.72	944.83	987.42	1033.40	1079.39	1129.24	1179.58	1233.31	1259.93	1313.66	1360.12	1390.62	1428.86	1452.09
UnitedHealthcare	Harmony	HMO L	350.61	381.77	393.69	405.60	418.44	431.27	444.56	458.31	458.31	458.31	458.31	460.14	469.31	480.31	498.18	512.85	520.18	531.18	542.18	549.06	556.39	560.05	563.72	567.39	571.05	578.39	585.72	596.72	607.26	621.93	640.26	661.80	687.47	716.34	749.34	781.88	818.54	854.75	894.62	934.95	978.49	1022.03	1069.24	1116.90	1167.77	1192.98	1243.85	1287.85	1316.72	1352.93	1374.93
UnitedHealthcare	Harmony	HMO M	388.25	422.76	435.96	449.16	463.37	477.58	492.29	507.52	507.52	507.52	507.52	509.55	519.70	531.88	551.67	567.91	576.04	588.22	600.40	608.01	616.13	620.19	624.25	628.31	632.37	640.49	648.61	660.79	672.46	688.70	709.01	732.86	761.28	793.25	829.80	865.83	906.43	946.52	990.68	1035.34	1083.56	1131.77	1184.04	1236.83	1293.16	1321.07	1377.41	1426.13	1458.10	1498.20	1522.56
UnitedHealthcare	Harmony	HMO N	363.85	396.19	408.56	420.92	434.24	447.56	461.35	475.62	475.62	475.62	475.62	477.52	487.03	498.45	517.00	532.22	539.83	551.24	562.66	569.79	577.40	581.21	585.01	588.82	592.62	600.23	607.84	619.26	630.20	645.42	664.44	686.80	713.43	743.39	777.64	811.41	849.46	887.03	928.41	970.26	1015.45	1060.63	1109.62	1159.09	1211.88	1238.04	1290.83	1336.49	1366.46	1404.03	1426.86
Western Health	Full	HMO A	406.47	442.60	456.41	470.23	485.10	499.98	515.39	531.33	531.33	531.33	531.33	533.45	544.08	556.83	577.55	594.56	603.06	615.81	628.56	636.53	645.03	649.28	653.53	657.78	662.04	670.54	679.04	691.79	704.01	721.01	742.27	767.24	796.99	830.47	868.72	906.45	948.95	990.93	1037.15	1083.91	1134.39	1184.86	1239.59	1294.85	1353.83	1383.05	1442.03	1493.03	1526.51	1568.48	1593.99
Western Health	Full	HMO B	426.53	464.44	478.93	493.43	509.04	524.65	540.82	557.55	557.55	557.55	557.55	559.78	570.93	584.31	606.06	623.90	632.82	646.20	659.58	667.94	676.86	681.33	685.79	690.25	694.71	703.63	712.55	725.93	738.75	756.59	778.90	805.10	836.32	871.45	911.59	951.18	995.78	1039.83	1088.34	1137.40	1190.37	1243.34	1300.76	1358.75	1420.64	1451.30	1513.19	1566.71	1601.84	1645.89	1672.65
Western Health	Full	HMO C	397.43	432.76	446.27	459.77	474.32	488.87	503.93	519.52	519.52	519.52	519.52	521.60	531.99	544.46	564.72	581.34	589.65	602.12	614.59	622.38	630.70	634.85	639.01	643.16	647.32	655.63	663.94	676.41	688.36	704.99	725.77	750.18	779.28	812.01	849.41	886.30	927.86	968.90	1014.10	1059.82	1109.17	1158.53	1212.04	1266.07	1323.73	1352.31	1409.97	1459.85	1492.58	1533.62	1558.56
Western Health	Full	HMO D	382.67	416.69	429.69	442.70	456.70	470.71	485.22	500.22	500.22	500.22	500.22	502.22	512.23	524.23	543.74	559.75	567.75	579.76	591.76	599.27	607.27	611.27	615.27	619.28	623.28	631.28	639.28	651.29	662.79	678.80	698.81	722.32	750.33	781.85	817.86	853.38	893.40	932.91	976.43	1020.45	1067.97	1115.50	1167.02	1219.04	1274.57	1302.08	1357.60	1405.62	1437.14	1476.66	1500.66

Platinum		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																																																			
Anthem Blue Cross	Select HMO	HMO A	428.97	467.10	481.68	496.25	511.96	527.66	543.92	560.74	560.74	560.74	560.74	562.98	574.20	587.66	609.52	627.47	636.44	649.90	663.36	671.77	680.74	685.22	689.71	694.20	698.68	707.65	716.63	730.08	742.98	760.92	783.35	809.71	841.11	876.44	916.81	956.62	1001.48	1045.78	1094.56	1143.91	1197.18	1250.45	1308.21	1366.52	1428.77	1459.61	1521.85	1575.68	1611.01	1655.30	1682.22
Anthem Blue Cross	Vivity	HMO B	428.28	466.35	480.90	495.46	511.13	526.81	543.04	559.84	559.84	559.84	559.84	562.08	573.28	586.71	608.55	626.46	635.42	648.85	662.29	670.69	679.65	684.12	688.60	693.08	697.56	706.52	715.48	728.91	741.79	759.70	782.10	808.41	839.76	875.03	915.34	955.09	999.87	1044.10	1092.81	1142.07	1195.26	1248.44	1306.11	1364.33	1426.47	1457.26	1519.41	1573.15	1608.42	1652.65	1679.52
Anthem Blue Cross	Vivity	HMO C	419.33	456.61	470.86	485.11	500.46	515.81	531.71	548.15	548.15	548.15	548.15	550.34	561.31	574.46	595.84	613.38	622.15	635.31	648.46	656.68	665.45	669.84	674.22	678.61	682.99	691.77	700.54	713.69	726.30	743.84	765.77	791.53	822.23	856.76	896.23	935.14	979.00	1022.30	1069.99	1118.23	1170.30	1222.37	1278.83	1335.84	1396.69	1426.83	1487.68	1540.30	1574.83	1618.14	1644.45
Anthem Blue Cross	CaliforniaCare HMO	HMO D	480.89	523.63	539.98	556.32	573.92	591.52	609.75	628.61	628.61	628.61	628.61	631.12	643.70	658.78	683.30	703.41	713.47	728.56	743.65	753.07	763.13	768.16	773.19	778.22	783.25	793.31	803.36	818.45	832.91	853.02	878.17	907.71	942.92	982.52	1027.78	1072.41	1122.70	1172.36	1227.05	1282.36	1342.08	1401.80	1466.55	1531.92	1601.70	1636.27	1706.05	1766.39	1806.00	1855.66	1885.83
Anthem Blue Cross	Prudent Buyer - Small Group	PPO B	563.56	613.65	632.81	651.96	672.59	693.22	714.58	736.68	736.68	736.68	736.68	739.63	754.36	772.04	800.77	824.34	836.13	853.81	871.49	882.54	894.33	900.22	906.12	912.01	917.90	929.69	941.48	959.16	976.10	999.67	1029.14	1063.77	1105.02	1151.43	1204.47	1256.78	1315.71	1373.91	1438.00	1502.83	1572.81	1642.80	1718.67	1795.29	1877.06	1917.58	1999.35	2070.07	2116.48	2174.68	2210.04
Kaiser Permanente	Full	HMO A	426.85	463.52	477.54	491.57	506.67	507.50	523.14	539.32	539.32	539.32	539.32	541.47	552.26	565.20	586.24	603.50	612.12	625.07	638.01	646.10	654.73	659.05	663.36	667.67	671.99	680.62	689.25	702.19	714.59	731.85	753.43	778.77	808.98	842.95	881.78	920.07	963.22	1005.83	1052.75	1100.21	1151.44	1202.68	1258.23	1314.32	1374.18	1403.84	1463.71	1515.48	1549.46	1592.06	1617.96
Kaiser Permanente	Full	HMO B	415.71	451.39	465.04	478.68	493.37	493.80	509.02	524.76	524.76	524.76	524.76	526.86	537.35	549.95	570.41	587.21	595.60	608.20	620.79	628.66	637.06	641.26	645.45	649.65	653.85	662.25	670.64	683.24	695.31	712.10	733.09	757.75	787.14	820.20	857.98	895.24	937.22	978.68	1024.33	1070.51	1120.36	1170.21	1224.26	1278.84	1337.09	1365.95	1424.20	1474.57	1507.63	1549.09	1574.28
Kaiser Permanente	Full	HMO C	399.32	433.55	446.64	459.72	473.82	473.64	488.24	503.34	503.34	503.34	503.34	505.35	515.42	527.50	547.13	563.23	571.29	583.37	595.45	603.00	611.05	615.08	619.10	623.13	627.16	635.21	643.26	655.34	666.92	683.03	703.16	726.82	755.01	786.72	822.96	858.69	898.96	938.72	982.51	1026.81	1074.62	1122.44	1174.28	1226.63	1282.50	1310.19	1366.06	1414.38	1446.09	1485.85	1510.02
Sharp Health Plan	Premier	HMO A	387.44	421.88	435.05	448.22	462.40	476.58	491.27	506.46	506.46	506.46	506.46	508.49	518.62	530.77	550.52	566.73	574.83	586.99	599.14	606.74	614.84	618.89	622.95	627.00	631.05	639.15	647.26	659.41	671.06	687.27	707.52	731.33	759.69	791.60	828.06	864.02	904.54	944.55	988.61	1033.18	1081.29	1129.41	1181.57	1234.24	1290.46	1318.32	1374.53	1423.15	1455.06	1495.07	1519.38
Sharp Health Plan	Performance	HMO B	415.31	452.23	466.34	480.46	495.66	510.86	526.60	542.89	542.89	542.89	542.89	545.06	555.92	568.95	590.12	607.49	616.18	629.21	642.24	650.38	659.07	663.41	667.75	672.10	676.44	685.13	693.81	706.84	719.33	736.70	758.42	783.93	814.34	848.54	887.63	926.17	969.60	1012.49	1059.72	1107.50	1159.07	1210.64	1266.56	1323.02	1383.28	1413.14	1473.40	1525.52	1559.72	1602.61	1628.67
