Rate Guide Summary

10/01/20 - 12/01/20

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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. 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 under the age of 21. Add the rates for the Employee and each applicable dependent to determine the total premium.

For dependent children ages 21-25, premium rates are charged individually based on age of dependent.

Rate Guide Summary - CaliforniaChoice® County Service/Rate Area Index

10/01/20 - 12/01/20

CaliforniaChoice® Your Health. Your Choice.®

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

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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																							
Advantage PPO		SR	SR	SR	SR	SR	SR	SR	SR	SR	SR	SR	SR	SR	SR	SR	SR	SR	SR	SR	SR	SR	SR
CaliforniaCare HMO		R	SR	SR	R	R	SR	R	SR	SR	R	SR	R	SR	R	R	R	R	R	R	R	SR	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
Health Net																							
CommunityCare		R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R
Full		R	R	R	R	R	R	R	R	R	R	R	R	SR	R	R	R	R	R	R	R	R	R
Salud HMO y Mas		R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R
WholeCare		R	R	R	R	R	R	R	R	R	R	R	R	SR	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
Oscar																							
Oscar EPO		R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R
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 Plus																							
Sutter Health Plus																			SR				
UnitedHealthcare																							
Advantage																							
Alliance																							
Focus																							
SignatureValue														SR									
Western Health Advantage																							
Full		R	R	R	R	SR	R	R	R	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																								
Advantage PPO		SR	SR	SR	SR		SR	SR	SR	SR		SR		SR		SR		SR		SR		SR	SR	SR
CaliforniaCare HMO		SR	SR	SR	SR		SR	SR	SR	SR		SR		SR		SR		SR		SR		SR	R	SR
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
Health Net																								
CommunityCare		R	R	R	R		R	R	R	R		R		R		R		R		R		R	R	R
Full		SR	SR	SR	SR		SR	SR	SR	SR		SR		SR		SR		SR		SR		R	R	SR
Salud HMO y Mas		R	R	R	R		R	R	R	R		R		R		R		R		R		R	R	R
WholeCare		SR	SR	SR	SR		SR	SR	SR	SR		SR		SR		SR		SR		SR		R	R	SR
Kaiser Permanente																								
Full		SR	SR	SR	SR		SR	SR	SR	SR		SR		SR		SR		SR		SR		R	R	SR
Oscar																								
Oscar EPO		R	R	R	R		R	R	R	R		R		R		R		R		R		R	R	R
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 Plus																								
Sutter Health Plus				SR	SR		SR	SR	SR	SR		SR		SR		SR		SR		SR				SR
UnitedHealthcare																								
Advantage		SR		SR	SR			SR	SR	SR		SR		SR		SR		SR		SR				SR
Alliance																								
Focus								SR	SR	SR		SR		SR		SR		SR		SR				SR
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																															
Advantage PPO		SR	SR	SR	SR	SR		SR	SR	SR		SR	SR	SR		SR	SR	SR		SR		SR		SR		SR	SR		SR		SR
CaliforniaCare HMO		R	SR	SR	SR	SR		SR	SR	SR		SR	SR	SR		SR	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
Health Net																															
CommunityCare		R	R	R	R	R		R	R	R		R	R	R		R	R	R		R		SR		SR		R	R		SR		SR
Full		R	SR	SR	SR	SR		SR	SR	SR		R	SR	SR		R	R	R		SR		SR		SR		SR	SR		SR		SR
Salud HMO y Mas		R	R	R	R	R		R	R	R		R	R	R		R	R	R		SR		SR		SR		SR	SR		SR		SR
WholeCare		R	SR	SR	SR	SR		SR	SR	SR		R	SR	SR		R	R	R		SR		SR		SR		SR	SR		SR		SR
Kaiser Permanente																															
Full		SR	R	SR	SR	SR		SR	SR	SR		R	R	SR		SR	R	R		SR		SR		SR		SR	SR		SR		SR
Oscar																															
Oscar EPO		R	R	R	R	R		R	R	R		R	R	R		R	R	R		R		SR		SR		R	R		SR		R
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 Plus																															
Sutter Health Plus				SR	SR																										
UnitedHealthcare																															
Advantage				SR	SR								SR	SR						SR		SR		SR		SR	SR		SR		SR
Alliance								SR	SR	SR		SR		SR						SR		SR		SR		SR	SR		SR		SR
Focus				SR	SR								SR	SR								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 10/01/20 - 12/01/20

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.

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Anthem Blue Cross - Advantage PPO

Area 1:	ALPINE except 95223; AMADOR except 95646; CALAVERAS except 95250; COLUSA except 95988; HUMBOLDT except 95563, 95587; MENDOCINO except 95542; PLUMAS except 95981, 96063; SUTTER except 95648; TEHAMA except 96007; TRINITY except 95543; TUOLUMNE except 95230, 95314
Area 2:	MARIN except 94952; NAPA except 94589-94590, 95461; SOLANO except 94558; SONOMA except 94574, 95461
Area 3:	EL DORADO except 95666; PLACER except 95692, 95724, 96162; SACRAMENTO except 94246, 95887; YOLO except 95620
Area 4:	SAN FRANCISCO except 94014, 94128, 94153-94154, 94156, 94162, 94171, 94199, 96643
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; SANTA CRUZ except 94060
Area 10:	MARIPOSA except 95369; MERCED except 95316, 95360; SAN JOAQUIN except 94505, 95214; TULARE except 93230
Area 11:	FRESNO except 93603, 93633, 93647; MADERA except 93630
Area 12:	SAN LUIS OBISPO except 93458; VENTURA except 93225
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 91786, 91795, 91797
Area 16:	LOS ANGELES Zips starting with 900-905, 913-914, 916, 923, 928, 932 except 90101, 90103, 90134, 91400
Area 17:	RIVERSIDE except 91708, 92275; SAN BERNARDINO except 91752, 91759, 92320, 92326, 92412, 92414, 92424, 92509, 93558
Area 18:	ORANGE except 92725
Area 19:	SAN DIEGO except 91947, 92162, 92164, 92184

Anthem Blue Cross - CaliforniaCare HMO

Area 1:	HUMBOLDT except 95526, 95552, 95563, 95587; NEVADA except 95960
Area 2:	Service and Rates apply to all ZIP codes in this Area
Area 3:	PLACER except 95668, 95692, 95724, 96162
Area 4:	SAN FRANCISCO except 96643
Area 5:	CONTRA COSTA except 94557
Area 6:	Service and Rates apply to all ZIP codes in this Area
Area 7:	Service and Rates apply to all ZIP codes in this Area
Area 8:	Service and Rates apply to all ZIP codes in this Area
Area 9:	Service and Rates apply to all ZIP codes in this Area
Area 10:	Service and Rates apply to all ZIP codes in this Area
Area 11:	Service and Rates apply to all ZIP codes in this Area
Area 12:	Service and Rates apply to all ZIP codes in this Area
Area 13:	IMPERIAL except 92225
Area 14:	KERN except 93219, 93268, 93461, 93501-93502, 93527
Area 15:	LOS ANGELES Zips starting with 906-908, 910-912, 915, 917-918, 935 except 90671, 90899, 91526, 91714, 91786, 91795, 91797, 91804, 91896, 91899
Area 16:	LOS ANGELES Zips starting with 900-905, 913-914, 916, 923, 928, 932 except 90099, 90101, 90103, 90134, 90233, 90311, 91382, 91400, 91618
Area 17:	RIVERSIDE except 91708, 92225-92226, 92239, 92275, 92515; SAN BERNARDINO except 91752, 91759, 91792, 92242, 92267, 92280, 92304, 92320, 92326, 92365, 92412, 92414, 92424, 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

Area 1:	ALPINE except 95223; AMADOR except 95646; CALAVERAS except 95250; COLUSA except 95988; HUMBOLDT except 95563, 95587; MENDOCINO except 95542; PLUMAS except 95981, 96063; SUTTER except 95648; TEHAMA except 96007; TRINITY except 95543; TUOLUMNE except 95230, 95314
Area 2:	MARIN except 94952; NAPA except 94589-94590, 95461; SOLANO except 94558; SONOMA except 94574, 95461
Area 3:	EL DORADO except 95666; PLACER except 95692, 95724, 96162; SACRAMENTO except 94246, 95887; YOLO except 95620
Area 4:	SAN FRANCISCO except 94014, 94128, 94153-94154, 94156, 94162, 94171, 94199, 96643
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; SANTA CRUZ except 94060
Area 10:	MARIPOSA except 95369; MERCED except 95316, 95360; SAN JOAQUIN except 94505, 95214; TULARE except 93230
Area 11:	FRESNO except 93603, 93633, 93647; MADERA except 93630
Area 12:	SAN LUIS OBISPO except 93458; VENTURA except 93225
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 91786, 91795, 91797
Area 16:	LOS ANGELES Zips starting with 900-905, 913-914, 916, 923, 928, 932 except 90101, 90103, 90134, 91400
Area 17:	RIVERSIDE except 91708, 92275; SAN BERNARDINO except 91752, 91759, 92320, 92326, 92412, 92414, 92424, 92509, 93558
Area 18:	ORANGE except 92725
Area 19:	SAN DIEGO except 91947, 92162, 92164, 92184

Anthem Blue Cross - Select HMO

Area 1:	NEVADA except 95724, 95728, 96111, 96160-96162
Area 2:	Rate Area Only, No Service
Area 3:	PLACER except 95668, 95692, 95715, 95724, 96140-96141, 96143, 96145-96146, 96148, 96161-96162; SACRAMENTO except 94246, 95887; YOLO except 95620, 95645, 95912
Area 4:	SAN FRANCISCO except 94014, 94128, 94153-94154, 94156, 94162, 94171, 94199, 96643
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:	Rate Area Only, No Service
Area 9:	SANTA CRUZ except 94060
Area 10:	MERCED except 93610, 95316, 95360; SAN JOAQUIN except 94505, 95214; TULARE except 93212, 93230
Area 11:	FRESNO except 93245, 93603, 93633, 93647
Area 12:	VENTURA except 93013, 93225
Area 13:	IMPERIAL except 92004, 92222, 92225, 92266, 92283
Area 14:	KERN except 93219, 93461, 93555-93556, 93558
Area 15:	LOS ANGELES Zips starting with 906-908, 910-912, 915, 917-918, 935 except 90704, 91786, 91795, 91797
Area 16:	LOS ANGELES Zips starting with 900-905, 913-914, 916, 923, 928, 932 except 90101, 90103, 90134, 91400
Area 17:	RIVERSIDE except 91708, 92225-92226, 92239, 92275; SAN BERNARDINO except 91752, 91759, 92242, 92267, 92280, 92304, 92309-92310, 92317, 92320-92323, 92325-92327, 92332, 92338, 92352, 92363-92366, 92378, 92385, 92391, 92412, 92414, 92424, 92509, 93555, 93558, 93562, 93592
Area 18:	ORANGE except 92725
Area 19:	SAN DIEGO except 91901, 91905-91906, 91916-91917, 91934-91935, 91947-91948, 91962-91963, 91980, 92004, 92036, 92059, 92061, 92066, 92086, 92162, 92164, 92184

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Anthem Blue Cross - Select PPO

Area 1:	ALPINE except 95223; AMADOR except 95646; CALAVERAS except 95250; COLUSA except 95988; HUMBOLDT except 95563, 95587; MENDOCINO except 95542; PLUMAS except 95981, 96063; SUTTER except 95648; TEHAMA except 96007; TRINITY except 95543; TUOLUMNE except 95230, 95314
Area 2:	MARIN except 94952; NAPA except 94589-94590, 95461; SOLANO except 94558; SONOMA except 94574, 95461
Area 3:	EL DORADO except 95666; PLACER except 95692, 95724, 96162; SACRAMENTO except 94246, 95887; YOLO except 95620
Area 4:	SAN FRANCISCO except 94014, 94128, 94153-94154, 94156, 94162, 94171, 94199, 96643
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; SANTA CRUZ except 94060
Area 10:	MARIPOSA except 95369; MERCED except 95316, 95360; SAN JOAQUIN except 94505, 95214; TULARE except 93230
Area 11:	FRESNO except 93603, 93633, 93647; MADERA except 93630
Area 12:	SAN LUIS OBISPO except 93458; VENTURA except 93225
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 91786, 91795, 91797
Area 16:	LOS ANGELES Zips starting with 900-905, 913-914, 916, 923, 928, 932 except 90101, 90103, 90134, 91400
Area 17:	RIVERSIDE except 91708, 92275; SAN BERNARDINO except 91752, 91759, 92320, 92326, 92412, 92414, 92424, 92509, 93558
Area 18:	ORANGE except 92725
Area 19:	SAN DIEGO except 91947, 92162, 92164, 92184

Health Net - CommunityCare

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:	LOS ANGELES Zips starting with 906-908, 910-912, 915, 917-918, 935 except 90623, 90630-90631, 90704, 91709, 91759, 91786, 91795, 91797, 93560
Area 16:	LOS ANGELES Zips starting with 900-905, 913-914, 916, 923, 928, 932 except 90090, 90101, 90103, 90134, 90189, 91361-91362, 91400, 93243
Area 17:	Rate Area Only, No Service
Area 18:	ORANGE except 90638, 92725
Area 19:	SAN DIEGO except 91947, 91987, 92096, 92162, 92164, 92184

Health Net - Full

Area 1:	NEVADA 95712, 95924, 95945-95946, 95949, 95959-95960, 95975
Area 2:	MARIN except 94952; NAPA except 94589-94590, 95461; SOLANO except 94558; SONOMA except 94574, 95461
Area 3:	EL DORADO except 95629, 95656, 95666, 95720-95721, 95735, 96142, 96150-96152, 96154-96158; PLACER except 95610, 95626, 95692, 95715, 95717, 95724, 96140-96141, 96143, 96145-96146, 96148, 96161-96162; SACRAMENTO except 94209, 94246, 94286, 95887; YOLO except 95620
Area 4:	SAN FRANCISCO except 94014, 94153-94154, 94156, 94162, 94171, 94199, 96643
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:	SANTA CRUZ except 94060
Area 10:	MERCED except 95316, 95360; SAN JOAQUIN except 94505, 95297; STANISLAUS except 95397; TULARE except 93230, 93527, 93633
Area 11:	FRESNO except 93245, 93603, 93618, 93620, 93633, 93647, 93844, 93888; KINGS except 93246; MADERA except 93620, 93630
Area 12:	VENTURA except 93099, 93225
Area 13:	Rate Area Only, No Service
Area 14:	KERN except 93219, 93461, 93527-93528, 93536, 93554-93556, 93558
Area 15:	LOS ANGELES Zips starting with 906-908, 910-912, 915, 917-918, 935 except 91709, 91759, 91786, 91795, 91797
Area 16:	LOS ANGELES Zips starting with 900-905, 913-914, 916, 923, 928, 932 except 90090, 90101, 90103, 90134, 90189, 91400
Area 17:	RIVERSIDE except 91708, 92028, 92225-92226, 92239, 92275, 92324, 92373, 92399, 92515; SAN BERNARDINO except 91752, 91766, 91792, 92242, 92267, 92280, 92304, 92320, 92323, 92326, 92332, 92338, 92363-92364, 92366, 92412, 92414, 92424, 92509, 92880, 93516, 93555, 93558, 93562, 93592
Area 18:	ORANGE except 92725
Area 19:	SAN DIEGO except 91947, 91987, 92096, 92162, 92164, 92184, 92190

Health Net - Salud HMO y Mas

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:	KERN 93263, 93301-93309, 93311-93314
Area 15:	LOS ANGELES Zips starting with 906-908, 910-912, 915, 917-918, 935 except 90623, 90630-90631, 91709, 91759, 91786, 91795, 91797, 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 90090, 90101, 90103, 90134, 91310, 91321-91322, 91350-91351, 91354-91355, 91361-91362, 91380-91387, 91390, 91400, 93243
Area 17:	RIVERSIDE 91752, 92320, 92501-92509, 92513-92514, 92516-92519, 92521-92522, 92551-92557, 92570-92571, 92599, 92860, 92877-92883; SAN BERNARDINO except 91752, 91766, 91785, 91792, 92242, 92252, 92256, 92267-92268, 92277-92278, 92280, 92284-92286, 92301, 92304-92305, 92307-92312, 92314-92315, 92320, 92323, 92326-92327, 92329, 92332-92333, 92338-92342, 92347, 92356, 92363-92366, 92368, 92371-92372, 92386, 92392-92395, 92397-92398, 92412, 92414, 92424, 92509, 92880, 93516, 93555, 93558, 93562, 93592
Area 18:	ORANGE except 90638, 92725
Area 19:	SAN DIEGO except 91905-91906, 91934, 91947, 91962-91963, 91980, 92004, 92036, 92066, 92086, 92162, 92164, 92184

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Health Net - WholeCare

Area 1:	NEVADA 95712, 95924, 95945-95946, 95949, 95959-95960, 95975
Area 2:	MARIN except 94952; NAPA except 94589-94590, 95461, 95476; SOLANO except 94503, 94558, 95616, 95618, 95690, 95694; SONOMA except 94515, 94574, 95461
Area 3:	EL DORADO except 95629, 95656, 95666, 95720-95721, 95735, 96142, 96150-96152, 96154-96158; PLACER except 95610, 95626, 95692, 95715, 95717, 95724, 96140-96141, 96143, 96145-96146, 96148, 96161-96162; SACRAMENTO except 94209, 94246, 94286, 94571, 95678, 95887; YOLO except 95615, 95620, 95912
Area 4:	SAN FRANCISCO except 94014, 94128, 94153-94154, 94156, 94162, 94171, 94199, 96643
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, 95033, 95076
Area 8:	SAN MATEO except 94112, 94134, 94303
Area 9:	SANTA CRUZ except 94060
Area 10:	MERCED except 93610, 93622, 95316, 95360, 95380; SAN JOAQUIN except 94505, 94514, 95297, 95361, 95632, 95690; STANISLAUS except 95230, 95304, 95322, 95385, 95397; TULARE except 93212, 93215, 93230, 93238, 93527, 93631, 93633, 93641, 93646, 93654
Area 11:	FRESNO except 93245, 93603, 93618, 93620, 93633, 93647, 93844, 93888; KINGS except 93242, 93246, 93631, 93656; MADERA except 93602, 93620, 93622-93623, 93626, 93630, 93720
Area 12:	SANTA BARBARA except 93252; VENTURA except 90265, 91304, 91307, 91311, 93013, 93099, 93225, 93252
Area 13:	Rate Area Only, No Service
Area 14:	KERN except 93219, 93461, 93527-93528, 93536, 93554-93556, 93558
Area 15:	LOS ANGELES Zips starting with 906-908, 910-912, 915, 917-918, 935 except 90623, 90630-90631, 91709, 91759, 91786, 91795, 91797, 93560
Area 16:	LOS ANGELES Zips starting with 900-905, 913-914, 916, 923, 928, 932 except 90090, 90101, 90103, 90134, 90189, 91361-91362, 91400, 93243
Area 17:	RIVERSIDE except 91708, 92028, 92225-92226, 92239, 92275, 92324, 92373, 92399, 92515; SAN BERNARDINO except 91752, 91766, 91792, 92242, 92267, 92280, 92304, 92309-92310, 92320, 92323, 92326, 92332, 92338, 92363-92364, 92366, 92412, 92414, 92424, 92509, 92880, 93516, 93555, 93558, 93562, 93592
Area 18:	ORANGE except 90638, 92725
Area 19:	SAN DIEGO except 91947, 91987, 92096, 92162, 92164, 92184

Kaiser Permanente - Full

Area 1:	AMADOR 95640, 95669; SUTTER except 95648, 95948, 95953, 95957, 95982, 95991-95993; 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, 96140-96141, 96143, 96145-96146, 96148, 96161-96162; SACRAMENTO except 94245-94246, 94286, 94299, 95887; YOLO except 95606, 95620, 95627, 95637, 95653, 95679, 95912, 95937
Area 4:	SAN FRANCISCO except 94014, 94153-94154, 94156, 94162, 94171, 94199, 96643
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:	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, 91709, 91786, 91795, 91797
Area 16:	LOS ANGELES Zips starting with 900-905, 913-914, 916, 923, 928, 932 except 90101, 90103, 90134, 91400
Area 17:	RIVERSIDE except 91708, 92225-92226, 92239, 92275, 92515, 92536, 92539, 92549, 92561; SAN BERNARDINO except 91752, 91792, 92242, 92267, 92280, 92301, 92304, 92309-92312, 92320, 92323, 92326-92327, 92332, 92338, 92342, 92347, 92356, 92363-92366, 92368, 92398, 92412, 92414, 92424, 92509, 93516, 93555, 93558, 93562, 93592
Area 18:	ORANGE except 92725
Area 19:	SAN DIEGO except 91905-91906, 91934, 91947-91948, 92004, 92036, 92066, 92070, 92162, 92164, 92184, 92190

Oscar Health Plan Of California - Oscar EPO

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:	LOS ANGELES Zips starting with 906-908, 910-912, 915, 917-918, 935 except 90671, 90704, 90834-90835, 90899, 91526, 91709, 91714, 91759, 91786, 91795, 91797, 91804, 91896, 91899, 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 90099, 90101, 90103, 90134, 90233, 90311, 91382, 91400, 91618
Area 17:	Rate Area Only, No Service
Area 18:	ORANGE except 92725
Area 19:	Rate Area Only, No Service

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, 92162, 92184

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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, 92162, 92184

Sutter Health Plus - Sutter Health Plus

Area 1:	SUTTER 95645, 95659, 95668
Area 2:	SOLANO except 94558; SONOMA except 94515, 94574, 94922-94923, 94926, 95412, 95416, 95431, 95433, 95461, 95476, 95480, 95487, 95497
Area 3:	EL DORADO 95614, 95635, 95651, 95664, 95672, 95682, 95762; PLACER 95602-95603, 95648, 95650, 95658, 95661, 95663, 95677-95678, 95681, 95703, 95713, 95722, 95746-95747, 95765; SACRAMENTO except 94207-94208, 94211, 94234, 94245-94246, 94282, 94286, 94291, 94299, 95887; YOLO except 95620
Area 4:	SAN FRANCISCO except 94014, 94153-94154, 94156, 94160-94162, 94171, 94199, 96643
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:	No Rate or Service
Area 12:	No Rate or Service
Area 13:	No Rate or Service
Area 14:	No Rate or Service
Area 15:	No Rate or Service
Area 16:	No Rate or Service
Area 17:	No Rate or Service
Area 18:	No Rate or Service
Area 19:	No Rate or Service

Unitedhealthcare Of California - Advantage

Area 1:	No Rate or Service
Area 2:	MARIN except 94952; SOLANO 94510, 94591; SONOMA 94928, 94931, 94951-94952, 94954, 95442, 95452, 95476
Area 3:	PLACER except 95610, 95626, 95668, 95692, 95715, 95724, 96140-96141, 96143, 96145-96146, 96148, 96161-96162; SACRAMENTO except 94571, 95678; YOLO except 95615, 95620, 95912
Area 4:	SAN FRANCISCO except 94014, 94128, 94199, 96643
Area 5:	CONTRA COSTA except 94505, 94514, 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, 95020-95021, 95023, 95033, 95037-95038, 95046, 95076
Area 8:	SAN MATEO except 94112, 94134, 94303
Area 9:	SANTA CRUZ except 94060
Area 10:	SAN JOAQUIN except 94505, 94514, 95214, 95361, 95632, 95690; STANISLAUS except 95230, 95304, 95322, 95385
Area 11:	No Rate or Service
Area 12:	SANTA BARBARA except 93252, 93254, 93427, 93429, 93434, 93436-93438, 93440-93441, 93454-93458, 93460, 93463-93464; VENTURA except 90265, 91304, 91307, 91311, 93013, 93225, 93252
Area 13:	No Rate or Service
Area 14:	KERN except 93219, 93461, 93536, 93558
Area 15:	LOS ANGELES Zips starting with 906-908, 910-912, 915, 917-918, 935 except 90623, 90630-90631, 90704, 91709, 91786, 91795, 91797, 93560
Area 16:	LOS ANGELES Zips starting with 900-905, 913-914, 916, 923, 928, 932 except 90103, 90134, 91361-91362, 91400, 93243
Area 17:	RIVERSIDE except 91708, 92028, 92225-92226, 92239, 92248, 92275, 92320, 92324, 92373, 92399, 92536, 92539, 92561; SAN BERNARDINO except 91752, 91759, 91766, 91792, 92242, 92252, 92256, 92267-92268, 92280, 92285, 92304-92305, 92309-92312, 92314-92315, 92317, 92320-92323, 92325-92327, 92329, 92331-92333, 92338-92339, 92341-92342, 92347, 92352, 92356, 92358, 92363-92366, 92368, 92371-92372, 92378, 92382, 92385-92386, 92391, 92397-92398, 92414, 92424, 92509, 92880, 93516, 93555, 93558, 93562, 93592
Area 18:	ORANGE except 90638, 92725
Area 19:	SAN DIEGO except 91903, 91905-91906, 91931, 91934-91935, 91948, 91962-91963, 91980, 91987, 92003-92004, 92036, 92055, 92059-92061, 92066, 92070, 92086, 92162, 92184

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, 93558
Area 15:	LOS ANGELES Zips starting with 906-908, 910-912, 915, 917-918, 935 except 90623, 90630-90631, 90704, 91709, 91786, 91795, 91797, 93560
Area 16:	LOS ANGELES Zips starting with 900-905, 913-914, 916, 923, 928, 932 except 90103, 90134, 91361-91362, 91400, 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, 92414, 92424, 92509, 92880, 93516, 93555, 93558, 93562, 93592
Area 18:	ORANGE except 90638, 92725
Area 19:	SAN DIEGO except 91901, 91903, 91905-91906, 91916-91917, 91931, 91934, 91948, 91962-91963, 91980, 91987, 92004, 92036, 92066, 92070, 92086, 92162, 92184

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Unitedhealthcare Of California - Focus

Area 1:	No Rate or Service
Area 2:	No Rate or Service
Area 3:	PLACER except 95610, 95626, 95668, 95692, 95701, 95714-95715, 95717, 95724, 96140-96141, 96143, 96145-96146, 96148, 96161-96162; SACRAMENTO except 94571, 95678; YOLO except 95606, 95615, 95620, 95637, 95645, 95679, 95912
Area 4:	SAN FRANCISCO except 94014, 94128, 94199, 96643
Area 5:	CONTRA COSTA except 94505, 94509, 94511, 94513-94514, 94517, 94523, 94531, 94548, 94551, 94557, 94561, 94588, 94611, 94706-94708
Area 6:	ALAMEDA except 94505, 94514, 94583, 95035, 95304, 95377, 95391
Area 7:	SANTA CLARA except 94022-94024, 94028, 94301-94306, 94309, 94539, 94550, 95020-95021, 95023, 95026, 95031, 95033, 95037-95038, 95044, 95046, 95076, 95140
Area 8:	SAN MATEO except 94020-94021, 94037-94038, 94044, 94060, 94074, 94112, 94134, 94303, 94401
Area 9:	SANTA CRUZ except 94060
Area 10:	SAN JOAQUIN except 94505, 94514, 95214, 95361, 95632, 95690; STANISLAUS except 95230, 95304, 95322, 95385
Area 11:	No Rate or Service
Area 12:	SANTA BARBARA except 93252, 93254, 93427, 93429, 93434, 93436-93438, 93440-93441, 93454-93458, 93460, 93463-93464; VENTURA except 90265, 91304, 91307, 91311, 93013, 93225, 93252
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, 91709, 91786, 91795, 91797, 93532, 93534-93536, 93539, 93543, 93550-93552, 93560, 93584, 93586, 93590-93591, 93599
Area 16:	LOS ANGELES Zips starting with 900-905, 913-914, 916, 923, 928, 932 except 90103, 90134, 91361-91362, 91400, 93243
Area 17:	RIVERSIDE except 91708, 92028, 92225-92226, 92239, 92248, 92254, 92275, 92320, 92324, 92373, 92399, 92536, 92539, 92561; SAN BERNARDINO 91701, 91708-91710, 91729-91730, 91737, 91739, 91743, 91758, 91761-91764, 91784-91786, 92284, 92286, 92301, 92307-92308, 92313, 92316, 92318, 92324, 92334-92337, 92340, 92344-92346, 92350, 92354, 92357, 92359, 92369, 92376-92377, 92392-92395, 92401-92408, 92410-92413, 92415, 92418, 92423, 92427
Area 18:	ORANGE except 90638, 92725
Area 19:	SAN DIEGO except 91903, 91905-91906, 91931, 91934-91935, 91948, 91962-91963, 91980, 91987, 92003-92004, 92036, 92040, 92055, 92059-92061, 92066, 92070-92072, 92082, 92086, 92143, 92162, 92173, 92184

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, 96140-96141, 96143, 96145-96146, 96148, 96161-96162; SACRAMENTO except 94571, 95678; YOLO except 95615, 95620, 95912
Area 4:	SAN FRANCISCO except 94014, 94128, 94199, 96643
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, 95033, 95076
Area 8:	SAN MATEO except 94112, 94134, 94303
Area 9:	SANTA CRUZ except 94060
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, 93558
Area 15:	LOS ANGELES Zips starting with 906-908, 910-912, 915, 917-918, 935 except 90623, 90630-90631, 90704, 91709, 91786, 91795, 91797, 93560
Area 16:	LOS ANGELES Zips starting with 900-905, 913-914, 916, 923, 928, 932 except 90103, 90134, 91361-91362, 91400, 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, 92326, 92332, 92363, 92414, 92424, 92509, 92880, 93516, 93555, 93558, 93562, 93592
Area 18:	ORANGE except 90638, 92725
Area 19:	SAN DIEGO except 92162, 92184

Western Health Advantage - Full

Area 1:	COLUSA 95912
Area 2:	MARIN except 94952; 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, 96140-96141, 96143, 96145-96146, 96148, 96161-96162; SACRAMENTO except 95678, 95887; 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

10/01/20 - 12/01/20

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	269.88	293.87	303.05	312.22	322.10	331.98	342.21	352.79	352.79	352.79	352.79	354.20	361.26	369.72	383.48	394.77	400.42	408.88	417.35	422.64	428.29	431.11	433.93	436.75	439.58	445.22	450.87	459.33	467.45	478.74	492.85	509.43	529.19	551.41	576.81	601.86	630.08	657.95	688.65	719.69	753.21	786.72	823.06	859.75	898.91	918.31	957.47	991.34	1013.57	1041.44	1058.37
Anthem Blue Cross	Select PPO	PPO B	251.94	274.33	282.89	291.46	300.68	309.90	319.45	329.33	329.33	329.33	329.33	330.65	337.23	345.14	357.98	368.52	373.79	381.69	389.60	394.54	399.81	402.44	405.08	407.71	410.35	415.61	420.88	428.79	436.36	446.90	460.07	475.55	494.00	514.74	538.45	561.84	588.18	614.20	642.85	671.83	703.12	734.41	768.33	802.58	839.13	857.25	893.80	925.42	946.17	972.18	987.99
Anthem Blue Cross	Prudent Buyer - Small Group	EPO A	268.50	292.37	301.49	310.62	320.44	330.27	340.45	350.98	350.98	350.98	350.98	352.38	359.40	367.83	381.52	392.75	398.36	406.79	415.21	420.47	426.09	428.90	431.71	434.51	437.32	442.94	448.55	456.98	465.05	476.28	490.32	506.82	526.47	548.58	573.85	598.77	626.85	654.58	685.11	716.00	749.34	782.69	818.84	855.34	894.30	913.60	952.56	986.25	1008.37	1036.09	1052.94
Health Net	CommunityCare	HMO A	216.73	236.00	243.36	250.73	258.66	266.59	274.81	283.31	283.31	283.31	283.31	284.44	290.11	296.91	307.96	317.02	321.55	328.35	335.15	339.40	343.94	346.20	348.47	350.74	353.00	357.53	362.07	368.87	375.38	384.45	395.78	409.10	424.96	442.81	463.21	483.32	505.99	528.37	553.02	577.95	604.86	631.78	660.96	690.42	721.87	737.45	768.90	796.10	813.94	836.33	849.93
Kaiser Permanente	Full	HMO A	208.84	226.16	232.78	239.40	246.54	239.68	247.06	254.71	254.71	254.71	254.71	255.72	260.82	266.93	276.87	285.02	289.09	295.20	301.32	305.14	309.21	311.25	313.29	315.33	317.36	321.44	325.51	331.63	337.49	345.64	355.82	367.80	382.06	398.11	416.44	434.53	454.91	475.03	497.19	519.60	543.80	567.99	594.23	620.72	648.99	663.00	691.27	715.72	731.77	751.89	764.13
Kaiser Permanente	Full	HMO C	197.68	214.01	220.26	226.50	233.22	225.96	232.92	240.12	240.12	240.12	240.12	241.08	245.89	251.65	261.01	268.70	272.54	278.30	284.07	287.67	291.51	293.43	295.35	297.27	299.19	303.04	306.88	312.64	318.16	325.85	335.45	346.74	360.19	375.31	392.60	409.65	428.86	447.83	468.72	489.85	512.66	535.48	560.21	585.10	611.83	625.04	651.70	674.75	689.87	708.84	720.36
Oscar	Oscar EPO	EPO A	187.26	203.90	210.26	216.63	223.48	230.34	237.44	244.78	244.78	244.78	244.78	245.76	250.65	256.53	266.07	273.91	277.82	283.70	289.57	293.24	297.16	299.12	301.08	303.04	304.99	308.91	312.83	318.70	324.33	332.16	341.96	353.46	367.17	382.59	400.21	417.59	437.17	456.51	477.81	499.35	522.60	545.86	571.07	596.52	623.70	637.16	664.33	687.83	703.25	722.59	734.34
Oscar	Oscar EPO	EPO B	177.79	193.60	199.64	205.68	212.19	218.70	225.44	232.41	232.41	232.41	232.41	233.34	237.99	243.57	252.63	260.07	263.79	269.36	274.94	278.43	282.15	284.01	285.87	287.72	289.58	293.30	297.02	302.60	307.94	315.38	324.68	335.60	348.62	363.26	379.99	396.49	415.09	433.45	453.67	474.12	496.20	518.28	542.21	566.38	592.18	604.97	630.76	653.07	667.72	686.08	697.23
Oscar	Oscar EPO	EPO C	178.81	194.71	200.78	206.86	213.40	219.95	226.73	233.74	233.74	233.74	233.74	234.68	239.35	244.96	254.08	261.56	265.30	270.91	276.51	280.02	283.76	285.63	287.50	289.37	291.24	294.98	298.72	304.33	309.71	317.19	326.54	337.52	350.61	365.34	382.17	398.76	417.46	435.93	456.26	476.83	499.04	521.24	545.32	569.63	595.57	608.43	634.37	656.81	671.54	690.00	701.22
Sharp Health Plan	Premier	HMO A	172.72	188.07	193.95	199.82	206.14	212.46	219.01	225.78	225.78	225.78	225.78	226.68	231.20	236.62	245.42	252.65	256.26	261.68	267.10	270.48	274.10	275.90	277.71	279.52	281.32	284.93	288.55	293.97	299.16	306.38	315.41	326.03	338.67	352.89	369.15	385.18	403.24	421.08	440.72	460.59	482.04	503.49	526.74	550.23	575.29	587.71	612.77	634.44	648.67	666.50	677.34
Sharp Health Plan	Performance	HMO B	197.55	215.11	221.83	228.54	235.77	243.00	250.49	258.24	258.24	258.24	258.24	259.27	264.44	270.64	280.71	288.97	293.10	299.30	305.50	309.37	313.50	315.57	317.64	319.70	321.77	325.90	330.03	336.23	342.17	350.43	360.76	372.90	387.36	403.63	422.22	440.56	461.22	481.62	504.08	526.81	551.34	575.88	602.47	629.33	658.00	672.20	700.86	725.65	741.92	762.32	774.72
Sutter Health Plus	Sutter Health Plus	HMO A	203.31	221.38	228.29	235.20	242.65	250.09	257.79	265.78	265.78	265.78	265.78	266.83	272.15	278.52	288.89	297.39	301.65	308.02	314.40	318.39	322.64	324.77	326.89	329.02	331.15	335.40	339.65	346.03	352.14	360.65	371.28	383.77	398.65	415.39	434.53	453.40	474.66	495.66	518.78	542.17	567.41	592.66	620.04	647.68	677.18	691.79	721.29	746.81	763.55	784.55	797.29
Sutter Health Plus	Sutter Health Plus	HMO B	201.24	219.13	225.97	232.81	240.18	247.54	255.17	263.07	263.07	263.07	263.07	264.11	269.38	275.69	285.95	294.37	298.57	304.89	311.20	315.15	319.36	321.46	323.57	325.67	327.77	331.98	336.19	342.51	348.56	356.97	367.50	379.86	394.59	411.17	430.11	448.78	469.83	490.61	513.50	536.65	561.64	586.63	613.72	641.08	670.28	684.75	713.95	739.20	755.78	776.56	789.17
Western Health	Full	HMO B	187.12	203.75	210.11	216.47	223.32	230.17	237.26	244.60	244.60	244.60	244.60	245.58	250.47	256.34	265.88	273.71	277.62	283.49	289.36	293.03	296.94	298.90	300.86	302.81	304.77	308.68	312.60	318.47	324.09	331.92	341.71	353.20	366.90	382.31	399.92	417.29	436.85	456.18	477.46	498.98	522.22	545.46	570.65	596.09	623.24	636.69	663.84	687.32	702.73	722.06	733.80
Western Health	Full	HMO C	191.85	208.91	215.43	221.95	228.97	235.99	243.27	250.79	250.79	250.79	250.79	251.79	256.81	262.83	272.61	280.63	284.65	290.67	296.69	300.45	304.46	306.47	308.47	310.48	312.49	316.50	320.51	326.53	332.30	340.32	350.35	362.14	376.19	391.99	410.04	427.85	447.91	467.72	489.54	511.61	535.44	559.26	585.09	611.18	639.01	652.81	680.65	704.72	720.52	740.33	752.37

