State/Region: Nevada

Voluntary - Standard Rates for New Business Only Group Size: 5-50 employees Effective Dates: 1/1/2023 - 12/31/2023 Rate Guarantee: 2 year Contribution: Not required Participation: A minimum of 5 eligible employees with 2 enrolled is required. Commission: 10.00%

	A Plans	B Plans
Frames	Once every calendar year	Once every two calendar years
Lenses	Once every calendar year	Once every calendar year
Contacts	Once every calendar year	Once every calendar year

	Contract	Copayments		Allowances		Group Size 5-9			Group Size 10-50				
	Code	Exam	Materials	Frames	Contacts	Employee Only	Employee + Spouse	Employee + Child(ren)	Employee + Family	Employee Only	Employee + Spouse	Employee + Child(ren)	Employee + Family
A plans													
MO.A.10.130.130	4BQT	N/A	\$10	\$130	\$130	\$7.04	\$14.09	\$14.45	\$23.93	\$7.04	\$14.09	\$14.45	\$23.93
MO.A.10.150.150	4C5B	N/A	\$10	\$150	\$150	\$7.66	\$15.31	\$15.60	\$25.87	\$7.66	\$15.31	\$15.60	\$25.87
MO.A.20.130.130	4C5W	N/A	\$20	\$130	\$130	\$6.47	\$12.93	\$13.33	\$22.06	\$6.47	\$12.93	\$13.33	\$22.06

	Contract	Copayments		Allowances		Group Size 5-9			Group Size 10-50				
	Code	Exam	Materials	Frames	Contacts	Employee Only	Employee + Spouse	Employee + Child(ren)	Employee + Family	Employee Only	Employee + Spouse	Employee + Child(ren)	Employee + Family
B plans													
MO.B.10.130.130 MO.B.10.150.150 MO.B.20.130.130	4C8V 4BHF 4CAW	N/A N/A N/A	\$10 \$10 \$20	\$130 \$150 \$130	\$130 \$150 \$130	\$6.53 \$7.09 \$6.00	\$13.05 \$14.17 \$12.01	\$13.38 \$14.43 \$12.36	\$22.16 \$23.93 \$20.46	\$6.53 \$7.09 \$6.00	\$13.05 \$14.17 \$12.01	\$13.38 \$14.43 \$12.36	\$22.16 \$23.93 \$20.46

Plan Selected:	Group Size Selected:	5-9	đ	10-50
Group Signature:	Date:			

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Blue View VisionSM Monthly Rates