Sharp Health Plan	Premier	HMO C	388.91	423.48	436.70	449.92	464.15	478.39	493.13	508.38	508.38	508.38	508.38	510.41	520.58	532.78	552.61	568.88	577.01	589.21	601.41	609.04	617.17	621.24	625.31	629.37	633.44	641.58	649.71	661.91	673.60	689.87	710.21	734.10	762.57	794.60	831.20	867.30	907.97	948.13	992.36	1037.10	1085.39	1133.69	1186.05	1238.92	1295.35	1323.31	1379.74	1428.55	1460.58	1500.74	1525.14
Sutter Health Plan	Sutter Health Plan	HMO A	523.22	569.73	587.51	605.30	624.45	643.60	663.43	683.96	683.96	683.96	683.96	686.69	700.37	716.78	743.45	765.34	776.28	792.70	809.11	819.37	830.32	835.79	841.26	846.73	852.20	863.15	874.09	890.50	906.24	928.12	955.48	987.63	1025.93	1069.02	1118.26	1166.82	1221.54	1275.57	1335.07	1395.26	1460.24	1525.21	1595.66	1666.79	1742.71	1780.32	1856.24	1921.90	1964.99	2019.02	2051.84
UnitedHealthcare	SignatureValue	HMO A	470.83	512.69	528.69	544.69	561.92	579.16	597.01	615.47	615.47	615.47	615.47	617.93	630.24	645.01	669.02	688.71	698.56	713.33	728.10	737.33	747.18	752.10	757.03	761.95	766.88	776.72	786.57	801.34	815.50	835.19	859.81	888.74	923.21	961.98	1006.29	1049.99	1099.23	1147.85	1201.40	1255.56	1314.03	1372.50	1435.89	1499.90	1568.22	1602.07	1670.39	1729.47	1768.25	1816.87	1846.41
UnitedHealthcare	SignatureValue	HMO B	509.96	555.29	572.62	589.95	608.61	627.28	646.61	666.61	666.61	666.61	666.61	669.28	682.61	698.61	724.61	745.94	756.60	772.60	788.60	798.60	809.26	814.60	819.93	825.26	830.60	841.26	851.93	867.93	883.26	904.59	931.25	962.58	999.92	1041.91	1089.91	1137.24	1190.57	1243.23	1301.22	1359.88	1423.21	1486.54	1555.20	1624.53	1698.52	1735.19	1809.18	1873.17	1915.17	1967.83	1999.83
UnitedHealthcare	Alliance	HMO C	396.46	431.70	445.18	458.65	473.16	487.67	502.70	518.25	518.25	518.25	518.25	520.32	530.69	543.13	563.34	579.92	588.21	600.65	613.09	620.86	629.16	633.30	637.45	641.59	645.74	654.03	662.32	674.76	686.68	703.27	724.00	748.35	777.38	810.02	847.34	884.13	925.59	966.54	1011.62	1057.23	1106.46	1155.70	1209.08	1262.98	1320.50	1349.00	1406.53	1456.28	1488.93	1529.87	1554.75
UnitedHealthcare	SignatureValue	HMO D	489.39	532.90	549.53	566.16	584.07	601.99	620.54	639.73	639.73	639.73	639.73	642.29	655.08	670.44	695.39	715.86	726.09	741.45	756.80	766.40	776.63	781.75	786.87	791.99	797.10	807.34	817.57	832.93	847.64	868.11	893.70	923.77	959.60	999.90	1045.96	1091.38	1142.56	1193.10	1248.75	1305.05	1365.82	1426.60	1492.49	1559.02	1630.03	1665.22	1736.23	1797.64	1837.94	1888.48	1919.19
UnitedHealthcare	SignatureValue	HMO E	501.86	546.46	563.52	580.58	598.95	617.31	636.34	656.02	656.02	656.02	656.02	658.64	671.76	687.51	713.09	734.09	744.58	760.33	776.07	785.91	796.41	801.66	806.90	812.15	817.40	827.90	838.39	854.14	869.23	890.22	916.46	947.29	984.03	1025.36	1072.59	1119.17	1171.65	1223.48	1280.55	1338.28	1400.60	1462.92	1530.49	1598.72	1671.54	1707.62	1780.44	1843.42	1884.75	1936.57	1968.06
UnitedHealthcare	Alliance	HMO F	412.09	448.72	462.73	476.73	491.81	506.90	522.52	538.68	538.68	538.68	538.68	540.83	551.61	564.54	585.55	602.78	611.40	624.33	637.26	645.34	653.96	658.27	662.58	666.89	671.20	679.81	688.43	701.36	713.75	730.99	752.54	777.85	808.02	841.96	880.74	918.99	962.08	1004.64	1051.50	1098.91	1150.08	1201.26	1256.74	1312.76	1372.56	1402.18	1461.98	1513.69	1547.63	1590.18	1616.04
UnitedHealthcare	Alliance	HMO G	422.59	460.15	474.51	488.87	504.34	519.81	535.83	552.40	552.40	552.40	552.40	554.61	565.66	578.92	600.46	618.14	626.97	640.23	653.49	661.78	670.61	675.03	679.45	683.87	688.29	697.13	705.97	719.22	731.93	749.61	771.70	797.67	828.60	863.40	903.17	942.39	986.59	1030.23	1078.28	1126.90	1179.37	1231.85	1288.75	1346.20	1407.52	1437.90	1499.21	1552.24	1587.05	1630.68	1657.20
UnitedHealthcare	Harmony	HMO H	389.58	424.21	437.45	450.69	464.95	479.20	493.97	509.25	509.25	509.25	509.25	511.29	521.47	533.69	553.55	569.85	578.00	590.22	602.44	610.08	618.23	622.30	626.38	630.45	634.53	642.67	650.82	663.04	674.76	691.05	711.42	735.36	763.88	795.96	832.62	868.78	909.52	949.75	994.06	1038.87	1087.25	1135.63	1188.08	1241.04	1297.57	1325.58	1382.10	1430.99	1463.08	1503.31	1527.75
UnitedHealthcare	Harmony	HMO I	415.24	452.15	466.27	480.38	495.58	510.77	526.52	542.80	542.80	542.80	542.80	544.97	555.83	568.85	590.02	607.39	616.08	629.11	642.13	650.27	658.96	663.30	667.64	671.99	676.33	685.01	693.70	706.73	719.21	736.58	758.29	783.80	814.20	848.40	887.48	926.02	969.44	1012.32	1059.55	1107.31	1158.88	1210.44	1266.35	1322.80	1383.05	1412.91	1473.16	1525.27	1559.46	1602.35	1628.40
UnitedHealthcare	Harmony	HMO M	421.94	459.45	473.79	488.13	503.57	519.02	535.01	551.56	551.56	551.56	551.56	553.77	564.80	578.03	599.55	617.20	626.02	639.26	652.50	660.77	669.59	674.01	678.42	682.83	687.24	696.07	704.89	718.13	730.82	748.47	770.53	796.45	827.34	862.09	901.80	940.96	985.09	1028.66	1076.65	1125.18	1177.58	1229.98	1286.79	1344.15	1405.37	1435.71	1496.93	1549.88	1584.63	1628.21	1654.68
UnitedHealthcare	Alliance	HMO N	429.41	467.58	482.17	496.77	512.49	528.20	544.48	561.32	561.32	561.32	561.32	563.57	574.79	588.26	610.15	628.12	637.10	650.57	664.04	672.46	681.44	685.93	690.42	694.91	699.40	708.39	717.37	730.84	743.75	761.71	784.16	810.55	841.98	877.34	917.76	957.61	1002.52	1046.86	1095.70	1145.09	1198.42	1251.74	1309.56	1367.94	1430.24	1461.12	1523.42	1577.31	1612.67	1657.02	1683.96
UnitedHealthcare	Harmony	HMO O	404.93	440.92	454.69	468.45	483.27	498.09	513.44	529.32	529.32	529.32	529.32	531.44	542.02	554.73	575.37	592.31	600.78	613.48	626.19	634.13	642.59	646.83	651.06	655.30	659.53	668.00	676.47	689.17	701.35	718.29	739.46	764.34	793.98	827.33	865.44	903.02	945.37	987.18	1033.23	1079.81	1130.10	1180.38	1234.90	1289.95	1348.71	1377.82	1436.57	1487.39	1520.74	1562.55	1587.96
Western Health	Full	HMO B	464.61	505.91	521.70	537.49	554.49	571.50	589.11	607.33	607.33	607.33	607.33	609.76	621.91	636.48	660.17	679.60	689.32	703.90	718.47	727.58	737.30	742.16	747.02	751.88	756.73	766.45	776.17	790.75	804.71	824.15	848.44	876.99	911.00	949.26	992.99	1036.11	1084.69	1132.67	1185.51	1238.96	1296.65	1354.35	1416.90	1480.07	1547.48	1580.88	1648.30	1706.60	1744.86	1792.84	1821.99
Western Health	Full	HMO C	459.94	500.82	516.45	532.08	548.92	565.75	583.19	601.22	601.22	601.22	601.22	603.63	615.65	630.08	653.53	672.77	682.39	696.82	711.25	720.27	729.89	734.70	739.51	744.32	749.13	758.75	768.36	782.79	796.62	815.86	839.91	868.17	901.84	939.71	983.00	1025.69	1073.79	1121.28	1173.59	1226.50	1283.61	1340.73	1402.66	1465.18	1531.92	1564.99	1631.72	1689.44	1727.32	1774.81	1803.66
Western Health	Full	HMO D	434.40	473.01	487.78	502.54	518.44	534.34	550.81	567.84	567.84	567.84	567.84	570.11	581.47	595.10	617.24	635.42	644.50	658.13	671.76	680.28	689.36	693.90	698.45	702.99	707.53	716.62	725.70	739.33	752.39	770.56	793.28	819.96	851.76	887.54	928.42	968.74	1014.17	1059.03	1108.43	1158.40	1212.34	1266.29	1324.78	1383.83	1446.86	1478.09	1541.12	1595.64	1631.41	1676.27	1703.52

Health Care Service Plan rates will vary by county

THE INFORMATION PROVIDED HEREIN, INCLUDING THE RATING INFORMATION IS PROVIDED ON TO YOU ON AN “AS IS” “AS AVAILABLE” BASIS WITHOUT WARRANTY OF ANY KIND, EXPRESS OR IMPLIED. WE FURTHER DISCLAIM ALL LIABILITY RELATED TO THE INFORMATION, INCLUDING THOSE CAUSED BY RATING DISCREPANCIES. FINAL RATES AND RATING AREAS ARE BASED UPON ACTUAL ENROLLMENT AND UNDERWRITING AND MUST BE APPROVED BY THE APPLICABLE INSURANCE CARRIER.