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	323.13	351.85	362.83	373.82	385.64	397.47	409.72	422.39	422.39	422.39	422.39	424.08	432.53	442.66	459.14	472.65	479.41	489.55	499.69	506.02	512.78	516.16	519.54	522.92	526.30	533.06	539.81	549.95	559.67	573.18	590.08	609.93	633.59	660.20	690.61	720.60	754.39	787.76	824.51	861.68	901.80	941.93	985.44	1029.36	1076.25	1099.48	1146.37	1186.92	1213.53	1246.90	1267.17
Anthem Blue Cross	CaliforniaCare HMO	HMO B	323.13	351.85	362.83	373.82	385.64	397.47	409.72	422.39	422.39	422.39	422.39	424.08	432.53	442.66	459.14	472.65	479.41	489.55	499.69	506.02	512.78	516.16	519.54	522.92	526.30	533.06	539.81	549.95	559.67	573.18	590.08	609.93	633.59	660.20	690.61	720.60	754.39	787.76	824.51	861.68	901.80	941.93	985.44	1029.36	1076.25	1099.48	1146.37	1186.92	1213.53	1246.90	1267.17
Anthem Blue Cross	Advantage PPO	PPO A	311.78	339.50	350.09	360.69	372.10	383.51	395.33	407.56	407.56	407.56	407.56	409.19	417.34	427.12	443.02	456.06	462.58	472.36	482.14	488.26	494.78	498.04	501.30	504.56	507.82	514.34	520.86	530.64	540.02	553.06	569.36	588.52	611.34	637.02	666.36	695.30	727.90	760.10	795.56	831.42	870.14	908.86	950.84	993.22	1038.46	1060.88	1106.12	1145.24	1170.92	1203.12	1222.68
Anthem Blue Cross	Select PPO	PPO B	284.50	309.79	319.46	329.13	339.54	349.96	360.74	371.90	371.90	371.90	371.90	373.39	380.83	389.75	404.26	416.16	422.11	431.03	439.96	445.54	451.49	454.46	457.44	460.41	463.39	469.34	475.29	484.21	492.77	504.67	519.54	537.02	557.85	581.28	608.06	634.46	664.21	693.59	725.95	758.68	794.01	829.34	867.64	906.32	947.60	968.06	1009.34	1045.04	1068.47	1097.85	1115.70
Anthem Blue Cross	Prudent Buyer - Small Group	PPO C	304.81	331.90	342.26	352.62	363.78	374.93	386.49	398.44	398.44	398.44	398.44	400.03	408.00	417.57	433.10	445.85	452.23	461.79	471.35	477.33	483.71	486.89	490.08	493.27	496.46	502.83	509.21	518.77	527.93	540.68	556.62	575.35	597.66	622.76	651.45	679.74	711.61	743.09	777.15	812.82	850.67	888.52	929.56	971.00	1015.23	1037.14	1081.37	1119.62	1144.72	1176.19	1195.32
Anthem Blue Cross	Prudent Buyer - Small Group	EPO A	301.63	328.44	338.70	348.95	359.99	371.03	382.46	394.29	394.29	394.29	394.29	395.87	403.75	413.22	428.59	441.21	447.52	456.98	466.45	472.36	478.67	481.82	484.98	488.13	491.29	497.59	503.90	513.37	522.43	535.05	550.82	569.35	591.44	616.28	644.66	672.66	704.20	735.35	769.65	804.35	841.81	879.27	919.88	960.88	1004.65	1026.34	1070.10	1107.95	1132.80	1163.94	1182.87
Anthem Blue Cross	Prudent Buyer - Small Group	EPO B	302.07	328.92	339.18	349.45	360.51	371.56	383.01	394.86	394.86	394.86	394.86	396.44	404.34	413.81	429.21	441.85	448.17	457.64	467.12	473.04	479.36	482.52	485.68	488.84	492.00	498.31	504.63	514.11	523.19	535.83	551.62	570.18	592.29	617.17	645.60	673.63	705.22	736.41	770.77	805.51	843.03	880.54	921.21	962.27	1006.10	1027.82	1071.65	1109.56	1134.43	1165.63	1184.58
Health Net	WholeCare	HMO A	369.20	402.02	414.57	427.11	440.63	454.14	468.14	482.62	482.62	482.62	482.62	484.55	494.20	505.78	524.60	540.05	547.77	559.35	570.93	578.17	585.89	589.75	593.62	597.48	601.34	609.06	616.78	628.37	639.47	654.91	674.21	696.90	723.92	754.33	789.08	823.34	861.95	900.08	942.06	984.54	1030.38	1076.23	1125.94	1176.13	1229.70	1256.25	1309.82	1356.15	1386.55	1424.68	1447.86
Health Net	CommunityCare	HMO C	244.42	266.15	274.46	282.76	291.71	300.65	309.92	319.51	319.51	319.51	319.51	320.78	327.17	334.84	347.30	357.53	362.64	370.31	377.98	382.77	387.88	390.44	392.99	395.55	398.10	403.22	408.33	416.00	423.35	433.57	446.35	461.37	479.26	499.39	522.39	545.08	570.64	595.88	623.68	651.79	682.14	712.50	745.41	778.64	814.10	831.67	867.14	897.81	917.94	943.18	958.53
Kaiser Permanente	Full	HMO A	240.66	260.81	268.52	276.22	284.52	278.83	287.42	296.31	296.31	296.31	296.31	297.49	303.42	310.53	322.09	331.57	336.31	343.42	350.53	354.98	359.72	362.09	364.46	366.83	369.20	373.94	378.68	385.79	392.61	402.09	413.94	427.87	444.46	463.13	484.46	505.50	529.20	552.61	578.39	604.47	632.62	660.76	691.28	722.10	754.99	771.29	804.18	832.62	851.29	874.70	888.93
Kaiser Permanente	Full	HMO B	244.68	265.18	273.02	280.86	289.31	283.76	292.50	301.55	301.55	301.55	301.55	302.76	308.79	316.03	327.79	337.44	342.26	349.50	356.74	361.26	366.08	368.50	370.91	373.32	375.73	380.56	385.38	392.62	399.56	409.21	421.27	435.44	452.33	471.32	493.04	514.45	538.57	562.39	588.63	615.16	643.81	672.46	703.52	734.88	768.35	784.94	818.41	847.36	866.36	890.18	904.65
Kaiser Permanente	Full	HMO C	252.37	273.56	281.66	289.76	298.48	293.22	302.26	311.60	311.60	311.60	311.60	312.85	319.08	326.56	338.71	348.68	353.67	361.15	368.63	373.30	378.29	380.78	383.27	385.77	388.26	393.24	398.23	405.71	412.87	422.85	435.31	449.96	467.41	487.04	509.47	531.60	556.52	581.14	608.25	635.67	665.27	694.88	726.97	759.38	793.97	811.10	845.69	875.61	895.24	919.85	934.80
Kaiser Permanente	Full	HMO D	226.95	245.88	253.12	260.36	268.15	261.96	270.03	278.38	278.38	278.38	278.38	279.49	285.06	291.74	302.60	311.51	315.96	322.64	329.33	333.50	337.96	340.18	342.41	344.64	346.86	351.32	355.77	362.45	368.86	377.76	388.90	401.98	417.57	435.11	455.15	474.92	497.19	519.18	543.40	567.90	594.34	620.79	649.46	678.42	709.32	724.63	755.53	782.25	799.71	821.78	835.14
Oscar	Oscar EPO	EPO A	214.28	233.32	240.61	247.89	255.73	263.57	271.70	280.10	280.10	280.10	280.10	281.22	286.82	293.55	304.47	313.43	317.91	324.64	331.36	335.56	340.04	342.28	344.52	346.76	349.00	353.49	357.97	364.69	371.13	380.10	391.30	404.46	420.15	437.80	457.96	477.85	500.26	522.39	546.76	571.40	598.01	624.62	653.47	682.60	713.70	729.10	760.19	787.08	804.73	826.86	840.30
Oscar	Oscar EPO	EPO B	241.22	262.66	270.86	279.06	287.88	296.71	305.86	315.32	315.32	315.32	315.32	316.58	322.88	330.45	342.75	352.84	357.88	365.45	373.02	377.75	382.79	385.32	387.84	390.36	392.88	397.93	402.97	410.54	417.79	427.89	440.50	455.32	472.98	492.84	515.54	537.93	563.16	588.07	615.50	643.25	673.20	703.16	735.63	768.43	803.43	820.77	855.77	886.04	905.91	930.82	945.95
Oscar	Oscar EPO	EPO C	214.01	233.03	240.31	247.58	255.41	263.25	271.36	279.75	279.75	279.75	279.75	280.87	286.47	293.18	304.09	313.04	317.52	324.23	330.95	335.14	339.62	341.86	344.10	346.33	348.57	353.05	357.52	364.24	370.67	379.62	390.82	403.96	419.63	437.25	457.40	477.26	499.64	521.74	546.08	570.70	597.27	623.85	652.66	681.76	712.81	728.20	759.25	786.11	803.73	825.83	839.25
Oscar	Oscar EPO	EPO D	240.70	262.09	270.27	278.46	287.27	296.08	305.20	314.64	314.64	314.64	314.64	315.90	322.19	329.74	342.01	352.08	357.12	364.67	372.22	376.94	381.97	384.49	387.01	389.52	392.04	397.07	402.11	409.66	416.90	426.97	439.55	454.34	471.96	491.78	514.43	536.77	561.95	586.80	614.18	641.86	671.75	701.64	734.05	766.78	801.70	819.01	853.93	884.14	903.96	928.81	943.92
Sharp Health Plan	Premier	HMO A	202.89	220.92	227.82	234.71	242.14	249.56	257.25	265.21	265.21	265.21	265.21	266.27	271.58	277.94	288.28	296.77	301.01	307.38	313.74	317.72	321.96	324.09	326.21	328.33	330.45	334.70	338.94	345.30	351.40	359.89	370.50	382.96	397.82	414.52	433.62	452.45	473.67	494.62	517.69	541.03	566.22	591.42	618.73	646.32	675.76	690.34	719.78	745.24	761.95	782.90	795.63
Sharp Health Plan	Performance	HMO B	215.29	234.42	241.74	249.06	256.94	264.82	272.98	281.42	281.42	281.42	281.42	282.55	288.17	294.93	305.90	314.91	319.41	326.17	332.92	337.14	341.64	343.90	346.15	348.40	350.65	355.15	359.65	366.41	372.88	381.89	393.14	406.37	422.13	439.86	460.12	480.10	502.62	524.85	549.33	574.10	600.83	627.57	656.55	685.82	717.06	732.54	763.77	790.79	808.52	830.75	844.26
Sharp Health Plan	Premier	HMO C	197.90	215.49	222.21	228.94	236.18	243.43	250.93	258.69	258.69	258.69	258.69	259.72	264.90	271.11	281.20	289.47	293.61	299.82	306.03	309.91	314.05	316.12	318.19	320.26	322.33	326.47	330.61	336.81	342.76	351.04	361.39	373.55	388.04	404.33	422.96	441.33	462.02	482.46	504.96	527.73	552.30	576.88	603.52	630.43	659.14	673.37	702.08	726.92	743.22	763.65	776.07
Sutter Health Plus	Sutter Health Plus	HMO B	260.90	284.09	292.95	301.82	311.37	320.92	330.81	341.05	341.05	341.05	341.05	342.41	349.23	357.41	370.71	381.63	387.08	395.27	403.45	408.57	414.02	416.75	419.48	422.21	424.94	430.39	435.85	444.04	451.88	462.79	476.43	492.46	511.56	533.05	557.60	581.82	609.10	636.04	665.71	695.72	728.12	760.52	795.65	831.12	868.97	887.73	925.59	958.33	979.81	1006.75	1023.11
Sutter Health Plus	Sutter Health Plus	HMO C	236.80	257.85	265.90	273.95	282.61	291.28	300.26	309.55	309.55	309.55	309.55	310.78	316.97	324.40	336.48	346.38	351.33	358.76	366.19	370.83	375.79	378.26	380.74	383.22	385.69	390.65	395.60	403.03	410.15	420.05	432.43	446.98	464.32	483.82	506.11	528.08	552.85	577.30	604.23	631.47	660.88	690.29	722.17	754.36	788.72	805.75	840.10	869.82	889.32	913.78	928.62
UnitedHealthcare	SignatureValue	HMO A	366.67	399.27	411.73	424.19	437.61	451.03	464.93	479.31	479.31	479.31	479.31	481.23	490.81	502.32	521.01	536.35	544.02	555.52	567.02	574.21	581.88	585.72	589.55	593.39	597.22	604.89	612.56	624.06	635.09	650.42	669.60	692.12	718.97	749.16	783.67	817.70	856.05	893.91	935.61	977.79	1023.33	1068.86	1118.23	1168.08	1221.28	1247.64	1300.85	1346.86	1377.06	1414.92	1437.93
Western Health	Full	HMO A	206.25	224.58	231.59	238.60	246.15	253.69	261.51	269.60	269.60	269.60	269.60	270.68	276.07	282.54	293.06	301.68	306.00	312.47	318.94	322.98	327.30	329.45	331.61	333.77	335.92	340.24	344.55	351.02	357.22	365.85	376.63	389.30	404.40	421.39	440.80	459.94	481.51	502.81	526.26	549.99	575.60	601.21	628.98	657.02	686.94	701.77	731.70	757.58	774.56	795.86	808.80
Western Health	Full	HMO B	216.56	235.81	243.17	250.53	258.45	266.38	274.59	283.08	283.08	283.08	283.08	284.21	289.88	296.67	307.71	316.77	321.30	328.09	334.89	339.13	343.66	345.93	348.19	350.45	352.72	357.25	361.78	368.57	375.08	384.14	395.46	408.77	424.62	442.46	462.84	482.94	505.58	527.95	552.58	577.49	604.38	631.27	660.43	689.87	721.29	736.86	768.28	795.46	813.29	835.66	849.24
Western Health	Full	HMO C	202.16	220.13	227.00	233.87	241.27	248.67	256.33	264.26	264.26	264.26	264.26	265.32	270.60	276.95	287.25	295.71	299.94	306.28	312.62	316.58	320.81	322.93	325.04	327.15	329.27	333.50	337.73	344.07	350.15	358.60	369.17	381.59	396.39	413.04	432.07	450.83	471.97	492.85	515.84	539.09	564.20	589.30	616.52	644.00	673.34	687.87	717.20	742.57	759.22	780.10	792.78

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	403.81	439.70	453.42	467.15	481.93	496.71	512.01	527.85	527.85	527.85	527.85	529.96	540.52	553.19	573.77	590.66	599.11	611.78	624.45	632.36	640.81	645.03	649.26	653.48	657.70	666.15	674.59	687.26	699.40	716.29	737.41	762.22	791.78	825.03	863.03	900.51	942.74	984.44	1030.36	1076.81	1126.96	1177.11	1231.47	1286.37	1344.96	1373.99	1432.58	1483.26	1516.51	1558.21	1583.55
Anthem Blue Cross	CaliforniaCare HMO	HMO B	403.81	439.70	453.42	467.15	481.93	496.71	512.01	527.85	527.85	527.85	527.85	529.96	540.52	553.19	573.77	590.66	599.11	611.78	624.45	632.36	640.81	645.03	649.26	653.48	657.70	666.15	674.59	687.26	699.40	716.29	737.41	762.22	791.78	825.03	863.03	900.51	942.74	984.44	1030.36	1076.81	1126.96	1177.11	1231.47	1286.37	1344.96	1373.99	1432.58	1483.26	1516.51	1558.21	1583.55
Anthem Blue Cross	Advantage PPO	PPO A	374.86	408.18	420.92	433.66	447.38	461.10	475.31	490.01	490.01	490.01	490.01	491.97	501.77	513.53	532.64	548.32	556.16	567.92	579.68	587.03	594.87	598.79	602.71	606.63	610.55	618.39	626.23	637.99	649.26	664.94	684.54	707.57	735.02	765.89	801.17	835.96	875.16	913.87	956.50	999.62	1046.17	1092.72	1143.19	1194.15	1248.55	1275.50	1329.89	1376.93	1407.80	1446.51	1470.03
Anthem Blue Cross	Select PPO	PPO B	337.40	367.39	378.85	390.32	402.67	415.02	427.81	441.04	441.04	441.04	441.04	442.80	451.62	462.21	479.41	493.52	500.58	511.17	521.75	528.37	535.42	538.95	542.48	546.01

USE EMPLOYER ZIP CODE FOR RATING

AREA 1 - Continued

10/01/20 - 12/01/20

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	462.55	503.67	519.39	535.11	552.04	568.97	586.50	604.64	604.64	604.64	604.64	607.06	619.15	633.66	657.24	676.59	686.27	700.78	715.29	724.36	734.03	738.87	743.71	748.54	753.38	763.06	772.73	787.24	801.15	820.50	844.68	873.10	906.96	945.05	988.59	1031.52	1079.89	1127.65	1180.26	1233.47	1290.91	1348.35	1410.63	1473.51	1540.62	1573.88	1640.99	1699.04	1737.13	1784.90	1813.92
Health Net	WholeCare	HMO C	422.05	459.57	473.91	488.26	503.71	519.15	535.15	551.70	551.70	551.70	551.70	553.91	564.95	578.19	599.70	617.36	626.18	639.43	652.67	660.94	669.77	674.18	678.60	683.01	687.42	696.25	705.08	718.32	731.01	748.66	770.73	796.66	827.56	862.31	902.04	941.21	985.34	1028.93	1076.93	1125.48	1177.89	1230.30	1287.13	1344.50	1405.74	1436.09	1497.33	1550.29	1585.05	1628.63	1655.10
Health Net	Salud HMO y Mas	HMO D	273.62	297.94	307.24	316.54	326.55	336.57	346.94	357.67	357.67	357.67	357.67	359.10	366.25	374.84	388.79	400.23	405.95	414.54	423.12	428.49	434.21	437.07	439.93	442.79	445.65	451.38	457.10	465.68	473.91	485.36	499.66	516.47	536.50	559.04	584.79	610.18	638.80	667.05	698.17	729.64	763.62	797.60	834.44	871.64	911.34	931.01	970.71	1005.05	1027.58	1055.84	1073.01
Health Net	Full	HMO E	424.08	461.78	476.19	490.60	506.13	521.65	537.72	554.36	554.36	554.36	554.36	556.57	567.66	580.96	602.58	620.32	629.19	642.50	655.80	664.12	672.99	677.42	681.86	686.29	690.73	699.60	708.47	721.77	734.52	752.26	774.43	800.49	831.53	866.46	906.37	945.73	990.08	1033.87	1082.10	1130.88	1183.55	1236.21	1293.31	1350.96	1412.50	1442.99	1504.52	1557.74	1592.66	1636.46	1663.08
Kaiser Permanente	Full	HMO A	333.96	362.40	373.28	384.15	395.86	393.58	405.71	418.26	418.26	418.26	418.26	419.94	428.30	438.34	454.65	468.04	474.73	484.77	494.80	501.08	507.77	511.12	514.46	517.81	521.15	527.85	534.54	544.58	554.20	567.58	584.31	603.97	627.39	653.74	683.86	713.56	747.02	780.06	816.45	853.25	892.99	932.72	975.81	1019.30	1065.73	1088.74	1135.16	1175.32	1201.67	1234.71	1254.78
Kaiser Permanente	Full	HMO B	330.60	358.74	369.50	380.26	391.85	389.45	401.45	413.87	413.87	413.87	413.87	415.52	423.80	433.73	449.88	463.12	469.74	479.67	489.61	495.81	502.44	505.75	509.06	512.37	515.68	522.30	528.92	538.86	548.38	561.62	578.17	597.63	620.80	646.88	676.68	706.06	739.17	771.87	807.87	844.29	883.61	922.93	965.56	1008.60	1054.54	1077.30	1123.24	1162.97	1189.05	1221.74	1241.61
Oscar	Oscar EPO	EPO A	295.58	321.86	331.90	341.95	352.77	363.59	374.79	386.38	386.38	386.38	386.38	387.93	395.66	404.93	420.00	432.36	438.54	447.82	457.09	462.89	469.07	472.16	475.25	478.34	481.43	487.61	493.80	503.07	511.96	524.32	539.78	557.94	579.57	603.91	631.73	659.17	690.08	720.60	754.22	788.22	824.93	861.63	901.43	941.61	984.50	1005.75	1048.64	1085.73	1110.08	1140.60	1159.14
Oscar	Oscar EPO	EPO B	290.38	316.19	326.06	335.93	346.56	357.19	368.19	379.58	379.58	379.58	379.58	381.10	388.69	397.80	412.61	424.75	430.83	439.94	449.05	454.74	460.81	463.85	466.89	469.92	472.96	479.03	485.11	494.22	502.95	515.09	530.28	548.12	569.37	593.29	620.62	647.57	677.93	707.92	740.94	774.35	810.41	846.47	885.57	925.04	967.18	988.05	1030.19	1066.63	1090.54	1120.53	1138.74
Sharp Health Plan	Premier	HMO A	282.90	308.04	317.66	327.27	337.63	347.98	358.71	369.80	369.80	369.80	369.80	371.28	378.68	387.55	401.97	413.81	419.72	428.60	437.47	443.02	448.94	451.90	454.85	457.81	460.77	466.69	472.60	481.48	489.99	501.82	516.61	533.99	554.70	578.00	604.62	630.88	660.46	689.68	721.85	754.39	789.52	824.65	862.74	901.20	942.25	962.59	1003.64	1039.14	1062.44	1091.65	1109.40
Sharp Health Plan	Performance	HMO B	304.75	331.84	342.20	352.56	363.71	374.87	386.42	398.37	398.37	398.37	398.37	399.96	407.93	417.49	433.03	445.78	452.15	461.71	471.27	477.25	483.62	486.81	490.00	493.18	496.37	502.74	509.12	518.68	527.84	540.59	556.52	575.25	597.56	622.65	651.33	679.62	711.49	742.96	777.62	812.67	850.52	888.37	929.40	970.83	1015.05	1036.96	1081.18	1119.42	1144.52	1175.99	1195.11
Sharp Health Plan	Premier	HMO C	278.90	303.70	313.17	322.65	332.86	343.07	353.64	364.58	364.58	364.58	364.58	366.04	373.33	382.08	396.30	407.97	413.80	422.55	431.30	436.77	442.60	445.52	448.43	451.35	454.27	460.10	465.93	474.68	483.07	494.74	509.32	526.45	546.87	569.84	596.09	621.97	651.14	679.94	711.66	743.74	778.38	813.01	850.57	888.48	928.95	949.00	989.47	1024.47	1047.44	1076.24	1093.74
Sutter Health Plus	Sutter Health Plus	HMO A	340.34	370.59	382.16	393.73	406.18	418.64	431.54	444.90	444.90	444.90	444.90	446.67	455.56	466.24	483.59	497.83	504.95	515.62	526.30	532.97	540.09	543.65	547.21	550.77	554.33	561.45	568.57	579.24	589.48	603.71	621.51	642.42	667.33	695.36	727.39	758.98	794.57	829.71	868.42	907.57	949.83	992.10	1037.92	1084.19	1133.57	1158.04	1207.42	1250.13	1278.16	1313.31	1334.65
Sutter Health Plus	Sutter Health Plus	HMO B	336.11	365.99	377.41	388.84	401.14	413.44	426.18	439.37	439.37	439.37	439.37	441.12	449.91	460.45	477.59	491.65	498.68	509.22	519.77	526.36	533.39	536.90	540.42	543.93	547.45	554.48	561.51	572.05	582.16	596.22	613.79	634.44	659.05	686.73	718.36	749.56	784.70	819.41	857.64	896.30	938.04	979.78	1025.04	1070.73	1119.50	1143.67	1192.43	1234.61	1262.29	1297.00	1318.08
UnitedHealthcare	SignatureValue	HMO A	485.46	528.61	545.11	561.61	579.38	597.15	615.55	634.59	634.59	634.59	634.59	637.13	649.82	665.05	689.80	710.11	720.26	735.49	750.72	760.24	770.39	775.47	780.55	785.62	790.70	800.85	811.01	826.24	840.83	861.14	886.52	916.35	951.89	991.86	1037.55	1082.61	1133.38	1183.51	1238.72	1294.56	1354.85	1415.14	1480.50	1546.50	1616.94	1651.84	1722.28	1783.20	1823.18	1873.31	1903.77
Western Health	Full	HMO A	271.50	295.63	304.86	314.09	324.03	333.96	344.26	354.90	354.90	354.90	354.90	356.32	363.42	371.94	385.78	397.14	402.81	411.33	419.85	425.17	430.85	433.69	436.53	439.37	442.21	447.89	453.57	462.08	470.25	481.60	495.80	512.48	532.35	554.71	580.27	605.46	633.86	661.89	692.77	724.00	757.72	791.43	827.99	864.90	904.29	923.81	963.21	997.28	1019.64	1047.67	1064.71
Western Health	Full	HMO B	278.13	302.85	312.30	321.76	331.94	342.12	352.66	363.57	363.57	363.57	363.57	365.02	372.29	381.02	395.20	406.83	412.65	421.37	430.10	435.55	441.37	444.28	447.19	450.10	453.00	458.82	464.64	473.36	481.73	493.36	507.90	524.99	545.35	568.25	594.43	620.24	649.33	678.05	709.68	741.68	776.21	810.75	848.20	886.01	926.37	946.36	986.72	1021.62	1044.53	1073.25	1090.70

Health Care Service Plan rates will vary by county

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USE EMPLOYER ZIP CODE FOR RATING

AREA 2

10/01/20 - 12/01/20

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	301.75	328.57	338.82	349.08	360.12	371.17	382.61	394.44	394.44	394.44	394.44	396.02	403.91	413.37	428.76	441.38	447.69	457.16	466.62	472.54	478.85	482.01	485.16	488.32	491.47	497.78	504.09	513.56	522.63	535.26	551.03	569.57	591.66	616.51	644.91	672.91	704.47	735.63	769.95	804.66	842.13	879.60	920.23	961.25	1005.03	1026.73	1070.51	1108.38	1133.23	1164.39	1183.32
Anthem Blue Cross	Select PPO	PPO B	279.11	303.92	313.41	322.89	333.11	343.32	353.90	364.85	364.85	364.85	364.85	366.31	373.61	382.36	396.59	408.27	414.10	422.86	431.62	437.09	442.93	445.85	448.77	451.68	454.60	460.44	466.28	475.03	483.43	495.10	509.70	526.84	547.28	570.26	596.53	622.43	651.62	680.45	712.19	744.29	778.95	813.62	851.20	889.14	929.64	949.70	990.20	1025.23	1048.21	1077.04	1094.55
Anthem Blue Cross	Prudent Buyer - Small Group	EPO A	300.18	326.86	337.06	347.27	358.25	369.24	380.62	392.39	392.39	392.39	392.39	393.96	401.81	411.22	426.53	439.08	445.36	454.78	464.20	470.08	476.36	479.50	482.64	485.78	488.92	495.20	501.47	510.89	519.92	532.47	548.17	566.61	588.59	613.31	641.56	669.42	700.81	731.81	765.95	800.48	837.75	875.03	915.45	956.25	999.81	1021.39	1064.95	1102.62	1127.34	1158.34	1177.17
Health Net	CommunityCare	HMO A	216.73	236.00	243.36	250.73	258.66	266.59	274.81	283.31	283.31	283.31	283.31	284.44	290.11	296.91	307.96	317.02	321.55	328.35	335.15	339.40	343.94	346.20	348.47	350.74	353.00	357.53	362.07	368.87	375.38	384.45	395.78	409.10	424.96	442.81	463.21	483.32	505.99	528.37	553.02	577.95	604.86	631.78	660.96	690.42	721.87	737.45	768.90	796.10	813.94	836.33	849.93
Kaiser Permanente	Full	HMO A	219.10	237.33	244.30	251.27	258.78	252.29	260.07	268.11	268.11	268.11	268.11	269.18	274.55	280.98	291.44	300.02	304.31	310.74	317.18	321.20	325.49	327.63	329.78	331.92	334.07	338.36	342.65	349.08	355.25	363.83	374.55	387.15	402.17	419.06	438.36	457.40	478.85	500.03	523.35	546.95	572.42	597.89	625.50	653.39	683.15	697.89	727.66	753.39	770.28	791.47	804.33
Kaiser Permanente	Full	HMO C	207.35	224.54	231.11	237.68	244.76	237.85	245.18	252.76	252.76	252.76	252.76	253.77	258.83	264.89	274.75	282.84	286.88	292.95	299.02	302.81	306.85	308.87	310.90	312.92	314.94	318.99	323.03	329.10	334.91	343.00	353.11	364.99	379.14	395.07	413.27	431.21	451.43	471.40	493.39	515.63	539.65	563.66	589.69	615.98	644.04	657.94	685.99	710.26	726.18	746.15	758.28
Oscar	Oscar EPO	EPO A	187.26	203.90	210.26	216.63	223.48	230.34	237.44	244.78	244.78	244.78	244.78	245.76	250.65	256.53	266.07	273.91	277.82	283.70	289.57	293.24	297.16	299.12	301.08	303.04	304.99	308.91	312.83	318.70	324.33	332.16	341.96	353.46	367.17	382.59	400.21	417.59	437.17	456.51	477.81	499.35	522.60	545.86	571.07	596.52	623.70	637.16	664.33	687.83	703.25	722.59	734.34
Oscar	Oscar EPO	EPO B	177.79	193.60	199.64	205.68	212.19	218.70	225.44	232.41	232.41	232.41	232.41	233.34	237.99	243.57	252.63	260.07	263.79	269.36	274.94	278.43	282.15	284.01	285.87	287.72	289.58	293.30	297.02	302.60	307.94	315.38	324.68	335.60	348.62	363.26	379.99	396.49	415.09	433.45	453.67	474.12	496.20	518.28	542.21	566.38	592.18	604.97	630.76	653.07	667.72	686.08	697.23
Oscar	Oscar EPO	EPO C	178.81	194.71	200.78	206.86	213.40	219.95	226.73	233.74	233.74	233.74	233.74	234.68	239.35	244.96	254.08	261.56	265.30	270.91	276.51	280.02	283.76	285.63	287.50	289.37	291.24	294.98	298.72	304.33	309.71	317.19	326.54	337.52	350.61	365.34	382.17	398.76	417.46	435.93	456.26	476.83	499.04	521.24	545.32	569.63	595.57	608.43	634.37	656.81	671.54	690.00	701.22
Sharp Health Plan	Premier	HMO A	172.72	188.07	193.95	199.82	206.14	212.46	219.01	225.78	225.78	225.78	225.78	226.68	231.20	236.62	245.42	252.65	256.26	261.68	267.10	270.48	274.10	275.90	277.71	279.52	281.32	284.93	288.55	293.97	299.16	306.38	315.41	326.03	338.67	352.89	369.15	385.18	403.24	421.08	440.72	460.59	482.04	503.49	526.74	550.23	575.29	587.71	612.77	634.44	648.67	666.50	677.34
Sharp Health Plan	Performance	HMO B	197.55	215.11	221.83	228.54	235.77	243.00	250.49	258.24	258.24	258.24	258.24	259.27	264.44	270.64	280.71	288.97	293.10	299.30	305.50	309.37	313.50	315.57	317.64	319.70	321.77	325.90	330.03	336.23	342.17	350.43	360.76	372.90	387.36	403.63	422.22	440.56	461.22	481.62	504.08	526.81	551.34	575.88	602.47	629.33	658.00	672.20	700.86	725.65	741.92	762.32	774.72
Sutter Health Plus	Sutter Health Plus	HMO A	199.08	216.77	223.54	230.31	237.59	244.88	252.43	260.24	260.24	260.24	260.24	261.27	266.48	272.72	282.87	291.20	295.36	301.61	307.86	311.76	315.92	318.00	320.09	322.17	324.25	328.41	332.58	338.82	344.81	353.14	363.55	375.78	390.35	406.74	425.48	443.96	464.78	485.33	507.97	530.88	555.60	580.32	607.12	634.19	663.07	677.39	706.27	731.25	747.65	768.21	780.69
Sutter Health Plus	Sutter Health Plus	HMO B	197.05	214.57	221.26	227.96	235.17	242.39	249.86	257.59	257.59	257.59	257.59	258.61	263.77	269.95	279.99	288.24	292.36	298.54	304.72	308.58	312.71	314.77	316.83	318.89	320.95	325.07	329.19	335.37	341.30	349.54	359.84	371.95	386.38	402.60	421.15	439.44	460.04	480.39	502.80	525.47	549.94	574.41	600.94	627.73	656.32	670.49	699.08	723.81	740.04	760.39	772.74
Western Health	Full	HMO B	196.64	214.11	220.80	227.48	234.68	241.87	249.33	257.04	257.04	257.04	257.04	258.07	263.21	269.38	279.40	287.63	291.74	297.91	304.08	307.93	312.05	314.10	316.16	318.21	320.27	324.38	328.50	334.67	340.58	348.80	359.08	371.16	385.56	401.75	420.26	438.51	459.07	479.38	501.74	524.36	548.78	573.20	599.67	626.41	654.94	669.07	697.60	722.28	738.47	758.78	771.12
Western Health	Full	HMO C	201.60	219.52	226.37	233.22	240.60	247.98	255.62	263.53	263.53	263.53	263.53	264.58	269.85	276.18	286.45	294.89	299.10	305.43	311.75	315.70	319.92	322.03	324.14	326.25	328.35	332.57	336.79	343.11	349.17	357.61	368.15	380.53	395.29	411.89	430.87	449.58	470.66	491.48	514.40	537.59	562.63	587.66	614.81	642.21	671.47	685.96	715.21	740.51	757.11	777.93	790.58