USE EMPLOYER ZIP CODE FOR RATING | AREA 19 | 02/01/27 - 03/01/27

Bronze		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																																																	
Anthem Blue Cross	Prudent Buyer - Small Group	PPO A	436.23	475.00	489.83	504.65	520.62	536.59	553.12	570.23	570.23	570.23	570.23	572.51	583.92	597.60	619.84	638.09	647.21	660.90	674.58	683.14	692.26	696.82	701.38	705.94	710.51	719.63	728.75	742.44	755.55	773.80	796.61	823.41	855.35	891.27	932.33	972.81	1018.43	1063.48	1113.09	1163.27	1217.44	1271.61	1330.35	1389.65	1452.95	1484.31	1547.60	1602.35	1638.27	1683.32	1710.69
Anthem Blue Cross	Select PPO	PPO B	400.45	436.05	449.66	463.27	477.93	492.59	507.77	523.47	523.47	523.47	523.47	525.56	536.03	548.60	569.01	585.76	594.14	606.70	619.27	627.12	635.49	639.68	643.87	648.06	652.24	660.62	668.99	681.56	693.60	710.35	731.29	755.89	785.21	818.18	855.87	893.04	934.92	976.27	1021.81	1067.88	1117.61	1167.34	1221.26	1275.70	1333.80	1362.59	1420.70	1470.95	1503.93	1545.28	1570.41
Anthem Blue Cross	Prudent Buyer - Small Group	PPO C	435.70	474.43	489.23	504.04	519.99	535.94	552.45	569.54	569.54	569.54	569.54	571.82	583.21	596.88	619.09	637.32	646.43	660.10	673.77	682.31	691.42	695.98	700.53	705.09	709.65	718.76	727.87	741.54	754.64	772.87	795.65	822.42	854.31	890.19	931.20	971.64	1017.20	1062.19	1111.74	1161.86	1215.97	1270.07	1328.74	1387.97	1451.19	1482.51	1545.73	1600.41	1636.29	1681.28	1708.62
Anthem Blue Cross	Select PPO	PPO D	399.93	435.48	449.07	462.66	477.30	491.94	507.10	522.78	522.78	522.78	522.78	524.87	535.33	547.87	568.26	584.99	593.36	605.90	618.45	626.29	634.65	638.84	643.02	647.20	651.38	659.75	668.11	680.66	692.68	709.41	730.32	754.89	784.17	817.11	854.75	891.86	933.69	974.98	1020.47	1066.47	1116.14	1165.80	1219.65	1274.01	1332.04	1360.80	1418.82	1469.01	1501.95	1543.25	1568.34
Kaiser Permanente	Full	HMO A	292.08	316.77	326.22	335.66	345.83	341.72	352.25	363.15	363.15	363.15	363.15	364.60	371.86	380.58	394.74	406.36	412.17	420.89	429.61	435.05	440.86	443.77	446.67	449.58	452.48	458.29	464.10	472.82	481.17	492.79	507.32	524.39	544.72	567.60	593.75	619.53	648.58	677.27	708.87	740.82	775.32	809.82	847.23	884.99	925.30	945.28	985.59	1020.45	1043.33	1072.02	1089.45
Kaiser Permanente	Full	HMO C	284.02	308.00	317.17	326.33	336.21	331.81	342.04	352.61	352.61	352.61	352.61	354.02	361.08	369.54	383.29	394.57	400.22	408.68	417.14	422.43	428.07	430.89	433.71	436.54	439.36	445.00	450.64	459.10	467.21	478.50	492.60	509.17	528.92	551.14	576.52	601.56	629.77	657.62	688.30	719.33	752.83	786.33	822.65	859.32	898.46	917.85	956.99	990.84	1013.06	1040.92	1057.83
Sharp Health Plan	Premier	HMO A	272.80	297.05	306.32	315.59	325.58	335.56	345.90	356.60	356.60	356.60	356.60	358.03	365.16	373.72	387.62	399.04	404.74	413.30	421.86	427.21	432.91	435.77	438.62	441.47	444.32	450.03	455.73	464.29	472.50	483.91	498.17	514.93	534.90	557.37	583.04	608.36	636.89	665.06	696.08	727.46	761.34	795.22	831.95	869.03	908.62	928.23	967.81	1002.05	1024.51	1052.68	1069.80
Sharp Health Plan	Performance	HMO B	291.24	317.12	327.02	336.92	347.58	358.24	369.28	380.70	380.70	380.70	380.70	382.22	389.84	398.97	413.82	426.00	432.09	441.23	450.37	456.08	462.17	465.22	468.26	471.31	474.35	480.44	486.53	495.67	504.43	516.61	531.84	549.73	571.05	595.03	622.44	649.47	679.93	710.01	743.13	776.63	812.79	848.96	888.17	927.77	970.02	990.96	1033.22	1069.77	1093.75	1123.83	1142.10
Sutter Health Plan	Sutter Health Plan	HMO A	335.37	365.18	376.58	387.97	400.25	412.52	425.24	438.40	438.40	438.40	438.40	440.14	448.91	459.43	476.53	490.56	497.57	508.09	518.61	525.19	532.20	535.71	539.22	542.73	546.23	553.25	560.26	570.78	580.87	594.89	612.43	633.03	657.58	685.20	716.77	747.89	782.96	817.59	855.73	894.31	935.96	977.61	1022.76	1068.35	1117.01	1141.13	1189.79	1231.87	1259.49	1294.12	1315.16
Sutter Health Plan	Sutter Health Plan	HMO B	335.53	365.36	376.76	388.17	400.45	412.73	425.45	438.62	438.62	438.62	438.62	440.36	449.13	459.66	476.76	490.80	497.82	508.34	518.87	525.45	532.47	535.98	539.48	542.99	546.50	553.52	560.54	571.06	581.15	595.19	612.73	633.35	657.91	685.54	717.12	748.26	783.35	818.00	856.16	894.75	936.42	978.09	1023.27	1068.88	1117.57	1141.69	1190.37	1232.48	1260.11	1294.76	1315.81
Western Health	Full	HMO B	316.71	344.87	355.63	366.39	377.99	389.58	401.59	414.01	414.01	414.01	414.01	415.66	423.94	433.88	450.02	463.27	469.90	479.83	489.77	495.98	502.60	505.91	509.23	512.54	515.85	522.47	529.10	539.03	548.56	561.81	578.37	597.82	621.01	647.09	676.90	706.29	739.41	772.12	808.14	844.57	883.90	923.23	965.87	1008.93	1054.89	1077.66	1123.61	1163.36	1189.44	1222.14	1242.02
Western Health	Full	HMO C	330.55	359.93	371.17	382.40	394.50	406.60	419.13	432.09	432.09	432.09	432.09	433.82	442.46	452.83	469.68	483.51	490.42	500.79	511.16	517.64	524.56	528.01	531.47	534.93	538.38	545.30	552.21	562.58	572.52	586.35	603.63	623.94	648.13	675.36	706.47	737.15	771.71	805.85	843.44	881.46	922.51	963.56	1008.07	1053.00	1100.97	1124.73	1172.69	1214.17	1241.39	1275.53	1296.27

Silver		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	NETWORK	PLAN																																																	
Anthem Blue Cross	Select HMO	HMO A	321.64	350.23	361.16	372.09	383.86	395.63	407.83	420.44	420.44	420.44	420.44	422.12	430.53	440.62	457.02	470.47	477.20	487.29	497.38	503.69	510.41	513.78	517.14	520.50	523.87	530.60	537.32	547.41	557.08	570.54	587.35	607.12	630.66	657.15	687.42	717.27	750.91	784.12	820.70	857.70	897.64	937.58	980.89	1024.61	1071.28	1094.41	1141.07	1181.44	1207.92	1241.14	1261.32
Anthem Blue Cross	CaliforniaCare HMO	HMO B	359.66	391.63	403.85	416.07	429.24	442.40	456.04	470.14	470.14	470.14	470.14	472.02	481.42	492.71	511.04	526.09	533.61	544.89	556.18	563.23	570.75	574.51	578.27	582.03	585.79	593.32	600.84	612.12	622.94	637.98	656.79	678.88	705.21	734.83	768.68	802.06	839.67	876.81	917.71	959.09	1003.75	1048.41	1096.84	1145.73	1197.92	1223.77	1275.96	1321.09	1350.71	1387.85	1410.42
Anthem Blue Cross	CaliforniaCare HMO	HMO D	359.23	391.16	403.37	415.58	428.73	441.87	455.49	469.58	469.58	469.58	469.58	471.46	480.85	492.12	510.43	525.46	532.97	544.24	555.51	562.56	570.07	573.83	577.58	581.34	585.10	592.61	600.12	611.39	622.19	637.22	656.00	678.07	704.37	733.95	767.76	801.10	838.67	875.77	916.62	957.94	1002.55	1047.16	1095.53	1144.37	1196.49	1222.32	1274.44	1319.52	1349.10	1386.20	1408.74
Anthem Blue Cross	Select PPO	PPO B	431.92	470.31	484.99	499.67	515.48	531.29	547.66	564.60	564.60	564.60	564.60	566.86	578.15	591.70	613.72	631.79	640.82	654.37	667.92	676.39	685.42	689.94	694.46	698.97	703.49	712.53	721.56	735.11	748.10	766.16	788.75	815.28	846.90	882.47	923.12	963.21	1008.38	1052.98	1102.10	1151.78	1205.42	1259.06	1317.21	1375.93	1438.60	1469.65	1532.32	1586.53	1622.10	1666.70	1693.80
Anthem Blue Cross	Prudent Buyer - Small Group	PPO C	470.51	512.34	528.33	544.32	561.54	578.76	596.60	615.05	615.05	615.05	615.05	617.51	629.81	644.57	668.56	688.24	698.08	712.84	727.60	736.83	746.67	751.59	756.51	761.43	766.35	776.19	786.03	800.80	814.94	834.62	859.22	888.13	922.58	961.32	1005.61	1049.28	1098.48	1147.07	1200.58	1254.70	1313.13	1371.56	1434.91	1498.88	1567.15	1600.98	1669.25	1728.29	1767.04	1815.63	1845.15
Anthem Blue Cross	Prudent Buyer - Small Group	PPO D	456.19	496.74	512.25	527.75	544.45	561.15	578.44	596.33	596.33	596.33	596.33	598.72	610.64	624.95	648.21	667.29	676.83	691.15	705.46	714.40	723.94	728.72	733.49	738.26	743.03	752.57	762.11	776.42	790.14	809.22	833.07	861.10	894.50	932.06	975.00	1017.34	1065.05	1112.16	1164.04	1216.51	1273.16	1329.82	1391.24	1453.26	1519.45	1552.25	1618.44	1675.69	1713.26	1760.37	1788.99
Anthem Blue Cross	Select PPO	PPO E	418.80	456.03	470.26	484.49	499.82	515.15	531.03	547.45	547.45	547.45	547.45	549.64	560.59	573.73	595.08	612.60	621.36	634.49	647.63	655.85	664.60	668.98	673.36	677.74	682.12	690.88	699.64	712.78	725.37	742.89	764.79	790.52	821.18	855.66	895.08	933.95	977.75	1020.99	1068.62	1116.80	1168.81	1220.81	1277.20	1334.14	1394.90	1425.01	1485.78	1538.33	1572.82	1616.07	1642.35