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	268.35	292.21	301.33	310.45	320.27	330.09	340.27	350.79	350.79	350.79	350.79	352.19	359.21	367.63	381.31	392.53	398.15	406.57	414.98	420.25	425.86	428.67	431.47	434.28	437.08	442.70	448.31	456.73	464.80	476.02	490.05	506.54	526.19	548.28	573.54	598.45	626.51	654.22	684.74	715.61	748.94	782.26	818.39	854.88	893.81	913.11	952.04	985.72	1007.82	1035.53	1052.37
Anthem Blue Cross	CaliforniaCare HMO	HMO B	310.03	337.59	348.13	358.66	370.01	381.36	393.11	405.27	405.27	405.27	405.27	406.89	415.00	424.72	440.53	453.50	459.98	469.71	479.43	485.51	492.00	495.24	498.48	501.72	504.97	511.45	517.94	527.66	536.98	549.95	566.16	585.21	607.91	633.44	662.62	691.39	723.81	755.83	791.09	826.75	865.25	903.75	945.49	987.64	1032.63	1054.92	1099.90	1138.81	1164.34	1196.36	1215.81
Anthem Blue Cross	Advantage PPO	PPO A	348.54	379.52	391.37	403.21	415.97	428.73	441.94	455.61	455.61	455.61	455.61	457.43	466.54	477.48	495.25	509.83	517.12	528.05	538.99	545.82	553.11	556.76	560.40	564.05	567.69	574.98	582.27	593.20	603.68	618.26	636.49	657.90	683.42	712.12	744.92	777.27	813.72	849.71	889.35	929.44	972.73	1016.01	1062.94	1110.32	1160.89	1185.95	1236.53	1280.26	1308.97	1344.96	1366.83
Anthem Blue Cross	Select PPO	PPO B	315.19	343.20	353.92	364.63	376.17	387.70	399.65	412.01	412.01	412.01	412.01	413.66	421.90	431.79	447.85	461.04	467.63	477.52	487.41	493.59	500.18	503.48	506.77	510.07	513.36	519.96	526.55	536.44	545.91	559.10	575.58	594.94	618.02	643.97	673.64	702.89	735.85	768.40	804.24	840.50	879.64	918.78	961.22	1004.07	1049.80	1072.46	1118.20	1157.75	1183.70	1216.25	1236.03
Anthem Blue Cross	Prudent Buyer - Small Group	PPO C	340.74	371.03	382.61	394.19	406.66	419.13	432.05	445.41	445.41	445.41	445.41	447.19	456.10	466.79	484.16	498.41	505.54	516.23	526.92	533.60	540.73	544.29	547.85	551.42	554.98	562.11	569.23	579.92	590.17	604.42	622.24	643.17	668.12	696.18	728.25	759.87	795.50	830.69	869.40	908.64	950.95	993.26	1039.14	1085.46	1134.90	1159.40	1208.84	1251.60	1279.66	1314.85	1336.23
Anthem Blue Cross	Prudent Buyer - Small Group	EPO A	337.23	367.20	378.66	390.13	402.47	414.81	427.60	440.82	440.82	440.82	440.82	442.58	451.40	461.98	479.17	493.28	500.33	510.91	521.49	528.10	535.16	538.68	542.21	545.74	549.26	556.31	563.37	573.95	584.09	598.19	615.83	636.54	661.23	689.00	720.74	752.04	787.30	822.13	860.48	899.27	941.15	983.03	1028.43	1074.28	1123.21	1147.45	1196.39	1238.70	1266.48	1301.30	1322.46
Anthem Blue Cross	Prudent Buyer - Small Group	EPO B	337.68	367.69	379.17	390.65	403.01	415.37	428.17	441.41	441.41	441.41	441.41	443.18	452.00	462.60	479.81	493.94	501.00	511.59	522.19	528.81	535.87	539.40	542.93	546.47	550.00	557.06	564.12	574.72	584.87	598.99	616.65	637.40	662.12	689.92	721.71	753.05	788.36	823.23	861.63	900.48	942.41	984.34	1029.81	1075.72	1124.71	1148.99	1197.99	1240.36	1268.17	1303.04	1324.23
Health Net	WholeCare	HMO A	443.21	482.60	497.67	512.73	528.95	545.17	561.98	579.36	579.36	579.36	579.36	581.67	593.26	607.17	629.76	648.30	657.57	671.48	685.38	694.07	703.34	707.97	712.61	717.24	721.88	731.15	740.42	754.32	767.65	786.19	809.36	836.59	869.03	905.53	947.25	988.38	1034.73	1080.50	1130.90	1181.89	1236.93	1291.96	1351.64	1411.89	1476.20	1508.06	1572.37	1627.99	1664.49	1710.26	1738.08
Health Net	CommunityCare	HMO C	244.42	266.15	274.46	282.76	291.71	300.65	309.92	319.51	319.51	319.51	319.51	320.78	327.17	334.84	347.30	357.53	362.64	370.31	377.98	382.77	387.88	390.44	392.99	395.55	398.10	403.22	408.33	416.00	423.35	433.57	446.35	461.37	479.26	499.39	522.39	545.08	570.64	595.88	623.68	651.79	682.14	712.50	745.41	778.64	814.10	831.67	867.14	897.81	917.94	943.18	958.53
Kaiser Permanente	Full	HMO A	252.60	273.80	281.91	290.02	298.76	293.50	302.55	311.90	311.90	311.90	311.90	313.15	319.39	326.87	339.04	349.02	354.01	361.49	368.98	373.66	378.65	381.14	383.64	386.14	388.63	393.62	398.61	406.10	413.27	423.25	435.73	450.39	467.85	487.50	509.96	532.11	557.06	581.70	608.83	636.28	665.91	695.54	727.67	760.11	794.73	811.88	846.50	876.45	896.10	920.74	935.70
Kaiser Permanente	Full	HMO B	256.82	278.40	286.66	294.91	303.80	298.69	307.90	317.42	317.42	317.42	317.42	318.69	325.04	332.66	345.04	355.20	360.27	367.89	375.51	380.27	385.35	387.89	390.43	392.97	395.51	400.59	405.67	413.28	420.58	430.74	443.44	458.36	476.13	496.13	518.99	541.52	566.92	591.99	619.61	647.54	677.70	707.85	740.55	773.56	808.79	826.25	861.48	891.96	911.96	937.03	952.26
Kaiser Permanente	Full	HMO C	264.91	287.22	295.75	304.27	313.46	308.65	318.16	328.00	328.00	328.00	328.00	329.32	335.88	343.75	356.54	367.04	372.28	380.16	388.03	392.95	398.20	400.82	403.44	406.07	408.69	413.94	419.19	427.06	434.60	445.10	458.22	473.64	492.01	512.67	536.29	559.57	585.81	611.73	640.26	669.13	700.29	731.45	765.23	799.34	835.75	853.79	890.20	921.69	942.35	968.27	984.00
Kaiser Permanente	Full	HMO D	238.16	258.09	265.71	273.32	281.53	275.74	284.24	293.03	293.03	293.03	293.03	294.21	300.07	307.10	318.53	327.90	332.59	339.63	346.66	351.05	355.74	358.09	360.43	362.77	365.12	369.81	374.50	381.53	388.27	397.65	409.37	423.14	439.55	458.01	479.11	499.91	523.36	546.51	572.00	597.79	625.63	653.46	683.65	714.12	746.65	762.77	795.29	823.42	841.88	865.03	879.09
Oscar	Oscar EPO	EPO A	214.28	233.32	240.61	247.89	255.73	263.57	271.70	280.10	280.10	280.10	280.10	281.22	286.82	293.55	304.47	313.43	317.91	324.64	331.36	335.56	340.04	342.28	344.52	346.76	349.00	353.49	357.97	364.69	371.13	380.10	391.30	404.46	420.15	437.80	457.96	477.85	500.26	522.39	546.76	571.40	598.01	624.62	653.47	682.60	713.70	729.10	760.19	787.08	804.73	826.86	840.30
Oscar	Oscar EPO	EPO B	241.22	262.66	270.86	279.06	287.88	296.71	305.86	315.32	315.32	315.32	315.32	316.58	322.88	330.46	342.75	352.84	357.88	365.45	373.02	377.75	382.79	385.32	387.84	390.36	392.88	397.93	402.97	410.54	417.79	427.89	440.50	455.32	472.98	492.84	515.54	537.93	563.16	588.07	615.50	643.25	673.20	703.16	735.63	768.43	803.43	820.77	855.77	886.04	905.91	930.82	945.95
Oscar	Oscar EPO	EPO C	214.01	233.03	240.31	247.58	255.41	263.25	271.36	279.75	279.75	279.75	279.75	280.87	286.47	293.18	304.09	313.04	317.52	324.23	330.95	335.14	339.62	341.86	344.10	346.33	348.57	353.05	357.52	364.24	370.67	379.62	390.82	403.96	419.63	437.25	457.40	477.26	499.64	521.74	546.08	570.70	597.27	623.85	652.66	681.76	712.81	728.20	759.25	786.11	803.73	825.83	839.25
Oscar	Oscar EPO	EPO D	240.70	262.09	270.27	278.46	287.27	296.08	305.20	314.64	314.64	314.64	314.64	315.90	322.19	329.74	342.01	352.08	357.12	364.67	372.22	376.94	381.97	384.49	387.01	389.52	392.04	397.07	402.11	409.66	416.90	426.97	439.55	454.34	471.96	491.78	514.43	536.77	561.95	586.80	614.18	641.86	671.75	701.64	734.05	766.78	801.70	819.01	853.93	884.14	903.96	928.81	943.92
Sharp Health Plan	Premier	HMO A	202.89	220.92	227.82	234.71	242.14	249.56	257.25	265.21	265.21	265.21	265.21	266.27	271.58	277.94	288.28	296.77	301.01	307.38	313.74	317.72	321.96	324.09	326.21	328.33	330.45	334.70	338.94	345.30	351.40	359.89	370.50	382.96	397.82	414.52	433.62	452.45	473.67	494.62	517.69	541.03	566.22	591.42	618.73	646.32	675.76	690.34	719.78	745.24	761.95	782.90	795.63
Sharp Health Plan	Performance	HMO B	215.29	234.42	241.74	249.06	256.94	264.82	272.98	281.42	281.42	281.42	281.42	282.55	288.17	294.93	305.90	314.91	319.41	326.17	332.92	337.14	341.64	343.90	346.15	348.40	350.65	355.15	359.65	366.41	372.88	381.89	393.14	406.37	422.13	439.86	460.12	480.10	502.62	524.85	549.33	574.10	600.83	627.57	656.55	685.82	717.06	732.54	763.77	790.79	808.52	830.75	844.26
Sharp Health Plan	Premier	HMO C	197.90	215.49	222.21	228.94	236.18	243.43	250.93	258.69	258.69	258.69	258.69	259.72	264.90	271.11	281.20	289.47	293.61	299.82	306.03	309.91	314.05	316.12	318.19	320.26	322.33	326.47	330.61	336.81	342.76	351.04	361.39	373.55	388.04	404.33	422.96	441.33	462.02	482.46	504.96	527.73	552.30	576.88	603.52	630.43	659.14	673.37	702.08	726.92	743.22	763.65	776.07
Sutter Health Plus	Sutter Health Plus	HMO B	255.46	278.17	286.85	295.54	304.89	314.24	323.92	333.95	333.95	333.95	333.95	335.27	341.95	349.97	362.99	373.68	379.02	387.04	395.05	400.06	405.40	408.07	410.75	413.42	416.09	421.43	426.77	434.79	442.47	453.16	466.51	482.21	500.91	521.95	545.99	569.70	596.42	622.80	651.85	681.24	712.96	744.68	779.08	813.81	850.88	869.24	906.31	938.37	959.41	985.79	1001.81
Sutter Health Plus	Sutter Health Plus	HMO C	231.87	252.48	260.36	268.24	276.73	285.22	294.01	303.11	303.11	303.11	303.11	304.31	310.37	317.65	329.47	339.17	344.02	351.29	358.57	363.11	367.96	370.39	372.81	375.24	377.66	382.51	387.36	394.63	401.61	411.30	423.43	437.67	454.65	473.74	495.57	517.09	541.33	565.28	591.65	618.32	647.12	675.91	707.13	738.65	772.30	788.97	822.61	851.71	870.80	894.75	909.29
UnitedHealthcare	SignatureValue	HMO A	353.08	384.46	396.46	408.46	421.39	434.31	447.69	461.54	461.54	461.54	461.54	463.39	472.62	483.69	501.69	516.46	523.85	534.92	546.00	552.92	560.31	564.00	567.69	571.39	575.08	582.46	589.85	600.93	611.54	626.31	644.77	666.46	692.31	721.39	754.62	787.39	824.31	860.77	900.93	941.54	985.39	1029.23	1076.77	1124.77	1176.00	1201.39	1252.62	1296.93	1326.00	1362.47	1384.62
UnitedHealthcare	Advantage	HMO B	279.08	303.89	313.37	322.86	333.07	343.29	353.87	364.81	364.81	364.81	364.81	366.27	373.57	382.32	396.55	408.22	414.06	422.81	431.57	437.04	442.88	445.80	448.72	451.63	454.55	460.39	466.23	474.98	483.37	495.05	509.64	526.79	547.22	570.20	596.46	622.37	651.55	680.37	712.11	744.21	778.87	813.53	851.10	889.04	929.54	949.60	990.09	1025.12	1048.10	1076.92	1094.43
Western Health	Full	HMO A	221.05	240.70	248.21	255.73	263.82	271.91	280.29	288.96	288.96	288.96	288.96	290.11	295.89	302.83	314.10	323.34	327.97	334.90	341.83	346.17	350.79	353.10	355.42	357.73	360.04	364.66	369.29	376.22	382.87	392.11	403.67	417.25	433.43	451.64	472.44	492.96	516.08	538.90	564.04	589.47	616.92	644.37	674.13	704.19	736.26	752.15	784.23	811.97	830.17	853.00	866.87
Western Health	Full	HMO B	232.10	252.74	260.62	268.51	277.01	285.50	294.30	303.40	303.40	303.40	303.40	304.62	310.69	317.97	329.80	339.51	344.36	351.65	358.93	363.48	368.33	370.76	373.19	375.61	378.04	382.90	387.75	395.03	402.01	411.72	423.86	438.12	455.11	474.22	496.07	517.61	541.88	565.85	592.24	618.94	647.77	676.59	707.84	739.40	773.07	789.76	823.44	852.56	871.68	895.65	910.21
Western Health	Full	HMO C	216.67	235.93	243.30	250.66	258.59	266.52	274.74	283.23	283.23	283.23	283.23	284.36	290.03	296.83	307.87	316.94	321.47	328.27	335.06	339.31	343.84	346.11	348.38	350.64	352.91	357.44	361.97	368.77	375.28	384.35	395.68	408.99	424.85	442.69	463.08	483.19	505.85	528.23	552.87	577.79	604.70	631.61	660.78	690.24	721.68	737.25	768.69	795.88	813.73	836.10	849.70

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	335.31	365.11	376.51	387.90	400.18	412.45	425.16	438.31	438.31	438.31	438.31	440.06	448.83	459.35	476.44	490.47	497.48	508.00	518.52	525.10	532.11	535.61	539.12	542.63	546.13	553.15	560.16	570.68	580.76	594.79	612.32	632.92	657.47	685.08	716.64	747.76	782.82	817.45	855.58	894.15	935.79	977.43	1022.58	1068.16	1116.81	1140.92	1189.57	1231.65	1259.26	1293.89	1314.93
Anthem Blue Cross	CaliforniaCare HMO	HMO B	387.43	421.87	435.04	448.21	462.39	476.57	491.26	506.45	506.45	506.45	506.45	508.48	518.60	530.76	550.51	566.72	574.82	586.98	599.13	606.73	614.83	618.88	622.93	626.99	631.04	639.14	647.24	659.40	671.05	687.25	707.51	731.31	759.68	791.58	828.05	864.00	904.52	944.53	988.59	1033.16	1081.27	1129.38	1181.55	1234.22	1290.43	1318.29	1374.51	1423.12	1455.03	1495.04	1519.35
Anthem Blue Cross	Advantage PPO	PPO A	419.08	456.33	470.58	484.82	500.16	515.50	531.39	547.82	547.82	547.82	547.82	550.01	560.97	574.12	595.48	613.01	621.78	634.92	648.07	656.29	665.05	669.44	673.82	678

USE EMPLOYER ZIP CODE FOR RATING

AREA 2 - Continued

10/01/20 - 12/01/20

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	384.06	418.20	431.25	444.31	458.36	472.42	486.98	502.04	502.04	502.04	502.04	504.05	514.09	526.14	545.72	561.78	569.82	581.86	593.91	601.44	609.48	613.49	617.51	621.53	625.54	633.57	641.61	653.66	665.20	681.27	701.35	724.95	753.06	784.69	820.84	856.48	896.64	936.30	979.98	1024.16	1071.86	1119.55	1171.26	1223.47	1279.20	1306.81	1362.54	1410.73	1442.36	1482.02	1506.12
Health Net	WholeCare	HMO C	506.65	551.69	568.91	586.13	604.67	623.22	642.43	662.29	662.29	662.29	662.29	664.94	678.19	694.08	719.91	741.11	751.70	767.60	783.49	793.43	804.02	809.32	814.62	819.92	825.22	835.81	846.41	862.31	877.54	898.73	925.22	956.35	993.44	1035.17	1082.85	1129.87	1182.86	1235.18	1292.80	1351.08	1414.00	1476.92	1545.13	1614.01	1687.52	1723.95	1797.47	1861.05	1902.77	1955.09	1986.87
Health Net	Salud HMO y Mas	HMO D	273.62	297.94	307.24	316.54	326.55	336.57	346.94	357.67	357.67	357.67	357.67	359.10	366.25	374.84	388.79	400.23	405.95	414.54	423.12	428.49	434.21	437.07	439.93	442.79	445.65	451.38	457.10	465.68	473.91	485.36	499.66	516.47	536.50	559.04	584.79	610.18	638.80	667.05	698.17	729.64	763.62	797.60	834.44	871.64	911.34	931.01	970.71	1005.05	1027.58	1055.84	1073.01
Health Net	Full	HMO E	509.09	554.34	571.64	588.95	607.58	626.21	645.51	665.48	665.48	665.48	665.48	668.14	681.45	697.42	723.37	744.67	755.32	771.29	787.26	797.24	807.89	813.21	818.54	823.86	829.18	839.83	850.48	866.45	881.76	903.05	929.67	960.95	998.21	1040.14	1088.05	1135.30	1188.54	1241.11	1299.01	1357.57	1420.79	1484.01	1552.56	1621.77	1695.63	1732.24	1806.10	1869.99	1911.91	1964.49	1996.44
Kaiser Permanente	Full	HMO A	350.80	380.74	392.19	403.63	415.96	414.30	427.07	440.28	440.28	440.28	440.28	442.04	450.84	461.41	478.58	492.67	499.71	510.28	520.85	527.45	534.49	538.02	541.54	545.06	548.58	555.63	562.67	573.24	583.37	597.45	615.07	635.76	660.41	688.15	719.85	751.11	786.33	821.11	859.42	898.16	939.99	981.82	1027.16	1072.95	1121.82	1146.04	1194.91	1237.18	1264.91	1299.69	1320.84
Kaiser Permanente	Full	HMO B	347.26	376.89	388.21	399.54	411.74	409.95	422.58	435.65	435.65	435.65	435.65	437.39	446.11	456.56	473.55	487.49	494.46	504.92	515.38	521.91	528.88	532.37	535.85	539.34	542.82	549.79	556.76	567.22	577.24	591.18	608.60	629.08	653.48	680.92	712.29	743.22	778.07	812.49	850.39	888.73	930.12	971.50	1016.37	1061.68	1110.04	1134.00	1182.36	1224.18	1251.63	1286.04	1306.95
Oscar	Oscar EPO	EPO A	295.58	321.86	331.90	341.95	352.77	363.59	374.79	386.38	386.38	386.38	386.38	387.93	395.66	404.93	420.00	432.36	438.54	447.82	457.09	462.89	469.07	472.16	475.25	478.34	481.43	487.61	493.80	503.07	511.96	524.32	539.78	557.94	579.57	603.91	631.73	659.17	690.08	720.60	754.22	788.22	824.93	861.63	901.43	941.61	984.50	1005.75	1048.64	1085.73	1110.08	1140.60	1159.14
Oscar	Oscar EPO	EPO B	290.38	316.19	326.06	335.93	346.56	357.19	368.19	379.58	379.58	379.58	379.58	381.10	388.69	397.80	412.61	424.75	430.83	439.94	449.05	454.74	460.81	463.85	466.89	469.92	472.96	479.03	485.11	494.22	502.95	515.09	530.28	548.12	569.37	593.29	620.62	647.57	677.93	707.92	740.94	774.35	810.41	846.47	885.57	925.04	967.18	988.05	1030.19	1066.63	1090.54	1120.53	1138.74
Sharp Health Plan	Premier	HMO A	282.90	308.04	317.66	327.27	337.63	347.98	358.71	369.80	369.80	369.80	369.80	371.28	378.68	387.55	401.97	413.81	419.72	428.60	437.47	443.02	448.94	451.90	454.85	457.81	460.77	466.69	472.60	481.48	489.99	501.82	516.61	533.99	554.70	578.00	604.62	630.88	660.46	689.68	721.85	754.39	789.52	824.65	862.74	901.20	942.25	962.59	1003.64	1039.14	1062.44	1091.65	1109.40
Sharp Health Plan	Performance	HMO B	304.75	331.84	342.20	352.56	363.71	374.87	386.42	398.37	398.37	398.37	398.37	399.96	407.93	417.49	433.03	445.78	452.15	461.71	471.27	477.25	483.62	486.81	490.00	493.18	496.37	502.74	509.12	518.68	527.84	540.59	556.52	575.25	597.56	622.65	651.33	679.62	711.49	742.96	777.62	812.67	850.52	888.37	929.40	970.83	1015.05	1036.96	1081.18	1119.42	1144.52	1175.99	1195.11
Sharp Health Plan	Premier	HMO C	278.90	303.70	313.17	322.65	332.86	343.07	353.64	364.58	364.58	364.58	364.58	366.04	373.33	382.08	396.30	407.97	413.80	422.55	431.30	436.77	442.60	445.52	448.43	451.35	454.27	460.10	465.93	474.68	483.07	494.74	509.32	526.45	546.87	569.84	596.09	621.97	651.14	679.94	711.66	743.74	778.38	813.01	850.57	888.48	928.95	949.00	989.47	1024.47	1047.44	1076.24	1093.74
Sutter Health Plus	Sutter Health Plus	HMO A	333.25	362.87	374.20	385.53	397.72	409.92	422.55	435.63	435.63	435.63	435.63	437.36	446.08	456.53	473.52	487.46	494.43	504.89	515.34	521.88	528.85	532.33	535.82	539.30	542.79	549.76	556.73	567.18	577.20	591.14	608.56	629.04	653.43	680.88	712.24	743.17	778.02	812.44	850.33	888.67	930.05	971.44	1016.31	1061.61	1109.97	1133.92	1182.28	1224.10	1251.54	1285.96	1306.86
Sutter Health Plus	Sutter Health Plus	HMO B	329.11	358.37	369.55	380.74	392.79	404.83	417.31	430.22	430.22	430.22	430.22	431.94	440.54	450.86	467.64	481.41	488.29	498.62	508.94	515.40	522.28	525.72	529.16	532.61	536.05	542.93	549.81	560.14	570.03	583.80	601.01	621.23	645.32	672.43	703.40	733.95	768.36	802.35	839.78	877.64	918.51	959.38	1003.69	1048.43	1096.19	1119.85	1167.60	1208.90	1236.01	1269.99	1290.63
UnitedHealthcare	SignatureValue	HMO A	467.47	509.02	524.91	540.80	557.91	575.02	592.74	611.07	611.07	611.07	611.07	613.51	625.74	640.40	664.23	683.79	693.56	708.23	722.90	732.06	741.84	746.73	751.62	756.50	761.39	771.17	780.95	795.61	809.67	829.22	853.66	882.39	916.61	955.10	999.10	1042.49	1091.37	1139.65	1192.81	1246.58	1304.63	1362.69	1425.63	1489.18	1557.01	1590.62	1658.44	1717.11	1755.60	1803.88	1833.21
Western Health	Full	HMO A	290.72	316.56	326.44	336.32	346.96	357.60	368.62	380.02	380.02	380.02	380.02	381.54	389.14	398.26	413.08	425.24	431.32	440.44	449.56	455.26	461.35	464.39	467.43	470.47	473.51	479.59	485.67	494.79	503.53	515.69	530.89	548.75	570.03	593.97	621.33	648.32	678.72	708.74	741.80	775.24	811.34	847.45	886.59	926.11	968.29	989.19	1031.38	1067.86	1091.80	1121.82	1140.06
Western Health	Full	HMO B	298.09	324.59	334.72	344.85	355.77	366.68	377.98	389.67	389.67	389.67	389.67	391.23	399.02	408.37	423.57	436.04	442.27	451.62	460.98	466.82	473.06	476.17	479.29	482.41	485.52	491.76	497.99	507.35	516.31	528.78	544.36	562.68	584.50	609.05	637.10	664.77	695.94	726.73	760.63	794.92	831.94	868.96	909.09	949.62	992.87	1014.30	1057.56	1094.96	1119.51	1150.30	1169.00

Health Care Service Plan rates will vary by county

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USE EMPLOYER ZIP CODE FOR RATING

AREA 3

10/01/20 - 12/01/20

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	314.46	342.41	353.10	363.79	375.30	386.81	398.73	411.06	411.06	411.06	411.06	412.70	420.93	430.79	446.82	459.98	466.55	476.42	486.28	492.45	499.03	502.32	505.60	508.89	512.18	518.76	525.33	535.20	544.65	557.81	574.25	593.57	616.59	642.49	672.08	701.27	734.15	766.63	802.39	838.56	877.61	916.66	959.00	1001.75	1047.38	1069.99	1115.62	1155.08	1180.98	1213.45	1233.18
Anthem Blue Cross	Select PPO	PPO B	287.17	312.69	322.45	332.21	342.72	353.23	364.12	375.38	375.38	375.38	375.38	376.88	384.39	393.40	408.04	420.05	426.06	435.07	444.07	449.71	455.71	458.71	461.72	464.72	467.72	473.73	479.74	488.74	497.38	509.39	524.41	542.05	563.07	586.72	613.75	640.40	670.43	700.08	732.74	765.78	801.44	837.10	875.76	914.80	956.47	977.11	1018.78	1054.82	1078.47	1108.12	1126.14
Anthem Blue Cross	Prudent Buyer - Small Group	EPO A	312.85	340.66	351.30	361.93	373.38	384.83	396.69	408.96	408.96	408.96	408.96	410.60	418.78	428.59	444.54	457.63	464.17	473.98	483.80	489.93	496.48	499.75	503.02	506.29	509.56	516.11	522.65	532.47	541.87	554.96	571.32	590.54	613.44	639.20	668.65	697.69	730.40	762.71	798.29	834.28	873.13	911.98	954.10	996.64	1042.03	1064.52	1109.92	1149.18	1174.94	1207.25	1226.88
Health Net	CommunityCare	HMO A	216.73	236.00	243.36	250.73	258.66	266.59	274.81	283.31	283.31	283.31	283.31	284.44	290.11	296.91	307.96	317.02	321.55	328.35	335.15	339.40	343.94	346.20	348.47	350.74	353.00	357.53	362.07	368.87	375.38	384.45	395.78	409.10	424.96	442.81	463.21	483.32	505.99	528.37	553.02	577.95	604.86	631.78	660.96	690.42	721.87	737.45	768.90	796.10	813.94	836.33	849.93
Kaiser Permanente	Full	HMO A	208.84	226.16	232.78	239.40	246.54	239.68	247.06	254.71	254.71	254.71	254.71	255.72	260.82	266.93	276.87	285.02	289.09	295.20	301.32	305.14	309.21	311.25	313.29	315.33	317.36	321.44	325.51	331.63	337.49	345.64	355.82	367.80	382.06	398.11	416.44	434.53	454.91	475.03	497.19	519.60	543.80	567.99	594.23	620.72	648.99	663.00	691.27	715.72	731.77	751.89	764.13
Kaiser Permanente	Full	HMO C	197.68	214.01	220.26	226.50	233.22	225.96	232.92	240.12	240.12	240.12	240.12	241.08	245.89	251.65	261.01	268.70	272.54	278.30	284.07	287.67	291.51	293.43	295.35	297.27	299.19	303.04	306.88	312.64	318.16	325.85	335.45	346.74	360.19	375.31	392.60	409.65	428.86	447.83	468.72	489.85	512.66	535.48	560.21	585.18	611.83	625.04	651.70	674.75	689.87	708.84	720.36
Oscar	Oscar EPO	EPO A	187.26	203.90	210.26	216.63	223.48	230.34	237.44	244.78	244.78	244.78	244.78	245.76	250.65	256.53	266.07	273.91	277.82	283.70	289.57	293.24	297.16	299.12	301.08	303.04	304.99	308.91	312.83	318.70	324.33	332.16	341.96	353.46	367.17	382.59	400.21	417.59	437.17	456.51	477.81	499.35	522.60	545.86	571.07	596.52	623.70	637.16	664.33	687.83	703.25	722.59	734.34
Oscar	Oscar EPO	EPO B	177.79	193.60	199.64	205.68	212.19	218.70	225.44	232.41	232.41	232.41	232.41	233.34	237.99	243.57	252.63	260.07	263.79	269.36	274.94	278.43	282.15	284.01	285.87	287.72	289.58	293.30	297.02	302.60	307.94	315.38	324.68	335.68	348.62	363.26	379.99	396.49	415.09	433.45	453.67	474.12	496.20	518.28	542.21	566.38	592.18	604.97	630.76	653.07	667.72	686.08	697.23
Oscar	Oscar EPO	EPO C	178.81	194.71	200.78	206.86	213.40	219.95	226.73	233.74	233.74	233.74	233.74	234.68	239.35	244.96	254.08	261.56	265.30	270.91	276.51	280.02	283.76	285.63	287.50	289.37	291.24	294.98	298.72	304.33	309.71	317.19	326.54	337.52	350.61	365.34	382.17	398.76	417.46	435.93	456.26	476.83	499.04	521.24	545.32	569.63	595.57	608.43	634.37	656.81	671.54	690.00	701.22
Sharp Health Plan	Premier	HMO A	172.72	188.07	193.95	199.82	206.14	212.46	219.01	225.78	225.78	225.78	225.78	226.68	231.20	236.62	245.42	252.65	256.26	261.68	267.10	270.48	274.10	275.90	277.71	279.52	281.32	284.93	288.55	293.97	299.16	306.38	315.41	326.03	338.67	352.89	369.15	385.18	403.24	421.08	440.72	460.59	482.04	503.49	526.74	550.23	575.29	587.71	612.77	634.44	648.67	666.50	677.34
Sharp Health Plan	Performance	HMO B	197.55	215.11	221.83	228.54	235.77	243.00	250.49	258.24	258.24	258.24	258.24	259.27	264.44	270.64	280.71	288.97	293.10	299.30	305.50	309.37	313.50	315.57	317.64	319.70	321.77	325.90	330.03	336.23	342.17	350.43	360.76	372.90	387.36	403.63	422.22	440.56	461.22	481.62	504.08	526.81	551.34	575.88	602.47	629.33	658.00	672.20	700.86	725.65	741.92	762.32	774.72
Sutter Health Plus	Sutter Health Plus	HMO A	188.41	205.16	211.57	217.97	224.87	231.76	238.90	246.30	246.30	246.30	246.30	247.28	252.20	258.12	267.72	275.60	279.54	285.45	291.36	295.06	299.00	300.97	302.94	304.91	306.88	310.82	314.76	320.67	326.34	334.22	344.07	355.65	369.44	384.96	402.69	420.18	439.88	459.34	480.76	502.44	525.84	549.23	574.60	600.22	627.56	641.10	668.44	692.08	707.60	727.06	738.87
Sutter Health Plus	Sutter Health Plus	HMO B	186.50	203.07	209.41	215.75	222.58	229.40	236.47	243.80	243.80	243.80	243.80	244.76	249.64	255.49	264.99	272.80	276.70	282.55	288.40	292.06	295.96	297.91	299.86	301.81	303.76	307.66	311.56	317.41	323.02	330.82	340.57	352.03	365.68	381.04	398.59	415.90	435.40	454.66	475.87	497.32	520.48	543.64	568.75	594.11	621.17	634.57	661.63	685.04	700.40	719.65	731.35
Western Health	Full	HMO B	187.12	203.75	210.11	216.47	223.32	230.17	237.26	244.60	244.60	244.60	244.60	245.58	250.47	256.34	265.88	273.71	277.62	283.49	289.36	293.03	296.94	298.90	300.86	302.81	304.77	308.68	312.60	318.47	324.09	331.92	341.71	353.20	366.90	382.31	399.92	417.29	436.85	456.18	477.46	498.98	522.22	545.46	570.65	596.09	623.24	636.69	663.84	687.32	702.73	722.06	733.80
Western Health	Full	HMO C	191.85	208.91	215.43	221.95	228.97	235.99	243.27	250.79	250.79	250.79	250.79	251.79	256.81	262.83	272.61	280.63	284.65	290.67	296.69	300.45	304.46	306.47	308.47	310.48	312.49	316.50	320.51	326.53	332.30	340.32	350.35	362.14	376.19	391.99	410.04	427.85	447.91	467.72	489.54	511.61	535.44	559.26	585.09	611.18	639.01	652.81	680.65	704.72	720.52	740.33	752.37

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	333.81	363.48	374.82	386.17	398.39	410.61	423.26	436.35	436.35	436.35	436.35	438.10	446.82	457.29	474.31	488.28	495.26	505.73	516.20	522.75	529.73	533.22	536.71	540.20	543.69	550.67	557.66	568.13	578.16	592.13	609.58	630.09	654.53	682.02	713.43	744.41	779.32	813.79	851.76	890.15	931.61	973.06	1018.00	1063.38	1111.82	1135.82	1184.25	1226.14	1253.63	1288.11	1309.05
Anthem Blue Cross	CaliforniaCare HMO	HMO B	387.37	421.80	434.96	448.13	462.31	476.48	491.17	506.36	506.36	506.36	506.36	508.39	518.51	530.67	550.41	566.62	574.72	586.87	599.02	606.62	614.72	618.77	622.82	626.87	630.92	639.03	647.13	659.28	670.93	687.13	707.38	731.18	759.54	791.44	827.90	863.85	904.36	943.36	988.41	1032.97	1081.08	1129.18	1181.34	1234.00	1290.21	1318.06	1374.26	1422.87	1454.77	1494.77	1519.08
Anthem Blue Cross	Advantage PPO	PPO A	363.25	395.54	407.89	420.23	433.53	446.82	460.59	474.84	474.84	474.84	474.84	476.74	486.24	497.63	516.15	531.35	538.94	550.34	561.74	568.86	576.46	580.25	584.05	587.85	591.65	599.25	606.85	618.24	629.16	644.36	663.35	685.67	712.26	742.17	776.36	810.08	848.06	885.58	926.89	968.67	1013.78	1058.89	1107.80	1157.19	1209.89	1236.01	1288.72	1334.30	1364.22	1401.73	1424.52
Anthem Blue Cross	Select PPO	PPO B	324.28	353.10	364.12	375.14	387.01	398.88	411.17	423.89	423.89	423.89	423.89	425.59	434.06	444.24	460.77	474.33	481.12	491.29	501.46	507.82	514.60	517.99	521.38	524.78	528.17	534.95	541.73	551.90	561.65	575.22	592.17	612.10	635.84	662.54	693.06	723.16	757.07	790.55	827.43	864.74	905.01	945.27	988.94	1033.02	1080.07	1103.39	1150.44	1191.13	1217.84	1251.32	1271.67
Anthem Blue Cross	Prudent Buyer - Small Group	PPO C	355.16	386.73	398.80	410.87	423.87	436.87	450.33	464.26	464.26	464.26	464.26	466.12	475.40	486.54	504.65	519.51	526.94	538.08	549.22	556.18	563.61	567.33	571.04	574.75	578.47	585.90	593.32	604.47	615.14	630.00	648.57	670.39	696.39	725.64	759.07	792.03	829.17	865.84	906.24	947.09	991.20	1035.30	1083.12	1131.40	1182.93	1208.47	1260.00	1304.57	1333.82	1370.50	1392.78
Anthem Blue Cross	Prudent Buyer - Small Group	EPO A	351.43	382.67	394.62	406.56	419.42	432.29	445.61	459.39	459.39	459.39	459.39	461.23	470.42	481.44	499.36	514.06	521.41	532.43	543.46	550.35	557.70	561.37	565.05	568.72	572.40	579.75	587.10	598.13	608.69	623.39	641.77	663.36	689.09	718.03	751.10	783.72	820.47	856.76	896.73	937.16	980.80	1024.44	1071.76	1119.53	1170.53	1195.79	1246.78	1290.89	1319.83	1356.12	1378.17
Anthem Blue Cross	Prudent Buyer - Small Group	EPO B	351.94	383.22	395.18	407.14	420.03	432.91	446.25	460.05	460.05	460.05	460.05	461.89	471.09	482.13	500.07	514.80	522.16	533.20	544.24	551.14	558.50	562.18	565.86	569.54	573.22	580.58	587.94	598.99	609.57	624.29	642.69	664.31	690.08	719.06	752.18	784.85	821.65	857.99	898.02	938.50	982.21	1025.91	1073.30	1121.14	1172.21	1197.51	1248.58	1292.74	1321.72	1358.07	1380.15
Health Net	WholeCare	HMO A	369.63	402.49	415.05	427.61	441.14	454.67	468.68	483.18	483.18	483.18	483.18	485.11	494.77	506.37	525.21	540.68	548.41	560.00	571.60	578.85	586.58	590.44	594.31	598.17	602.04	609.77	617.50	629.10	640.21	655.67	675.00	697.71	724.77	755.21	789.99	824.30	862.95	901.13	943.16	985.68	1031.58	1077.48	1127.25	1177.50	1231.13	1257.71	1311.34	1357.73	1388.17	1426.34	1449.54
Health Net	CommunityCare	HMO C	244.42	266.15	274.46	282.76	291.71	300.65	309.92	319.51	319.51	319.51	319.51	320.78	327.17	334.84	347.30	357.53	362.64	370.31	377.98	382.77	387.88	390.44	392.99	395.55	398.10	403.22	408.33	416.00	423.35	433.57	446.35	461.37	479.26	499.39	522.39	545.08	570.64	595.88	623.68	651.79	682.14	712.50	745.41	778.64	814.10	831.67	867.14	897.81	917.94	943.18	958.53
Kaiser Permanente	Full	HMO A	240.66	260.81	268.52	276.22	284.52	278.83	287.42	296.31	296.31	296.31	296.31	297.49	303.42	310.53	322.09	331.57	336.31	343.42	350.53	354.98	359.72	362.09	364.46	366.83	369.20	373.94	378.68	385.79	392.61	402.09	413.94	427.87	444.46	463.13	484.46	505.50	529.20	552.61	578.39	604.47	632.62	660.76	691.28	722.10	754.99	771.29	804.18	832.62	851.29	874.70	888.93
Kaiser Permanente	Full	HMO B	244.68	265.18	273.02	280.86	289.31	283.76	292.50	301.55	301.55	301.55	301.55	302.76	308.79	316.03	327.79	337.44	342.26	349.50	356.74	361.26	366.08	368.50	370.91	373.32	375.73	380.56	385.38	392.62	399.56	409.21	421.27	435.44	452.33	471.32	493.04	514.45	538.57	562.39	588.63	615.16	643.81	672.46	703.52	734.88	768.35	784.94	818.41	847.36	866.36	890.18	904.65
Kaiser Permanente	Full	HMO C	252.37	273.56	281.66	289.76	298.48	293.22	302.26	311.60	311.60	311.60	311.60	312.85	319.08	326.56	338.71	348.68	353.67	361.15	368.63	373.30	378.29	380.78	383.27	385.77	388.26	393.24	398.23	405.71	412.87	422.85	435.31	449.96	467.41	487.04	509.47	531.60	556.52	581.14	608.25	635.67	665.27	694.88	726.97	759.38	793.97	811.10	845.69	875.61	895.24	919.85	934.80
Kaiser Permanente	Full	HMO D	226.95	245.88	253.12	260.36	268.15	261.96	270.03	278.38	278.38	278.38	278.38	279.49	285.06	291.74	302.60	311.51	315.96	322.64	329.33	333.50	337.96	340.18	342.41	344.64	346.86	351.32	355.77	362.45	368.86	377.76	388.90	401.98	417.57	435.11	455.15	474.92	497.19	519.18	543.40	567.90	594.34	620.79	649.46	678.42	709.32	724.63	755.53	782.25	799.79	821.78	835.14
Oscar	Oscar EPO	EPO A	214.28	233.32	240.61	247.89	255.73	263.57	271.70	280.10	280.10	280.10	280.10	281.22	286.82	293.55	304.47	313.43	317.91	324.64	331.36	335.56	340.04	342.28	344.52	346.76	349.00	353.49	357.97	364.69	371.13	380.10	391.30	404.46	420.15	437.80	457.96	477.85	500.26	522.39	546.76	571.40	598.01	624.62	653.47	682.60	713.70	729.10	760.19	787.08	804.73	826.86	840.30
Oscar	Oscar EPO	EPO B	241.22	262.66	270.86	279.06	287.88	296.71	305.86	315.32	315.32	315.32	315.32	316.58	322.88	330.45	342.75	352.84	357.88	365.45	373.02	377.75	382.79	385.32	387.84	390.36	392.88	397.93	402.97	410.54	417.79	427.89	440.50	455.32	472.98	492.84	515.54	537.93	563.16	588.07	615.50	643.25	673.20	703.16	735.63	768.43	803.43	820.77	855.77	886.04	905.91	930.82	945.95
Oscar	Oscar EPO	EPO C	214.01	233.03	240.31	247.58	255.41	263.25	271.36	279.75	279.75	279.75	279.75	280.87	286.47	293.18	304.09	313.04	317.52	324.23	330.95	335.14	339.62	341.86	344.10	346.33	348.57	353.05	357.52	364.24	370.67	379.62	390.82	403.96	419.63	437.25	457.40	477.26	499.64	521.74	546.08	570.70	597.27	623.85	652.66	681.76	712.81	728.20	759.25	786.11	803.73	825.83	839.25
Oscar	Oscar EPO	EPO D	240.70	262.09	270.27	278.46	287.27	296.08	305.20	314.64	314.64	314.64	314.64	315.90	322.19	329.74	342.01	352.08	357.12	364.67	372.22	376.94	381.97	384.49	387.01	389.52	392.04	397.07	402.11	409.66	416.90	426.97	439.55	454.34	471.96	491.78	514.43	536.77	561.95	586.80	614.18	641.86	671.75	701.64	734.05	766.78	801.70	819.01	853.93	884.14	903.96	928.81	943.92
Sharp Health Plan	Premier	HMO A	202.89	220.92	227.82	234.71	242.14	249.56	257.25	265.21	265.21	265.21	265.21	266.27	271.58	277.94	288.28	296.77	301.01	307.38	313.74	317.72	321.96	324.09	326.21	328.33	330.45	334.70	338.94	345.30	351.40	359.89	370.50	382.96	397.82	414.52	433.62	452.45	473.67	494.62	517.69	541.03	566.22	591.42	618.73	646.32	675.76	690.34	719.78	745.24	761.95	782.90	795.63
Sharp Health Plan	Performance	HMO B	215.29	234.42	241.74	249.06	256.94	264.82	272.98	281.42	281.42	281.42	281.42	282.55	288.17	294.93	305.90	314.91	319.41	326.17	332.92	337.14	341.64	343.90	346.15	348.40	350.65	355.15	359.65	366.41	372.88	381.89	393.14	406.37	422.13	439.86	460.12	480.10	502.62	524.85	549.33	574.10	600.83	627.57	656.55	685.82	717.06	732.54	763.77	790.79	808.52	830.75	844.26
Sharp Health Plan	Premier	HMO C	197.90	215.49	222.21	228.94	236.18	243.43	250.93	258.69	258.69	258.69	258.69	259.72	264.90	271.11	281.20	289.47	293.61	299.82	306.03	309.91	314.05	316.12	318.19	320.26	322.33	326.47	330.61	336.81	342.76	351.04	361.39	373.55	388.04	404.33	422.96	441.33	462.02	482.46	504.96	527.73	552.30	576.88	603.52	630.43	659.14	673.37	702.08	726.92	743.22	763.65	776.07
Sutter Health Plus	Sutter Health Plus	HMO B	241.78	263.27	271.49	279.71	288.55	297.40	306.57	316.06	316.06	316.06	316.06	317.32	323.64	331.22	343.55	353.66	358.72	366.30	373.89	378.63	383.69	386.21	388.74	391.27	393.80	398.86	403.91	411.50	418.77	428.88	441.52	456.38	474.08	493.99	516.74	539.18	564.47	589.44	616.93	644.74	674.77	704.79	737.35	770.22	805.30	822.68	857.76	888.10	908.01	932.98	948.14
Sutter Health Plus	Sutter Health Plus	HMO C	219.45	238.96	246.42	253.87	261.91	269.94	278.26	286.87	286.87	286.87	286.87	288.01	293.75	300.63	311.82	321.00	325.59	332.47	339.36	343.66	348.25	350.55	352.84	355.14	357.43	362.02	366.61	373.50	380.09	389.27	400.75	414.23	430.29	448.37	469.02	489.39	512.34	535.00	559.96	585.20	612.45	639.70	669.25	699.08	730.93	746.70	778.55	806.08	824.16	846.82	860.58
UnitedHealthcare	SignatureValue	HMO A	344.28	374.88	386.58	398.29	410.89	423.49	436.54	450.04	450.04	450.04	450.04	451.84	460.84	471.64	489.19	503.59	510.80	521.60	532.40	539.15	546.35	549.95	553.55	557.15	560.75	567.95	575.15	585.95	596.30	610.70	628.71	649.86	675.06	703.41	735.82	767.77	803.77	839.32	878.48	918.08	960.84	1003.59	1049.94	1096.75	1146.70	1171.45	1221.41	1264.61	1292.96	1328.52	1350.12
UnitedHealthcare	Advantage	HMO B	313.34	341.19	351.84	362.49	373.96	385.42	397.30	409.59	409.59	409.59	409.59	411.23	419.42	429.25	445.22	458.33	464.88	474.71	484.54	490.69	497.24	500.52	503.80	507.07	510.35	516.90	523.46	533.29	542.71	555.81	572.20	591.45	614.39	640.19	669.68	698.76	731.53	763.89	799.52	835.56	874.47	913.39	955.57	998.17	1043.64	1066.16	1111.63	1150.95	1176.75	1209.11	1228.77
UnitedHealthcare	Focus	HMO D	324.88	353.76	364.80	375.84	387.73	399.62	411.94	424.68	424.68	424.68	424.68	426.38	434.87	445.06	461.63	475.22	482.01	492.20	502.40	508.77	515.56	518.96	522.36	525.75	529.15	535.95	542.74	552.93	562.70	576.29	593.28	613.24	637.02	663.77	694.35	724.50	758.48	792.03	828.98	866.35	906.69	947.04	990.78	1034.95	1082.08	1105.44	1152.58	1193.35	1220.11	1253.66	1274.04
Western Health	Full	HMO A	206.25	224.58	231.59	238.60	246.15	253.69	261.51	269.60	269.60	269.60	269.60	270.68	276.07	282.54	293.06	301.68	306.00	312.47	318.94	322.98	327.30	329.45	331.61	333.77	335.92	340.24	344.55	351.02	357.22	365.85	376.63	389.30	404.40	421.39	440.80	459.94	481.51	502.81	526.26	549.99	575.60	601.21	628.98	657.02	686.94	701.77	731.70	757.58	774.56	795.86	808.80
Western Health	Full	HMO B	216.56	235.81	243.17	250.53	258.45	266.38	274.59	283.08	283.08	283.08	283.08	284.21	289.88	296.67	307.71	316.77	321.30	328.09	334.89	339.13	343.66	345.93	348.19	350.45	352.72	357.25	361.78	368.57	375.08	384.14	395.46	408.77	424.62	442.46	462.84	482.94	505.58	527.95	552.58	577.49	604.38	631.27	660.43	689.87	721.29	736.86	768.28	795.46	813.29	835.66	849.24
Western Health	Full	HMO C	202.16	220.13	227.00	233.87	241.27	248.67	256.33	264.26	264.26	264.26	264.26	265.32	270.60	276.95	287.25	295.71	299.94	306.28	312.62	316.58	320.81	322.93	325.04	327.15	329.27	333.50	337.73	344.07	350.15	358.60	369.17	381.59	396.39	413.04	432.07	450.83	471.97	492.85	515.84	539.09	564.20	589.30	616.52	644.00	673.34	687.87	717.20	742.57	759.22	780.10	792.78

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	417.10	454.18	468.35	482.53	497.79	513.06	528.87	545.23	545.23	545.23	545.23	547.41	558.32	571.40	592.67	610.11	618.84	631.92	645.01	653.19	661.91	666.27	670.63	674.99	679.36	688.08	696.80	709.89	722.43	739.88	761.69	787.31	817.85	852.19	891.45	930.16	973.78	1016.85	1064.29	1112.27	1164.07	1215.86	1272.02	1328.73	1389.25	1419.23	1479.75	1532.10	1566.45	1609.52	1635.69
Anthem Blue Cross	CaliforniaCare HMO	HMO B	484.09	527.12	543.58	560.03	577.75	595.46	613.82	632.80	632.80	632.80	632.80	635.33	647.99	663.17	687.85	708.10	718.23	733.42	748.60	758.09	768.22	773

USE EMPLOYER ZIP CODE FOR RATING

AREA 3 - Continued

10/01/20 - 12/01/20

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	477.79	520.26	536.50	552.74	570.22	587.71	605.82	624.56	624.56	624.56	624.56	627.06	639.55	654.54	678.90	698.88	708.88	723.87	738.85	748.22	758.22	763.21	768.21	773.21	778.20	788.19	798.19	813.18	827.54	847.53	872.51	901.86	936.84	976.19	1021.16	1065.50	1115.46	1164.80	1219.14	1274.10	1333.44	1392.77	1457.10	1522.05	1591.38	1625.73	1695.06	1755.01	1794.36	1843.70	1873.68
Health Net	WholeCare	HMO C	422.54	460.10	474.47	488.83	504.29	519.76	535.78	552.35	552.35	552.35	552.35	554.56	565.60	578.86	600.40	618.08	626.91	640.17	653.43	661.71	670.55	674.97	679.39	683.80	688.22	697.06	705.90	719.15	731.86	749.53	771.63	797.59	828.52	863.32	903.09	942.30	986.49	1030.13	1078.18	1126.79	1179.26	1231.73	1288.62	1346.07	1407.38	1437.76	1499.07	1552.09	1586.89	1630.53	1657.05
Health Net	Salud HMO y Mas	HMO D	273.62	297.94	307.24	316.54	326.55	336.57	346.94	357.67	357.67	357.67	357.67	359.10	366.25	374.84	388.79	400.23	405.95	414.54	423.12	428.49	434.21	437.07	439.93	442.79	445.65	451.38	457.10	465.68	473.91	485.36	499.66	516.47	536.50	559.04	584.79	610.18	638.80	667.05	698.17	729.64	763.62	797.60	834.44	871.64	911.34	931.01	970.71	1005.05	1027.58	1055.84	1073.01
Health Net	Full	HMO E	424.58	462.32	476.75	491.18	506.72	522.26	538.35	555.00	555.00	555.00	555.00	557.22	568.32	581.64	603.29	621.05	629.93	643.25	656.57	664.89	673.77	678.21	682.65	687.09	691.53	700.41	709.29	722.61	735.38	753.14	775.34	801.42	832.50	867.47	907.43	946.83	991.23	1035.08	1083.36	1132.20	1184.93	1237.65	1294.82	1352.54	1414.14	1444.67	1506.27	1559.55	1594.52	1638.36	1665.00
Kaiser Permanente	Full	HMO A	333.96	362.40	373.28	384.15	395.86	393.58	405.71	418.26	418.26	418.26	418.26	419.94	428.30	438.34	454.65	468.04	474.73	484.77	494.80	501.08	507.77	511.12	514.46	517.81	521.15	527.85	534.54	544.58	554.20	567.58	584.31	603.97	627.39	653.74	683.86	713.56	747.02	780.06	816.45	853.25	892.99	932.72	975.81	1019.30	1065.73	1088.74	1135.16	1175.32	1201.67	1234.71	1254.78
Kaiser Permanente	Full	HMO B	330.60	358.74	369.50	380.26	391.85	389.45	401.45	413.87	413.87	413.87	413.87	415.52	423.80	433.73	449.88	463.12	469.74	479.67	489.61	495.81	502.44	505.75	509.06	512.37	515.68	522.30	528.92	538.86	548.38	561.62	578.17	597.63	620.80	646.88	676.68	706.06	739.17	771.87	807.87	844.29	883.61	922.93	965.56	1008.60	1054.54	1077.30	1123.24	1162.97	1189.05	1221.74	1241.61
Oscar	Oscar EPO	EPO A	295.58	321.86	331.90	341.95	352.77	363.59	374.79	386.38	386.38	386.38	386.38	387.93	395.66	404.93	420.00	432.36	438.54	447.82	457.09	462.89	469.07	472.16	475.25	478.34	481.43	487.61	493.80	503.07	511.96	524.32	539.78	557.94	579.57	603.91	631.73	659.17	690.08	720.60	754.22	788.22	824.93	861.63	901.43	941.61	984.50	1005.75	1048.64	1085.73	1110.08	1140.60	1159.14
Oscar	Oscar EPO	EPO B	290.38	316.19	326.06	335.93	346.56	357.19	368.19	379.58	379.58	379.58	379.58	381.10	388.69	397.80	412.61	424.75	430.83	439.94	449.05	454.74	460.81	463.85	466.89	469.92	472.96	479.03	485.11	494.22	502.95	515.09	530.28	548.12	569.37	593.29	620.62	647.57	677.93	707.92	740.94	774.35	810.41	846.47	885.57	925.04	967.18	988.05	1030.19	1066.63	1090.54	1120.53	1138.74
Sharp Health Plan	Premier	HMO A	282.90	308.04	317.66	327.27	337.63	347.98	358.71	369.80	369.80	369.80	369.80	371.28	378.68	387.55	401.97	413.81	419.72	428.60	437.47	443.02	448.94	451.90	454.85	457.81	460.77	466.69	472.60	481.48	489.99	501.82	516.61	533.99	554.70	578.00	604.62	630.88	660.46	689.68	721.85	754.39	789.52	824.65	862.74	901.20	942.25	962.59	1003.64	1039.14	1062.44	1091.65	1109.40
Sharp Health Plan	Performance	HMO B	304.75	331.84	342.20	352.56	363.71	374.87	386.42	398.37	398.37	398.37	398.37	399.96	407.93	417.49	433.03	445.78	452.15	461.71	471.27	477.25	483.62	486.81	490.00	493.18	496.37	502.74	509.12	518.68	527.84	540.59	556.52	575.25	597.56	622.65	651.33	679.62	711.49	742.96	777.62	812.67	850.52	888.37	929.40	970.83	1015.05	1036.96	1081.18	1119.42	1144.52	1175.99	1195.11
Sharp Health Plan	Premier	HMO C	278.90	303.70	313.17	322.65	332.86	343.07	353.64	364.58	364.58	364.58	364.58	366.04	373.33	382.08	396.30	407.97	413.80	422.55	431.30	436.77	442.60	445.52	448.43	451.35	454.27	460.10	465.93	474.68	483.07	494.74	509.32	526.45	546.87	569.84	596.09	621.97	651.14	679.94	711.66	743.74	778.38	813.01	850.57	888.48	928.95	949.00	989.47	1024.47	1047.44	1076.24	1093.74
Sutter Health Plus	Sutter Health Plus	HMO A	315.40	343.44	354.16	364.87	376.42	387.96	399.92	412.30	412.30	412.30	412.30	413.94	422.18	432.08	448.16	461.35	467.95	477.84	487.74	493.92	500.52	503.82	507.11	510.41	513.71	520.31	526.90	536.80	546.28	559.47	575.97	595.34	618.43	644.41	674.09	703.36	736.35	768.92	804.79	841.07	880.23	919.40	961.87	1004.74	1050.51	1073.18	1118.95	1158.53	1184.50	1217.07	1236.85
Sutter Health Plus	Sutter Health Plus	HMO B	311.48	339.17	349.76	360.34	371.75	383.15	394.95	407.18	407.18	407.18	407.18	408.80	416.94	426.71	442.59	455.62	462.14	471.91	481.68	487.79	494.30	497.56	500.82	504.08	507.33	513.85	520.36	530.13	539.50	552.53	568.82	587.95	610.75	636.41	665.72	694.63	727.20	759.37	794.79	830.63	869.31	907.99	949.93	992.27	1037.47	1059.86	1105.06	1144.15	1169.80	1201.96	1221.50
UnitedHealthcare	SignatureValue	HMO A	455.81	496.33	511.82	527.31	543.99	560.68	577.96	595.83	595.83	595.83	595.83	598.21	610.13	624.43	647.67	666.73	676.27	690.57	704.87	713.80	723.34	728.10	732.87	737.64	742.40	751.94	761.47	775.77	789.47	808.54	832.37	860.38	893.75	931.28	974.18	1016.49	1064.15	1111.22	1163.06	1215.49	1272.10	1328.70	1390.07	1452.04	1518.17	1550.95	1617.08	1674.28	1711.82	1758.89	1787.49
UnitedHealthcare	Focus	HMO B	430.14	468.37	482.99	497.61	513.35	529.10	545.40	562.27	562.27	562.27	562.27	564.52	575.76	589.26	611.19	629.18	638.18	651.67	665.17	673.60	682.60	687.09	691.59	696.09	700.59	709.58	718.58	732.08	745.01	763.00	785.49	811.92	843.41	878.83	919.31	959.23	1004.21	1048.63	1097.55	1147.03	1200.45	1253.86	1311.78	1370.25	1432.66	1463.59	1526.00	1579.98	1615.40	1659.82	1686.81
Western Health	Full	HMO A	271.50	295.63	304.86	314.09	324.03	333.96	344.26	354.90	354.90	354.90	354.90	356.32	363.42	371.94	385.78	397.14	402.81	411.33	419.85	425.17	430.85	433.69	436.53	439.37	442.21	447.89	453.57	462.08	470.25	481.60	495.80	512.48	532.35	554.71	580.27	605.46	633.86	661.89	692.77	724.00	757.72	791.43	827.99	864.90	904.29	923.81	963.21	997.28	1019.64	1047.67	1064.71
Western Health	Full	HMO B	278.13	302.85	312.30	321.76	331.94	342.12	352.66	363.57	363.57	363.57	363.57	365.02	372.29	381.02	395.20	406.83	412.65	421.37	430.10	435.55	441.37	444.28	447.19	450.10	453.00	458.82	464.64	473.36	481.73	493.36	507.90	524.99	545.35	568.25	594.43	620.24	649.33	678.05	709.68	741.68	776.21	810.75	848.20	886.01	926.37	946.36	986.72	1021.62	1044.53	1073.25	1090.70

Health Care Service Plan rates will vary by county

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USE EMPLOYER ZIP CODE FOR RATING

AREA 4

10/01/20 - 12/01/20

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	328.33	357.52	368.67	379.83	391.85	403.87	416.31	429.19	429.19	429.19	429.19	430.91	439.49	449.79	466.53	480.26	487.13	497.43	507.73	514.17	521.04	524.47	527.90	531.34	534.77	541.64	548.50	558.81	568.68	582.41	599.58	619.75	643.79	670.82	701.73	732.20	766.53	800.44	837.78	875.55	916.32	957.09	1001.30	1045.94	1093.58	1117.18	1164.82	1206.02	1233.06	1266.97	1287.57
Anthem Blue Cross	Select PPO	PPO B	328.33	357.52	368.67	379.83	391.85	403.87	416.31	429.19	429.19	429.19	429.19	430.91	439.49	449.79	466.53	480.26	487.13	497.43	507.73	514.17	521.04	524.47	527.90	531.34	534.77	541.64	548.50	558.81	568.68	582.41	599.58	619.75	643.79	670.82	701.73	732.20	766.53	800.44	837.78	875.55	916.32	957.09	1001.30	1045.94	1093.58	1117.18	1164.82	1206.02	1233.06	1266.97	1287.57
Anthem Blue Cross	Prudent Buyer - Small Group	EPO A	326.61	355.64	366.74	377.84	389.80	401.75	414.13	426.94	426.94	426.94	426.94	428.65	437.19	447.43	464.08	477.75	484.58	494.82	505.07	511.47	518.31	521.72	525.14	528.55	531.97	538.80	545.63	555.88	565.70	579.36	596.44	616.50	640.41	667.31	698.05	728.36	762.51	796.24	833.39	870.96	911.52	952.08	996.05	1040.45	1087.84	1111.32	1158.72	1199.70	1226.60	1260.33	1280.82
Health Net	CommunityCare	HMO A	216.73	236.00	243.36	250.73	258.66	266.59	274.81	283.31	283.31	283.31	283.31	284.44	290.11	296.91	307.96	317.02	321.55	328.35	335.15	339.40	343.94	346.20	348.47	350.74	353.00	357.53	362.07	368.87	375.38	384.45	395.78	409.10	424.96	442.81	463.21	483.32	505.99	528.37	553.02	577.95	604.86	631.78	660.96	690.42	721.87	737.45	768.90	796.10	813.94	836.33	849.93
Kaiser Permanente	Full	HMO A	229.35	248.49	255.81	263.13	271.02	264.91	273.07	281.52	281.52	281.52	281.52	282.64	288.27	295.03	306.01	315.02	319.52	326.28	333.03	337.26	341.76	344.01	346.27	348.52	350.77	355.27	359.78	366.54	373.01	382.02	393.28	406.51	422.28	440.01	460.28	480.27	502.79	525.03	549.52	574.30	601.04	627.78	656.78	686.06	717.31	732.79	764.04	791.06	808.80	831.04	844.56
Kaiser Permanente	Full	HMO C	217.02	235.07	241.97	248.87	256.30	249.74	257.44	265.40	265.40	265.40	265.40	266.46	271.77	278.14	288.49	296.98	301.23	307.60	313.97	317.95	322.20	324.32	326.44	328.56	330.69	334.93	339.18	345.55	351.65	360.15	370.76	383.24	398.10	414.82	433.93	452.77	474.00	494.97	518.06	541.42	566.63	591.84	619.18	646.78	676.24	690.84	720.29	745.77	762.49	783.46	796.20
Oscar	Oscar EPO	EPO A	187.26	203.90	210.26	216.63	223.48	230.34	237.44	244.78	244.78	244.78	244.78	245.76	250.65	256.53	266.07	273.91	277.82	283.70	289.57	293.24	297.16	299.12	301.08	303.04	304.99	308.91	312.83	318.70	324.33	332.16	341.96	353.46	367.17	382.59	400.21	417.59	437.17	456.51	477.81	499.35	522.60	545.86	571.07	596.52	623.70	637.16	664.33	687.83	703.25	722.59	734.34
Oscar	Oscar EPO	EPO B	177.79	193.60	199.64	205.68	212.19	218.70	225.44	232.41	232.41	232.41	232.41	233.34	237.99	243.57	252.63	260.07	263.79	269.36	274.94	278.43	282.15	284.01	285.87	287.72	289.58	293.30	297.02	302.60	307.94	315.38	324.68	335.60	348.62	363.26	379.99	396.49	415.09	433.45	453.67	474.12	496.20	518.28	542.21	566.38	592.18	604.97	630.76	653.07	667.72	686.08	697.23
Oscar	Oscar EPO	EPO C	178.81	194.71	200.78	206.86	213.40	219.95	226.73	233.74	233.74	233.74	233.74	234.68	239.35	244.96	254.08	261.56	265.30	270.91	276.51	280.02	283.76	285.63	287.50	289.37	291.24	294.98	298.72	304.33	309.71	317.19	326.54	337.52	350.61	365.34	382.17	398.76	417.46	435.93	456.26	476.83	499.04	521.24	545.32	569.63	595.57	608.43	634.37	656.81	671.54	690.00	701.22
Sharp Health Plan	Premier	HMO A	172.72	188.07	193.95	199.82	206.14	212.46	219.01	225.78	225.78	225.78	225.78	226.68	231.20	236.62	245.42	252.65	256.26	261.68	267.10	270.48	274.10	275.90	277.71	279.52	281.32	284.93	288.55	293.97	299.16	306.38	315.41	326.03	338.67	352.89	369.15	385.18	403.24	421.08	440.72	460.59	482.04	503.49	526.74	550.23	575.29	587.71	612.77	634.44	648.67	666.50	677.34
Sharp Health Plan	Performance	HMO B	197.55	215.11	221.83	228.54	235.77	243.00	250.49	258.24	258.24	258.24	258.24	259.27	264.44	270.64	280.71	288.97	293.10	299.30	305.50	309.37	313.50	315.57	317.64	319.70	321.77	325.90	330.03	336.23	342.17	350.43	360.76	372.90	387.36	403.63	422.22	440.56	461.22	481.62	504.08	526.81	551.34	575.88	602.47	629.33	658.00	672.20	700.86	725.65	741.92	762.32	774.72
Sutter Health Plus	Sutter Health Plus	HMO A	210.51	229.23	236.38	243.54	251.24	258.95	266.93	275.19	275.19	275.19	275.19	276.28	281.79	288.39	299.12	307.93	312.33	318.94	325.54	329.67	334.07	336.27	338.47	340.67	342.88	347.28	351.68	358.29	364.62	373.42	384.43	397.36	412.77	430.11	449.92	469.46	491.47	513.21	537.15	561.37	587.51	613.65	642.00	670.62	701.16	716.30	746.84	773.26	790.60	812.34	825.53
Sutter Health Plus	Sutter Health Plus	HMO B	208.37	226.89	233.97	241.06	248.68	256.31	264.21	272.39	272.39	272.39	272.39	273.47	278.92	285.45	296.08	304.79	309.15	315.69	322.22	326.31	330.67	332.85	335.03	337.21	339.38	343.74	348.10	354.64	360.90	369.62	380.51	393.32	408.57	425.73	445.34	464.68	486.47	507.99	531.68	555.65	581.53	607.41	635.46	663.79	694.02	709.00	739.24	765.39	782.55	804.06	817.13
Western Health	Full	HMO B	196.64	214.11	220.80	227.48	234.68	241.87	249.33	257.04	257.04	257.04	257.04	258.07	263.21	269.38	279.40	287.63	291.74	297.91	304.08	307.93	312.05	314.10	316.16	318.21	320.27	324.38	328.50	334.67	340.58	348.80	359.08	371.16	385.56	401.75	420.26	438.51	459.07	479.38	501.74	524.36	548.78	573.20	599.67	626.41	654.94	669.07	697.60	722.28	738.47	758.78	771.12
Western Health	Full	HMO C	201.60	219.52	226.37	233.22	240.60	247.98	255.62	263.53	263.53	263.53	263.53	264.58	269.85	276.18	286.45	294.89	299.10	305.43	311.75	315.70	319.92	322.03	324.14	326.25	328.35	332.57	336.79	343.11	349.17	357.61	368.15	380.53	395.29	411.89	430.87	449.58	470.66	491.48	514.40	537.59	562.63	587.66	614.81	642.21	671.47	685.96	715.21	740.51	757.11	777.93	790.58

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	256.00	278.76	287.46	296.16	305.53	314.90	324.60	334.64	334.64	334.64	334.64	335.98	342.67	350.70	363.75	374.46	379.82	387.85	395.88	400.90	406.25	408.93	411.61	414.28	416.96	422.32	427.67	435.70	443.40	454.11	467.49	483.22	501.96	523.04	547.14	570.90	597.67	624.10	653.22	682.67	714.46	746.25	780.72	815.52	852.66	871.07	908.21	940.34	961.42	987.86	1003.92
Anthem Blue Cross	CaliforniaCare HMO	HMO B	304.41	331.47	341.81	352.16	363.30	374.44	385.98	397.92	397.92	397.92	397.92	399.51	407.47	417.02	432.54	445.27	451.64	461.19	470.74	476.71	483.07	486.26	489.44	492.62	495.81	502.18	508.54	518.09	527.24	539.98	555.89	574.60	596.88	621.95	650.60	678.85	710.69	742.12	776.74	811.76	849.56	887.36	928.35	969.73	1013.90	1035.79	1079.95	1118.16	1143.22	1174.66	1193.76
Anthem Blue Cross	Advantage PPO	PPO A	379.25	412.96	425.85	438.74	452.62	466.50	480.88	495.75	495.75	495.75	495.75	497.73	507.65	519.55	538.88	554.74	562.68	574.57	586.47	593.91	601.84	605.81	609.77	613.74	617.70	625.64	633.57	645.47	656.87	672.73	692.56	715.86	743.63	774.86	810.55	845.75	885.41	924.57	967.70	1011.33	1058.43	1105.52	1156.58	1208.14	1263.17	1290.44	1345.47	1393.06	1424.29	1463.45	1487.25
Anthem Blue Cross	Select PPO	PPO B	370.76	403.72	416.32	428.92	442.49	456.07	470.12	484.66	484.66	484.66	484.66	486.60	496.29	507.92	526.83	542.33	550.09	561.72	573.35	580.62	588.38	592.25	596.13	600.01	603.89	611.64	619.40	631.03	642.17	657.68	677.07	699.85	726.99	757.52	792.42	826.83	865.60	903.89	946.06	988.71	1034.75	1080.79	1130.71	1181.12	1234.91	1261.57	1315.37	1361.89	1392.43	1430.72	1453.98
Anthem Blue Cross	Prudent Buyer - Small Group	PPO C	370.76	403.72	416.32	428.92	442.49	456.07	470.12	484.66	484.66	484.66	484.66	486.60	496.29	507.92	526.83	542.33	550.09	561.72	573.35	580.62	588.38	592.25	596.13	600.01	603.89	611.64	619.40	631.03	642.17	657.68	677.07	699.85	726.99	757.52	792.42	826.83	865.60	903.89	946.06	988.71	1034.75	1080.79	1130.71	1181.12	1234.91	1261.57	1315.37	1361.89	1392.43	1430.72	1453.98
Anthem Blue Cross	Prudent Buyer - Small Group	EPO A	366.92	399.53	412.00	424.47	437.90	451.33	465.24	479.63	479.63	479.63	479.63	481.55	491.14	502.65	521.36	536.71	544.38	555.89	567.40	574.60	582.27	586.11	589.94	593.78	597.62	605.29	612.97	624.48	635.51	650.86	670.04	692.59	719.45	749.66	784.20	818.25	856.62	894.51	936.24	978.45	1024.01	1069.57	1118.98	1168.86	1222.10	1248.48	1301.72	1347.76	1377.98	1415.87	1438.89
Anthem Blue Cross	Prudent Buyer - Small Group	EPO B	367.45	400.11	412.60	425.09	438.54	451.99	465.92	480.33	480.33	480.33	480.33	482.25	491.86	503.39	522.12	537.49	545.17	556.70	568.23	575.44	583.12	586.96	590.81	594.65	598.49	606.18	613.86	625.39	636.44	651.81	671.02	693.60	720.50	750.76	785.34	819.44	857.87	895.82	937.60	979.87	1025.50	1071.14	1120.61	1170.56	1223.88	1250.30	1303.62	1349.73	1379.99	1417.93	1440.99
Health Net	WholeCare	HMO A	387.46	421.90	435.07	448.24	462.42	476.60	491.29	506.48	506.48	506.48	506.48	508.51	518.64	530.79	550.55	566.75	574.86	587.01	599.17	606.77	614.87	618.92	622.97	627.02	631.08	639.18	647.28	659.44	671.09	687.30	707.55	731.36	759.72	791.63	828.10	864.06	904.58	944.59	988.65	1033.22	1081.34	1129.45	1181.62	1234.30	1290.52	1318.37	1374.59	1423.21	1455.12	1495.13	1519.44
Health Net	CommunityCare	HMO C	244.42	266.15	274.46	282.76	291.71	300.65	309.92	319.51	319.51	319.51	319.51	320.78	327.17	334.84	347.30	357.53	362.64	370.31	377.98	382.77	387.88	390.44	392.99	395.55	398.10	403.22	408.33	416.00	423.35	433.57	446.35	461.37	479.26	499.39	522.39	545.08	570.64	595.88	623.68	651.79	682.14	712.50	745.41	778.64	814.10	831.67	867.14	897.81	917.94	943.18	958.53
Kaiser Permanente	Full	HMO A	264.53	286.80	295.31	303.83	313.00	308.18	317.67	327.50	327.50	327.50	327.50	328.81	335.36	343.22	355.99	366.47	371.71	379.57	387.43	392.34	397.58	400.20	402.82	405.44	408.06	413.30	418.54	426.40	433.93	444.41	457.51	472.91	491.25	511.88	535.46	558.71	584.91	610.78	639.27	668.09	699.21	730.32	764.05	798.11	834.46	852.48	888.83	920.27	940.90	966.77	982.50
Kaiser Permanente	Full	HMO B	268.96	291.62	300.29	308.95	318.29	313.63	323.29	333.29	333.29	333.29	333.29	334.63	341.29	349.29	362.29	372.96	378.29	386.29	394.29	399.29	404.62	407.28	409.95	412.62	415.28	420.62	425.95	433.95	441.61	452.28	465.61	481.28	499.94	520.94	544.94	568.60	595.26	621.59	650.59	679.92	711.58	743.25	777.57	812.24	849.23	867.56	904.56	936.56	957.55	983.88	999.87
Kaiser Permanente	Full	HMO C	277.46	300.88	309.83	318.79	328.43	324.08	334.07	344.40	344.40	344.40	344.40	345.78	352.67	360.94	374.37	385.39	390.90	399.16	407.43	412.60	418.11	420.86	423.62	426.37	429.13	434.64	440.15	448.41	456.34	467.36	481.13	497.32	516.61	538.30	563.10	587.55	615.11	642.31	672.28	702.58	735.30	768.02	803.49	839.31	877.54	896.48	934.71	967.77	989.47	1016.68	1033.20
Kaiser Permanente	Full	HMO D	249.37	270.29	278.29	286.29	294.91	289.53	298.45	307.68	307.68	307.68	307.68	308.92	315.07	322.45	334.45	344.30	349.22	356.61	363.99	368.61	373.53	375.99	378.45	380.91	383.38	388.30	393.22	400.61	407.68	417.53	429.84	444.30	461.53	480.91	503.06	524.91	549.52	573.83	600.60	627.68	656.91	686.14	717.83	749.83	783.98	800.90	835.06	864.59	883.98	908.29	923.04
Oscar	Oscar EPO	EPO A	214.28	233.32	240.61	247.89	255.73	263.57	271.70	280.10	280.10	280.10	280.10	281.22	286.82	293.55	304.47	313.43	317.91	324.64	331.36	335.56	340.04	342.28	344.52	346.76	349.00	353.49	357.97	364.69	371.13	380.10	391.30	404.46	420.15	437.80	457.96	477.85	500.26	522.39	546.76	571.40	598.01	624.62	653.47	682.60	713.70	729.10	760.19	787.08	804.73	826.86	840.30
Oscar	Oscar EPO	EPO B	241.22	262.66	270.86	279.06	287.88	296.71	305.86	315.32	315.32	315.32	315.32	316.58	322.88	330.45	342.75	352.84	357.88	365.45	373.02	377.75	382.79	385.32	387.84	390.36	392.88	397.93	402.97	410.54	417.79	427.89	440.50	455.32	472.98	492.84	515.54	537.93	563.16	588.07	615.50	643.25	673.20	703.16	735.63	768.43	803.43	820.77	855.77	886.04	905.91	930.82	945.95
Oscar	Oscar EPO	EPO C	214.01	233.03	240.31	247.58	255.41	263.25	271.36	279.75	279.75	279.75	279.75	280.87	286.47	293.18	304.09	313.04	317.52	324.23	330.95	335.14	339.62	341.86	344.10	346.33	348.57	353.05	357.52	364.24	370.67	379.62	390.82	403.96	419.63	437.25	457.40	477.26	499.64	521.74	546.08	570.70	597.27	623.85	652.66	681.76	712.81	728.20	759.25	786.11	803.73	825.83	839.25
Oscar	Oscar EPO	EPO D	240.70	262.09	270.27	278.46	287.27	296.08	305.20	314.64	314.64	314.64	314.64	315.90	322.19	329.74	342.01	352.08	357.12	364.67	372.22	376.94	381.97	384.49	387.01	389.52	392.04	397.07	402.11	409.66	416.90	426.97	439.55	454.34	471.96	491.78	514.43	536.77	561.95	586.80	614.18	641.86	671.75	701.64	734.05	766.78	801.70	819.01	853.93	884.14	903.96	928.81	943.92
Sharp Health Plan	Premier	HMO A	202.89	220.92	227.82	234.71	242.14	249.56	257.25	265.21	265.21	265.21	265.21	266.27	271.58	277.94	288.28	296.77	301.01	307.38	313.74	317.72	321.96	324.09	326.21	328.33	330.45	334.70	338.94	345.30	351.40	359.89	370.50	382.96	397.82	414.52	433.62	452.45	473.67	494.62	517.69	541.03	566.22	591.42	618.73	646.32	675.76	690.34	719.78	745.24	761.95	782.90	795.63
Sharp Health Plan	Performance	HMO B	215.29	234.42	241.74	249.06	256.94	264.82	272.98	281.42	281.42	281.42	281.42	282.55	288.17	294.93	305.90	314.91	319.41	326.17	332.92	337.14	341.64	343.90	346.15	348.40	350.65	355.15	359.65	366.41	372.88	381.89	393.14	406.37	422.13	439.86	460.12	480.10	502.62	524.85	549.33	574.10	600.83	627.57	656.55	685.82	717.06	732.54	763.77	790.79	808.52	830.75	844.26
Sharp Health Plan	Premier	HMO C	197.90	215.49	222.21	228.94	236.18	243.43	250.93	258.69	258.69	258.69	258.69	259.72	264.90	271.11	281.20	289.47	293.61	299.82	306.03	309.91	314.05	316.12	318.19	320.26	322.33	326.47	330.61	336.81	342.76	351.04	361.39	373.55	388.04	404.33	422.96	441.33	462.02	482.46	504.96	527.73	552.30	576.88	603.52	630.43	659.14	673.37	702.08	726.92	743.22	763.65	776.07
Sutter Health Plus	Sutter Health Plus	HMO B	270.14	294.15	303.33	312.51	322.40	332.29	342.53	353.13	353.13	353.13	353.13	354.53	361.60	370.07	383.84	395.14	400.79	409.27	417.74	423.04	428.69	431.51	434.34	437.16	439.99	445.64	451.29	459.76	467.89	479.19	493.31	509.91	529.68	551.93	577.35	602.42	630.67	658.57	689.29	720.37	753.91	787.46	823.83	860.56	899.75	919.17	958.37	992.27	1014.52	1042.41	1059.35
Sutter Health Plus	Sutter Health Plus	HMO C	245.19	266.98	275.32	283.65	292.62	301.60	310.89	320.52	320.52	320.52	320.52	321.79	328.20	335.89	348.39	358.65	363.78	371.47	379.16	383.97	389.10	391.66	394.23	396.79	399.35	404.48	409.61	417.30	424.67	434.93	447.75	462.82	480.76	500.96	524.03	546.79	572.43	597.75	625.63	653.84	684.29	714.74	747.75	781.08	816.66	834.29	869.86	900.63	920.82	946.14	961.52
UnitedHealthcare	SignatureValue	HMO A	340.16	370.39	381.95	393.52	405.97	418.42	431.31	444.65	444.65	444.65	444.65	446.43	455.32	465.99	483.33	497.56	504.68	515.35	526.02	532.69	539.81	543.36	546.92	550.48	554.03	561.15	568.26	578.93	589.16	603.39	621.18	642.07	666.98	694.99	727.00	758.57	794.14	829.27	867.96	907.09	949.33	991.57	1037.37	1083.61	1132.97	1157.42	1206.78	1249.47	1277.48	1312.61	1333.95
UnitedHealthcare	Advantage	HMO B	268.85	292.75	301.89	311.02	320.86	330.71	340.90	351.44	351.44	351.44	351.44	352.85	359.87	368.31	382.02	393.26	398.88	407.32	415.75	421.03	426.65	429.46	432.27	435.08	437.89	443.52	449.14	457.57	465.66	476.90	490.96	507.48	527.16	549.30	574.60	599.56	627.67	655.44	686.01	716.94	750.32	783.71	819.91	856.46	895.47	914.80	953.81	987.55	1009.69	1037.45	1054.32
UnitedHealthcare	Focus	HMO D	270.40	294.44	303.63	312.82	322.72	332.62	342.87	353.47	353.47	353.47	353.47	354.88	361.95	370.44	384.22	395.53	401.19	409.67	418.16	423.46	429.11	431.94	434.77	437.60	440.42	446.08	451.73	460.22	468.35	479.66	493.80	510.41	530.21	552.47	577.92	603.02	631.30	659.22	689.97	721.08	754.66	788.24	824.65	861.41	900.64	920.08	959.32	993.25	1015.52	1043.44	1060.41
Western Health	Full	HMO A	221.05	240.70	248.21	255.73	263.82	271.91	280.29	288.96	288.96	288.96	288.96	290.11	295.89	302.83	314.10	323.34	327.97	334.90	341.83	346.17	350.79	353.10	355.42	357.73	360.04	364.66	369.29	376.22	382.87	392.11	403.67	417.25	433.43	451.64	472.44	492.96	516.08	538.90	564.04	589.47	616.92	644.37	674.13	704.19	736.26	752.15	784.23	811.97	830.17	853.00	866.87
Western Health	Full	HMO B	232.10	252.74	260.62	268.51	277.01	285.50	294.30	303.40	303.40	303.40	303.40	304.62	310.69	317.97	329.80	339.51	344.36	351.65	358.93	363.48	368.33	370.76	373.19	375.61	378.04	382.90	387.75	395.03	402.01	411.72	423.86	438.12	455.11	474.22	496.07	517.61	541.88	565.85	592.24	618.94	647.77	676.59	707.84	739.40	773.07	789.76	823.44	852.56	871.68	895.65	910.21
Western Health	Full	HMO C	216.67	235.93	243.30	250.66	258.59	266.52	274.74	283.23	283.23	283.23	283.23	284.36	290.03	296.83	307.87	316.94	321.47	328.27	335.06	339.31	343.84	346.11	348.38	350.64	352.91	357.44	361.97	368.77	375.28	384.35	395.68	408.99	424.85	442.69	463.08	483.19	505.85	528.23	552.87	577.79	604.70	631.61	660.78	690.24	721.68	737.25	768.69	795.88	813.73	836.10	849.70