Anthem Blue Cross	Prudent Buyer - Small Group	PPO F	472.43	514.42	530.48	546.53	563.82	581.11	599.02	617.55	617.55	617.55	617.55	620.02	632.37	647.19	671.28	691.04	700.92	715.74	730.56	739.82	749.71	754.65	759.59	764.53	769.47	779.35	789.23	804.05	818.25	838.02	862.72	891.74	926.33	965.23	1009.69	1053.54	1102.94	1151.73	1205.46	1259.80	1318.47	1377.14	1440.74	1504.97	1573.52	1607.48	1676.03	1735.32	1774.22	1823.01	1852.65
Kaiser Permanente	Full	HMO A	318.40	345.43	355.77	366.11	377.24	374.10	385.63	397.55	397.55	397.55	397.55	399.14	407.10	416.64	432.14	444.86	451.22	460.77	470.31	476.27	482.63	485.81	488.99	492.17	495.35	501.71	508.07	517.62	526.76	539.48	555.38	574.07	596.33	621.38	650.00	678.23	710.03	741.44	776.03	811.01	848.78	886.55	927.50	968.84	1012.97	1034.83	1078.96	1117.13	1142.17	1173.58	1192.65
Kaiser Permanente	Full	HMO B	322.59	349.99	360.47	370.95	382.23	379.25	390.94	403.03	403.03	403.03	403.03	404.64	412.70	422.37	438.09	450.99	457.44	467.11	476.78	482.83	489.28	492.50	495.72	498.95	502.17	508.62	515.07	524.74	534.01	546.91	563.03	581.97	604.54	629.93	658.95	687.57	719.81	751.65	786.71	822.18	860.46	898.75	940.26	982.18	1026.91	1049.08	1093.82	1132.51	1157.90	1189.74	1209.09
Kaiser Permanente	Full	HMO C	320.30	347.50	357.90	368.30	379.51	376.44	388.04	400.04	400.04	400.04	400.04	401.64	409.64	419.24	434.84	447.64	454.04	463.65	473.25	479.25	485.65	488.85	492.05	495.25	498.45	504.85	511.25	520.85	530.05	542.85	558.86	577.66	600.06	625.26	654.06	682.47	714.47	746.07	780.88	816.08	854.08	892.09	933.29	974.90	1019.30	1041.30	1085.71	1124.11	1149.31	1180.92	1200.12
Kaiser Permanente	Full	HMO D	294.36	319.25	328.77	338.29	348.54	344.52	355.14	366.12	366.12	366.12	366.12	367.59	374.91	383.70	397.98	409.69	415.55	424.34	433.13	438.62	444.48	447.40	450.33	453.26	456.19	462.05	467.91	476.69	485.11	496.83	511.48	528.68	549.19	572.25	598.61	624.61	653.90	682.82	714.67	746.89	781.68	816.46	854.17	892.25	932.89	953.02	993.66	1028.81	1051.88	1080.80	1098.36
Kaiser Permanente	Full	HMO E	306.86	332.87	342.82	352.76	363.47	359.91	371.00	382.48	382.48	382.48	382.48	384.01	391.65	400.83	415.75	427.99	434.11	443.29	452.47	458.21	464.33	467.38	470.44	473.50	476.56	482.68	488.80	497.98	506.78	519.02	534.32	552.29	573.71	597.81	625.35	652.50	683.10	713.32	746.59	780.25	816.58	852.92	892.32	932.09	974.55	995.58	1038.04	1074.76	1098.85	1129.07	1147.44
Sharp Health Plan	Premier	HMO A	285.29	310.65	320.35	330.04	340.49	350.93	361.74	372.93	372.93	372.93	372.93	374.42	381.88	390.83	405.37	417.31	423.28	432.23	441.18	446.77	452.74	455.72	458.70	461.69	464.67	470.64	476.60	485.55	494.13	506.07	520.98	538.51	559.40	582.89	609.74	636.22	666.05	695.51	727.96	760.78	796.21	831.63	870.05	908.83	950.23	970.74	1012.13	1047.93	1071.43	1100.89	1118.79
Sharp Health Plan	Performance	HMO B	294.75	320.95	330.96	340.98	351.77	362.56	373.73	385.29	385.29	385.29	385.29	386.83	394.54	403.78	418.81	431.14	437.30	446.55	455.80	461.58	467.74	470.82	473.91	476.99	480.07	486.24	492.40	501.65	510.51	522.84	538.25	556.36	577.94	602.21	629.95	657.30	688.13	718.57	752.09	785.99	822.59	859.20	898.88	938.95	981.72	1002.91	1045.68	1082.66	1106.94	1137.38	1155.87
Sharp Health Plan	Premier	HMO C	268.76	292.65	301.78	310.92	320.76	330.59	340.78	351.32	351.32	351.32	351.32	352.73	359.75	368.18	381.88	393.13	398.75	407.18	415.61	420.88	426.50	429.31	432.12	434.93	437.74	443.37	448.99	457.42	465.50	476.74	490.79	507.31	526.98	549.11	574.41	599.35	627.46	655.21	685.78	716.69	750.07	783.44	819.63	856.17	895.16	914.49	953.48	987.21	1009.34	1037.10	1053.96
Sutter Health Plan	Sutter Health Plan	HMO B	409.97	446.41	460.35	474.28	489.29	504.29	519.83	535.92	535.92	535.92	535.92	538.05	548.77	561.63	582.54	599.68	608.26	621.12	633.98	642.02	650.60	654.88	659.17	663.46	667.75	676.32	684.89	697.76	710.08	727.23	748.67	773.86	803.87	837.63	876.21	914.26	957.14	999.47	1046.10	1093.26	1144.17	1195.08	1250.28	1306.02	1365.50	1394.98	1454.46	1505.91	1539.67	1582.01	1607.72
Sutter Health Plan	Sutter Health Plan	HMO C	355.08	386.64	398.71	410.78	423.78	436.77	450.23	464.17	464.17	464.17	464.17	466.01	475.30	486.44	504.54	519.39	526.82	537.96	549.10	556.06	563.49	567.20	570.91	574.63	578.34	585.77	593.19	604.33	615.01	629.86	648.43	670.24	696.24	725.48	758.90	791.85	828.99	865.65	906.04	946.88	990.98	1035.07	1082.88	1131.15	1182.67	1208.20	1259.72	1304.28	1333.52	1370.19	1392.46
UnitedHealthcare	SignatureValue	HMO A	409.25	445.63	459.54	473.45	488.43	503.41	518.92	534.97	534.97	534.97	534.97	537.11	547.81	560.65	581.51	598.63	607.19	620.03	632.87	640.89	649.45	653.73	658.01	662.29	666.57	675.13	683.69	696.53	708.84	725.95	747.35	772.50	802.46	836.16	874.68	912.66	955.46	997.72	1044.26	1091.34	1142.16	1192.98	1248.09	1303.72	1363.10	1392.53	1451.91	1503.27	1536.97	1579.23	1604.91
UnitedHealthcare	Alliance	HMO E	355.22	386.80	398.87	410.94	423.94	436.94	450.41	464.34	464.34	464.34	464.34	466.20	475.48	486.63	504.74	519.60	527.03	538.17	549.31	556.28	563.71	567.42	571.14	574.85	578.57	586.00	593.43	604.57	615.25	630.11	648.68	670.51	696.51	725.76	759.20	792.16	829.31	865.99	906.39	947.25	991.37	1035.48	1083.31	1131.60	1183.14	1208.68	1260.22	1304.80	1334.05	1370.73	1393.02
UnitedHealthcare	Harmony	HMO F	350.00	381.11	393.01	404.91	417.72	430.53	443.79	457.52	457.52	457.52	457.52	459.35	468.50	479.48	497.32	511.96	519.29	530.27	541.25	548.11	555.43	559.09	562.75	566.41	570.07	577.39	584.71	595.69	606.21	620.85	639.16	660.66	686.28	715.10	748.05	780.53	817.13	853.27	893.08	933.34	976.81	1020.27	1067.39	1114.98	1165.76	1190.92	1241.71	1285.63	1314.45	1350.60	1372.56
UnitedHealthcare	Harmony	HMO G	314.87	342.86	353.56	364.27	375.79	387.32	399.25	411.60	411.60	411.60	411.60	413.25	421.48	431.36	447.41	460.58	467.17	477.04	486.92	493.10	499.68	502.98	506.27	509.56	512.85	519.44	526.02	535.90	545.37	558.54	575.01	594.35	617.40	643.33	672.97	702.19	735.12	767.63	803.44	839.66	878.77	917.87	960.26	1003.07	1048.76	1071.39	1117.08	1156.60	1182.53	1215.04	1234.80
Western Health	Full	HMO B	362.81	395.06	407.40	419.73	433.01	446.29	460.04	474.27	474.27	474.27	474.27	476.16	485.65	497.03	515.53	530.71	538.29	549.68	561.06	568.17	575.76	579.56	583.35	587.14	590.94	598.53	606.11	617.50	628.40	643.58	662.55	684.84	711.40	741.28	775.43	809.10	847.04	884.51	925.77	967.51	1012.56	1057.62	1106.47	1155.79	1208.43	1234.52	1287.16	1332.69	1362.57	1400.04	1422.80
Western Health	Full	HMO C	342.86	373.34	384.99	396.64	409.19	421.74	434.74	448.18	448.18	448.18	448.18	449.98	458.94	469.70	487.18	501.52	508.69	519.45	530.20	536.93	544.10	547.68	551.27	554.85	558.44	565.61	572.78	583.54	593.84	608.19	626.11	647.18	672.28	700.51	732.78	764.60	800.46	835.86	874.86	914.30	956.87	999.45	1045.62	1092.23	1141.97	1166.63	1216.37	1259.40	1287.64	1323.04	1344.54
Western Health	Full	HMO D	330.78	360.19	371.43	382.67	394.78	406.88	419.42	432.40	432.40	432.40	432.40	434.12	442.77	453.15	470.01	483.85	490.77	501.15	511.52	518.01	524.93	528.39	531.85	535.31	538.76	545.68	552.60	562.98	572.92	586.76	604.06	624.38	648.59	675.83	706.97	737.67	772.26	806.42	844.04	882.09	923.16	964.24	1008.78	1053.75	1101.74	1125.52	1173.52	1215.03	1242.27	1276.43	1297.19

Health Care Service Plan rates will vary by county

THE INFORMATION PROVIDED HEREIN, INCLUDING THE RATING INFORMATION IS PROVIDED ON TO YOU ON AN "AS IS" "AS AVAILABLE" BASIS WITHOUT WARRANTY OF ANY KIND, EXPRESS OR IMPLIED. WE FURTHER DISCLAIM ALL LIABILITY RELATED TO THE INFORMATION, INCLUDING THOSE CAUSED BY RATING DISCREPANCIES. FINAL RATES AND RATING AREAS ARE BASED UPON ACTUAL ENROLLMENT AND UNDERWRITING AND MUST BE APPROVED BY THE APPLICABLE INSURANCE CARRIER.