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	319.82	348.24	359.11	369.98	381.69	393.39	405.52	418.06	418.06	418.06	418.06	419.73	428.09	438.13	454.43	467.81	474.50	484.53	494.56	500.84	507.52	510.87	514.21	517.56	520.90	527.59	534.28	544.31	553.93	567.31	584.03	603.68	627.09	653.43	683.53	713.21	746.66	779.68	816.05	852.84	892.56	932.27	975.33	1018.81	1065.22	1088.21	1134.61	1174.75	1201.09	1234.11	1254.18
Anthem Blue Cross	CaliforniaCare HMO	HMO B	380.35	414.16	427.09	440.01	453.93	467.86	482.27	497.19	497.19	497.19	497.19	499.18	509.12	521.06	540.45	556.36	564.31	576.24	588.18	595.63	603.59	607.57	611.54

USE EMPLOYER ZIP CODE FOR RATING

AREA 4 - Contined

10/01/20 - 12/01/20

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	366.30	398.87	411.31	423.76	437.17	450.58	464.47	478.83	478.83	478.83	478.83	480.75	490.32	501.81	520.49	535.81	543.47	554.96	566.46	573.64	581.30	585.13	588.96	592.79	596.62	604.28	611.94	623.44	634.45	649.77	668.93	691.43	718.25	748.41	782.89	816.88	855.19	893.02	934.68	976.81	1022.30	1067.79	1117.11	1166.91	1220.06	1246.39	1299.54	1345.51	1375.68	1413.51	1436.49
Health Net	WholeCare	HMO C	442.93	482.30	497.35	512.40	528.62	544.83	561.62	578.99	578.99	578.99	578.99	581.30	592.88	606.78	629.36	647.89	657.15	671.05	684.94	693.63	702.89	707.52	712.15	716.79	721.42	730.68	739.95	753.84	767.16	785.69	808.85	836.06	868.48	904.96	946.64	987.75	1034.07	1079.81	1130.18	1181.13	1236.14	1291.14	1350.78	1410.99	1475.26	1507.10	1571.37	1626.95	1663.43	1709.17	1736.97
Health Net	Salud HMO y Mas	HMO D	273.62	297.94	307.24	316.54	326.55	336.57	346.94	357.67	357.67	357.67	357.67	359.10	366.25	374.84	388.79	400.23	405.95	414.54	423.12	428.49	434.21	437.07	439.93	442.79	445.65	451.38	457.10	465.68	473.91	485.36	499.66	516.47	536.50	559.04	584.79	610.18	638.80	667.05	698.17	729.64	763.62	797.60	834.44	871.64	911.34	931.01	970.71	1005.05	1027.58	1055.84	1073.01
Health Net	Full	HMO E	445.05	484.61	499.74	514.87	531.16	547.45	564.32	581.77	581.77	581.77	581.77	584.10	595.73	609.69	632.38	651.00	660.31	674.27	688.23	696.96	706.27	710.92	715.58	720.23	724.88	734.19	743.50	757.46	770.84	789.46	812.73	840.08	872.65	909.31	951.19	992.50	1039.04	1085.00	1135.61	1186.81	1242.08	1297.35	1357.27	1417.77	1482.35	1514.35	1578.92	1634.77	1671.42	1717.38	1745.31
Kaiser Permanente	Full	HMO A	367.64	399.08	411.10	423.12	436.06	435.01	448.42	462.29	462.29	462.29	462.29	464.14	473.38	484.48	502.51	517.30	524.70	535.79	546.89	553.82	561.22	564.92	568.62	572.31	576.01	583.41	590.81	601.90	612.53	627.33	645.82	667.55	693.43	722.56	755.84	788.67	825.65	862.17	902.39	943.07	986.99	1030.91	1078.52	1126.60	1177.91	1203.34	1254.65	1299.03	1328.16	1364.68	1386.87
Kaiser Permanente	Full	HMO B	363.93	395.03	406.93	418.82	431.63	430.45	443.71	457.43	457.43	457.43	457.43	459.26	468.41	479.39	497.23	511.87	519.19	530.17	541.14	548.01	555.32	558.98	562.64	566.30	569.96	577.28	584.60	595.58	606.10	620.74	639.04	660.53	686.15	714.97	747.90	780.38	816.98	853.11	892.91	933.17	976.62	1020.08	1067.19	1114.77	1165.54	1190.70	1241.48	1285.39	1314.21	1350.35	1372.29
Oscar	Oscar EPO	EPO A	295.58	321.86	331.90	341.95	352.77	363.59	374.79	386.38	386.38	386.38	386.38	387.93	395.66	404.93	420.00	432.36	438.54	447.82	457.09	462.89	469.07	472.16	475.25	478.34	481.43	487.61	493.80	503.07	511.96	524.32	539.78	557.94	579.57	603.91	631.73	659.17	690.08	720.60	754.22	788.22	824.93	861.63	901.43	941.61	984.50	1005.75	1048.64	1085.73	1110.08	1140.60	1159.14
Oscar	Oscar EPO	EPO B	290.38	316.19	326.06	335.93	346.56	357.19	368.19	379.58	379.58	379.58	379.58	381.10	388.69	397.80	412.61	424.75	430.83	439.94	449.05	454.74	460.81	463.85	466.89	469.92	472.96	479.03	485.11	494.22	502.95	515.09	530.28	548.12	569.37	593.29	620.62	647.57	677.93	707.92	740.94	774.35	810.41	846.47	885.57	925.04	967.18	988.05	1030.19	1066.63	1090.54	1120.53	1138.74
Sharp Health Plan	Premier	HMO A	282.90	308.04	317.66	327.27	337.63	347.98	358.71	369.80	369.80	369.80	369.80	371.28	378.68	387.55	401.97	413.81	419.72	428.60	437.47	443.02	448.94	451.90	454.85	457.81	460.77	466.69	472.60	481.48	489.99	501.82	516.61	533.99	554.70	578.00	604.62	630.88	660.46	689.68	721.85	754.39	789.52	824.65	862.74	901.20	942.25	962.59	1003.64	1039.14	1062.44	1091.65	1109.40
Sharp Health Plan	Performance	HMO B	304.75	331.84	342.20	352.56	363.71	374.87	386.42	398.37	398.37	398.37	398.37	399.96	407.93	417.49	433.03	445.78	452.15	461.71	471.27	477.25	483.62	486.81	490.00	493.18	496.37	502.74	509.12	518.68	527.84	540.59	556.52	575.25	597.56	622.65	651.33	679.62	711.49	742.96	777.62	812.67	850.52	888.37	929.40	970.83	1015.05	1036.96	1081.18	1119.42	1144.52	1175.99	1195.11
Sharp Health Plan	Premier	HMO C	278.90	303.70	313.17	322.65	332.86	343.07	353.64	364.58	364.58	364.58	364.58	366.04	373.33	382.08	396.30	407.97	413.80	422.55	431.30	436.77	442.60	445.52	448.43	451.35	454.27	460.10	465.93	474.68	483.07	494.74	509.32	526.45	546.87	569.84	596.09	621.97	651.14	679.94	711.66	743.74	778.38	813.01	850.57	888.48	928.95	949.00	989.47	1024.47	1047.44	1076.24	1093.74
Sutter Health Plus	Sutter Health Plus	HMO A	352.39	383.72	395.69	407.67	420.57	433.47	446.83	460.66	460.66	460.66	460.66	462.49	471.70	482.76	500.72	515.46	522.83	533.89	544.94	551.85	559.22	562.91	566.59	570.28	573.96	581.33	588.70	599.76	610.36	625.10	643.52	665.17	690.97	719.99	753.16	785.86	822.71	859.10	899.18	939.72	983.48	1027.24	1074.69	1122.59	1173.72	1199.06	1250.19	1294.41	1323.43	1359.83	1381.93
Sutter Health Plus	Sutter Health Plus	HMO B	348.02	378.95	390.78	402.61	415.35	428.09	441.28	454.94	454.94	454.94	454.94	456.75	465.85	476.76	494.51	509.06	516.34	527.26	538.18	545.00	552.28	555.92	559.56	563.20	566.84	574.12	581.40	592.31	602.78	617.34	635.53	656.91	682.39	711.05	743.81	776.11	812.50	848.44	888.02	928.05	971.27	1014.49	1061.34	1108.66	1159.15	1184.17	1234.67	1278.34	1307.00	1342.94	1364.77
UnitedHealthcare	SignatureValue	HMO A	450.36	490.39	505.69	521.00	537.48	553.97	571.04	588.70	588.70	588.70	588.70	591.05	602.83	616.96	639.92	658.76	668.17	682.30	696.43	705.26	714.68	719.39	724.10	728.81	733.52	742.94	752.36	766.49	780.03	798.87	822.41	850.08	883.05	920.14	962.52	1004.32	1051.42	1097.93	1149.14	1200.95	1256.87	1312.80	1373.44	1434.66	1500.01	1532.39	1597.73	1654.25	1691.34	1737.84	1766.10
UnitedHealthcare	Focus	HMO B	358.00	389.83	401.99	414.16	427.27	440.37	453.94	467.98	467.98	467.98	467.98	469.85	479.21	490.44	508.69	523.67	531.16	542.39	553.62	560.64	568.13	571.87	575.62	579.36	583.10	590.59	598.08	609.31	620.07	635.05	653.77	675.76	701.97	731.45	765.15	798.37	835.81	872.78	913.50	954.68	999.14	1043.60	1091.80	1140.47	1192.41	1218.15	1270.10	1315.02	1344.51	1381.48	1403.94
Western Health	Full	HMO A	290.72	316.56	326.44	336.32	346.96	357.60	368.62	380.02	380.02	380.02	380.02	381.54	389.14	398.26	413.08	425.24	431.32	440.44	449.56	455.26	461.35	464.39	467.43	470.47	473.51	479.59	485.67	494.79	503.53	515.69	530.89	548.75	570.03	593.97	621.33	648.32	678.72	708.74	741.80	775.24	811.34	847.45	886.59	926.11	968.29	989.19	1031.38	1067.86	1091.80	1121.82	1140.06
Western Health	Full	HMO B	298.09	324.59	334.72	344.85	355.77	366.68	377.98	389.67	389.67	389.67	389.67	391.23	399.02	408.37	423.57	436.04	442.27	451.62	460.98	466.82	473.06	476.17	479.29	482.41	485.52	491.76	497.99	507.35	516.31	528.78	544.36	562.68	584.50	609.05	637.10	664.77	695.94	726.73	760.63	794.92	831.94	868.96	909.09	949.62	992.87	1014.30	1057.56	1094.96	1119.51	1150.30	1169.00

Health Care Service Plan rates will vary by county

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USE EMPLOYER ZIP CODE FOR RATING

AREA 5

10/01/20 - 12/01/20

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	295.93	322.24	332.30	342.35	353.18	364.02	375.23	386.84	386.84	386.84	386.84	388.39	396.12	405.41	420.50	432.87	439.06	448.35	457.63	463.43	469.62	472.72	475.81	478.91	482.00	488.19	494.38	503.67	512.56	524.94	540.42	558.60	580.26	604.63	632.48	659.95	690.90	721.46	755.11	789.15	825.90	862.65	902.50	942.73	985.67	1006.94	1049.88	1087.02	1111.39	1141.95	1160.52
Anthem Blue Cross	Select PPO	PPO B	295.93	322.24	332.30	342.35	353.18	364.02	375.23	386.84	386.84	386.84	386.84	388.39	396.12	405.41	420.50	432.87	439.06	448.35	457.63	463.43	469.62	472.72	475.81	478.91	482.00	488.19	494.38	503.67	512.56	524.94	540.42	558.60	580.26	604.63	632.48	659.95	690.90	721.46	755.11	789.15	825.90	862.65	902.50	942.73	985.67	1006.94	1049.88	1087.02	1111.39	1141.95	1160.52
Anthem Blue Cross	Prudent Buyer - Small Group	EPO A	294.38	320.55	330.55	340.56	351.33	362.11	373.27	384.81	384.81	384.81	384.81	386.35	394.05	403.28	418.29	430.60	436.76	445.99	455.23	461.00	467.16	470.24	473.32	476.39	479.47	485.63	491.79	501.02	509.87	522.19	537.58	555.67	577.22	601.46	629.16	656.49	687.27	717.67	751.15	785.01	821.57	858.13	897.76	937.78	980.50	1001.66	1044.37	1081.32	1105.56	1135.96	1154.43
Health Net	CommunityCare	HMO A	216.73	236.00	243.36	250.73	258.66	266.59	274.81	283.31	283.31	283.31	283.31	284.44	290.11	296.91	307.96	317.02	321.55	328.35	335.15	339.40	343.94	346.20	348.47	350.74	353.00	357.53	362.07	368.87	375.38	384.45	395.78	409.10	424.96	442.81	463.21	483.32	505.99	528.37	553.02	577.95	604.86	631.78	660.96	690.42	721.87	737.45	768.90	796.10	813.94	836.33	849.93
Kaiser Permanente	Full	HMO A	208.84	226.16	232.78	239.40	246.54	239.68	247.06	254.71	254.71	254.71	254.71	255.72	260.82	266.93	276.87	285.02	289.09	295.20	301.32	305.14	309.21	311.25	313.29	315.33	317.36	321.44	325.51	331.63	337.49	345.64	355.82	367.80	382.06	398.11	416.44	434.53	454.91	475.03	497.19	519.60	543.80	567.99	594.23	620.72	648.99	663.00	691.27	715.72	731.77	751.89	764.13
Kaiser Permanente	Full	HMO C	197.68	214.01	220.26	226.50	233.22	225.96	232.92	240.12	240.12	240.12	240.12	241.08	245.89	251.65	261.01	268.70	272.54	278.30	284.07	287.67	291.51	293.43	295.35	297.27	299.19	303.04	306.88	312.64	318.16	325.85	335.45	346.74	360.19	375.31	392.60	409.65	428.86	447.83	468.72	489.85	512.66	535.48	560.21	585.16	611.83	625.04	651.70	674.75	689.87	708.84	720.36
Oscar	Oscar EPO	EPO A	187.26	203.90	210.26	216.63	223.48	230.34	237.44	244.78	244.78	244.78	244.78	245.76	250.65	256.53	266.07	273.91	277.82	283.70	289.57	293.24	297.16	299.12	301.08	303.04	304.99	308.91	312.83	318.70	324.33	332.16	341.96	353.46	367.17	382.59	400.21	417.59	437.17	456.51	477.81	499.35	522.60	545.86	571.07	596.52	623.70	637.16	664.33	687.83	703.25	722.59	734.34
Oscar	Oscar EPO	EPO B	177.79	193.60	199.64	205.68	212.19	218.70	225.44	232.41	232.41	232.41	232.41	233.34	237.99	243.57	252.63	260.07	263.79	269.36	274.94	278.43	282.15	284.01	285.87	287.72	289.58	293.30	297.02	302.60	307.94	315.38	324.68	335.60	348.62	363.26	379.99	396.49	415.09	433.45	453.67	474.12	496.20	518.28	542.21	566.38	592.18	604.97	630.76	653.07	667.72	686.08	697.23
Oscar	Oscar EPO	EPO C	178.81	194.71	200.78	206.86	213.40	219.95	226.73	233.74	233.74	233.74	233.74	234.68	239.35	244.96	254.08	261.56	265.30	270.91	276.51	280.02	283.76	285.63	287.50	289.37	291.24	294.98	298.72	304.33	309.71	317.19	326.54	337.52	350.61	365.34	382.17	398.76	417.46	435.93	456.26	476.83	499.04	521.24	545.32	569.63	595.57	608.43	634.37	656.81	671.54	690.00	701.22
Sharp Health Plan	Premier	HMO A	172.72	188.07	193.95	199.82	206.14	212.46	219.01	225.78	225.78	225.78	225.78	226.68	231.20	236.62	245.42	252.65	256.26	261.68	267.10	270.48	274.10	275.90	277.71	279.52	281.32	284.93	288.55	293.97	299.16	306.38	315.41	326.03	338.67	352.89	369.15	385.18	403.24	421.08	440.72	460.59	482.04	503.49	526.74	550.23	575.29	587.71	612.77	634.44	648.67	666.50	677.34
Sharp Health Plan	Performance	HMO B	197.55	215.11	221.83	228.54	235.77	243.00	250.49	258.24	258.24	258.24	258.24	259.27	264.44	270.64	280.71	288.97	293.10	299.30	305.50	309.37	313.50	315.57	317.64	319.70	321.77	325.90	330.03	336.23	342.17	350.43	360.76	372.90	387.36	403.63	422.22	440.56	461.22	481.62	504.08	526.81	551.34	575.88	602.47	629.33	658.00	672.20	700.86	725.65	741.92	762.32	774.72
Sutter Health Plus	Sutter Health Plus	HMO A	214.45	233.51	240.80	248.09	255.93	263.78	271.91	280.33	280.33	280.33	280.33	281.44	287.05	293.78	304.71	313.68	318.17	324.89	331.62	335.83	340.31	342.55	344.80	347.04	349.28	353.77	358.25	364.98	371.43	380.40	391.61	404.79	420.48	438.14	458.33	478.23	500.66	522.80	547.19	571.86	598.49	625.12	653.99	683.15	714.26	729.68	760.80	787.71	805.37	827.51	840.96
Sutter Health Plus	Sutter Health Plus	HMO B	212.26	231.13	238.35	245.56	253.33	261.10	269.14	277.48	277.48	277.48	277.48	278.58	284.13	290.79	301.61	310.49	314.93	321.59	328.25	332.41	336.85	339.07	341.29	343.51	345.73	350.17	354.60	361.26	367.65	376.52	387.62	400.66	416.20	433.68	453.66	473.36	495.56	517.48	541.62	566.04	592.40	618.76	647.33	676.19	706.99	722.25	753.05	779.69	797.17	819.09	832.40
Western Health	Full	HMO B	196.64	214.11	220.80	227.48	234.68	241.87	249.33	257.04	257.04	257.04	257.04	258.07	263.21	269.38	279.40	287.63	291.74	297.91	304.08	307.93	312.05	314.10	316.16	318.21	320.27	324.38	328.50	334.67	340.58	348.80	359.08	371.16	385.56	401.75	420.26	438.51	459.07	479.38	501.74	524.36	548.78	573.20	599.67	626.41	654.94	669.07	697.60	722.28	738.47	758.78	771.12
Western Health	Full	HMO C	201.60	219.52	226.37	233.22	240.60	247.98	255.62	263.53	263.53	263.53	263.53	264.58	269.85	276.18	286.45	294.89	299.10	305.43	311.75	315.70	319.92	322.03	324.14	326.25	328.35	332.57	336.79	343.11	349.17	357.61	368.15	380.53	395.29	411.89	430.87	449.58	470.66	491.48	514.40	537.59	562.63	587.66	614.81	642.21	671.47	685.96	715.21	740.51	757.11	777.93	790.58

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	290.98	316.85	326.74	336.63	347.28	357.93	368.96	380.37	380.37	380.37	380.37	381.89	389.50	398.63	413.46	425.63	431.72	440.85	449.98	455.68	461.77	464.81	467.86	470.90	473.94	480.03	486.11	495.24	503.99	516.16	531.38	549.25	570.56	594.52	621.90	648.91	679.34	709.39	742.48	775.95	812.09	848.23	887.40	926.96	969.18	990.10	1032.32	1068.84	1092.80	1122.85	1141.11
Anthem Blue Cross	CaliforniaCare HMO	HMO B	322.33	350.98	361.93	372.89	384.68	396.48	408.70	421.34	421.34	421.34	421.34	423.03	431.45	441.56	458.00	471.48	478.22	488.33	498.45	504.77	511.51	514.88	518.25	521.62	524.99	531.73	538.47	548.58	558.28	571.76	588.61	608.41	632.01	658.55	688.89	718.81	752.51	785.80	822.46	859.53	899.56	939.59	982.99	1026.81	1073.57	1096.75	1143.52	1183.97	1210.51	1243.80	1264.02
Anthem Blue Cross	Advantage PPO	PPO A	341.82	372.21	383.83	395.44	407.96	420.47	433.43	446.83	446.83	446.83	446.83	448.62	457.55	468.28	485.70	500.00	507.15	517.88	528.60	535.30	542.45	546.03	549.60	553.18	556.75	563.90	571.05	581.77	592.05	606.35	624.22	645.22	670.25	698.40	730.57	762.29	798.04	833.34	872.21	911.53	953.98	996.43	1042.45	1088.92	1138.52	1163.10	1212.70	1255.59	1283.74	1319.04	1340.49
Anthem Blue Cross	Select PPO	PPO B	334.18	363.89	375.25	386.60	398.83	411.07	423.73	436.84	436.84	436.84	436.84	438.59	447.32	457.81	474.85	488.82	495.81	506.30	516.78	523.33	530.32	533.82	537.31	540.81	544.30	551.29	558.28	568.77	578.81	592.79	610.27	630.80	655.26	682.78	714.23	745.25	780.20	814.71	852.71	891.15	932.65	974.15	1019.15	1064.58	1113.07	1137.09	1185.58	1227.52	1255.04	1289.55	1310.52
Anthem Blue Cross	Prudent Buyer - Small Group	PPO C	334.18	363.89	375.25	386.60	398.83	411.07	423.73	436.84	436.84	436.84	436.84	438.59	447.32	457.81	474.85	488.82	495.81	506.30	516.78	523.33	530.32	533.82	537.31	540.81	544.30	551.29	558.28	568.77	578.81	592.79	610.27	630.80	655.26	682.78	714.23	745.25	780.20	814.71	852.71	891.15	932.65	974.15	1019.15	1064.58	1113.07	1137.09	1185.58	1227.52	1255.04	1289.55	1310.52
Anthem Blue Cross	Prudent Buyer - Small Group	EPO A	330.71	360.11	371.35	382.59	394.69	406.79	419.33	432.30	432.30	432.30	432.30	434.03	442.68	453.05	469.91	483.74	490.66	501.04	511.41	517.90	524.81	528.27	531.73	535.19	538.65	545.56	552.48	562.85	572.80	586.63	603.92	624.24	648.45	675.68	706.81	737.50	772.09	806.24	843.85	881.89	922.96	964.03	1008.56	1053.52	1101.50	1125.28	1173.26	1214.76	1242.00	1276.15	1296.90
Anthem Blue Cross	Prudent Buyer - Small Group	EPO B	331.19	360.63	371.89	383.14	395.27	407.39	419.94	432.93	432.93	432.93	432.93	434.66	443.32	453.71	470.59	484.45	491.38	501.77	512.16	518.65	525.58	529.04	532.50	535.97	539.43	546.36	553.28	563.67	573.63	587.49	604.80	625.15	649.40	676.67	707.84	738.58	773.21	807.41	845.08	883.18	924.31	965.43	1010.03	1055.05	1103.11	1126.92	1174.97	1216.53	1243.81	1278.01	1298.79
Health Net	WholeCare	HMO A	397.38	432.70	446.21	459.72	474.26	488.80	503.87	519.45	519.45	519.45	519.45	521.53	531.92	544.39	564.64	581.27	589.58	602.04	614.51	622.30	630.61	634.77	638.93	643.08	647.24	655.55	663.86	676.33	688.27	704.90	725.67	750.09	779.18	811.90	849.30	886.19	927.74	968.78	1013.97	1059.68	1109.03	1158.38	1211.88	1265.90	1323.56	1352.13	1409.79	1459.66	1492.39	1533.42	1558.35
Health Net	CommunityCare	HMO C	244.42	266.15	274.46	282.76	291.71	300.65	309.92	319.51	319.51	319.51	319.51	320.78	327.17	334.84	347.30	357.53	362.64	370.31	377.98	382.77	387.88	390.44	392.99	395.55	398.10	403.22	408.33	416.00	423.35	433.57	446.35	461.37	479.26	499.39	522.39	545.08	570.64	595.88	623.68	651.79	682.14	712.50	745.41	778.64	814.10	831.67	867.14	897.81	917.94	943.18	958.53
Kaiser Permanente	Full	HMO A	240.66	260.81	268.52	276.22	284.52	278.83	287.42	296.31	296.31	296.31	296.31	297.49	303.42	310.53	322.09	331.57	336.31	343.42	350.53	354.98	359.72	362.09	364.46	366.83	369.20	373.94	378.68	385.79	392.61	402.09	413.94	427.87	444.46	463.13	484.46	505.50	529.20	552.61	578.39	604.47	632.62	660.76	691.28	722.10	754.99	771.29	804.18	832.62	851.29	874.70	888.93
Kaiser Permanente	Full	HMO B	244.68	265.18	273.02	280.86	289.31	283.76	292.50	301.55	301.55	301.55	301.55	302.76	308.79	316.03	327.79	337.44	342.26	349.50	356.74	361.26	366.08	368.50	370.91	373.32	375.73	380.56	385.38	392.62	399.56	409.21	421.27	435.44	452.33	471.32	493.04	514.45	538.57	562.39	588.63	615.16	643.81	672.46	703.52	734.88	768.35	784.94	818.41	847.36	866.36	890.18	904.65
Kaiser Permanente	Full	HMO C	252.37	273.56	281.66	289.76	298.48	293.22	302.26	311.60	311.60	311.60	311.60	312.85	319.08	326.56	338.71	348.68	353.67	361.15	368.63	373.30	378.29	380.78	383.27	385.77	388.26	393.24	398.23	405.71	412.87	422.85	435.31	449.96	467.41	487.04	509.47	531.60	556.52	581.14	608.25	635.67	665.27	694.88	726.97	759.38	793.97	811.10	845.69	875.61	895.24	919.85	934.80
Kaiser Permanente	Full	HMO D	226.95	245.88	253.12	260.36	268.15	261.96	270.03	278.38	278.38	278.38	278.38	279.49	285.06	291.74	302.60	311.51	315.96	322.64	329.33	333.50	337.96	340.18	342.41	344.64	346.86	351.32	355.77	362.45	368.86	377.76	388.90	401.98	417.57	435.11	455.15	474.92	497.19	519.18	543.40	567.90	594.34	620.79	649.46	678.42	709.32	724.63	755.53	782.25	799.79	821.78	835.14
Oscar	Oscar EPO	EPO A	214.28	233.32	240.61	247.89	255.73	263.57	271.70	280.10	280.10	280.10	280.10	281.22	286.82	293.55	304.47	313.43	317.91	324.64	331.36	335.56	340.04	342.28	344.52	346.76	349.00	353.49	357.97	364.69	371.13	380.10	391.30	404.46	420.15	437.80	457.96	477.85	500.26	522.39	546.76	571.40	598.01	624.62	653.47	682.60	713.70	729.10	760.19	787.08	804.73	826.86	840.30
Oscar	Oscar EPO	EPO B	241.22	262.66	270.86	279.06	287.88	296.71	305.86	315.32	315.32	315.32	315.32	316.58	322.88	330.45	342.75	352.84	357.88	365.45	373.02	377.75	382.79	385.32	387.84	390.36	392.88	397.93	402.97	410.54	417.79	427.89	440.50	455.32	472.98	492.84	515.54	537.93	563.16	588.07	615.50	643.25	673.20	703.16	735.63	768.43	803.43	820.77	855.77	886.04	905.91	930.82	945.95
Oscar	Oscar EPO	EPO C	214.01	233.03	240.31	247.58	255.41	263.25	271.36	279.75	279.75	279.75	279.75	280.87	286.47	293.18	304.09	313.04	317.52	324.23	330.95	335.14	339.62	341.86	344.10	346.33	348.57	353.05	357.52	364.24	370.67	379.62	390.82	403.96	419.63	437.25	457.40	477.26	499.64	521.74	546.08	570.70	597.27	623.85	652.66	681.76	712.81	728.20	759.25	786.11	803.73	825.83	839.25
Oscar	Oscar EPO	EPO D	240.70	262.09	270.27	278.46	287.27	296.08	305.20	314.64	314.64	314.64	314.64	315.90	322.19	329.74	342.01	352.08	357.12	364.67	372.22	376.94	381.97	384.49	387.01	389.52	392.04	397.07	402.11	409.66	416.90	426.97	439.55	454.34	471.96	491.78	514.43	536.77	561.95	586.80	614.18	641.86	671.75	701.64	734.05	766.78	801.70	819.01	853.93	884.14	903.96	928.81	943.92
Sharp Health Plan	Premier	HMO A	202.89	220.92	227.82	234.71	242.14	249.56	257.25	265.21	265.21	265.21	265.21	266.27	271.58	277.94	288.28	296.77	301.01	307.38	313.74	317.72	321.96	324.09	326.21	328.33	330.45	334.70	338.94	345.30	351.40	359.89	370.50	382.96	397.82	414.52	433.62	452.45	473.67	494.62	517.69	541.03	566.22	591.42	618.73	646.32	675.76	690.34	719.78	745.24	761.95	782.90	795.63
Sharp Health Plan	Performance	HMO B	215.29	234.42	241.74	249.06	256.94	264.82	272.98	281.42	281.42	281.42	281.42	282.55	288.17	294.93	305.90	314.91	319.41	326.17	332.92	337.14	341.64	343.90	346.15	348.40	350.65	355.15	359.65	366.41	372.88	381.89	393.14	406.37	422.13	439.86	460.12	480.10	502.62	524.85	549.33	574.10	600.83	627.57	656.55	685.82	717.06	732.54	763.77	790.79	808.52	830.75	844.26
Sharp Health Plan	Premier	HMO C	197.90	215.49	222.21	228.94	236.18	243.43	250.93	258.69	258.69	258.69	258.69	259.72	264.90	271.11	281.20	289.47	293.61	299.82	306.03	309.91	314.05	316.12	318.19	320.26	322.33	326.47	330.61	336.81	342.76	351.04	361.39	373.55	388.04	404.33	422.96	441.33	462.02	482.46	504.96	527.73	552.30	576.88	603.52	630.43	659.14	673.37	702.08	726.92	743.22	763.65	776.07
Sutter Health Plus	Sutter Health Plus	HMO B	275.19	299.65	309.00	318.35	328.42	338.50	348.93	359.73	359.73	359.73	359.73	361.16	368.35	376.99	391.01	402.53	408.28	416.91	425.55	430.94	436.70	439.58	442.45	445.33	448.21	453.97	459.72	468.35	476.63	488.14	502.53	519.43	539.58	562.24	588.14	613.68	642.46	670.88	702.17	733.83	768.00	802.17	839.22	876.64	916.56	936.35	976.28	1010.81	1033.47	1061.89	1079.15
Sutter Health Plus	Sutter Health Plus	HMO C	249.77	271.97	280.46	288.95	298.09	307.23	316.70	326.51	326.51	326.51	326.51	327.80	334.33	342.17	354.90	365.35	370.57	378.41	386.25	391.14	396.37	398.98	401.59	404.20	406.82	412.04	417.26	425.10	432.61	443.06	456.12	471.46	489.75	510.32	533.82	557.01	583.12	608.92	637.32	666.06	697.07	728.09	761.72	795.67	831.92	849.87	886.11	917.46	938.03	963.82	979.48
UnitedHealthcare	SignatureValue	HMO A	329.39	358.66	369.86	381.05	393.11	405.17	417.65	430.57	430.57	430.57	430.57	432.29	440.90	451.24	468.03	481.81	488.70	499.03	509.36	515.82	522.71	526.16	529.60	533.05	536.49	543.38	550.27	560.60	570.51	584.28	601.51	621.74	645.86	672.98	703.98	734.55	769.00	803.01	840.47	878.36	919.27	960.17	1004.52	1049.30	1097.09	1120.77	1168.57	1209.90	1237.03	1271.04	1291.71
UnitedHealthcare	Advantage	HMO B	260.33	283.47	292.32	301.17	310.69	320.22	330.09	340.30	340.30	340.30	340.30	341.66	348.47	356.63	369.91	380.80	386.24	394.41	402.57	407.68	413.12	415.85	418.57	421.29	424.01	429.46	434.90	443.07	450.90	461.79	475.40	491.39	510.45	531.89	556.39	580.55	607.78	634.66	664.27	694.21	726.54	758.87	793.92	829.31	867.08	885.80	923.57	956.24	977.68	1004.57	1020.90
UnitedHealthcare	Focus	HMO D	310.85	338.48	349.05	359.61	370.99	382.37	394.15	406.34	406.34	406.34	406.34	407.97	416.09	425.84	441.69	454.69	461.20	470.95	480.70	486.80	493.30	496.55	499.80	503.05	506.30	512.80	519.30	529.05	538.40	551.40	567.66	586.75	609.51	635.11	664.37	693.22	725.72	757.82	793.18	828.93	867.54	906.14	947.99	990.25	1035.35	1057.70	1102.81	1141.82	1167.41	1199.52	1219.02
Western Health	Full	HMO A	221.05	240.70	248.21	255.73	263.82	271.91	280.29	288.96	288.96	288.96	288.96	290.11	295.89	302.83	314.10	323.34	327.97	334.90	341.83	346.17	350.79	353.10	355.42	357.73	360.04	364.66	369.29	376.22	382.87	392.11	403.67	417.25	433.43	451.64	472.44	492.96	516.08	538.90	564.04	589.47	616.92	644.37	674.13	704.19	736.26	752.15	784.23	811.97	830.17	853.00	866.87
Western Health	Full	HMO B	232.10	252.74	260.62	268.51	277.01	285.50	294.30	303.40	303.40	303.40	303.40	304.62	310.69	317.97	329.80	339.51	344.36	351.65	358.93	363.48	368.33	370.76	373.19	375.61	378.04	382.90	387.75	395.03	402.01	411.72	423.86	438.12	455.11	474.22	496.07	517.61	541.88	565.85	592.24	618.94	647.77	676.59	707.84	739.40	773.07	789.76	823.44	852.56	871.68	895.65	910.21
Western Health	Full	HMO C	216.67	235.93	243.30	250.66	258.59	266.52	274.74	283.23	283.23	283.23	283.23	284.36	290.03	296.83	307.87	316.94	321.47	328.27	335.06	339.31	343.84	346.11	348.38	350.64	352.91	357.44	361.97	368.77	375.28	384.35	395.68	408.99	424.85	442.69	463.08	483.19	505.85	528.23	552.87	577.79	604.70	631.61	660.78	690.24	721.68	737.25	768.69	795.88	813.73	836.10	849.70

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	363.57	395.88	408.24	420.60	433.90	447.21	460.99	475.25	475.25	475.25	475.25	477.15	486.66	498.06	516.60	531.80	539.41	550.81	562.22	569.35	576.95	580.76	584.56	588.36	592.16	599.77	607.37	618.78	629.71	644.91	663.92	686.26	712.88	742.82	777.03	810.78	848.80	886.34	927.69	969.51	1014.66	1059.81	1108.76	1158.18	1210.94	1237.08	1289.83	1335.45	1365.39	1402.94	1425.75
Anthem Blue Cross	CaliforniaCare HMO	HMO B	402.81	438.62	452.31	466.00	480.74	495.48	510.75	526.55	526.55	526.55	526.55	528.66	539.19	551.82	572.36	589.21	597.63	610.27	622.91	630.81	639.23	643.44	647.66	651.87	656

USE EMPLOYER ZIP CODE FOR RATING

AREA 5 - Continued

10/01/20 - 12/01/20

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	416.44	453.45	467.61	481.76	497.00	512.24	528.03	544.36	544.36	544.36	544.36	546.54	557.42	570.49	591.72	609.14	617.85	630.91	643.98	652.14	660.85	665.21	669.56	673.92	678.27	686.98	695.69	708.76	721.28	738.70	760.47	786.06	816.54	850.83	890.03	928.68	972.23	1015.23	1062.59	1110.49	1162.21	1213.92	1269.99	1326.61	1387.03	1416.97	1477.39	1529.65	1563.95	1606.95	1633.08
Health Net	WholeCare	HMO C	454.27	494.65	510.09	525.53	542.15	558.78	576.00	593.81	593.81	593.81	593.81	596.19	608.07	622.32	645.48	664.48	673.98	688.23	702.48	711.39	720.89	725.64	730.39	735.14	739.89	749.39	758.89	773.15	786.80	805.81	829.56	857.47	890.72	928.13	970.89	1013.05	1060.55	1107.46	1159.13	1211.38	1267.79	1324.21	1385.37	1447.13	1513.04	1545.70	1611.61	1668.62	1706.03	1752.94	1781.43
Health Net	Salud HMO y Mas	HMO D	273.62	297.94	307.24	316.54	326.55	336.57	346.94	357.67	357.67	357.67	357.67	359.10	366.25	374.84	388.79	400.23	405.95	414.54	423.12	428.49	434.21	437.07	439.93	442.79	445.65	451.38	457.10	465.68	473.91	485.36	499.66	516.47	536.50	559.04	584.79	610.18	638.80	667.05	698.17	729.64	763.62	797.60	834.44	871.64	911.34	931.01	970.71	1005.05	1027.58	1055.84	1073.01
Health Net	Full	HMO E	456.45	497.02	512.54	528.05	544.76	561.46	578.77	596.67	596.67	596.67	596.67	599.05	610.99	625.31	648.58	667.67	677.22	691.54	705.86	714.81	724.35	729.13	733.90	738.67	743.45	752.99	762.54	776.86	790.58	809.68	833.54	861.59	895.00	932.59	975.55	1017.92	1065.65	1112.79	1164.70	1217.20	1273.89	1330.57	1392.03	1454.08	1520.31	1553.13	1619.36	1676.64	1714.23	1761.36	1790.01
Kaiser Permanente	Full	HMO A	333.96	362.40	373.28	384.15	395.86	393.58	405.71	418.26	418.26	418.26	418.26	419.94	428.30	438.34	454.65	468.04	474.73	484.77	494.80	501.08	507.77	511.12	514.46	517.81	521.15	527.85	534.54	544.58	554.20	567.58	584.31	603.97	627.39	653.74	683.86	713.56	747.02	780.06	816.45	853.25	892.99	932.72	975.81	1019.30	1065.73	1088.74	1135.16	1175.32	1201.67	1234.71	1254.78
Kaiser Permanente	Full	HMO B	330.60	358.74	369.50	380.26	391.85	389.45	401.45	413.87	413.87	413.87	413.87	415.52	423.80	433.73	449.88	463.12	469.74	479.67	489.61	495.81	502.44	505.75	509.06	512.37	515.68	522.30	528.92	538.86	548.38	561.62	578.17	597.63	620.80	646.88	676.68	706.06	739.17	771.87	807.87	844.29	883.61	922.93	965.56	1008.60	1054.54	1077.30	1123.24	1162.97	1189.05	1221.74	1241.61
Oscar	Oscar EPO	EPO A	295.58	321.86	331.90	341.95	352.77	363.59	374.79	386.38	386.38	386.38	386.38	387.93	395.66	404.93	420.00	432.36	438.54	447.82	457.09	462.89	469.07	472.16	475.25	478.34	481.43	487.61	493.80	503.07	511.96	524.32	539.78	557.94	579.57	603.91	631.73	659.17	690.08	720.60	754.22	788.22	824.93	861.63	901.43	941.61	984.50	1005.75	1048.64	1085.73	1110.08	1140.60	1159.14
Oscar	Oscar EPO	EPO B	290.38	316.19	326.06	335.93	346.56	357.19	368.19	379.58	379.58	379.58	379.58	381.10	388.69	397.80	412.61	424.75	430.83	439.94	449.05	454.74	460.81	463.85	466.89	469.92	472.96	479.03	485.11	494.22	502.95	515.09	530.28	548.12	569.37	593.29	620.62	647.57	677.93	707.92	740.94	774.35	810.41	846.47	885.57	925.04	967.18	988.05	1030.19	1066.63	1090.54	1120.53	1138.74
Sharp Health Plan	Premier	HMO A	282.90	308.04	317.66	327.27	337.63	347.98	358.71	369.80	369.80	369.80	369.80	371.28	378.68	387.55	401.97	413.81	419.72	428.60	437.47	443.02	448.94	451.90	454.85	457.81	460.77	466.69	472.60	481.48	489.99	501.82	516.61	533.99	554.70	578.00	604.62	630.88	660.46	689.68	721.85	754.39	789.52	824.65	862.74	901.20	942.25	962.59	1003.64	1039.14	1062.44	1091.65	1109.40
Sharp Health Plan	Performance	HMO B	304.75	331.84	342.20	352.56	363.71	374.87	386.42	398.37	398.37	398.37	398.37	399.96	407.93	417.49	433.03	445.78	452.15	461.71	471.27	477.25	483.62	486.81	490.00	493.18	496.37	502.74	509.12	518.68	527.84	540.59	556.52	575.25	597.56	622.65	651.33	679.62	711.49	742.96	777.62	812.67	850.52	888.37	929.40	970.83	1015.05	1036.96	1081.18	1119.42	1144.52	1175.99	1195.11
Sharp Health Plan	Premier	HMO C	278.90	303.70	313.17	322.65	332.86	343.07	353.64	364.58	364.58	364.58	364.58	366.04	373.33	382.08	396.30	407.97	413.80	422.55	431.30	436.77	442.60	445.52	448.43	451.35	454.27	460.10	465.93	474.68	483.07	494.74	509.32	526.45	546.87	569.84	596.09	621.97	651.14	679.94	711.66	743.74	778.38	813.01	850.57	888.48	928.95	949.00	989.47	1024.47	1047.44	1076.24	1093.74
Sutter Health Plus	Sutter Health Plus	HMO A	358.98	390.89	403.09	415.29	428.43	441.57	455.17	469.26	469.26	469.26	469.26	471.13	480.51	491.78	510.08	525.09	532.60	543.86	555.13	562.16	569.67	573.43	577.18	580.93	584.69	592.20	599.70	610.97	621.76	636.78	655.55	677.60	703.88	733.44	767.23	800.54	838.08	875.16	915.98	957.27	1001.85	1046.43	1094.77	1143.57	1195.65	1221.46	1273.55	1318.60	1348.16	1385.23	1407.75
Sutter Health Plus	Sutter Health Plus	HMO B	354.52	386.03	398.08	410.13	423.11	436.08	449.52	463.44	463.44	463.44	463.44	465.28	474.55	485.67	503.74	518.57	525.99	537.11	548.23	555.19	562.60	566.31	570.01	573.72	577.43	584.84	592.26	603.38	614.04	628.87	647.41	669.19	695.14	724.34	757.70	790.61	827.68	864.29	904.61	945.39	989.42	1033.44	1081.17	1129.37	1180.81	1206.30	1257.74	1302.23	1331.43	1368.04	1390.27
UnitedHealthcare	SignatureValue	HMO A	436.10	474.86	489.68	504.50	520.46	536.43	552.96	570.06	570.06	570.06	570.06	572.34	583.74	597.42	619.66	637.90	647.02	660.70	674.38	682.93	692.05	696.61	701.17	705.73	710.29	719.42	728.54	742.22	755.33	773.57	796.37	823.17	855.09	891.00	932.05	972.52	1018.13	1063.16	1112.76	1162.92	1217.08	1271.23	1329.95	1389.24	1452.51	1483.87	1547.14	1601.87	1637.78	1682.82	1710.18
UnitedHealthcare	Focus	HMO B	411.55	448.14	462.12	476.11	491.18	506.24	521.84	537.98	537.98	537.98	537.98	540.13	550.89	563.80	584.78	602.00	610.61	623.52	636.43	644.50	653.11	657.41	661.72	666.02	670.32	678.93	687.54	700.45	712.82	730.04	751.56	776.84	806.97	840.86	879.60	917.79	960.83	1003.33	1050.14	1097.48	1148.59	1199.70	1255.11	1311.06	1370.77	1400.36	1460.08	1511.72	1545.62	1588.12	1613.94
Western Health	Full	HMO A	290.72	316.56	326.44	336.32	346.96	357.60	368.62	380.02	380.02	380.02	380.02	381.54	389.14	398.26	413.08	425.24	431.32	440.44	449.56	455.26	461.35	464.39	467.43	470.47	473.51	479.59	485.67	494.79	503.53	515.69	530.89	548.75	570.03	593.97	621.33	648.32	678.72	708.74	741.80	775.24	811.34	847.45	886.59	926.11	968.29	989.19	1031.38	1067.86	1091.80	1121.82	1140.06
Western Health	Full	HMO B	298.09	324.59	334.72	344.85	355.77	366.68	377.98	389.67	389.67	389.67	389.67	391.23	399.02	408.37	423.57	436.04	442.27	451.62	460.98	466.82	473.06	476.17	479.29	482.41	485.52	491.76	497.99	507.35	516.31	528.78	544.36	562.68	584.50	609.05	637.10	664.77	695.94	726.73	760.63	794.92	831.94	868.96	909.09	949.62	992.87	1014.30	1057.56	1094.96	1119.51	1150.30	1169.00

Health Care Service Plan rates will vary by county

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USE EMPLOYER ZIP CODE FOR RATING

AREA 6

10/01/20 - 12/01/20

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	293.03	319.07	329.03	338.99	349.72	360.44	371.55	383.04	383.04	383.04	383.04	384.57	392.23	401.43	416.36	428.62	434.75	443.94	453.14	458.88	465.01	468.07	471.14	474.20	477.27	483.40	489.53	498.72	507.53	519.79	535.11	553.11	574.56	598.69	626.27	653.47	684.11	714.37	747.69	781.40	817.79	854.18	893.63	933.47	975.99	997.05	1039.57	1076.34	1100.47	1130.73	1149.12
Anthem Blue Cross	Select PPO	PPO B	293.03	319.07	329.03	338.99	349.72	360.44	371.55	383.04	383.04	383.04	383.04	384.57	392.23	401.43	416.36	428.62	434.75	443.94	453.14	458.88	465.01	468.07	471.14	474.20	477.27	483.40	489.53	498.72	507.53	519.79	535.11	553.11	574.56	598.69	626.27	653.47	684.11	714.37	747.69	781.40	817.79	854.18	893.63	933.47	975.99	997.05	1039.57	1076.34	1100.47	1130.73	1149.12
Anthem Blue Cross	Prudent Buyer - Small Group	EPO A	291.50	317.41	327.31	337.22	347.89	358.56	369.61	381.04	381.04	381.04	381.04	382.56	390.18	399.33	414.19	426.38	432.48	441.63	450.77	456.49	462.58	465.63	468.68	471.73	474.78	480.87	486.97	496.11	504.88	517.07	532.31	550.22	571.56	595.57	623.00	650.05	680.54	710.64	743.79	777.32	813.52	849.72	888.97	928.59	970.89	991.85	1034.14	1070.72	1094.73	1124.83	1143.12
Health Net	CommunityCare	HMO A	216.73	236.00	243.36	250.73	258.66	266.59	274.81	283.31	283.31	283.31	283.31	284.44	290.11	296.91	307.96	317.02	321.55	328.35	335.15	339.40	343.94	346.20	348.47	350.74	353.00	357.53	362.07	368.87	375.38	384.45	395.78	409.10	424.96	442.81	463.21	483.32	505.99	528.37	553.02	577.95	604.86	631.78	660.96	690.42	721.87	737.45	768.90	796.10	813.94	836.33	849.93
Kaiser Permanente	Full	HMO A	219.10	237.33	244.30	251.27	258.78	252.29	260.07	268.11	268.11	268.11	268.11	269.18	274.55	280.98	291.44	300.02	304.31	310.74	317.18	321.20	325.49	327.63	329.78	331.92	334.07	338.36	342.65	349.08	355.25	363.83	374.55	387.15	402.17	419.06	438.36	457.40	478.85	500.03	523.35	546.95	572.42	597.89	625.50	653.39	683.15	697.89	727.66	753.39	770.28	791.47	804.33
Kaiser Permanente	Full	HMO C	207.35	224.54	231.11	237.68	244.76	237.85	245.18	252.76	252.76	252.76	252.76	253.77	258.83	264.89	274.75	282.84	286.88	292.95	299.02	302.81	306.85	308.87	310.90	312.92	314.94	318.99	323.03	329.10	334.91	343.00	353.11	364.99	379.14	395.07	413.27	431.21	451.43	471.40	493.39	515.63	539.65	563.66	589.69	615.98	644.04	657.94	685.99	710.26	726.18	746.15	758.28
Oscar	Oscar EPO	EPO A	187.26	203.90	210.26	216.63	223.48	230.34	237.44	244.78	244.78	244.78	244.78	245.76	250.65	256.53	266.07	273.91	277.82	283.70	289.57	293.24	297.16	299.12	301.08	303.04	304.99	308.91	312.83	318.70	324.33	332.16	341.96	353.46	367.17	382.59	400.21	417.59	437.17	456.51	477.81	499.35	522.60	545.86	571.07	596.52	623.70	637.16	664.33	687.83	703.25	722.59	734.34
Oscar	Oscar EPO	EPO B	177.79	193.60	199.64	205.68	212.19	218.70	225.44	232.41	232.41	232.41	232.41	233.34	237.99	243.57	252.63	260.07	263.79	269.36	274.94	278.43	282.15	284.01	285.87	287.72	289.58	293.30	297.02	302.60	307.94	315.38	324.68	335.60	348.62	363.26	379.99	396.49	415.09	433.45	453.67	474.12	496.20	518.28	542.21	566.38	592.18	604.97	630.76	653.07	667.72	686.08	697.23
Oscar	Oscar EPO	EPO C	178.81	194.71	200.78	206.86	213.40	219.95	226.73	233.74	233.74	233.74	233.74	234.68	239.35	244.96	254.08	261.56	265.30	270.91	276.51	280.02	283.76	285.63	287.50	289.37	291.24	294.98	298.72	304.33	309.71	317.19	326.54	337.52	350.61	365.34	382.17	398.76	417.46	435.93	456.26	476.83	499.04	521.24	545.32	569.63	595.57	608.43	634.37	656.81	671.54	690.00	701.22
Sharp Health Plan	Premier	HMO A	172.72	188.07	193.95	199.82	206.14	212.46	219.01	225.78	225.78	225.78	225.78	226.68	231.20	236.62	245.42	252.65	256.26	261.68	267.10	270.48	274.10	275.90	277.71	279.52	281.32	284.93	288.55	293.97	299.16	306.38	315.41	326.03	338.67	352.89	369.15	385.18	403.24	421.08	440.72	460.59	482.04	503.49	526.74	550.23	575.29	587.71	612.77	634.44	648.67	666.50	677.34
Sharp Health Plan	Performance	HMO B	197.55	215.11	221.83	228.54	235.77	243.00	250.49	258.24	258.24	258.24	258.24	259.27	264.44	270.64	280.71	288.97	293.10	299.30	305.50	309.37	313.50	315.57	317.64	319.70	321.77	325.90	330.03	336.23	342.17	350.43	360.76	372.90	387.36	403.63	422.22	440.56	461.22	481.62	504.08	526.81	551.34	575.88	602.47	629.33	658.00	672.20	700.86	725.65	741.92	762.32	774.72
Sutter Health Plus	Sutter Health Plus	HMO A	194.27	211.54	218.14	224.74	231.85	238.97	246.33	253.96	253.96	253.96	253.96	254.96	260.04	266.14	276.04	284.17	288.23	294.33	300.42	304.23	308.29	310.32	312.36	314.39	316.42	320.48	324.55	330.64	336.48	344.61	354.77	366.70	380.92	396.92	415.21	433.24	453.55	473.61	495.71	518.05	542.18	566.30	592.46	618.87	647.06	661.03	689.22	713.59	729.59	749.66	761.83
Sutter Health Plus	Sutter Health Plus	HMO B	192.29	209.39	215.92	222.46	229.49	236.53	243.82	251.37	251.37	251.37	251.37	252.37	257.40	263.43	273.23	281.27	285.30	291.33	297.36	301.13	305.15	307.17	309.18	311.19	313.20	317.22	321.24	327.27	333.06	341.10	351.15	362.97	377.04	392.88	410.98	428.82	448.93	468.79	490.66	512.78	536.66	560.54	586.43	612.57	640.47	654.30	682.20	706.33	722.16	742.02	754.08
Western Health	Full	HMO B	196.64	214.11	220.80	227.48	234.68	241.87	249.33	257.04	257.04	257.04	257.04	258.07	263.21	269.38	279.40	287.63	291.74	297.91	304.08	307.93	312.05	314.10	316.16	318.21	320.27	324.38	328.50	334.67	340.58	348.80	359.08	371.16	385.56	401.75	420.26	438.51	459.07	479.38	501.74	524.36	548.78	573.20	599.67	626.41	654.94	669.07	697.60	722.28	738.47	758.78	771.12
Western Health	Full	HMO C	201.60	219.52	226.37	233.22	240.60	247.98	255.62	263.53	263.53	263.53	263.53	264.58	269.85	276.18	286.45	294.89	299.10	305.43	311.75	315.70	319.92	322.03	324.14	326.25	328.35	332.57	336.79	343.11	349.17	357.61	368.15	380.53	395.29	411.89	430.87	449.58	470.66	491.48	514.40	537.59	562.63	587.66	614.81	642.21	671.47	685.96	715.21	740.51	757.11	777.93	790.58

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	313.35	341.21	351.85	362.50	373.97	385.44	397.32	409.61	409.61	409.61	409.61	411.25	419.44	429.27	445.25	458.35	464.91	474.74	484.57	490.71	497.27	500.54	503.82	507.10	510.37	516.93	523.48	533.31	542.73	555.84	572.23	591.48	614.42	640.22	669.71	698.79	731.56	763.92	799.56	835.60	874.52	913.43	955.62	998.22	1043.69	1066.21	1111.68	1151.00	1176.81	1209.17	1228.83
Anthem Blue Cross	CaliforniaCare HMO	HMO B	339.12	369.27	380.79	392.32	404.73	417.15	430.00	443.30	443.30	443.30	443.30	445.07	453.94	464.58	481.87	496.05	503.15	513.78	524.42	531.07	538.17	541.71	545.26	548.81	552.35	559.44	566.54	577.18	587.37	601.56	619.29	640.13	664.95	692.88	724.80	756.27	791.73	826.75	865.32	904.33	946.45	988.56	1034.22	1080.32	1129.53	1153.91	1203.12	1245.67	1273.60	1308.62	1329.90
Anthem Blue Cross	Advantage PPO	PPO A	338.47	368.55	380.06	391.56	403.95	416.34	429.17	442.44	442.44	442.44	442.44	444.21	453.06	463.68	480.93	495.09	502.17	512.79	523.41	530.04	537.12	540.66	544.20	547.74	551.28	558.36	565.44	576.06	586.23	600.39	618.09	638.88	663.66	691.53	723.39	754.80	790.20	825.15	863.64	902.58	944.61	986.64	1032.21	1078.23	1127.34	1151.67	1200.78	1243.26	1271.13	1306.08	1327.32
Anthem Blue Cross	Select PPO	PPO B	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	501.33	511.71	518.19	525.12	528.58	532.04	535.50	538.96	545.88	552.80	563.18	573.13	586.97	604.27	624.60	648.83	676.08	707.22	737.93	772.53	806.71	844.34	882.40	923.49	964.59	1009.14	1054.12	1102.14	1125.93	1173.94	1215.47	1242.72	1276.89	1297.65
Anthem Blue Cross	Prudent Buyer - Small Group	PPO C	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	501.33	511.71	518.19	525.12	528.58	532.04	535.50	538.96	545.88	552.80	563.18	573.13	586.97	604.27	624.60	648.83	676.08	707.22	737.93	772.53	806.71	844.34	882.40	923.49	964.59	1009.14	1054.12	1102.14	1125.93	1173.94	1215.47	1242.72	1276.89	1297.65
Anthem Blue Cross	Prudent Buyer - Small Group	EPO A	327.47	356.57	367.70	378.83	390.82	402.80	415.22	428.06	428.06	428.06	428.06	429.77	438.33	448.61	465.30	479.00	485.85	496.12	506.39	512.82	519.66	523.09	526.51	529.94	533.36	540.21	547.06	557.33	567.18	580.88	598.00	618.12	642.09	669.06	699.88	730.27	764.52	798.33	835.57	873.24	913.91	954.57	998.66	1043.18	1090.70	1114.24	1161.75	1202.85	1229.82	1263.63	1284.18
Anthem Blue Cross	Prudent Buyer - Small Group	EPO B	327.94	357.09	368.24	379.38	391.38	403.39	415.82	428.68	428.68	428.68	428.68	430.39	438.97	449.26	465.98	479.69	486.55	496.84	507.13	513.56	520.42	523.85	527.28	530.71	534.14	540.99	547.85	558.14	568.00	581.72	598.87	619.01	643.02	670.03	700.89	731.33	765.62	799.49	836.78	874.51	915.23	955.96	1000.11	1044.69	1092.28	1115.85	1163.44	1204.59	1231.60	1265.46	1286.04
Health Net	WholeCare	HMO A	412.87	449.57	463.61	477.64	492.75	507.86	523.51	539.70	539.70	539.70	539.70	541.86	552.66	565.61	586.66	603.93	612.56	625.52	638.47	646.56	655.20	659.52	663.84	668.15	672.47	681.11	689.74	702.69	715.11	732.38	753.97	779.33	809.56	843.56	882.42	920.73	963.91	1006.55	1053.50	1101.00	1152.27	1203.54	1259.13	1315.26	1375.16	1404.85	1464.76	1516.57	1550.57	1593.21	1619.10
Health Net	CommunityCare	HMO C	244.42	266.15	274.46	282.76	291.71	300.65	309.92	319.51	319.51	319.51	319.51	320.78	327.17	334.84	347.30	357.53	362.64	370.31	377.98	382.77	387.88	390.44	392.99	395.55	398.10	403.22	408.33	416.00	423.35	433.57	446.35	461.37	479.26	499.39	522.39	545.08	570.64	595.88	623.68	651.79	682.14	712.50	745.41	778.64	814.10	831.67	867.14	897.81	917.94	943.18	958.53
Kaiser Permanente	Full	HMO A	252.60	273.80	281.91	290.02	298.76	293.50	302.55	311.90	311.90	311.90	311.90	313.15	319.39	326.87	339.04	349.02	354.01	361.49	368.98	373.66	378.65	381.14	383.64	386.14	388.63	393.62	398.61	406.10	413.27	423.25	435.73	450.39	467.85	487.50	509.96	532.11	557.06	581.70	608.83	636.28	665.91	695.54	727.67	760.11	794.73	811.88	846.50	876.45	896.10	920.74	935.70
Kaiser Permanente	Full	HMO B	256.82	278.40	286.66	294.91	303.80	298.69	307.90	317.42	317.42	317.42	317.42	318.69	325.04	332.66	345.04	355.20	360.27	367.89	375.51	380.27	385.35	387.89	390.43	392.97	395.51	400.59	405.67	413.28	420.58	430.74	443.44	458.36	476.13	496.13	518.99	541.52	566.92	591.99	619.61	647.54	677.70	707.85	740.55	773.56	808.79	826.25	861.48	891.96	911.96	937.03	952.26
Kaiser Permanente	Full	HMO C	264.91	287.22	295.75	304.27	313.46	308.65	318.16	328.00	328.00	328.00	328.00	329.32	335.88	343.75	356.54	367.04	372.28	380.16	388.03	392.95	398.20	400.82	403.44	406.07	408.69	413.94	419.19	427.06	434.60	445.10	458.22	473.64	492.01	512.67	536.29	559.57	585.81	611.73	640.26	669.13	700.29	731.45	765.23	799.34	835.75	853.79	890.20	921.69	942.35	968.27	984.00
Kaiser Permanente	Full	HMO D	238.16	258.09	265.71	273.32	281.53	275.74	284.24	293.03	293.03	293.03	293.03	294.21	300.07	307.10	318.53	327.90	332.59	339.63	346.66	351.05	355.74	358.09	360.43	362.77	365.12	369.81	374.50	381.53	388.27	397.65	409.37	423.14	439.55	458.01	479.11	499.91	523.36	546.51	572.00	597.79	625.63	653.46	683.65	714.12	746.65	762.77	795.29	823.42	841.88	865.03	879.09
Oscar	Oscar EPO	EPO A	214.28	233.32	240.61	247.89	255.73	263.57	271.70	280.10	280.10	280.10	280.10	281.22	286.82	293.55	304.47	313.43	317.91	324.64	331.36	335.56	340.04	342.28	344.52	346.76	349.00	353.49	357.97	364.69	371.13	380.10	391.30	404.46	420.15	437.80	457.96	477.85	500.26	522.39	546.76	571.40	598.01	624.62	653.47	682.60	713.70	729.10	760.19	787.08	804.73	826.86	840.30
Oscar	Oscar EPO	EPO B	241.22	262.66	270.86	279.06	287.88	296.71	305.86	315.32	315.32	315.32	315.32	316.58	322.88	330.46	342.75	352.84	357.88	365.45	373.02	377.75	382.79	385.32	387.84	390.36	392.88	397.93	402.97	410.54	417.79	427.89	440.50	455.32	472.98	492.84	515.54	537.93	563.16	588.07	615.50	643.25	673.20	703.16	735.63	768.43	803.43	820.77	855.77	886.04	905.91	930.82	945.95
Oscar	Oscar EPO	EPO C	214.01	233.03	240.31	247.58	255.41	263.25	271.36	279.75	279.75	279.75	279.75	280.87	286.47	293.18	304.09	313.04	317.52	324.23	330.95	335.14	339.62	341.86	344.10	346.33	348.57	353.05	357.52	364.24	370.67	379.62	390.82	403.96	419.63	437.25	457.40	477.26	499.64	521.74	546.08	570.70	597.27	623.85	652.66	681.76	712.81	728.20	759.25	786.11	803.73	825.83	839.25
Oscar	Oscar EPO	EPO D	240.70	262.09	270.27	278.46	287.27	296.08	305.20	314.64	314.64	314.64	314.64	315.90	322.19	329.74	342.01	352.08	357.12	364.67	372.22	376.94	381.97	384.49	387.01	389.52	392.04	397.07	402.11	409.66	416.90	426.97	439.55	454.34	471.96	491.78	514.43	536.77	561.95	586.80	614.18	641.86	671.75	701.64	734.05	766.78	801.70	819.01	853.93	884.14	903.96	928.81	943.92
Sharp Health Plan	Premier	HMO A	202.89	220.92	227.82	234.71	242.14	249.56	257.25	265.21	265.21	265.21	265.21	266.27	271.58	277.94	288.28	296.77	301.01	307.38	313.74	317.72	321.96	324.09	326.21	328.33	330.45	334.70	338.94	345.30	351.40	359.89	370.50	382.96	397.82	414.52	433.62	452.45	473.67	494.62	517.69	541.03	566.22	591.42	618.73	646.32	675.76	690.34	719.78	745.24	761.95	782.90	795.63
Sharp Health Plan	Performance	HMO B	215.29	234.42	241.74	249.06	256.94	264.82	272.98	281.42	281.42	281.42	281.42	282.55	288.17	294.93	305.90	314.91	319.41	326.17	332.92	337.14	341.64	343.90	346.15	348.40	350.65	355.15	359.65	366.41	372.88	381.89	393.14	406.37	422.13	439.86	460.12	480.10	502.62	524.85	549.33	574.10	600.83	627.57	656.55	685.82	717.06	732.54	763.77	790.79	808.52	830.75	844.26
Sharp Health Plan	Premier	HMO C	197.90	215.49	222.21	228.94	236.18	243.43	250.93	258.69	258.69	258.69	258.69	259.72	264.90	271.11	281.20	289.47	293.61	299.82	306.03	309.91	314.05	316.12	318.19	320.26	322.33	326.47	330.61	336.81	342.76	351.04	361.39	373.55	388.04	404.33	422.96	441.33	462.02	482.46	504.96	527.73	552.30	576.88	603.52	630.43	659.14	673.37	702.08	726.92	743.22	763.65	776.07
Sutter Health Plus	Sutter Health Plus	HMO B	249.29	271.45	279.93	288.40	297.52	306.65	316.10	325.88	325.88	325.88	325.88	327.18	333.70	341.52	354.23	364.65	369.87	377.69	385.51	390.40	395.61	398.22	400.83	403.43	406.04	411.25	416.47	424.29	431.78	442.21	455.25	470.56	488.81	509.34	532.80	555.94	582.01	607.76	636.11	664.78	695.74	726.70	760.26	794.16	830.33	848.25	884.42	915.71	936.24	961.98	977.61
Sutter Health Plus	Sutter Health Plus	HMO C	226.27	246.38	254.07	261.76	270.05	278.33	286.91	295.79	295.79	295.79	295.79	296.96	302.88	309.98	321.51	330.98	335.71	342.81	349.91	354.34	359.08	361.44	363.81	366.17	368.54	373.27	378.01	385.10	391.91	401.37	413.20	427.10	443.67	462.30	483.60	504.60	528.26	551.63	577.36	603.39	631.49	659.59	690.05	720.81	753.64	769.91	802.74	831.14	849.77	873.14	887.33
UnitedHealthcare	SignatureValue	HMO A	294.07	320.21	330.20	340.19	350.96	361.72	372.87	384.40	384.40	384.40	384.40	385.94	393.63	402.85	417.84	430.14	436.29	445.52	454.75	460.51	466.66	469.74	472.81	475.89	478.96	485.11	491.26	500.49	509.33	521.63	537.01	555.07	576.60	600.82	628.49	655.79	686.54	716.91	750.35	784.18	820.69	857.21	896.81	936.78	979.45	1000.59	1043.26	1080.16	1104.38	1134.75	1153.20
UnitedHealthcare	Advantage	HMO B	258.16	281.10	289.88	298.65	308.10	317.55	327.34	337.46	337.46	337.46	337.46	338.81	345.56	353.66	366.82	377.62	383.02	391.12	399.22	404.28	409.68	412.38	415.08	417.78	420.48	425.87	431.27	439.37	447.13	457.93	471.43	487.29	506.19	527.45	551.75	575.71	602.70	629.36	658.72	688.42	720.48	752.54	787.29	822.39	859.85	878.41	915.87	948.26	969.52	996.18	1012.38
UnitedHealthcare	Focus	HMO D	277.50	302.17	311.60	321.03	331.19	341.35	351.87	362.75	362.75	362.75	362.75	364.20	371.46	380.16	394.31	405.92	411.72	420.43	429.13	434.57	440.38	443.28	446.18	449.08	451.99	457.79	463.59	472.30	480.64	492.25	506.76	523.81	544.13	566.98	593.10	618.85	647.87	676.53	708.09	740.01	774.47	808.93	846.30	884.02	924.29	944.24	984.50	1019.33	1042.18	1070.84	1088.25
Western Health	Full	HMO A	221.05	240.70	248.21	255.73	263.82	271.91	280.29	288.96	288.96	288.96	288.96	290.11	295.89	302.83	314.10	323.34	327.97	334.90	341.83	346.17	350.79	353.10	355.42	357.73	360.04	364.66	369.29	376.22	382.87	392.11	403.67	417.25	433.43	451.64	472.44	492.96	516.08	538.90	564.04	589.47	616.92	644.37	674.13	704.19	736.26	752.15	784.23	811.97	830.17	853.00	866.87
Western Health	Full	HMO B	232.10	252.74	260.62	268.51	277.01	285.50	294.30	303.40	303.40	303.40	303.40	304.62	310.69	317.97	329.80	339.51	344.36	351.65	358.93	363.48	368.33	370.76	373.19	375.61	378.04	382.90	387.75	395.03	402.01	411.72	423.86	438.12	455.11	474.22	496.07	517.61	541.88	565.85	592.24	618.94	647.77	676.59	707.84	739.40	773.07	789.76	823.44	852.56	871.68	895.65	910.21
Western Health	Full	HMO C	216.67	235.93	243.30	250.66	258.59	266.52	274.74	283.23	283.23	283.23	283.23	284.36	290.03	296.83	307.87	316.94	321.47	328.27	335.06	339.31	343.84	346.11	348.38	350.64	352.91	357.44	361.97	368.77	375.28	384.35	395.68	408.99	424.85	442.69	463.08	483.19	505.85	528.23	552.87	577.79	604.70	631.61	660.78	690.24	721.68	737.25	768.69	795.88	813.73	836.10	849.70

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	391.54	426.35	439.65	452.96	467.29	481.62	496.47	511.82	511.82	511.82	511.82	513.87	524.10	536.39	556.35	572.73	580.92	593.20	605.48	613.16	621.35	625.44	629.54	633.63	637.73	645.92	654.11	666.39	678.16	694.54	715.01	739.07	767.73	799.97	836.83	873.16	914.11	954.54	999.07	1044.11	1092.74	1141.36	1194.08	1247.31	1304.12	1332.27	1389.08	1438.21	1470.46	1510.89	1535.46
Anthem Blue Cross	CaliforniaCare HMO	HMO B	423.75	461.42	475.82	490.22	505.73	521.24	537.30	553.92	553.92	553.92	553.92	556.14	567.21	580.51	602.11	619.84	628.70	641.99	655.29	663.60	672.46	676.89	681.32	685.75	690.18	699.05

USE EMPLOYER ZIP CODE FOR RATING

AREA 6 - Continued

10/01/20 - 12/01/20

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	448.46	488.32	503.56	518.80	535.22	551.63	568.63	586.22	586.22	586.22	586.22	588.56	600.29	614.36	637.22	655.98	665.36	679.43	693.50	702.29	711.67	716.36	721.05	725.74	730.43	739.81	749.19	763.26	776.74	795.50	818.95	846.50	879.33	916.26	958.47	1000.09	1046.99	1093.30	1144.30	1195.89	1251.58	1307.27	1367.65	1428.62	1493.69	1525.93	1591.00	1647.28	1684.21	1730.52	1758.66
Health Net	WholeCare	HMO C	471.98	513.93	529.97	546.01	563.29	580.56	598.46	616.97	616.97	616.97	616.97	619.43	631.77	646.58	670.64	690.38	700.26	715.06	729.87	739.12	749.00	753.93	758.87	763.80	768.74	778.61	788.48	803.29	817.48	837.22	861.90	890.90	925.45	964.32	1008.74	1052.54	1101.90	1150.64	1204.32	1258.61	1317.22	1375.83	1439.38	1503.54	1572.03	1605.96	1674.44	1733.67	1772.54	1821.28	1850.91
Health Net	Salud HMO y Mas	HMO D	273.62	297.94	307.24	316.54	326.55	336.57	346.94	357.67	357.67	357.67	357.67	359.10	366.25	374.84	388.79	400.23	405.95	414.54	423.12	428.49	434.21	437.07	439.93	442.79	445.65	451.38	457.10	465.68	473.91	485.36	499.66	516.47	536.50	559.04	584.79	610.18	638.80	667.05	698.17	729.64	763.62	797.60	834.44	871.64	911.34	931.01	970.71	1005.05	1027.58	1055.84	1073.01
Health Net	Full	HMO E	474.25	516.40	532.52	548.64	566.00	583.35	601.33	619.93	619.93	619.93	619.93	622.41	634.81	649.69	673.86	693.70	703.62	718.50	733.38	742.68	752.59	757.55	762.51	767.47	772.43	782.35	792.27	807.15	821.41	841.24	866.04	895.18	929.89	968.95	1013.59	1057.60	1107.19	1156.17	1210.10	1264.66	1323.55	1382.44	1446.30	1510.77	1579.58	1613.68	1682.49	1742.00	1781.06	1830.03	1859.79
Kaiser Permanente	Full	HMO A	350.80	380.74	392.19	403.63	415.96	414.30	427.07	440.28	440.28	440.28	440.28	442.04	450.84	461.41	478.58	492.67	499.71	510.28	520.85	527.45	534.49	538.02	541.54	545.06	548.58	555.63	562.67	573.24	583.37	597.45	615.07	635.76	660.41	688.15	719.85	751.11	786.33	821.11	859.42	898.16	939.99	981.82	1027.16	1072.95	1121.82	1146.04	1194.91	1237.18	1264.91	1299.69	1320.84
Kaiser Permanente	Full	HMO B	347.26	376.89	388.21	399.54	411.74	409.95	422.58	435.65	435.65	435.65	435.65	437.39	446.11	456.56	473.55	487.49	494.46	504.92	515.38	521.91	528.88	532.37	535.85	539.34	542.82	549.79	556.76	567.22	577.24	591.18	608.60	629.08	653.48	680.92	712.29	743.22	778.07	812.49	850.39	888.73	930.12	971.50	1016.37	1061.68	1110.04	1134.00	1182.36	1224.18	1251.63	1286.04	1306.95
Oscar	Oscar EPO	EPO A	295.58	321.86	331.90	341.95	352.77	363.59	374.79	386.38	386.38	386.38	386.38	387.93	395.66	404.93	420.00	432.36	438.54	447.82	457.09	462.89	469.07	472.16	475.25	478.34	481.43	487.61	493.80	503.07	511.96	524.32	539.78	557.94	579.57	603.91	631.73	659.17	690.08	720.60	754.22	788.22	824.93	861.63	901.43	941.61	984.50	1005.75	1048.64	1085.73	1110.08	1140.60	1159.14
Oscar	Oscar EPO	EPO B	290.38	316.19	326.06	335.93	346.56	357.19	368.19	379.58	379.58	379.58	379.58	381.10	388.69	397.80	412.61	424.75	430.83	439.94	449.05	454.74	460.81	463.85	466.89	469.92	472.96	479.03	485.11	494.22	502.95	515.09	530.28	548.12	569.37	593.29	620.62	647.57	677.93	707.92	740.94	774.35	810.41	846.47	885.57	925.04	967.18	988.05	1030.19	1066.63	1090.54	1120.53	1138.74
Sharp Health Plan	Premier	HMO A	282.90	308.04	317.66	327.27	337.63	347.98	358.71	369.80	369.80	369.80	369.80	371.28	378.68	387.55	401.97	413.81	419.72	428.60	437.47	443.02	448.94	451.90	454.85	457.81	460.77	466.69	472.60	481.48	489.99	501.82	516.61	533.99	554.70	578.00	604.62	630.88	660.46	689.68	721.85	754.39	789.52	824.65	862.74	901.20	942.25	962.59	1003.64	1039.14	1062.44	1091.65	1109.40
Sharp Health Plan	Performance	HMO B	304.75	331.84	342.20	352.56	363.71	374.87	386.42	398.37	398.37	398.37	398.37	399.96	407.93	417.49	433.03	445.78	452.15	461.71	471.27	477.25	483.62	486.81	490.00	493.18	496.37	502.74	509.12	518.68	527.84	540.59	556.52	575.25	597.56	622.65	651.33	679.62	711.49	742.96	777.62	812.67	850.52	888.37	929.40	970.83	1015.05	1036.96	1081.18	1119.42	1144.52	1175.99	1195.11
Sharp Health Plan	Premier	HMO C	278.90	303.70	313.17	322.65	332.86	343.07	353.64	364.58	364.58	364.58	364.58	366.04	373.33	382.08	396.30	407.97	413.80	422.55	431.30	436.77	442.60	445.52	448.43	451.35	454.27	460.10	465.93	474.68	483.07	494.74	509.32	526.45	546.87	569.84	596.09	621.97	651.14	679.94	711.66	743.74	778.38	813.01	850.57	888.48	928.95	949.00	989.47	1024.47	1047.44	1076.24	1093.74
Sutter Health Plus	Sutter Health Plus	HMO A	325.20	354.11	365.16	376.22	388.12	400.02	412.35	425.11	425.11	425.11	425.11	426.80	435.30	445.51	462.09	475.69	482.49	492.69	502.90	509.27	516.07	519.47	522.88	526.28	529.68	536.48	543.28	553.48	563.26	576.86	593.87	613.85	637.65	664.43	695.04	725.22	759.23	792.81	829.80	867.21	907.59	947.98	991.76	1035.97	1083.16	1106.54	1153.73	1194.54	1221.32	1254.90	1275.30
Sutter Health Plus	Sutter Health Plus	HMO B	321.17	349.71	360.63	371.54	383.30	395.05	407.23	419.83	419.83	419.83	419.83	421.50	429.90	439.98	456.35	469.78	476.50	486.58	496.65	502.95	509.67	513.03	516.38	519.74	523.10	529.82	536.54	546.61	556.27	569.70	586.49	606.23	629.74	656.19	686.41	716.22	749.81	782.97	819.50	856.44	896.33	936.21	979.45	1023.11	1069.71	1092.80	1139.40	1179.71	1206.16	1239.32	1259.46
UnitedHealthcare	SignatureValue	HMO A	389.34	423.95	437.18	450.41	464.66	478.91	493.67	508.94	508.94	508.94	508.94	510.98	521.15	533.37	553.22	569.50	577.65	589.86	602.08	609.71	617.85	621.92	626.00	630.07	634.14	642.28	650.43	662.64	674.35	690.63	710.99	734.91	763.41	795.47	832.12	868.25	908.97	949.17	993.45	1038.24	1086.59	1134.94	1187.36	1240.29	1296.78	1324.77	1381.26	1430.12	1462.18	1502.39	1526.82
UnitedHealthcare	Focus	HMO B	367.40	400.06	412.54	425.03	438.48	451.92	465.85	480.26	480.26	480.26	480.26	482.18	491.79	503.31	522.04	537.41	545.10	556.62	568.15	575.35	583.04	586.88	590.72	594.56	598.40	606.09	613.77	625.30	636.34	651.71	670.92	693.50	720.39	750.65	785.23	819.32	857.74	895.68	937.47	979.73	1025.36	1070.98	1120.45	1170.39	1223.70	1250.12	1303.43	1349.53	1379.79	1417.73	1440.78
Western Health	Full	HMO A	290.72	316.56	326.44	336.32	346.96	357.60	368.62	380.02	380.02	380.02	380.02	381.54	389.14	398.26	413.08	425.24	431.32	440.44	449.56	455.26	461.35	464.39	467.43	470.47	473.51	479.59	485.67	494.79	503.53	515.69	530.89	548.75	570.03	593.97	621.33	648.32	678.72	708.74	741.80	775.24	811.34	847.45	886.59	926.11	968.29	989.19	1031.38	1067.86	1091.80	1121.82	1140.06
Western Health	Full	HMO B	298.09	324.59	334.72	344.85	355.77	366.68	377.98	389.67	389.67	389.67	389.67	391.23	399.02	408.37	423.57	436.04	442.27	451.62	460.98	466.82	473.06	476.17	479.29	482.41	485.52	491.76	497.99	507.35	516.31	528.78	544.36	562.68	584.50	609.05	637.10	664.77	695.94	726.73	760.63	794.92	831.94	868.96	909.09	949.62	992.87	1014.30	1057.56	1094.96	1119.51	1150.30	1169.00