Continued

Gold		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	**NETWORK**	**PLAN**																																																			
Anthem Blue Cross	Select HMO	HMO A	412.28	448.93	462.94	476.95	492.04	507.13	522.76	538.93	538.93	538.93	538.93	541.09	551.86	564.80	585.82	603.06	611.69	624.62	637.55	645.64	654.26	658.57	662.88	667.20	671.51	680.13	688.75	701.69	714.08	731.33	752.89	778.21	808.40	842.35	881.15	919.41	962.53	1005.10	1051.99	1099.42	1150.62	1201.81	1257.32	1313.37	1373.19	1402.83	1462.66	1514.39	1548.35	1590.92	1616.79
Anthem Blue Cross	CaliforniaCare HMO	HMO B	461.08	502.07	517.74	533.41	550.28	567.16	584.64	602.72	602.72	602.72	602.72	605.13	617.19	631.65	655.16	674.44	684.09	698.55	713.02	722.06	731.70	736.52	741.35	746.17	750.99	760.63	770.28	784.74	798.60	817.89	842.00	870.33	904.08	942.05	985.45	1028.24	1076.46	1124.07	1176.51	1229.55	1286.81	1344.07	1406.15	1468.83	1535.73	1568.88	1635.78	1693.64	1731.61	1779.23	1808.16
Anthem Blue Cross	Priority Select HMO	HMO C	426.98	464.94	479.45	493.96	509.59	525.22	541.41	558.15	558.15	558.15	558.15	560.38	571.55	584.94	606.71	624.57	633.50	646.90	660.29	668.66	677.59	682.06	686.52	690.99	695.45	704.39	713.32	726.71	739.55	757.41	779.74	805.97	837.23	872.39	912.58	952.20	996.86	1040.95	1089.51	1138.63	1191.65	1244.67	1302.16	1360.21	1422.17	1452.86	1514.82	1568.40	1603.56	1647.66	1674.45
Anthem Blue Cross	Select PPO	PPO B	511.31	556.76	574.14	591.52	610.23	628.95	648.33	668.38	668.38	668.38	668.38	671.05	684.42	700.46	726.53	747.92	758.61	774.65	790.69	800.72	811.41	816.76	822.11	827.45	832.80	843.50	854.19	870.23	885.60	906.99	933.73	965.14	1002.57	1044.68	1092.80	1140.26	1193.73	1246.53	1304.68	1363.50	1426.99	1490.49	1559.33	1628.84	1703.03	1739.79	1813.98	1878.15	1920.26	1973.06	2005.14
Anthem Blue Cross	Select PPO	PPO C	527.54	574.44	592.37	610.30	629.60	648.91	668.91	689.60	689.60	689.60	689.60	692.36	706.15	722.70	749.60	771.66	782.70	799.25	815.80	826.14	837.17	842.69	848.21	853.72	859.24	870.28	881.31	897.86	913.72	935.79	963.37	995.78	1034.40	1077.84	1127.50	1176.46	1231.63	1286.10	1346.10	1406.78	1472.30	1537.81	1608.84	1680.56	1757.10	1795.03	1871.57	1937.78	1981.22	2035.70	2068.80
Anthem Blue Cross	Select PPO	PPO D	507.57	552.69	569.94	587.19	605.77	624.34	643.59	663.49	663.49	663.49	663.49	666.14	679.41	695.34	721.21	742.45	753.06	768.98	784.91	794.86	805.48	810.78	816.09	821.40	826.71	837.32	847.94	863.86	879.12	900.36	926.90	958.08	995.24	1037.03	1084.81	1131.91	1184.99	1237.41	1295.13	1353.52	1416.55	1479.58	1547.92	1616.93	1690.57	1727.06	1800.71	1864.41	1906.21	1958.62	1990.47
Anthem Blue Cross	Prudent Buyer - Small Group	PPO E	574.71	625.79	645.32	664.86	685.89	706.93	728.71	751.25	751.25	751.25	751.25	754.26	769.28	787.31	816.61	840.65	852.67	870.70	888.73	900.00	912.02	918.03	924.04	930.05	936.06	948.08	960.10	978.13	995.41	1019.45	1049.50	1084.81	1126.88	1174.20	1228.29	1281.63	1341.73	1401.08	1466.44	1532.55	1603.92	1675.29	1752.67	1830.80	1914.19	1955.50	2038.89	2111.01	2158.34	2217.69	2253.75
Anthem Blue Cross	Prudent Buyer - Small Group	PPO H	552.96	602.12	620.91	639.70	659.94	680.18	701.15	722.83	722.83	722.83	722.83	725.72	740.18	757.53	785.72	808.85	820.41	837.76	855.11	865.95	877.52	883.30	889.08	894.86	900.65	912.21	923.78	941.12	957.75	980.88	1009.79	1043.77	1084.25	1129.78	1181.83	1233.15	1290.97	1348.08	1410.96	1474.57	1543.24	1611.91	1686.36	1761.54	1841.77	1881.53	1961.76	2031.15	2076.69	2133.79	2168.49
Anthem Blue Cross	Prudent Buyer - Small Group	PPO I	561.10	610.98	630.05	649.12	669.66	690.20	711.47	733.47	733.47	733.47	733.47	736.40	751.07	768.68	797.28	820.75	832.49	850.09	867.70	878.70	890.43	896.30	902.17	908.04	913.90	925.64	937.37	954.98	971.85	995.32	1024.66	1059.13	1100.21	1146.41	1199.22	1251.30	1309.98	1367.92	1431.73	1496.28	1565.96	1635.64	1711.19	1787.47	1868.88	1909.22	1990.64	2061.05	2107.26	2165.20	2200.41
Kaiser Permanente	Full	HMO B	382.56	415.29	427.81	440.33	453.81	453.02	466.98	481.42	481.42	481.42	481.42	483.35	492.98	504.53	523.31	538.71	546.41	557.97	569.52	576.74	584.45	588.30	592.15	596.00	599.85	607.55	615.26	626.81	637.88	653.29	672.55	695.17	722.13	752.46	787.12	821.31	859.82	897.85	939.74	982.10	1027.84	1073.57	1123.16	1173.23	1226.66	1253.14	1306.58	1352.80	1383.13	1421.16	1444.26
Kaiser Permanente	Full	HMO C	393.56	427.28	440.17	453.06	466.94	466.56	480.94	495.81	495.81	495.81	495.81	497.79	507.71	519.61	538.95	554.81	562.74	574.64	586.54	593.98	601.91	605.88	609.85	613.81	617.78	625.71	633.64	645.54	656.95	672.81	692.65	715.95	743.71	774.95	810.65	845.85	885.52	924.69	967.82	1011.45	1058.55	1105.66	1156.72	1208.29	1263.32	1290.59	1345.63	1393.23	1424.46	1463.63	1487.43
Kaiser Permanente	Full	HMO D	371.62	403.39	415.53	427.68	440.76	439.57	453.11	467.13	467.13	467.13	467.13	469.00	478.34	489.55	507.77	522.72	530.19	541.40	552.61	559.62	567.09	570.83	574.57	578.30	582.04	589.52	596.99	608.20	618.94	633.89	652.58	674.53	700.69	730.12	763.75	796.92	834.29	871.19	911.83	952.94	997.32	1041.70	1089.81	1138.39	1190.24	1215.93	1267.79	1312.63	1342.06	1378.96	1401.39
Kaiser Permanente	Full	HMO E	332.46	360.74	371.56	382.37	394.02	391.39	403.45	415.93	415.93	415.93	415.93	417.60	425.91	435.90	452.12	465.43	472.08	482.06	492.05	498.29	504.94	508.27	511.60	514.92	518.25	524.91	531.56	541.54	551.11	564.42	581.06	600.60	623.90	650.10	680.05	709.58	742.85	775.71	811.90	848.50	888.01	927.53	970.37	1013.62	1059.79	1082.67	1128.84	1168.77	1194.97	1227.83	1247.79
Kaiser Permanente	Full	HMO F	379.38	411.83	424.24	436.65	450.01	449.10	462.95	477.26	477.26	477.26	477.26	479.17	488.72	500.17	518.79	534.06	541.69	553.15	564.60	571.76	579.40	583.22	587.03	590.85	594.67	602.31	609.94	621.40	632.37	647.65	666.74	689.17	715.89	745.96	780.33	814.21	852.39	890.10	931.62	973.62	1018.96	1064.30	1113.46	1163.09	1216.07	1242.32	1295.29	1341.11	1371.18	1408.88	1431.78
Sharp Health Plan	Performance	HMO A	366.15	398.70	411.14	423.59	436.99	450.39	464.27	478.63	478.63	478.63	478.63	480.54	490.12	501.60	520.27	535.59	543.25	554.73	566.22	573.40	581.06	584.89	588.71	592.54	596.37	604.03	611.69	623.18	634.18	649.50	668.65	691.14	717.95	748.10	782.56	816.54	854.83	892.64	934.29	976.41	1021.88	1067.34	1116.64	1166.42	1219.55	1245.87	1299.00	1344.95	1375.10	1412.92	1435.89
Sharp Health Plan	Premier	HMO B	345.92	376.67	388.42	400.18	412.84	425.50	438.61	452.18	452.18	452.18	452.18	453.99	463.03	473.88	491.52	505.99	513.22	524.08	534.93	541.71	548.95	552.56	556.18	559.80	563.42	570.65	577.89	588.74	599.14	613.61	631.70	652.95	678.27	706.76	739.31	771.42	807.59	843.32	882.66	922.45	965.40	1008.36	1054.94	1101.96	1152.15	1177.02	1227.22	1270.63	1299.11	1334.84	1356.54