Health Care Service Plan rates will vary by county

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USE EMPLOYER ZIP CODE FOR RATING

AREA 7

10/01/20 - 12/01/20

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	299.43	326.04	336.22	346.40	357.36	368.32	379.67	391.41	391.41	391.41	391.41	392.98	400.80	410.20	425.46	437.99	444.25	453.64	463.04	468.91	475.17	478.30	481.43	484.57	487.70	493.96	500.22	509.62	518.62	531.14	546.80	565.20	587.12	611.77	639.96	667.75	699.06	729.98	764.03	798.48	835.66	872.84	913.16	953.87	997.31	1018.84	1062.29	1099.86	1124.52	1155.44	1174.23
Anthem Blue Cross	Select PPO	PPO B	283.18	308.35	317.98	327.60	337.97	348.33	359.06	370.17	370.17	370.17	370.17	371.65	379.05	387.94	402.37	414.22	420.14	429.03	437.91	443.46	449.39	452.35	455.31	458.27	461.23	467.15	473.08	481.96	490.48	502.32	517.13	534.53	555.26	578.58	605.23	631.51	661.12	690.37	722.57	755.15	790.31	825.48	863.61	902.10	943.19	963.55	1004.64	1040.18	1063.50	1092.74	1110.51
Anthem Blue Cross	Prudent Buyer - Small Group	EPO A	297.91	324.39	334.51	344.64	355.54	366.44	377.74	389.42	389.42	389.42	389.42	390.98	398.77	408.11	423.30	435.76	441.99	451.34	460.68	466.53	472.76	475.87	478.99	482.10	485.22	491.45	497.68	507.02	515.98	528.44	544.02	562.32	584.13	608.66	636.70	664.35	695.50	726.27	760.15	794.42	831.41	868.41	908.52	949.02	992.24	1013.66	1056.89	1094.27	1118.80	1149.57	1168.26
Health Net	CommunityCare	HMO A	216.73	236.00	243.36	250.73	258.66	266.59	274.81	283.31	283.31	283.31	283.31	284.44	290.11	296.91	307.96	317.02	321.55	328.35	335.15	339.40	343.94	346.20	348.47	350.74	353.00	357.53	362.07	368.87	375.38	384.45	395.78	409.10	424.96	442.81	463.21	483.32	505.99	528.37	553.02	577.95	604.86	631.78	660.96	690.42	721.87	737.45	768.90	796.10	813.94	836.33	849.93
Kaiser Permanente	Full	HMO A	225.25	244.03	251.21	258.39	266.12	259.86	267.87	276.16	276.16	276.16	276.16	277.26	282.78	289.41	300.18	309.02	313.44	320.06	326.69	330.83	335.25	337.46	339.67	341.88	344.09	348.51	352.93	359.55	365.91	374.74	385.79	398.77	414.23	431.63	451.51	471.12	493.21	515.03	539.05	563.36	589.59	615.83	644.27	672.99	703.64	718.83	749.48	776.00	793.39	815.21	828.48
Kaiser Permanente	Full	HMO C	213.15	230.86	237.63	244.39	251.68	244.98	252.53	260.34	260.34	260.34	260.34	261.39	266.59	272.84	282.99	291.33	295.49	301.74	307.99	311.89	316.06	318.14	320.22	322.31	324.39	328.55	332.72	338.97	344.96	353.29	363.70	375.94	390.52	406.92	425.66	444.15	464.98	485.54	508.19	531.10	555.84	580.57	607.38	634.46	663.36	677.68	706.57	731.57	747.97	768.54	781.02
Oscar	Oscar EPO	EPO A	187.26	203.90	210.26	216.63	223.48	230.34	237.44	244.78	244.78	244.78	244.78	245.76	250.65	256.53	266.07	273.91	277.82	283.70	289.57	293.24	297.16	299.12	301.08	303.04	304.99	308.91	312.83	318.70	324.33	332.16	341.96	353.46	367.17	382.59	400.21	417.59	437.17	456.51	477.81	499.35	522.60	545.86	571.07	596.52	623.70	637.16	664.33	687.83	703.25	722.59	734.34
Oscar	Oscar EPO	EPO B	177.79	193.60	199.64	205.68	212.19	218.70	225.44	232.41	232.41	232.41	232.41	233.34	237.99	243.57	252.63	260.07	263.79	269.36	274.94	278.43	282.15	284.01	285.87	287.72	289.58	293.30	297.02	302.60	307.94	315.38	324.68	335.60	348.62	363.26	379.99	396.49	415.09	433.45	453.67	474.12	496.20	518.28	542.21	566.38	592.18	604.97	630.76	653.07	667.72	686.08	697.23
Oscar	Oscar EPO	EPO C	178.81	194.71	200.78	206.86	213.40	219.95	226.73	233.74	233.74	233.74	233.74	234.68	239.35	244.96	254.08	261.56	265.30	270.91	276.51	280.02	283.76	285.63	287.50	289.37	291.24	294.98	298.72	304.33	309.71	317.19	326.54	337.52	350.61	365.34	382.17	398.76	417.46	435.93	456.26	476.83	499.04	521.24	545.32	569.63	595.57	608.43	634.37	656.81	671.54	690.00	701.22
Sharp Health Plan	Premier	HMO A	172.72	188.07	193.95	199.82	206.14	212.46	219.01	225.78	225.78	225.78	225.78	226.68	231.20	236.62	245.42	252.65	256.26	261.68	267.10	270.48	274.10	275.90	277.71	279.52	281.32	284.93	288.55	293.97	299.16	306.38	315.41	326.03	338.67	352.89	369.15	385.18	403.24	421.08	440.72	460.59	482.04	503.49	526.74	550.23	575.29	587.71	612.77	634.44	648.67	666.50	677.34
Sharp Health Plan	Performance	HMO B	197.55	215.11	221.83	228.54	235.77	243.00	250.49	258.24	258.24	258.24	258.24	259.27	264.44	270.64	280.71	288.97	293.10	299.30	305.50	309.37	313.50	315.57	317.64	319.70	321.77	325.90	330.03	336.23	342.17	350.43	360.76	372.90	387.36	403.63	422.22	440.56	461.22	481.62	504.08	526.81	551.34	575.88	602.47	629.33	658.00	672.20	700.86	725.65	741.92	762.32	774.72
Sutter Health Plus	Sutter Health Plus	HMO A	224.10	244.02	251.63	259.25	267.45	275.65	284.15	292.95	292.95	292.95	292.95	294.11	299.97	307.00	318.42	327.80	332.48	339.51	346.54	350.94	355.63	357.97	360.31	362.66	365.00	369.69	374.37	381.40	388.14	397.52	409.23	423.00	439.41	457.86	478.95	499.75	523.19	546.33	571.81	597.59	625.42	653.25	683.42	713.89	746.40	762.52	795.03	823.15	841.61	864.75	878.80
Sutter Health Plus	Sutter Health Plus	HMO B	221.82	241.53	249.07	256.61	264.73	272.85	281.26	289.96	289.96	289.96	289.96	291.11	296.91	303.87	315.18	324.46	329.10	336.06	343.02	347.37	352.01	354.32	356.64	358.96	361.28	365.92	370.56	377.52	384.19	393.47	405.07	418.69	434.93	453.20	474.08	494.66	517.86	540.77	565.99	591.51	619.05	646.60	676.46	706.62	738.80	754.75	786.94	814.77	833.04	855.95	869.85
Western Health	Full	HMO B	196.64	214.11	220.80	227.48	234.68	241.87	249.33	257.04	257.04	257.04	257.04	258.07	263.21	269.38	279.40	287.63	291.74	297.91	304.08	307.93	312.05	314.10	316.16	318.21	320.27	324.38	328.50	334.67	340.58	348.80	359.08	371.16	385.56	401.75	420.26	438.51	459.07	479.38	501.74	524.36	548.78	573.20	599.67	626.41	654.94	669.07	697.60	722.28	738.47	758.78	771.12
Western Health	Full	HMO C	201.60	219.52	226.37	233.22	240.60	247.98	255.62	263.53	263.53	263.53	263.53	264.58	269.85	276.18	286.45	294.89	299.10	305.43	311.75	315.70	319.92	322.03	324.14	326.25	328.35	332.57	336.79	343.11	349.17	357.61	368.15	380.53	395.29	411.89	430.87	449.58	470.66	491.48	514.40	537.59	562.63	587.66	614.81	642.21	671.47	685.96	715.21	740.51	757.11	777.93	790.58

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	261.59	284.84	293.74	302.63	312.20	321.77	331.69	341.95	341.95	341.95	341.95	343.32	350.16	358.36	371.70	382.64	388.11	396.32	404.53	409.66	415.13	417.86	420.60	423.33	426.07	431.54	437.01	445.22	453.08	464.03	477.70	493.78	512.93	534.47	559.09	583.37	610.72	637.74	667.49	697.58	730.06	762.55	797.77	833.33	871.29	890.10	928.05	960.88	982.42	1009.44	1025.85
Anthem Blue Cross	CaliforniaCare HMO	HMO B	308.40	335.82	346.30	356.78	368.07	379.35	391.05	403.14	403.14	403.14	403.14	404.75	412.82	422.49	438.21	451.11	457.56	467.24	476.91	482.96	489.41	492.64	495.86	499.09	502.31	508.76	515.21	524.89	534.16	547.06	563.19	582.13	604.71	630.11	659.13	687.76	720.01	751.86	786.93	822.41	860.70	899.00	940.53	982.45	1027.20	1049.37	1094.12	1132.82	1158.22	1190.07	1209.42
Anthem Blue Cross	Advantage PPO	PPO A	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
Anthem Blue Cross	Select PPO	PPO B	319.78	348.20	359.07	369.94	381.64	393.35	405.47	418.01	418.01	418.01	418.01	419.68	428.04	438.07	454.38	467.75	474.44	484.47	494.51	500.78	507.46	510.81	514.15	517.50	520.84	527.53	534.22	544.25	553.86	567.24	583.96	603.61	627.02	653.35	683.45	713.13	746.57	779.59	815.96	852.74	892.45	932.16	975.22	1018.69	1065.09	1088.08	1134.48	1174.61	1200.94	1233.97	1254.03
Anthem Blue Cross	Prudent Buyer - Small Group	PPO C	338.18	368.24	379.74	391.23	403.61	415.99	428.81	442.07	442.07	442.07	442.07	443.84	452.68	463.29	480.53	494.68	501.75	512.36	522.97	529.60	536.67	540.21	543.75	547.28	550.82	557.89	564.97	575.58	585.74	599.89	617.57	638.35	663.10	690.96	722.78	754.17	789.54	824.46	862.92	901.82	943.82	985.82	1031.35	1077.32	1126.39	1150.71	1199.78	1242.22	1270.07	1304.99	1326.21
Anthem Blue Cross	Prudent Buyer - Small Group	EPO A	334.65	364.40	375.77	387.14	399.39	411.64	424.33	437.45	437.45	437.45	437.45	439.20	447.95	458.45	475.51	489.51	496.51	507.00	517.50	524.07	531.06	534.56	538.06	541.56	545.06	552.06	559.06	569.56	579.62	593.62	611.12	631.68	656.18	683.73	715.23	746.29	781.29	815.84	853.90	892.40	933.96	975.51	1020.57	1066.07	1114.62	1138.68	1187.24	1229.23	1256.79	1291.35	1312.35
Anthem Blue Cross	Prudent Buyer - Small Group	EPO B	335.11	364.90	376.28	387.67	399.94	412.21	424.91	438.05	438.05	438.05	438.05	439.80	448.56	459.08	476.16	490.18	497.19	507.70	518.21	524.78	531.79	535.30	538.80	542.31	545.81	552.82	559.83	570.34	580.42	594.43	611.96	632.54	657.08	684.67	716.21	747.31	782.36	816.96	855.07	893.62	935.24	976.85	1021.97	1067.53	1116.15	1140.24	1188.87	1230.92	1258.52	1293.12	1314.15
Health Net	WholeCare	HMO A	366.57	399.15	411.61	424.07	437.49	450.91	464.80	479.18	479.18	479.18	479.18	481.09	490.68	502.18	520.86	536.20	543.87	555.37	566.87	574.05	581.72	585.55	589.39	593.22	597.05	604.72	612.39	623.89	634.91	650.24	669.41	691.93	718.76	748.95	783.45	817.48	855.81	893.66	935.35	977.52	1023.04	1068.56	1117.92	1167.75	1220.94	1247.30	1300.48	1346.49	1376.67	1414.53	1437.54
Health Net	CommunityCare	HMO C	244.42	266.15	274.46	282.76	291.71	300.65	309.92	319.51	319.51	319.51	319.51	320.78	327.17	334.84	347.30	357.53	362.64	370.31	377.98	382.77	387.88	390.44	392.99	395.55	398.10	403.22	408.33	416.00	423.35	433.57	446.35	461.37	479.26	499.39	522.39	545.08	570.64	595.88	623.68	651.79	682.14	712.50	745.41	778.64	814.10	831.67	867.14	897.81	917.94	943.18	958.53
Kaiser Permanente	Full	HMO A	259.75	281.60	289.95	298.30	307.30	302.31	311.62	321.26	321.26	321.26	321.26	322.54	328.97	336.68	349.21	359.49	364.63	372.34	380.05	384.87	390.01	392.58	395.15	397.72	400.29	405.43	410.57	418.28	425.67	435.95	448.80	463.90	481.89	502.13	525.26	548.07	573.77	599.15	627.10	655.37	685.89	716.41	749.50	782.91	818.57	836.24	871.90	902.74	922.98	948.36	963.78
Kaiser Permanente	Full	HMO B	264.10	286.34	294.84	303.34	312.49	307.66	317.14	326.95	326.95	326.95	326.95	328.25	334.79	342.64	355.39	365.85	371.08	378.93	386.78	391.68	396.91	399.53	402.14	404.76	407.37	412.60	417.84	425.68	433.20	443.66	456.74	472.11	490.42	511.02	534.56	557.77	583.92	609.75	638.20	666.97	698.03	729.09	762.76	796.77	833.06	851.04	887.33	918.72	939.31	965.14	980.85
Kaiser Permanente	Full	HMO C	272.44	295.41	304.20	312.98	322.44	317.91	327.71	337.84	337.84	337.84	337.84	339.20	345.95	354.06	367.24	378.05	383.45	391.56	399.67	404.74	410.14	412.85	415.55	418.25	420.95	426.36	431.76	439.87	447.64	458.45	471.97	487.85	506.77	528.05	552.37	576.36	603.39	630.08	659.47	689.20	721.30	753.39	788.19	823.33	860.83	879.41	916.91	949.34	970.62	997.31	1013.52
Kaiser Permanente	Full	HMO D	244.89	265.41	273.26	281.10	289.56	284.02	292.77	301.82	301.82	301.82	301.82	303.03	309.07	316.31	328.08	337.74	342.57	349.81	357.06	361.59	366.41	368.83	371.24	373.66	376.07	380.90	385.73	392.97	399.92	409.58	421.65	435.83	452.74	471.75	493.48	514.91	539.06	562.90	589.16	615.72	644.39	673.07	704.16	735.55	769.05	785.65	819.15	848.13	867.14	890.98	905.46
Oscar	Oscar EPO	EPO A	214.28	233.32	240.61	247.89	255.73	263.57	271.70	280.10	280.10	280.10	280.10	281.22	286.82	293.55	304.47	313.43	317.91	324.64	331.36	335.56	340.04	342.28	344.52	346.76	349.00	353.49	357.97	364.69	371.13	380.10	391.30	404.46	420.15	437.80	457.96	477.85	500.26	522.39	546.76	571.40	598.01	624.62	653.47	682.60	713.70	729.10	760.19	787.08	804.73	826.86	840.30
Oscar	Oscar EPO	EPO B	241.22	262.66	270.86	279.06	287.88	296.71	305.86	315.32	315.32	315.32	315.32	316.58	322.88	330.46	342.75	352.84	357.88	365.45	373.02	377.75	382.79	385.32	387.84	390.36	392.88	397.93	402.97	410.54	417.79	427.89	440.50	455.32	472.98	492.84	515.54	537.93	563.16	588.07	615.50	643.25	673.20	703.16	735.63	768.43	803.43	820.77	855.77	886.04	905.91	930.82	945.95
Oscar	Oscar EPO	EPO C	214.01	233.03	240.31	247.58	255.41	263.25	271.36	279.75	279.75	279.75	279.75	280.87	286.47	293.18	304.09	313.04	317.52	324.23	330.95	335.14	339.62	341.86	344.10	346.33	348.57	353.05	357.52	364.24	370.67	379.62	390.82	403.96	419.63	437.25	457.40	477.26	499.64	521.74	546.08	570.70	597.27	623.85	652.66	681.76	712.81	728.20	759.25	786.11	803.73	825.83	839.25
Oscar	Oscar EPO	EPO D	240.70	262.09	270.27	278.46	287.27	296.08	305.20	314.64	314.64	314.64	314.64	315.90	322.19	329.74	342.01	352.08	357.12	364.67	372.22	376.94	381.97	384.49	387.01	389.52	392.04	397.07	402.11	409.66	416.90	426.97	439.55	454.34	471.96	491.78	514.43	536.77	561.95	586.80	614.18	641.86	671.75	701.64	734.05	766.78	801.70	819.01	853.93	884.14	903.96	928.81	943.92
Sharp Health Plan	Premier	HMO A	202.89	220.92	227.82	234.71	242.14	249.56	257.25	265.21	265.21	265.21	265.21	266.27	271.58	277.94	288.28	296.77	301.01	307.38	313.74	317.72	321.96	324.09	326.21	328.33	330.45	334.70	338.94	345.30	351.40	359.89	370.50	382.96	397.82	414.52	433.62	452.45	473.67	494.62	517.69	541.03	566.22	591.42	618.73	646.32	675.76	690.34	719.78	745.24	761.95	782.90	795.63
Sharp Health Plan	Performance	HMO B	215.29	234.42	241.74	249.06	256.94	264.82	272.98	281.42	281.42	281.42	281.42	282.55	288.17	294.93	305.90	314.91	319.41	326.17	332.92	337.14	341.64	343.90	346.15	348.40	350.65	355.15	359.65	366.41	372.88	381.89	393.14	406.37	422.13	439.86	460.12	480.10	502.62	524.85	549.33	574.10	600.83	627.57	656.55	685.82	717.06	732.54	763.77	790.79	808.52	830.75	844.26
Sharp Health Plan	Premier	HMO C	197.90	215.49	222.21	228.94	236.18	243.43	250.93	258.69	258.69	258.69	258.69	259.72	264.90	271.11	281.20	289.47	293.61	299.82	306.03	309.91	314.05	316.12	318.19	320.26	322.33	326.47	330.61	336.81	342.76	351.04	361.39	373.55	388.04	404.33	422.96	441.33	462.02	482.46	504.96	527.73	552.30	576.88	603.52	630.43	659.14	673.37	702.08	726.92	743.22	763.65	776.07
Sutter Health Plus	Sutter Health Plus	HMO B	287.57	313.13	322.90	332.68	343.20	353.73	364.63	375.92	375.92	375.92	375.92	377.41	384.93	393.95	408.61	420.64	426.65	435.68	444.70	450.34	456.35	459.36	462.36	465.37	468.38	474.39	480.41	489.43	498.08	510.10	525.14	542.81	563.86	587.54	614.61	641.30	671.37	701.07	733.77	766.85	802.56	838.27	876.99	916.08	957.81	978.48	1020.21	1056.30	1079.98	1109.68	1127.71
Sutter Health Plus	Sutter Health Plus	HMO C	261.01	284.21	293.08	301.95	311.51	321.06	330.95	341.20	341.20	341.20	341.20	342.55	349.38	357.57	370.87	381.79	387.25	395.44	403.63	408.75	414.20	416.93	419.66	422.39	425.12	430.58	436.04	444.23	452.08	462.99	476.64	492.68	511.79	533.28	557.85	582.07	609.37	636.32	666.00	696.03	728.44	760.85	796.00	831.48	869.35	888.12	925.99	958.74	980.24	1007.19	1023.56
UnitedHealthcare	SignatureValue	HMO A	294.07	320.21	330.20	340.19	350.96	361.72	372.87	384.40	384.40	384.40	384.40	385.94	393.63	402.85	417.84	430.14	436.29	445.52	454.75	460.51	466.66	469.74	472.81	475.89	478.96	485.11	491.26	500.49	509.33	521.63	537.01	555.07	576.60	600.82	628.49	655.79	686.54	716.91	750.35	784.18	820.69	857.21	896.81	936.78	979.45	1000.59	1043.26	1080.16	1104.38	1134.75	1153.20
UnitedHealthcare	Advantage	HMO B	258.16	281.10	289.88	298.65	308.10	317.55	327.34	337.46	337.46	337.46	337.46	338.81	345.56	353.66	366.82	377.62	383.02	391.12	399.22	404.28	409.68	412.38	415.08	417.78	420.48	425.87	431.27	439.37	447.13	457.93	471.43	487.29	506.19	527.45	551.75	575.71	602.70	629.36	658.72	688.42	720.48	752.54	787.29	822.39	859.85	878.41	915.87	948.26	969.52	996.18	1012.38
UnitedHealthcare	Focus	HMO D	277.50	302.17	311.60	321.03	331.19	341.35	351.87	362.75	362.75	362.75	362.75	364.20	371.46	380.16	394.31	405.92	411.72	420.43	429.13	434.57	440.38	443.28	446.18	449.08	451.99	457.79	463.59	472.30	480.64	492.25	506.76	523.81	544.13	566.98	593.10	618.85	647.87	676.53	708.09	740.01	774.47	808.93	846.30	884.02	924.29	944.24	984.50	1019.33	1042.18	1070.84	1088.25
Western Health	Full	HMO A	221.05	240.70	248.21	255.73	263.82	271.91	280.29	288.96	288.96	288.96	288.96	290.11	295.89	302.83	314.10	323.34	327.97	334.90	341.83	346.17	350.79	353.10	355.42	357.73	360.04	364.66	369.29	376.22	382.87	392.11	403.67	417.25	433.43	451.64	472.44	492.96	516.08	538.90	564.04	589.47	616.92	644.37	674.13	704.19	736.26	752.15	784.23	811.97	830.17	853.00	866.87
Western Health	Full	HMO B	232.10	252.74	260.62	268.51	277.01	285.50	294.30	303.40	303.40	303.40	303.40	304.62	310.69	317.97	329.80	339.51	344.36	351.65	358.93	363.48	368.33	370.76	373.19	375.61	378.04	382.90	387.75	395.03	402.01	411.72	423.86	438.12	455.11	474.22	496.07	517.61	541.88	565.85	592.24	618.94	647.77	676.59	707.84	739.40	773.07	789.76	823.44	852.56	871.68	895.65	910.21
Western Health	Full	HMO C	216.67	235.93	243.30	250.66	258.59	266.52	274.74	283.23	283.23	283.23	283.23	284.36	290.03	296.83	307.87	316.94	321.47	328.27	335.06	339.31	343.84	346.11	348.38	350.64	352.91	357.44	361.97	368.77	375.28	384.35	395.68	408.99	424.85	442.69	463.08	483.19	505.85	528.23	552.87	577.79	604.70	631.61	660.78	690.24	721.68	737.25	768.69	795.88	813.73	836.10	849.70

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	326.84	355.89	367.00	378.11	390.07	402.03	414.42	427.24	427.24	427.24	427.24	428.95	437.49	447.75	464.41	478.08	484.92	495.17	505.42	511.83	518.67	522.09	525.51	528.92	532.34	539.18	546.01	556.27	566.09	579.76	596.85	616.93	640.86	667.78	698.54	728.87	763.05	796.80	833.97	871.57	912.16	952.75	996.75	1041.18	1088.61	1112.11	1159.53	1200.54	1227.46	1261.21	1281.72
Anthem Blue Cross	CaliforniaCare HMO	HMO B	385.38	419.63	432.73	445.83	459.93	474.04	488.65	503.76	503.76	503.76	503.76	505.78	515.85	527.94	547.59	563.71	571.77	583.86	595.95	603.50	611.56	615.59	619.62	623.65	627.68	635.75	643.

USE EMPLOYER ZIP CODE FOR RATING

AREA 7 - Continued

10/01/20 - 12/01/20

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	374.35	407.63	420.35	433.07	446.78	460.48	474.67	489.35	489.35	489.35	489.35	491.31	501.09	512.84	531.92	547.58	555.41	567.16	578.90	586.24	594.07	597.99	601.90	605.82	609.73	617.56	625.39	637.13	648.39	664.05	683.62	706.62	734.03	764.85	800.09	834.83	873.98	912.64	955.21	998.27	1044.76	1091.25	1141.65	1192.55	1246.86	1273.78	1328.10	1375.07	1405.90	1444.56	1468.05
Health Net	WholeCare	HMO C	419.05	456.29	470.54	484.78	500.12	515.45	531.34	547.77	547.77	547.77	547.77	549.96	560.92	574.07	595.43	612.96	621.72	634.87	648.02	656.23	665.00	669.38	673.76	678.14	682.53	691.29	700.05	713.20	725.80	743.33	765.24	790.98	821.66	856.17	895.61	934.50	978.32	1021.60	1069.25	1117.46	1169.50	1221.53	1277.95	1334.92	1395.73	1425.85	1486.66	1539.24	1573.75	1617.03	1643.31
Health Net	Salud HMO y Mas	HMO D	273.62	297.94	307.24	316.54	326.55	336.57	346.94	357.67	357.67	357.67	357.67	359.10	366.25	374.84	388.79	400.23	405.95	414.54	423.12	428.49	434.21	437.07	439.93	442.79	445.65	451.38	457.10	465.68	473.91	485.36	499.66	516.47	536.50	559.04	584.79	610.18	638.80	667.05	698.17	729.64	763.62	797.60	834.44	871.64	911.34	931.01	970.71	1005.05	1027.58	1055.84	1073.01
Health Net	Full	HMO E	421.06	458.49	472.80	487.11	502.52	517.93	533.89	550.41	550.41	550.41	550.41	552.61	563.62	576.82	598.29	615.90	624.71	637.92	651.13	659.39	668.19	672.60	677.00	681.40	685.81	694.61	703.42	716.63	729.29	746.90	768.92	794.79	825.61	860.28	899.91	938.99	983.02	1026.51	1074.39	1122.83	1175.12	1227.40	1284.10	1341.34	1402.43	1432.71	1493.80	1546.64	1581.31	1624.80	1651.23
Kaiser Permanente	Full	HMO A	360.91	391.74	403.53	415.32	428.02	426.73	439.88	453.48	453.48	453.48	453.48	455.30	464.37	475.25	492.94	507.45	514.70	525.59	536.47	543.27	550.53	554.16	557.79	561.41	565.04	572.30	579.55	590.44	600.87	615.38	633.52	654.83	680.23	708.80	741.45	773.64	809.92	845.75	885.20	925.11	968.19	1011.27	1057.98	1105.14	1155.48	1180.42	1230.76	1274.29	1302.86	1338.69	1360.44
Kaiser Permanente	Full	HMO B	357.26	387.77	399.44	411.11	423.67	422.25	435.26	448.72	448.72	448.72	448.72	450.52	459.49	470.26	487.76	502.12	509.30	520.07	530.84	537.57	544.75	548.34	551.93	555.52	559.11	566.29	573.47	584.23	594.56	608.91	626.86	647.95	673.08	701.35	733.66	765.52	801.42	836.86	875.90	915.39	958.02	1000.65	1046.87	1093.53	1143.34	1168.02	1217.83	1260.91	1289.18	1324.62	1346.16
Oscar	Oscar EPO	EPO A	295.58	321.86	331.90	341.95	352.77	363.59	374.79	386.38	386.38	386.38	386.38	387.93	395.66	404.93	420.00	432.36	438.54	447.82	457.09	462.89	469.07	472.16	475.25	478.34	481.43	487.61	493.80	503.07	511.96	524.32	539.78	557.94	579.57	603.91	631.73	659.17	690.08	720.60	754.22	788.22	824.93	861.63	901.43	941.61	984.50	1005.75	1048.64	1085.73	1110.08	1140.60	1159.14
Oscar	Oscar EPO	EPO B	290.38	316.19	326.06	335.93	346.56	357.19	368.19	379.58	379.58	379.58	379.58	381.10	388.69	397.80	412.61	424.75	430.83	439.94	449.05	454.74	460.81	463.85	466.89	469.92	472.96	479.03	485.11	494.22	502.95	515.09	530.28	548.12	569.37	593.29	620.62	647.57	677.93	707.92	740.94	774.35	810.41	846.47	885.57	925.04	967.18	988.05	1030.19	1066.63	1090.54	1120.53	1138.74
Sharp Health Plan	Premier	HMO A	282.90	308.04	317.66	327.27	337.63	347.98	358.71	369.80	369.80	369.80	369.80	371.28	378.68	387.55	401.97	413.81	419.72	428.60	437.47	443.02	448.94	451.90	454.85	457.81	460.77	466.69	472.60	481.48	489.99	501.82	516.61	533.99	554.70	578.00	604.62	630.88	660.46	689.68	721.85	754.39	789.52	824.65	862.74	901.20	942.25	962.59	1003.64	1039.14	1062.44	1091.65	1109.40
Sharp Health Plan	Performance	HMO B	304.75	331.84	342.20	352.56	363.71	374.87	386.42	398.37	398.37	398.37	398.37	399.96	407.93	417.49	433.03	445.78	452.15	461.71	471.27	477.25	483.62	486.81	490.00	493.18	496.37	502.74	509.12	518.68	527.84	540.59	556.52	575.25	597.56	622.65	651.33	679.62	711.49	742.96	777.62	812.67	850.52	888.37	929.40	970.83	1015.05	1036.96	1081.18	1119.42	1144.52	1175.99	1195.11
Sharp Health Plan	Premier	HMO C	278.90	303.70	313.17	322.65	332.86	343.07	353.64	364.58	364.58	364.58	364.58	366.04	373.33	382.08	396.30	407.97	413.80	422.55	431.30	436.77	442.60	445.52	448.43	451.35	454.27	460.10	465.93	474.68	483.07	494.74	509.32	526.45	546.87	569.84	596.09	621.97	651.14	679.94	711.66	743.74	778.38	813.01	850.57	888.48	928.95	949.00	989.47	1024.47	1047.44	1076.24	1093.74
Sutter Health Plus	Sutter Health Plus	HMO A	375.13	408.48	421.23	433.98	447.71	461.44	475.66	490.38	490.38	490.38	490.38	492.33	502.14	513.91	533.03	548.72	556.57	568.34	580.11	587.46	595.31	599.23	603.15	607.08	611.00	618.84	626.69	638.46	649.74	665.43	685.04	708.09	735.55	766.45	801.75	836.57	875.80	914.54	957.20	1000.35	1046.94	1093.52	1144.03	1195.03	1249.46	1276.43	1330.86	1377.94	1408.83	1447.57	1471.10
Sutter Health Plus	Sutter Health Plus	HMO B	370.47	403.41	416.00	428.59	442.15	455.71	469.75	484.29	484.29	484.29	484.29	486.22	495.90	507.53	526.41	541.91	549.66	561.28	572.90	580.17	587.92	591.79	595.67	599.54	603.41	611.16	618.91	630.53	641.67	657.17	676.54	699.30	726.42	756.93	791.80	826.18	864.93	903.18	945.32	987.93	1033.94	1079.95	1129.83	1180.19	1233.95	1260.58	1314.34	1360.83	1391.34	1429.60	1452.83
UnitedHealthcare	SignatureValue	HMO A	389.34	423.95	437.18	450.41	464.66	478.91	493.67	508.94	508.94	508.94	508.94	510.98	521.15	533.37	553.22	569.50	577.65	589.86	602.08	609.71	617.85	621.92	626.00	630.07	634.14	642.28	650.43	662.64	674.35	690.63	710.99	734.91	763.41	795.47	832.12	868.25	908.97	949.17	993.45	1038.24	1086.59	1134.94	1187.36	1240.29	1296.78	1324.77	1381.26	1430.12	1462.18	1502.39	1526.82
UnitedHealthcare	Focus	HMO B	367.40	400.06	412.54	425.03	438.48	451.92	465.85	480.26	480.26	480.26	480.26	482.18	491.79	503.31	522.04	537.41	545.10	556.62	568.15	575.35	583.04	586.88	590.72	594.56	598.40	606.09	613.77	625.30	636.34	651.71	670.92	693.50	720.39	750.65	785.23	819.32	857.74	895.68	937.47	979.73	1025.36	1070.98	1120.45	1170.39	1223.70	1250.12	1303.43	1349.53	1379.79	1417.73	1440.78
Western Health	Full	HMO A	290.72	316.56	326.44	336.32	346.96	357.60	368.62	380.02	380.02	380.02	380.02	381.54	389.14	398.26	413.08	425.24	431.32	440.44	449.56	455.26	461.35	464.39	467.43	470.47	473.51	479.59	485.67	494.79	503.53	515.69	530.89	548.75	570.03	593.97	621.33	648.32	678.72	708.74	741.80	775.24	811.34	847.45	886.59	926.11	968.29	989.19	1031.38	1067.86	1091.80	1121.82	1140.06
Western Health	Full	HMO B	298.09	324.59	334.72	344.85	355.77	366.68	377.98	389.67	389.67	389.67	389.67	391.23	399.02	408.37	423.57	436.04	442.27	451.62	460.98	466.82	473.06	476.17	479.29	482.41	485.52	491.76	497.99	507.35	516.31	528.78	544.36	562.68	584.50	609.05	637.10	664.77	695.94	726.73	760.63	794.92	831.94	868.96	909.09	949.62	992.87	1014.30	1057.56	1094.96	1119.51	1150.30	1169.00

Health Care Service Plan rates will vary by county

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USE EMPLOYER ZIP CODE FOR RATING