Sharp Health Plan	Performance	HMO D	377.08	410.59	423.41	436.23	450.03	463.83	478.12	492.91	492.91	492.91	492.91	494.88	504.74	516.57	535.79	551.57	559.45	571.28	583.11	590.51	598.39	602.34	606.28	610.22	614.17	622.05	629.94	641.77	653.11	668.88	688.60	711.76	739.37	770.42	805.91	840.90	880.34	919.28	962.16	1005.54	1052.36	1099.19	1149.96	1201.22	1255.93	1283.04	1337.76	1385.08	1416.13	1455.07	1478.73
Sutter Health Plan	Sutter Health Plan	HMO A	449.12	489.04	504.31	519.57	536.01	552.45	569.47	587.10	587.10	587.10	587.10	589.43	601.18	615.27	638.16	656.95	666.34	680.43	694.52	703.33	712.72	717.42	722.12	726.81	731.51	740.90	750.30	764.39	777.89	796.68	820.16	847.75	880.63	917.62	959.89	1001.57	1048.54	1094.92	1145.99	1197.66	1253.43	1309.20	1369.67	1430.73	1495.89	1528.18	1593.35	1649.71	1686.70	1733.08	1761.25
Sutter Health Plan	Sutter Health Plan	HMO B	481.73	524.55	540.92	557.29	574.93	592.56	610.82	629.72	629.72	629.72	629.72	632.23	644.82	659.94	684.50	704.65	714.72	729.83	744.95	754.39	764.47	769.51	774.54	779.58	784.62	794.69	804.77	819.88	834.37	854.52	879.71	909.30	944.57	984.24	1029.58	1074.29	1124.66	1174.41	1229.19	1284.61	1344.43	1404.25	1469.11	1534.60	1604.50	1639.14	1709.03	1769.49	1809.16	1858.90	1889.12
Sutter Health Plan	Sutter Health Plan	HMO C	409.29	445.67	459.58	473.49	488.47	503.45	518.96	535.03	535.03	535.03	535.03	537.16	547.86	560.70	581.56	598.68	607.24	620.08	632.92	640.95	649.51	653.79	658.07	662.35	666.63	675.19	683.75	696.59	708.90	726.02	747.42	772.56	802.52	836.23	874.75	912.74	955.54	997.80	1044.35	1091.43	1142.26	1193.08	1248.19	1303.83	1363.22	1392.64	1452.03	1503.39	1537.10	1579.37	1605.04
UnitedHealthcare	SignatureValue	HMO A	448.06	487.89	503.12	518.34	534.74	551.14	568.13	585.70	585.70	585.70	585.70	588.04	599.76	613.81	636.66	655.40	664.77	678.83	692.88	701.67	711.04	715.73	720.41	725.10	729.78	739.15	748.52	762.58	776.05	794.79	818.22	845.75	878.55	915.45	957.62	999.20	1046.06	1092.33	1143.29	1194.83	1250.47	1306.11	1366.44	1427.35	1492.36	1524.58	1589.59	1645.82	1682.72	1728.99	1757.10
UnitedHealthcare	Alliance	HMO B	388.90	423.47	436.69	449.91	464.14	478.38	493.12	508.37	508.37	508.37	508.37	510.40	520.57	532.77	552.60	568.87	577.00	589.20	601.40	609.03	617.16	621.23	625.30	629.36	633.43	641.56	649.70	661.90	673.59	689.86	710.19	734.09	762.56	794.58	831.18	867.28	907.95	948.11	992.34	1037.07	1085.37	1133.67	1186.03	1238.90	1295.33	1323.29	1379.72	1428.52	1460.55	1500.71	1525.11
UnitedHealthcare	SignatureValue	HMO C	479.69	522.33	538.64	554.94	572.50	590.05	608.24	627.05	627.05	627.05	627.05	629.56	642.10	657.15	681.60	701.67	711.70	726.75	741.80	751.21	761.24	766.26	771.27	776.29	781.30	791.34	801.37	816.42	830.84	850.91	875.99	905.46	940.58	980.08	1025.23	1069.75	1119.91	1169.45	1224.00	1279.18	1338.75	1398.32	1462.91	1528.12	1597.72	1632.21	1701.81	1762.01	1801.51	1851.05	1881.15
UnitedHealthcare	Alliance	HMO D	416.36	453.37	467.52	481.67	496.91	512.15	527.93	544.26	544.26	544.26	544.26	546.44	557.32	570.38	591.61	609.03	617.74	630.80	643.86	652.02	660.73	665.09	669.44	673.79	678.15	686.86	695.56	708.63	721.14	738.56	760.33	785.91	816.39	850.68	889.87	928.51	972.05	1015.04	1062.40	1110.29	1162.00	1213.70	1269.76	1326.36	1386.77	1416.71	1477.12	1529.37	1563.66	1606.66	1632.78
UnitedHealthcare	Harmony	HMO E	410.25	446.71	460.66	474.60	489.61	504.63	520.18	536.27	536.27	536.27	536.27	538.42	549.14	562.01	582.93	600.09	608.67	621.54	634.41	642.45	651.03	655.32	659.61	663.90	668.19	676.77	685.35	698.22	710.56	727.72	749.17	774.37	804.41	838.19	876.80	914.88	957.78	1000.14	1046.80	1093.99	1144.94	1195.88	1251.12	1306.89	1366.42	1395.91	1455.44	1506.92	1540.70	1583.07	1608.81
UnitedHealthcare	SignatureValue	HMO F	496.17	540.28	557.14	574.00	592.16	610.32	629.13	648.59	648.59	648.59	648.59	651.18	664.16	679.72	705.02	725.77	736.15	751.72	767.28	777.01	787.39	792.58	797.77	802.95	808.14	818.52	828.90	844.46	859.38	880.14	906.08	936.56	972.89	1013.75	1060.44	1106.49	1158.38	1209.62	1266.05	1323.12	1384.74	1446.36	1513.16	1580.61	1652.61	1688.28	1760.27	1822.54	1863.40	1914.64	1945.77
UnitedHealthcare	Alliance	HMO G	430.66	468.95	483.58	498.22	513.98	529.75	546.07	562.96	562.96	562.96	562.96	565.21	576.47	589.98	611.94	629.95	638.96	652.47	665.98	674.43	683.43	687.94	692.44	696.94	701.45	710.46	719.46	732.97	745.92	763.94	786.46	812.91	844.44	879.91	920.44	960.41	1005.45	1049.92	1098.90	1148.44	1201.92	1255.40	1313.39	1371.93	1434.42	1465.38	1527.87	1581.92	1617.38	1661.86	1688.88
UnitedHealthcare	SignatureValue	HMO H	464.97	506.31	522.11	537.91	554.93	571.95	589.58	607.81	607.81	607.81	607.81	610.24	622.40	636.98	660.69	680.14	689.86	704.45	719.04	728.16	737.88	742.74	747.61	752.47	757.33	767.06	776.78	791.37	805.35	824.80	849.11	877.68	911.72	950.01	993.77	1036.92	1085.55	1133.57	1186.45	1239.93	1297.67	1355.42	1418.02	1481.23	1548.70	1582.13	1649.60	1707.95	1746.24	1794.26	1823.43
UnitedHealthcare	Alliance	HMO J	403.58	439.46	453.17	466.89	481.66	496.43	511.73	527.56	527.56	527.56	527.56	529.67	540.22	552.88	573.46	590.34	598.78	611.44	624.10	632.02	640.46	644.68	648.90	653.12	657.34	665.78	674.22	686.88	699.02	715.90	737.00	761.80	791.34	824.58	862.56	900.02	942.22	983.90	1029.80	1076.22	1126.34	1176.46	1230.80	1285.66	1344.22	1373.24	1431.80	1482.44	1515.68	1557.36	1582.68
UnitedHealthcare	Harmony	HMO L	383.20	417.26	430.28	443.31	457.33	471.36	485.88	500.91	500.91	500.91	500.91	502.91	512.93	524.95	544.49	560.52	568.53	580.55	592.58	600.09	608.10	612.11	616.12	620.13	624.13	632.15	640.16	652.18	663.71	679.73	699.77	723.31	751.37	782.92	818.99	854.55	894.63	934.20	977.78	1021.86	1069.44	1117.03	1168.62	1220.72	1276.32	1303.87	1359.47	1407.56	1439.11	1478.69	1502.73
UnitedHealthcare	Harmony	HMO M	424.34	462.06	476.48	490.90	506.43	521.96	538.05	554.69	554.69	554.69	554.69	556.91	568.00	581.32	602.95	620.70	629.57	642.89	656.20	664.52	673.39	677.83	682.27	686.71	691.14	700.02	708.89	722.21	734.96	752.71	774.90	800.97	832.04	866.98	906.92	946.30	990.68	1034.50	1082.75	1131.57	1184.26	1236.96	1294.09	1351.78	1413.35	1443.86	1505.43	1558.68	1593.62	1637.44	1664.07
UnitedHealthcare	Harmony	HMO N	397.66	433.01	446.53	460.04	474.60	489.15	504.23	519.82	519.82	519.82	519.82	521.90	532.30	544.77	565.04	581.68	590.00	602.47	614.95	622.74	631.06	635.22	639.38	643.54	647.70	656.01	664.33	676.81	688.76	705.40	726.19	750.62	779.73	812.48	849.91	886.81	928.40	969.46	1014.69	1060.43	1109.82	1159.20	1212.74	1266.80	1324.50	1353.09	1410.79	1460.69	1493.44	1534.51	1559.46
Western Health	Full	HMO A	406.47	442.60	456.41	470.23	485.10	499.98	515.39	531.33	531.33	531.33	531.33	533.45	544.08	556.83	577.55	594.56	603.06	615.81	628.56	636.53	645.03	649.28	653.53	657.78	662.04	670.54	679.04	691.79	704.01	721.01	742.27	767.24	796.99	830.47	868.72	906.45	948.95	990.93	1037.15	1083.91	1134.39	1184.86	1239.59	1294.85	1353.83	1383.05	1442.03	1493.03	1526.51	1568.48	1593.99
Western Health	Full	HMO B	426.53	464.44	478.93	493.43	509.04	524.65	540.82	557.55	557.55	557.55	557.55	559.78	570.93	584.31	606.06	623.90	632.82	646.20	659.58	667.94	676.86	681.33	685.79	690.25	694.71	703.63	712.55	725.93	738.75	756.59	778.90	805.10	836.32	871.45	911.59	951.18	995.78	1039.83	1088.34	1137.40	1190.37	1243.34	1300.76	1358.75	1420.64	1451.30	1513.19	1566.71	1601.84	1645.89	1672.65
Western Health	Full	HMO C	397.43	432.76	446.27	459.77	474.32	488.87	503.93	519.52	519.52	519.52	519.52	521.60	531.99	544.46	564.72	581.34	589.65	602.12	614.59	622.38	630.70	634.85	639.01	643.16	647.32	655.63	663.94	676.41	688.36	704.99	725.77	750.18	779.28	812.01	849.41	886.30	927.86	968.90	1014.10	1059.82	1109.17	1158.53	1212.04	1266.07	1323.73	1352.31	1409.97	1459.85	1492.58	1533.62	1558.56
Western Health	Full	HMO D	382.67	416.69	429.69	442.70	456.70	470.71	485.22	500.22	500.22	500.22	500.22	502.22	512.23	524.23	543.74	559.75	567.75	579.76	591.76	599.27	607.27	611.27	615.27	619.28	623.28	631.28	639.28	651.29	662.79	678.80	698.81	722.32	750.33	781.85	817.86	853.38	893.40	932.91	976.43	1020.45	1067.97	1115.50	1167.02	1219.04	1274.57	1302.08	1357.60	1405.62	1437.14	1476.66	1500.66

Platinum		AGE -->	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
CARRIER	**NETWORK**	**PLAN**																																																		
Anthem Blue Cross	Select HMO	HMO A	447.33	487.10	502.30	517.50	533.88	550.25	567.21	584.75	584.75	584.75	584.75	587.09	598.78	612.82	635.62	654.34	663.69	677.73	691.76	700.53	709.89	714.56	719.24	723.92	728.60	737.95	747.31	761.34	774.79	793.51	816.90	844.38	877.13	913.96	956.07	997.58	1044.36	1090.56	1141.43	1192.89	1248.44	1303.99	1364.22	1425.04	1489.94	1522.10	1587.01	1643.15	1679.99	1726.18	1754.25
Anthem Blue Cross	Vivity	HMO B	499.48	543.88	560.86	577.83	596.12	614.40	633.33	652.92	652.92	652.92	652.92	655.53	668.59	684.26	709.72	730.62	741.06	756.73	772.40	782.20	792.64	797.87	803.09	808.31	813.54	823.99	834.43	850.10	865.12	886.01	912.13	942.82	979.38	1020.51	1067.52	1113.88	1166.12	1217.70	1274.50	1331.96	1393.98	1456.01	1523.26	1591.17	1663.64	1699.55	1772.02	1834.71	1875.84	1927.42	1958.76
Anthem Blue Cross	Vivity	HMO C	489.04	532.51	549.13	565.75	583.65	601.55	620.09	639.27	639.27	639.27	639.27	641.83	654.61	669.95	694.89	715.34	725.57	740.91	756.26	765.85	776.07	781.19	786.30	791.42	796.53	806.76	816.99	832.33	847.03	867.49	893.06	923.11	958.91	999.18	1045.21	1090.59	1141.74	1192.24	1247.86	1304.11	1364.84	1425.57	1491.42	1557.90	1628.86	1664.02	1734.98	1796.35	1836.62	1887.13	1917.81
Anthem Blue Cross	CaliforniaCare HMO	HMO D	500.15	544.61	561.61	578.60	596.91	615.22	634.18	653.79	653.79	653.79	653.79	656.41	669.48	685.17	710.67	731.59	742.05	757.74	773.43	783.24	793.70	798.93	804.16	809.39	814.62	825.08	835.54	851.23	866.27	887.19	913.34	944.07	980.69	1021.87	1068.95	1115.37	1167.67	1219.32	1276.20	1333.73	1395.84	1457.95	1525.29	1593.29	1665.86	1701.82	1774.39	1837.15	1878.34	1929.99	1961.37
Anthem Blue Cross	Prudent Buyer - Small Group	PPO B	648.40	706.03	728.07	750.11	773.84	797.57	822.15	847.58	847.58	847.58	847.58	850.97	867.92	888.26	921.32	948.44	962.00	982.35	1002.69	1015.40	1028.96	1035.74	1042.52	1049.30	1056.08	1069.65	1083.21	1103.55	1123.04	1150.17	1184.07	1223.91	1271.37	1324.77	1385.79	1445.97	1513.78	1580.74	1654.48	1729.06	1809.58	1890.10	1977.40	2065.55	2159.63	2206.25	2300.33	2381.70	2435.10	2502.06	2542.74
Kaiser Permanente	Full	HMO A	423.53	459.91	473.82	487.73	502.70	503.41	518.93	534.98	534.98	534.98	534.98	537.12	547.82	560.66	581.52	598.64	607.20	620.04	632.88	640.90	649.46	653.74	658.02	662.30	666.58	675.14	683.70	696.54	708.85	725.96	747.36	772.51	802.47	836.17	874.69	912.67	955.47	997.73	1044.28	1091.35	1142.18	1193.00	1248.10	1303.74	1363.12	1392.55	1451.93	1503.29	1536.99	1579.25	1604.94
Kaiser Permanente	Full	HMO B	412.48	447.88	461.41	474.94	489.52	489.82	504.92	520.54	520.54	520.54	520.54	522.62	533.03	545.52	565.82	582.48	590.81	603.30	615.79	623.60	631.93	636.10	640.26	644.42	648.59	656.92	665.25	677.74	689.71	706.37	727.19	751.65	780.80	813.60	851.08	888.04	929.68	970.80	1016.09	1061.89	1111.35	1160.80	1214.41	1268.55	1326.33	1354.96	1412.74	1462.71	1495.50	1536.62	1561.62
Kaiser Permanente	Full	HMO C	396.22	430.18	443.16	456.14	470.12	469.83	484.31	499.29	499.29	499.29	499.29	501.28	511.27	523.25	542.72	558.70	566.69	578.67	590.66	598.15	606.13	610.13	614.12	618.12	622.11	630.10	638.09	650.07	661.56	677.53	697.50	720.97	748.93	780.39	816.33	851.78	891.73	931.17	974.61	1018.55	1065.98	1113.41	1164.84	1216.76	1272.18	1299.64	1355.06	1403.00	1434.45	1473.89	1497.87
Sharp Health Plan	Premier	HMO A	387.44	421.88	435.05	448.22	462.40	476.58	491.27	506.46	506.46	506.46	506.46	508.49	518.62	530.77	550.52	566.73	574.83	586.99	599.14	606.74	614.84	618.89	622.95	627.00	631.05	639.15	647.26	659.41	671.06	687.27	707.52	731.33	759.69	791.60	828.06	864.02	904.54	944.55	988.61	1033.18	1081.29	1129.41	1181.57	1234.24	1290.46	1318.32	1374.53	1423.15	1455.06	1495.07	1519.38
Sharp Health Plan	Performance	HMO B	415.31	452.23	466.34	480.46	495.66	510.86	526.60	542.89	542.89	542.89	542.89	545.06	555.92	568.95	590.12	607.49	616.18	629.21	642.24	650.38	659.07	663.41	667.75	672.10	676.44	685.13	693.81	706.84	719.33	736.70	758.42	783.93	814.34	848.54	887.63	926.17	969.60	1012.49	1059.72	1107.50	1159.07	1210.64	1266.56	1323.02	1383.28	1413.14	1473.40	1525.52	1559.72	1602.61	1628.67
Sharp Health Plan	Premier	HMO C	388.91	423.48	436.70	449.92	464.15	478.39	493.13	508.38	508.38	508.38	508.38	510.41	520.58	532.78	552.61	568.88	577.01	589.21	601.41	609.04	617.17	621.24	625.31	629.37	633.44	641.58	649.71	661.91	673.60	689.87	710.21	734.10	762.57	794.60	831.20	867.30	907.97	948.13	992.36	1037.10	1085.39	1133.69	1186.05	1238.92	1295.35	1323.31	1379.74	1428.55	1460.58	1500.74	1525.14
Sutter Health Plan	Sutter Health Plan	HMO A	523.22	569.73	587.51	605.30	624.45	643.60	663.43	683.96	683.96	683.96	683.96	686.69	700.37	716.78	743.45	765.34	776.28	792.70	809.11	819.37	830.32	835.79	841.26	846.73	852.20	863.15	874.09	890.50	906.24	928.12	955.48	987.63	1025.93	1069.02	1118.26	1166.82	1221.54	1275.57	1335.07	1395.26	1460.24	1525.21	1595.66	1666.79	1742.71	1780.32	1856.24	1921.90	1964.99	2019.02	2051.84
UnitedHealthcare	SignatureValue	HMO A	497.85	542.11	559.03	575.95	594.17	612.39	631.27	650.79	650.79	650.79	650.79	653.39	666.41	682.03	707.41	728.23	738.65	754.27	769.88	779.65	790.06	795.27	800.47	805.68	810.88	821.30	831.71	847.33	862.30	883.12	909.15	939.74	976.19	1017.18	1064.04	1110.25	1162.31	1213.72	1270.34	1327.61	1389.44	1451.26	1518.29	1585.98	1658.21	1694.01	1766.24	1828.72	1869.72	1921.13	1952.37
UnitedHealthcare	SignatureValue	HMO B	539.23	587.16	605.48	623.81	643.55	663.28	683.72	704.87	704.87	704.87	704.87	707.69	721.79	738.70	766.19	788.75	800.03	816.94	833.86	844.43	855.71	861.35	866.99	872.63	878.27	889.55	900.82	917.74	933.95	956.51	984.70	1017.83	1057.31	1101.71	1152.46	1202.51	1258.90	1314.58	1375.91	1437.93	1504.90	1571.86	1644.46	1717.77	1796.01	1834.78	1913.02	1980.68	2025.09	2080.78	2114.61
UnitedHealthcare	Alliance	HMO C	432.13	470.54	485.22	499.91	515.73	531.54	547.92	564.87	564.87	564.87	564.87	567.13	578.43	591.98	614.01	632.09	641.13	654.68	668.24	676.71	685.75	690.27	694.79	699.31	703.83	712.87	721.90	735.46	748.45	766.53	789.12	815.67	847.31	882.89	923.56	963.67	1008.86	1053.48	1102.63	1152.33	1206.00	1259.66	1317.84	1376.59	1439.29	1470.36	1533.06	1587.28	1622.87	1667.50	1694.61
UnitedHealthcare	SignatureValue	HMO D	517.48	563.47	581.06	598.65	617.59	636.53	656.15	676.44	676.44	676.44	676.44	679.15	692.67	708.91	735.29	756.94	767.76	783.99	800.23	810.38	821.20	826.61	832.02	837.43	842.84	853.67	864.49	880.72	896.28	917.93	944.99	976.78	1014.66	1057.28	1105.98	1154.01	1208.12	1261.56	1320.41	1379.94	1444.20	1508.46	1578.13	1648.48	1723.57	1760.77	1835.86	1900.80	1943.41	1996.85	2029.32
UnitedHealthcare	SignatureValue	HMO E	530.66	577.83	595.86	613.90	633.32	652.74	672.86	693.67	693.67	693.67	693.67	696.44	710.32	726.97	754.02	776.22	787.32	803.96	820.61	831.02	842.12	847.66	853.21	858.76	864.31	875.41	886.51	903.16	919.11	941.31	969.06	1001.66	1040.51	1084.21	1134.15	1183.40	1238.89	1293.69	1354.04	1415.09	1480.99	1546.88	1618.33	1690.47	1767.47	1805.62	1882.62	1949.21	1992.91	2047.71	2081.01
UnitedHealthcare	Alliance	HMO F	449.15	489.08	504.34	519.61	536.05	552.49	569.52	587.13	587.13	587.13	587.13	589.48	601.22	615.31	638.21	657.00	666.39	680.48	694.57	703.38	712.78	717.47	722.17	726.87	731.56	740.96	750.35	764.44	777.95	796.74	820.22	847.82	880.70	917.68	959.96	1001.64	1048.61	1095.00	1146.08	1197.75	1253.52	1309.30	1369.77	1430.84	1496.01	1528.30	1593.47	1649.84	1686.82	1733.21	1761.39
UnitedHealthcare	Alliance	HMO G	460.60	501.54	517.20	532.85	549.71	566.57	584.03	602.09	602.09	602.09	602.09	604.50	616.54	630.99	654.47	673.74	683.37	697.82	712.27	721.30	730.94	735.75	740.57	745.39	750.20	759.84	769.47	783.92	797.77	817.04	841.12	869.42	903.14	941.07	984.42	1027.17	1075.33	1122.90	1175.28	1228.26	1285.46	1342.66	1404.68	1467.29	1534.13	1567.24	1634.07	1691.87	1729.80	1777.37	1806.27
UnitedHealthcare	Harmony	HMO H	425.78	463.62	478.09	492.56	508.15	523.73	539.87	556.57	556.57	556.57	556.57	558.80	569.93	583.29	604.99	622.80	631.71	645.06	658.42	666.77	675.68	680.13	684.58	689.03	693.49	702.39	711.30	724.65	737.46	755.27	777.53	803.69	834.86	869.92	909.99	949.51	994.03	1038.00	1086.42	1135.40	1188.28	1241.15	1298.48	1356.36	1418.14	1448.75	1510.53	1563.96	1599.03	1642.99	1669.71
UnitedHealthcare	Harmony	HMO I	453.84	494.18	509.60	525.03	541.64	558.25	575.45	593.25	593.25	593.25	593.25	595.62	607.49	621.73	644.86	663.85	673.34	687.58	701.81	710.71	720.21	724.95	729.70	734.44	739.19	748.68	758.17	772.41	786.06	805.04	828.77	856.65	889.88	927.25	969.96	1012.08	1059.54	1106.41	1158.02	1210.23	1266.59	1322.95	1384.05	1445.75	1511.60	1544.23	1610.08	1667.03	1704.41	1751.27	1779.75
UnitedHealthcare	Harmony	HMO M	461.16	502.15	517.82	533.50	550.37	567.25	584.74	602.82	602.82	602.82	602.82	605.23	617.29	631.76	655.27	674.56	684.20	698.67	713.14	722.18	731.82	736.65	741.47	746.29	751.11	760.76	770.40	784.87	798.74	818.03	842.14	870.47	904.23	942.21	985.61	1028.41	1076.64	1124.26	1176.70	1229.75	1287.02	1344.29	1406.38	1469.07	1535.99	1569.14	1636.05	1693.92	1731.90	1779.52	1808.46
UnitedHealthcare	Alliance	HMO N	468.03	509.64	525.54	541.45	558.58	575.71	593.46	611.81	611.81	611.81	611.81	614.26	626.49	641.18	665.04	684.62	694.40	709.09	723.77	732.95	742.74	747.63	752.53	757.42	762.32	772.10	781.89	796.58	810.65	830.23	854.70	883.45	917.72	956.26	1000.31	1043.75	1092.69	1141.03	1194.25	1248.09	1306.21	1364.34	1427.35	1490.98	1558.89	1592.54	1660.45	1719.19	1757.73	1806.06	1835.43
UnitedHealthcare	Harmony	HMO O	442.56	481.90	496.94	511.98	528.18	544.38	561.15	578.51	578.51	578.51	578.51	580.82	592.39	606.28	628.84	647.35	656.61	670.49	684.38	693.05	702.31	706.94	711.57	716.20	720.82	730.08	739.34	753.22	766.53	785.04	808.18	835.37	867.77	904.21	945.86	986.94	1033.22	1078.92	1129.25	1180.16	1235.12	1290.08	1349.66	1409.83	1474.04	1505.86	1570.08	1625.61	1662.06	1707.76	1735.53
Western Health	Full	HMO B	464.61	505.91	521.70	537.49	554.49	571.50	589.11	607.33	607.33	607.33	607.33	609.76	621.91	636.48	660.17	679.60	689.32	703.90	718.47	727.58	737.30	742.16	747.02	751.88	756.73	766.45	776.17	790.75	804.71	824.15	848.44	876.99	911.00	949.26	992.99	1036.11	1084.69	1132.67	1185.51	1238.96	1296.65	1354.35	1416.90	1480.07	1547.48	1580.88	1648.30	1706.60	1744.86	1792.84	1821.99
Western Health	Full	HMO C	459.94	500.82	516.45	532.08	548.92	565.75	583.19	601.22	601.22	601.22	601.22	603.63	615.65	630.08	653.53	672.77	682.39	696.82	711.25	720.27	729.89	734.70	739.51	744.32	749.13	758.75	768.36	782.79	796.62	815.86	839.91	868.17	901.84	939.71	983.00	1025.69	1073.79	1121.28	1173.59	1226.50	1283.61	1340.73	1402.66	1465.18	1531.92	1564.99	1631.72	1689.44	1727.32	1774.81	1803.66
Western Health	Full	HMO D	434.40	473.01	487.78	502.54	518.44	534.34	550.81	567.84	567.84	567.84	567.84	570.11	581.47	595.10	617.24	635.42	644.50	658.13	671.76	680.28	689.36	693.90	698.45	702.99	707.53	716.62	725.70	739.33	752.39	770.56	793.28	819.96	851.76	887.54	928.42	968.74	1014.17	1059.03	1108.43	1158.40	1212.34	1266.29	1324.78	1383.83	1446.86	1478.09	1541.12	1595.64	1631.41	1676.27	1703.52

Health Care Service Plan rates will vary by county

THE INFORMATION PROVIDED HEREIN, INCLUDING THE RATING INFORMATION IS PROVIDED ON TO YOU ON AN “AS IS” “AS AVAILABLE” BASIS WITHOUT WARRANTY OF ANY KIND, EXPRESS OR IMPLIED. WE FURTHER DISCLAIM ALL LIABILITY RELATED TO THE INFORMATION, INCLUDING THOSE CAUSED BY RATING DISCREPANCIES. FINAL RATES AND RATING AREAS ARE BASED UPON ACTUAL ENROLLMENT AND UNDERWRITING AND MUST BE APPROVED BY THE APPLICABLE INSURANCE CARRIER.