AREA 8

10/01/20 - 12/01/20

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	325.69	354.64	365.71	376.78	388.70	400.62	412.97	425.74	425.74	425.74	425.74	427.44	435.96	446.18	462.78	476.40	483.21	493.43	503.65	510.04	516.85	520.25	523.66	527.07	530.47	537.28	544.10	554.31	564.11	577.73	594.76	614.77	638.61	665.43	696.08	726.31	760.37	794.01	831.04	868.51	908.95	949.40	993.25	1037.53	1084.79	1108.20	1155.46	1196.33	1223.15	1256.78	1277.22
Anthem Blue Cross	Select PPO	PPO B	325.69	354.64	365.71	376.78	388.70	400.62	412.97	425.74	425.74	425.74	425.74	427.44	435.96	446.18	462.78	476.40	483.21	493.43	503.65	510.04	516.85	520.25	523.66	527.07	530.47	537.28	544.10	554.31	564.11	577.73	594.76	614.77	638.61	665.43	696.08	726.31	760.37	794.01	831.04	868.51	908.95	949.40	993.25	1037.53	1084.79	1108.20	1155.46	1196.33	1223.15	1256.78	1277.22
Anthem Blue Cross	Prudent Buyer - Small Group	EPO A	323.99	352.78	363.80	374.81	386.66	398.52	410.80	423.51	423.51	423.51	423.51	425.20	433.67	443.84	460.36	473.91	480.68	490.85	501.01	507.36	514.14	517.53	520.92	524.31	527.69	534.47	541.25	551.41	561.15	574.70	591.64	611.55	635.27	661.95	692.44	722.51	756.39	789.85	826.69	863.96	904.19	944.43	988.05	1032.09	1079.10	1102.40	1149.41	1190.06	1216.74	1250.20	1270.53
Health Net	CommunityCare	HMO A	216.73	236.00	243.36	250.73	258.66	266.59	274.81	283.31	283.31	283.31	283.31	284.44	290.11	296.91	307.96	317.02	321.55	328.35	335.15	339.40	343.94	346.20	348.47	350.74	353.00	357.53	362.07	368.87	375.38	384.45	395.78	409.10	424.96	442.81	463.21	483.32	505.99	528.37	553.02	577.95	604.86	631.78	660.96	690.42	721.87	737.45	768.90	796.10	813.94	836.33	849.93
Kaiser Permanente	Full	HMO A	229.35	248.49	255.81	263.13	271.02	264.91	273.07	281.52	281.52	281.52	281.52	282.64	288.27	295.03	306.01	315.02	319.52	326.28	333.03	337.26	341.76	344.01	346.27	348.52	350.77	355.27	359.78	366.54	373.01	382.02	393.28	406.51	422.28	440.01	460.28	480.27	502.79	525.03	549.52	574.30	601.04	627.78	656.78	686.06	717.31	732.79	764.04	791.06	808.80	831.04	844.56
Kaiser Permanente	Full	HMO C	217.02	235.07	241.97	248.87	256.30	249.74	257.44	265.40	265.40	265.40	265.40	266.46	271.77	278.14	288.49	296.98	301.23	307.60	313.97	317.95	322.20	324.32	326.44	328.56	330.69	334.93	339.18	345.55	351.65	360.15	370.76	383.24	398.10	414.82	433.93	452.77	474.00	494.97	518.06	541.42	566.63	591.84	619.18	646.78	676.24	690.84	720.29	745.77	762.49	783.46	796.20
Oscar	Oscar EPO	EPO A	187.26	203.90	210.26	216.63	223.48	230.34	237.44	244.78	244.78	244.78	244.78	245.76	250.65	256.53	266.07	273.91	277.82	283.70	289.57	293.24	297.16	299.12	301.08	303.04	304.99	308.91	312.83	318.70	324.33	332.16	341.96	353.46	367.17	382.59	400.21	417.59	437.17	456.51	477.81	499.35	522.60	545.86	571.07	596.52	623.70	637.16	664.33	687.83	703.25	722.59	734.34
Oscar	Oscar EPO	EPO B	177.79	193.60	199.64	205.68	212.19	218.70	225.44	232.41	232.41	232.41	232.41	233.34	237.99	243.57	252.63	260.07	263.79	269.36	274.94	278.43	282.15	284.01	285.87	287.72	289.58	293.30	297.02	302.60	307.94	315.38	324.68	335.60	348.62	363.26	379.99	396.49	415.09	433.45	453.67	474.12	496.20	518.28	542.21	566.38	592.18	604.97	630.76	653.07	667.72	686.08	697.23
Oscar	Oscar EPO	EPO C	178.81	194.71	200.78	206.86	213.40	219.95	226.73	233.74	233.74	233.74	233.74	234.68	239.35	244.96	254.08	261.56	265.30	270.91	276.51	280.02	283.76	285.63	287.50	289.37	291.24	294.98	298.72	304.33	309.71	317.19	326.54	337.52	350.61	365.34	382.17	398.76	417.46	435.93	456.26	476.83	499.04	521.24	545.32	569.63	595.57	608.43	634.37	656.81	671.54	690.00	701.22
Sharp Health Plan	Premier	HMO A	172.72	188.07	193.95	199.82	206.14	212.46	219.01	225.78	225.78	225.78	225.78	226.68	231.20	236.62	245.42	252.65	256.26	261.68	267.10	270.48	274.10	275.90	277.71	279.52	281.32	284.93	288.55	293.97	299.16	306.38	315.41	326.03	338.67	352.89	369.15	385.18	403.24	421.08	440.72	460.59	482.04	503.49	526.74	550.23	575.29	587.71	612.77	634.44	648.67	666.50	677.34
Sharp Health Plan	Performance	HMO B	197.55	215.11	221.83	228.54	235.77	243.00	250.49	258.24	258.24	258.24	258.24	259.27	264.44	270.64	280.71	288.97	293.10	299.30	305.50	309.37	313.50	315.57	317.64	319.70	321.77	325.90	330.03	336.23	342.17	350.43	360.76	372.90	387.36	403.63	422.22	440.56	461.22	481.62	504.08	526.81	551.34	575.88	602.47	629.33	658.00	672.20	700.86	725.65	741.92	762.32	774.72
Sutter Health Plus	Sutter Health Plus	HMO A	202.35	220.33	227.21	234.09	241.49	248.90	256.57	264.52	264.52	264.52	264.52	265.56	270.85	277.20	287.52	295.98	300.21	306.56	312.91	316.88	321.11	323.23	325.34	327.46	329.57	333.81	338.04	344.39	350.47	358.93	369.51	381.95	396.76	413.42	432.47	451.25	472.41	493.30	516.31	539.59	564.72	589.85	617.09	644.60	673.96	688.51	717.87	743.26	759.92	780.82	793.51
Sutter Health Plus	Sutter Health Plus	HMO B	200.29	218.09	224.90	231.70	239.03	246.37	253.96	261.82	261.82	261.82	261.82	262.86	268.10	274.38	284.59	292.97	297.16	303.44	309.72	313.65	317.84	319.93	322.03	324.12	326.22	330.41	334.60	340.88	346.90	355.28	365.75	378.06	392.72	409.21	428.06	446.65	467.60	488.28	511.06	534.10	558.97	583.84	610.81	638.04	667.10	681.50	710.56	735.69	752.19	772.87	785.43
Western Health	Full	HMO B	196.64	214.11	220.80	227.48	234.68	241.87	249.33	257.04	257.04	257.04	257.04	258.07	263.21	269.38	279.40	287.63	291.74	297.91	304.08	307.93	312.05	314.10	316.16	318.21	320.27	324.38	328.50	334.67	340.58	348.80	359.08	371.16	385.56	401.75	420.26	438.51	459.07	479.38	501.74	524.36	548.78	573.20	599.67	626.41	654.94	669.07	697.60	722.28	738.47	758.78	771.12
Western Health	Full	HMO C	201.60	219.52	226.37	233.22	240.60	247.98	255.62	263.53	263.53	263.53	263.53	264.58	269.85	276.18	286.45	294.89	299.10	305.43	311.75	315.70	319.92	322.03	324.14	326.25	328.35	332.57	336.79	343.11	349.17	357.61	368.15	380.53	395.29	411.89	430.87	449.58	470.66	491.48	514.40	537.59	562.63	587.66	614.81	642.21	671.47	685.96	715.21	740.51	757.11	777.93	790.58

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	294.82	321.02	331.04	341.06	351.85	362.64	373.82	385.38	385.38	385.38	385.38	386.92	394.63	403.88	418.91	431.24	437.41	446.66	455.90	461.69	467.85	470.93	474.02	477.10	480.18	486.35	492.52	501.76	510.63	522.96	538.38	556.49	578.07	602.35	630.10	657.46	688.29	718.73	752.26	786.18	822.79	859.40	899.09	939.17	981.95	1003.14	1045.92	1082.92	1107.20	1137.64	1156.14
Anthem Blue Cross	CaliforniaCare HMO	HMO B	365.07	397.52	409.92	422.33	435.69	449.05	462.89	477.21	477.21	477.21	477.21	479.12	488.66	500.12	518.73	534.00	541.63	553.09	564.54	571.70	579.33	583.15	586.97	590.79	594.60	602.24	609.87	621.33	632.30	647.57	666.66	689.09	715.82	745.88	780.24	814.12	852.30	890.00	931.51	973.51	1018.84	1064.18	1113.33	1162.96	1215.93	1242.18	1295.15	1340.96	1371.02	1408.72	1431.63
Anthem Blue Cross	Advantage PPO	PPO A	376.20	409.64	422.42	435.21	448.98	462.75	477.01	491.76	491.76	491.76	491.76	493.73	503.56	515.36	534.54	550.28	558.15	569.95	581.75	589.13	597.00	600.93	604.86	608.80	612.73	620.60	628.47	640.27	651.58	667.32	686.99	710.10	737.64	768.62	804.03	838.94	878.28	917.13	959.92	1003.19	1049.91	1096.62	1147.28	1198.42	1253.00	1280.05	1334.64	1381.85	1412.83	1451.68	1475.28
Anthem Blue Cross	Select PPO	PPO B	367.78	400.47	412.97	425.47	438.93	452.40	466.34	480.76	480.76	480.76	480.76	482.68	492.30	503.84	522.59	537.97	545.66	557.20	568.74	575.95	583.64	587.49	591.33	595.18	599.03	606.72	614.41	625.95	637.01	652.39	671.62	694.22	721.14	751.43	786.04	820.18	858.64	896.62	938.44	980.75	1026.42	1072.09	1121.61	1171.61	1224.98	1251.42	1304.78	1350.94	1381.22	1419.20	1442.28
Anthem Blue Cross	Prudent Buyer - Small Group	PPO C	367.78	400.47	412.97	425.47	438.93	452.40	466.34	480.76	480.76	480.76	480.76	482.68	492.30	503.84	522.59	537.97	545.66	557.20	568.74	575.95	583.64	587.49	591.33	595.18	599.03	606.72	614.41	625.95	637.01	652.39	671.62	694.22	721.14	751.43	786.04	820.18	858.64	896.62	938.44	980.75	1026.42	1072.09	1121.61	1171.61	1224.98	1251.42	1304.78	1350.94	1381.22	1419.20	1442.28
Anthem Blue Cross	Prudent Buyer - Small Group	EPO A	363.96	396.32	408.69	421.06	434.38	447.70	461.50	475.77	475.77	475.77	475.77	477.67	487.19	498.61	517.16	532.39	540.00	551.42	562.84	569.97	577.58	581.39	585.20	589.00	592.81	600.42	608.03	619.45	630.40	645.62	664.65	687.01	713.66	743.63	777.88	811.66	849.73	887.31	928.70	970.57	1015.77	1060.97	1109.97	1159.45	1212.26	1238.43	1291.24	1336.91	1366.89	1404.47	1427.31
Anthem Blue Cross	Prudent Buyer - Small Group	EPO B	364.49	396.89	409.28	421.67	435.01	448.35	462.17	476.46	476.46	476.46	476.46	478.37	487.90	499.33	517.91	533.16	540.78	552.22	563.65	570.80	578.42	582.23	586.05	589.86	593.67	601.29	608.92	620.35	631.31	646.56	665.61	688.01	714.69	744.71	779.01	812.84	850.96	888.60	930.05	971.98	1017.24	1062.51	1111.58	1161.13	1214.02	1240.23	1293.11	1338.85	1368.87	1406.51	1429.38
Health Net	WholeCare	HMO A	384.64	418.83	431.90	444.97	459.05	473.13	487.71	502.79	502.79	502.79	502.79	504.81	514.86	526.93	546.54	562.63	570.67	582.74	594.81	602.35	610.39	614.41	618.44	622.46	626.48	634.53	642.57	654.64	666.20	682.29	702.40	726.04	754.19	785.87	822.07	857.77	897.99	937.71	981.45	1025.70	1073.47	1121.23	1173.02	1225.31	1281.12	1308.77	1364.58	1412.85	1444.53	1484.25	1508.37
Health Net	CommunityCare	HMO C	244.42	266.15	274.46	282.76	291.71	300.65	309.92	319.51	319.51	319.51	319.51	320.78	327.17	334.84	347.30	357.53	362.64	370.31	377.98	382.77	387.88	390.44	392.99	395.55	398.10	403.22	408.33	416.00	423.35	433.57	446.35	461.37	479.26	499.39	522.39	545.08	570.64	595.88	623.68	651.79	682.14	712.50	745.41	778.64	814.10	831.67	867.14	897.81	917.94	943.18	958.53
Kaiser Permanente	Full	HMO A	264.53	286.80	295.31	303.83	313.00	308.18	317.67	327.50	327.50	327.50	327.50	328.81	335.36	343.22	355.99	366.47	371.71	379.57	387.43	392.34	397.58	400.20	402.82	405.44	408.06	413.30	418.54	426.40	433.93	444.41	457.51	472.91	491.25	511.88	535.46	558.71	584.91	610.78	639.27	668.09	699.21	730.32	764.05	798.11	834.46	852.48	888.83	920.27	940.90	966.77	982.50
Kaiser Permanente	Full	HMO B	268.96	291.62	300.29	308.95	318.29	313.63	323.29	333.29	333.29	333.29	333.29	334.63	341.29	349.29	362.29	372.96	378.29	386.29	394.29	399.29	404.62	407.28	409.95	412.62	415.28	420.62	425.95	433.95	441.61	452.28	465.61	481.28	499.94	520.94	544.94	568.60	595.26	621.59	650.59	679.92	711.58	743.25	777.57	812.24	849.23	867.56	904.56	936.56	957.55	983.88	999.87
Kaiser Permanente	Full	HMO C	277.46	300.88	309.83	318.79	328.43	324.08	334.07	344.40	344.40	344.40	344.40	345.78	352.67	360.94	374.37	385.39	390.90	399.16	407.43	412.60	418.11	420.86	423.62	426.37	429.13	434.64	440.15	448.41	456.34	467.36	481.13	497.32	516.61	538.30	563.10	587.55	615.11	642.31	672.28	702.58	735.30	768.02	803.49	839.31	877.54	896.48	934.71	967.77	989.47	1016.68	1033.20
Kaiser Permanente	Full	HMO D	249.37	270.29	278.29	286.29	294.91	289.53	298.45	307.68	307.68	307.68	307.68	308.92	315.07	322.45	334.45	344.30	349.22	356.61	363.99	368.61	373.53	375.99	378.45	380.91	383.38	388.30	393.22	400.61	407.68	417.53	429.84	444.30	461.53	480.91	503.06	524.91	549.52	573.83	600.60	627.68	656.91	686.14	717.83	749.83	783.98	800.90	835.06	864.59	883.98	908.29	923.04
Oscar	Oscar EPO	EPO A	214.28	233.32	240.61	247.89	255.73	263.57	271.70	280.10	280.10	280.10	280.10	281.22	286.82	293.55	304.47	313.43	317.91	324.64	331.36	335.56	340.04	342.28	344.52	346.76	349.00	353.49	357.97	364.69	371.13	380.10	391.30	404.46	420.15	437.80	457.96	477.85	500.26	522.39	546.76	571.40	598.01	624.62	653.47	682.60	713.70	729.10	760.19	787.08	804.73	826.43	673.20
Oscar	Oscar EPO	EPO B	241.22	262.66	270.86	279.06	287.88	296.71	305.86	315.32	315.32	315.32	315.32	316.58	322.88	330.46	342.75	352.84	357.88	365.45	373.02	377.75	382.79	385.32	387.84	390.36	392.88	397.93	402.97	410.54	417.79	427.89	440.50	455.32	472.98	492.84	515.54	537.93	563.16	588.07	615.50	643.25	673.20	703.16	735.63	768.43	803.43	820.77	855.77	886.04	905.91	930.82	945.95
Oscar	Oscar EPO	EPO C	214.01	233.03	240.31	247.58	255.41	263.25	271.36	279.75	279.75	279.75	279.75	280.87	286.47	293.18	304.09	313.04	317.52	324.23	330.95	335.14	339.62	341.86	344.10	346.33	348.57	353.05	357.52	364.24	370.67	379.62	390.82	403.96	419.63	437.25	457.40	477.26	499.64	521.74	546.08	570.70	597.27	623.85	652.66	681.76	712.81	728.20	759.25	786.11	803.73	825.83	839.25
Oscar	Oscar EPO	EPO D	240.70	262.09	270.27	278.46	287.27	296.08	305.20	314.64	314.64	314.64	314.64	315.90	322.19	329.74	342.01	352.08	357.12	364.67	372.22	376.94	381.97	384.49	387.01	389.52	392.04	397.07	402.11	409.66	416.90	426.97	439.55	454.34	471.96	491.78	514.43	536.77	561.95	586.80	614.18	641.86	671.75	701.64	734.05	766.78	801.70	819.01	853.93	884.14	903.96	928.81	943.92
Sharp Health Plan	Premier	HMO A	202.89	220.92	227.82	234.71	242.14	249.56	257.25	265.21	265.21	265.21	265.21	266.27	271.58	277.94	288.28	296.77	301.01	307.38	313.74	317.72	321.96	324.09	326.21	328.33	330.45	334.70	338.94	345.30	351.40	359.89	370.50	382.96	397.82	414.52	433.62	452.45	473.67	494.62	517.69	541.03	566.22	591.42	618.73	646.32	675.76	690.34	719.78	745.24	761.95	782.90	795.63
Sharp Health Plan	Performance	HMO B	215.29	234.42	241.74	249.06	256.94	264.82	272.98	281.42	281.42	281.42	281.42	282.55	288.17	294.93	305.90	314.91	319.41	326.17	332.92	337.14	341.64	343.90	346.15	348.40	350.65	355.15	359.65	366.41	372.88	381.89	393.14	406.37	422.13	439.86	460.12	480.10	502.62	524.85	549.33	574.10	600.83	627.57	656.55	685.82	717.06	732.54	763.77	790.79	808.52	830.75	844.26
Sharp Health Plan	Premier	HMO C	197.90	215.49	222.21	228.94	236.18	243.43	250.93	258.69	258.69	258.69	258.69	259.72	264.90	271.11	281.20	289.47	293.61	299.82	306.03	309.91	314.05	316.12	318.19	320.26	322.33	326.47	330.61	336.81	342.76	351.04	361.39	373.55	388.04	404.33	422.96	441.33	462.02	482.46	504.96	527.73	552.30	576.88	603.52	630.43	659.14	673.37	702.08	726.92	743.22	763.65	776.07
Sutter Health Plus	Sutter Health Plus	HMO B	259.66	282.74	291.56	300.39	309.89	319.40	329.24	339.43	339.43	339.43	339.43	340.78	347.57	355.71	368.95	379.81	385.24	393.39	401.54	406.63	412.06	414.77	417.49	420.20	422.92	428.35	433.78	441.93	449.73	460.59	474.17	490.12	509.13	530.52	554.95	579.05	606.21	633.02	662.55	692.42	724.66	756.91	791.87	827.17	864.85	883.51	921.19	953.77	975.16	1001.97	1018.25
Sutter Health Plus	Sutter Health Plus	HMO C	235.68	256.63	264.64	272.65	281.27	289.90	298.83	308.08	308.08	308.08	308.08	309.31	315.47	322.86	334.88	344.74	349.66	357.06	364.45	369.07	374.00	376.47	378.93	381.40	383.86	388.79	393.72	401.11	408.20	418.06	430.38	444.86	462.11	481.52	503.70	525.58	550.22	574.56	601.36	628.47	657.74	687.01	718.74	750.78	784.97	801.92	836.11	865.69	885.10	909.44	924.21
UnitedHealthcare	SignatureValue	HMO A	340.00	370.23	381.78	393.34	405.78	418.23	431.12	444.45	444.45	444.45	444.45	446.23	455.12	465.78	483.12	497.34	504.45	515.12	525.78	532.45	539.56	543.12	546.67	550.23	553.78	560.90	568.01	578.67	588.90	603.12	620.90	641.79	666.68	694.68	726.68	758.23	793.79	828.90	867.57	906.68	948.90	991.12	1036.90	1083.12	1132.46	1156.90	1206.24	1248.90	1276.90	1312.02	1333.35
UnitedHealthcare	Advantage	HMO B	268.72	292.61	301.74	310.87	320.71	330.55	340.73	351.27	351.27	351.27	351.27	352.68	359.70	368.13	381.83	393.07	398.69	407.12	415.55	420.82	426.44	429.25	432.06	434.87	437.68	443.30	448.92	457.35	465.43	476.67	490.72	507.23	526.91	549.04	574.33	599.27	627.37	655.12	685.68	716.59	749.96	783.33	819.51	856.04	895.04	914.36	953.35	987.07	1009.20	1036.95	1053.81
UnitedHealthcare	Focus	HMO D	309.45	336.96	347.47	357.99	369.32	380.64	392.37	404.51	404.51	404.51	404.51	406.13	414.22	423.93	439.70	452.65	459.12	468.83	478.54	484.60	491.08	494.31	497.55	500.78	504.02	510.49	516.96	526.67	535.98	548.92	565.10	584.11	606.77	632.25	661.37	690.09	722.45	754.41	789.60	825.20	863.63	902.06	943.72	985.79	1030.69	1052.94	1097.84	1136.67	1162.16	1194.11	1213.53
Western Health	Full	HMO A	221.05	240.70	248.21	255.73	263.82	271.91	280.29	288.96	288.96	288.96	288.96	290.11	295.89	302.83	314.10	323.34	327.97	334.90	341.83	346.17	350.79	353.10	355.42	357.73	360.04	364.66	369.29	376.22	382.87	392.11	403.67	417.25	433.43	451.64	472.44	492.96	516.08	538.90	564.04	589.47	616.92	644.37	674.13	704.19	736.26	752.15	784.23	811.97	830.17	853.00	866.87
Western Health	Full	HMO B	232.10	252.74	260.62	268.51	277.01	285.50	294.30	303.40	303.40	303.40	303.40	304.62	310.69	317.97	329.80	339.51	344.36	351.65	358.93	363.48	368.33	370.76	373.19	375.61	378.04	382.90	387.75	395.03	402.01	411.72	423.86	438.12	455.11	474.22	496.07	517.61	541.88	565.85	592.24	618.94	647.77	676.59	707.84	739.40	773.07	789.76	823.44	852.56	871.68	895.65	910.21
Western Health	Full	HMO C	216.67	235.93	243.30	250.66	258.59	266.52	274.74	283.23	283.23	283.23	283.23	284.36	290.03	296.83	307.87	316.94	321.47	328.27	335.06	339.31	343.84	346.11	348.38	350.64	352.91	357.44	361.97	368.77	375.28	384.35	395.68	408.99	424.85	442.69	463.08	483.19	505.85	528.23	552.87	577.79	604.70	631.61	660.78	690.24	721.68	737.25	768.69	795.88	813.73	836.10	849.70

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	368.39	401.14	413.66	426.18	439.66	453.15	467.11	481.56	481.56	481.56	481.56	483.49	493.12	504.67	523.46	538.87	546.57	558.13	569.69	576.91	584.61	588.47	592.32	596.17	600.02	607.73	615.43	626.99	638.07	653.48	672.74	695.37	722.34	752.68	787.35	821.54	860.07	898.11	940.01	982.38	1028.13	1073.88	1123.48	1173.56	1227.01	1253.50	1306.95	1353.18	1383.52	1421.57	1444.68
Anthem Blue Cross	CaliforniaCare HMO	HMO B	456.20	496.75	512.26	527.76	544.46	561.16	578.45	596.34	596.34	596.34	596.34	598.73	610.65	624.96	648.22	667.30	676.85	691.16	705.47	714.42	723.96

USE EMPLOYER ZIP CODE FOR RATING

AREA 8 - Continued

10/01/20 - 12/01/20

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	421.91	459.41	473.75	488.09	503.53	518.97	534.96	551.51	551.51	551.51	551.51	553.72	564.75	577.98	599.49	617.14	625.96	639.20	652.44	660.71	669.53	673.95	678.36	682.77	687.18	696.01	704.83	718.07	730.75	748.40	770.46	796.38	827.27	862.01	901.72	940.88	985.00	1028.57	1076.55	1125.08	1177.47	1229.87	1286.67	1344.03	1405.25	1435.58	1496.80	1549.74	1584.49	1628.06	1654.53
Health Net	WholeCare	HMO C	439.70	478.79	493.73	508.67	524.77	540.86	557.53	574.77	574.77	574.77	574.77	577.07	588.57	602.36	624.78	643.17	652.37	666.16	679.96	688.58	697.77	702.37	706.97	711.57	716.17	725.36	734.56	748.35	761.57	779.97	802.96	829.97	862.16	898.37	939.75	980.56	1026.54	1071.95	1121.96	1172.54	1227.14	1281.74	1340.94	1400.72	1464.52	1496.13	1559.93	1615.11	1651.32	1696.73	1724.31
Health Net	Salud HMO y Mas	HMO D	273.62	297.94	307.24	316.54	326.55	336.57	346.94	357.67	357.67	357.67	357.67	359.10	366.25	374.84	388.79	400.23	405.95	414.54	423.12	428.49	434.21	437.07	439.93	442.79	445.65	451.38	457.10	465.68	473.91	485.36	499.66	516.47	536.50	559.04	584.79	610.18	638.80	667.05	698.17	729.64	763.62	797.60	834.44	871.64	911.34	931.01	970.71	1005.05	1027.58	1055.84	1073.01
Health Net	Full	HMO E	441.81	481.09	496.10	511.12	527.29	543.46	560.21	577.53	577.53	577.53	577.53	579.84	591.40	605.26	627.78	646.26	655.50	669.36	683.22	691.89	701.13	705.75	710.37	714.99	719.61	728.85	738.09	751.95	765.23	783.71	806.82	833.96	866.30	902.69	944.27	985.27	1031.48	1077.10	1127.35	1178.17	1233.04	1287.90	1347.39	1407.45	1471.56	1503.32	1567.43	1622.87	1659.26	1704.88	1732.59
Kaiser Permanente	Full	HMO A	367.64	399.08	411.10	423.12	436.06	435.01	448.42	462.29	462.29	462.29	462.29	464.14	473.38	484.48	502.51	517.30	524.70	535.79	546.89	553.82	561.22	564.92	568.62	572.31	576.01	583.41	590.81	601.90	612.53	627.33	645.82	667.55	693.43	722.56	755.84	788.67	825.65	862.17	902.39	943.07	986.99	1030.91	1078.52	1126.60	1177.91	1203.34	1254.65	1299.03	1328.16	1364.68	1386.87
Kaiser Permanente	Full	HMO B	363.93	395.03	406.93	418.82	431.63	430.45	443.71	457.43	457.43	457.43	457.43	459.26	468.41	479.39	497.23	511.87	519.19	530.17	541.14	548.01	555.32	558.98	562.64	566.30	569.96	577.28	584.60	595.58	606.10	620.74	639.04	660.53	686.15	714.97	747.90	780.38	816.98	853.11	892.91	933.17	976.62	1020.08	1067.19	1114.77	1165.54	1190.70	1241.48	1285.39	1314.21	1350.35	1372.29
Oscar	Oscar EPO	EPO A	295.58	321.86	331.90	341.95	352.77	363.59	374.79	386.38	386.38	386.38	386.38	387.93	395.66	404.93	420.00	432.36	438.54	447.82	457.09	462.89	469.07	472.16	475.25	478.34	481.43	487.61	493.80	503.07	511.96	524.32	539.78	557.94	579.57	603.91	631.73	659.17	690.08	720.60	754.22	788.22	824.93	861.63	901.43	941.61	984.50	1005.75	1048.64	1085.73	1110.08	1140.60	1159.14
Oscar	Oscar EPO	EPO B	290.38	316.19	326.06	335.93	346.56	357.19	368.19	379.58	379.58	379.58	379.58	381.10	388.69	397.80	412.61	424.75	430.83	439.94	449.05	454.74	460.81	463.85	466.89	469.92	472.96	479.03	485.11	494.22	502.95	515.09	530.28	548.12	569.37	593.29	620.62	647.57	677.93	707.92	740.94	774.35	810.41	846.47	885.57	925.04	967.18	988.05	1030.19	1066.63	1090.54	1120.53	1138.74
Sharp Health Plan	Premier	HMO A	282.90	308.04	317.66	327.27	337.63	347.98	358.71	369.80	369.80	369.80	369.80	371.28	378.68	387.55	401.97	413.81	419.72	428.60	437.47	443.02	448.94	451.90	454.85	457.81	460.77	466.69	472.60	481.48	489.99	501.82	516.61	533.99	554.70	578.00	604.62	630.88	660.46	689.68	721.85	754.39	789.52	824.65	862.74	901.20	942.25	962.59	1003.64	1039.14	1062.44	1091.65	1109.40
Sharp Health Plan	Performance	HMO B	304.75	331.84	342.20	352.56	363.71	374.87	386.42	398.37	398.37	398.37	398.37	399.96	407.93	417.49	433.03	445.78	452.15	461.71	471.27	477.25	483.62	486.81	490.00	493.18	496.37	502.74	509.12	518.68	527.84	540.59	556.52	575.25	597.56	622.65	651.33	679.62	711.49	742.96	777.62	812.67	850.52	888.37	929.40	970.83	1015.05	1036.96	1081.18	1119.42	1144.52	1175.99	1195.11
Sharp Health Plan	Premier	HMO C	278.90	303.70	313.17	322.65	332.86	343.07	353.64	364.58	364.58	364.58	364.58	366.04	373.33	382.08	396.30	407.97	413.80	422.55	431.30	436.77	442.60	445.52	448.43	451.35	454.27	460.10	465.93	474.68	483.07	494.74	509.32	526.45	546.87	569.84	596.09	621.97	651.14	679.94	711.66	743.74	778.38	813.01	850.57	888.48	928.95	949.00	989.47	1024.47	1047.44	1076.24	1093.74
Sutter Health Plus	Sutter Health Plus	HMO A	338.72	368.83	380.34	391.85	404.25	416.65	429.49	442.78	442.78	442.78	442.78	444.55	453.40	464.03	481.30	495.46	502.55	513.17	523.80	530.44	537.53	541.07	544.61	548.15	551.70	558.78	565.87	576.49	586.68	600.84	618.56	639.37	664.16	692.06	723.94	755.37	790.79	825.77	864.29	903.26	945.32	987.39	1032.99	1079.04	1128.19	1152.54	1201.69	1244.19	1272.09	1307.07	1328.31
Sutter Health Plus	Sutter Health Plus	HMO B	334.52	364.25	375.62	386.99	399.23	411.48	424.16	437.29	437.29	437.29	437.29	439.03	447.77	458.27	475.32	489.31	496.31	506.80	517.30	523.86	530.85	534.35	537.85	541.35	544.85	551.84	558.84	569.34	579.39	593.39	610.88	631.43	655.92	683.46	714.95	746.00	780.98	815.52	853.57	892.05	933.59	975.13	1020.17	1065.64	1114.18	1138.23	1186.77	1228.75	1256.30	1290.84	1311.82
UnitedHealthcare	SignatureValue	HMO A	450.15	490.16	505.46	520.76	537.24	553.71	570.78	588.43	588.43	588.43	588.43	590.78	602.55	616.67	639.62	658.45	667.87	681.99	696.11	704.94	714.35	719.06	723.77	728.48	733.18	742.60	752.01	766.14	779.67	798.50	822.04	849.69	882.65	919.72	962.08	1003.86	1050.94	1097.42	1148.62	1200.40	1256.30	1312.20	1372.81	1434.00	1499.32	1531.68	1597.00	1653.49	1690.56	1737.05	1765.29
UnitedHealthcare	Focus	HMO B	409.70	446.12	460.05	473.97	488.97	503.96	519.49	535.56	535.56	535.56	535.56	537.70	548.41	561.27	582.15	599.29	607.86	620.71	633.57	641.60	650.17	654.45	658.74	663.02	667.31	675.88	684.45	697.30	709.62	726.75	748.18	773.35	803.34	837.08	875.64	913.67	956.51	998.82	1045.41	1092.54	1143.42	1194.30	1249.46	1305.16	1364.61	1394.06	1453.51	1504.92	1538.66	1580.97	1606.68
Western Health	Full	HMO A	290.72	316.56	326.44	336.32	346.96	357.60	368.62	380.02	380.02	380.02	380.02	381.54	389.14	398.26	413.08	425.24	431.32	440.44	449.56	455.26	461.35	464.39	467.43	470.47	473.51	479.59	485.67	494.79	503.53	515.69	530.89	548.75	570.03	593.97	621.33	648.32	678.72	708.74	741.80	775.24	811.34	847.45	886.59	926.11	968.29	989.19	1031.38	1067.86	1091.80	1121.82	1140.06
Western Health	Full	HMO B	298.09	324.59	334.72	344.85	355.77	366.68	377.98	389.67	389.67	389.67	389.67	391.23	399.02	408.37	423.57	436.04	442.27	451.62	460.98	466.82	473.06	476.17	479.29	482.41	485.52	491.76	497.99	507.35	516.31	528.78	544.36	562.68	584.50	609.05	637.10	664.77	695.94	726.73	760.63	794.92	831.94	868.96	909.09	949.62	992.87	1014.30	1057.56	1094.96	1119.51	1150.30	1169.00

Health Care Service Plan rates will vary by county

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USE EMPLOYER ZIP CODE FOR RATING

AREA 9

10/01/20 - 12/01/20

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	334.27	363.99	375.35	386.71	398.94	411.18	423.85	436.96	436.96	436.96	436.96	438.71	447.45	457.93	474.98	488.96	495.95	506.44	516.92	523.48	530.47	533.97	537.46	540.96	544.45	551.44	558.43	568.92	578.97	592.95	610.43	630.97	655.44	682.97	714.43	745.45	780.41	814.93	852.95	891.40	932.91	974.42	1019.43	1064.87	1113.37	1137.41	1185.91	1227.86	1255.39	1289.91	1310.88
Anthem Blue Cross	Select PPO	PPO B	301.82	328.65	338.91	349.17	360.22	371.26	382.70	394.54	394.54	394.54	394.54	396.12	404.01	413.48	428.86	441.49	447.80	457.27	466.74	472.66	478.97	482.13	485.28	488.44	491.60	497.91	504.22	513.69	522.77	535.39	551.17	569.72	591.81	616.67	645.07	673.09	704.65	735.82	770.14	804.86	842.34	879.82	920.46	961.49	1005.29	1026.99	1070.78	1108.66	1133.51	1164.68	1183.62
Anthem Blue Cross	Prudent Buyer - Small Group	EPO A	332.55	362.11	373.41	384.71	396.88	409.05	421.66	434.70	434.70	434.70	434.70	436.44	445.13	455.57	472.52	486.43	493.38	503.82	514.25	520.77	527.73	531.20	534.68	538.16	541.64	548.59	555.55	565.98	575.98	589.89	607.28	627.71	652.05	679.44	710.73	741.60	776.37	810.72	848.53	886.79	928.08	969.38	1014.16	1059.36	1107.62	1131.52	1179.78	1221.51	1248.89	1283.23	1304.10
Health Net	CommunityCare	HMO A	216.73	236.00	243.36	250.73	258.66	266.59	274.81	283.31	283.31	283.31	283.31	284.44	290.11	296.91	307.96	317.02	321.55	328.35	335.15	339.40	343.94	346.20	348.47	350.74	353.00	357.53	362.07	368.87	375.38	384.45	395.78	409.10	424.96	442.81	463.21	483.32	505.99	528.37	553.02	577.95	604.86	631.78	660.96	690.42	721.87	737.45	768.90	796.10	813.94	836.33	849.93
Kaiser Permanente	Full	HMO A	225.25	244.03	251.21	258.39	266.12	259.86	267.87	276.16	276.16	276.16	276.16	277.26	282.78	289.41	300.18	309.02	313.44	320.06	326.69	330.83	335.25	337.46	339.67	341.88	344.09	348.51	352.93	359.55	365.91	374.74	385.79	398.77	414.23	431.63	451.51	471.12	493.21	515.03	539.05	563.36	589.59	615.83	644.27	672.99	703.64	718.83	749.48	776.00	793.39	815.21	828.48
Kaiser Permanente	Full	HMO C	213.15	230.86	237.63	244.39	251.68	244.98	252.53	260.34	260.34	260.34	260.34	261.39	266.59	272.84	282.99	291.33	295.49	301.74	307.99	311.89	316.06	318.14	320.22	322.31	324.39	328.55	332.72	338.97	344.96	353.29	363.70	375.94	390.52	406.92	425.66	444.15	464.98	485.54	508.19	531.10	555.84	580.57	607.38	634.46	663.36	677.68	706.57	731.57	747.97	768.54	781.02
Oscar	Oscar EPO	EPO A	187.26	203.90	210.26	216.63	223.48	230.34	237.44	244.78	244.78	244.78	244.78	245.76	250.65	256.53	266.07	273.91	277.82	283.70	289.57	293.24	297.16	299.12	301.08	303.04	304.99	308.91	312.83	318.70	324.33	332.16	341.96	353.46	367.17	382.59	400.21	417.59	437.17	456.51	477.81	499.35	522.60	545.86	571.07	596.52	623.70	637.16	664.33	687.83	703.25	722.59	734.34
Oscar	Oscar EPO	EPO B	177.79	193.60	199.64	205.68	212.19	218.70	225.44	232.41	232.41	232.41	232.41	233.34	237.99	243.57	252.63	260.07	263.79	269.36	274.94	278.43	282.15	284.01	285.87	287.72	289.58	293.30	297.02	302.60	307.94	315.38	324.68	335.60	348.62	363.26	379.99	396.49	415.09	433.45	453.67	474.12	496.20	518.28	542.21	566.38	592.18	604.97	630.76	653.07	667.72	686.08	697.23
Oscar	Oscar EPO	EPO C	178.81	194.71	200.78	206.86	213.40	219.95	226.73	233.74	233.74	233.74	233.74	234.68	239.35	244.96	254.08	261.56	265.30	270.91	276.51	280.02	283.76	285.63	287.50	289.37	291.24	294.98	298.72	304.33	309.71	317.19	326.54	337.52	350.61	365.34	382.17	398.76	417.46	435.93	456.26	476.83	499.04	521.24	545.32	569.63	595.57	608.43	634.37	656.81	671.54	690.00	701.22
Sharp Health Plan	Premier	HMO A	172.72	188.07	193.95	199.82	206.14	212.46	219.01	225.78	225.78	225.78	225.78	226.68	231.20	236.62	245.42	252.65	256.26	261.68	267.10	270.48	274.10	275.90	277.71	279.52	281.32	284.93	288.55	293.97	299.16	306.38	315.41	326.03	338.67	352.89	369.15	385.18	403.24	421.08	440.72	460.59	482.04	503.49	526.74	550.23	575.29	587.71	612.77	634.44	648.67	666.50	677.34
Sharp Health Plan	Performance	HMO B	197.55	215.11	221.83	228.54	235.77	243.00	250.49	258.24	258.24	258.24	258.24	259.27	264.44	270.64	280.71	288.97	293.10	299.30	305.50	309.37	313.50	315.57	317.64	319.70	321.77	325.90	330.03	336.23	342.17	350.43	360.76	372.90	387.36	403.63	422.22	440.56	461.22	481.62	504.08	526.81	551.34	575.88	602.47	629.33	658.00	672.20	700.86	725.65	741.92	762.32	774.72
Sutter Health Plus	Sutter Health Plus	HMO A	197.51	215.07	221.78	228.50	235.72	242.95	250.44	258.20	258.20	258.20	258.20	259.22	264.38	270.58	280.65	288.91	293.04	299.24	305.43	309.31	313.44	315.50	317.57	319.64	321.70	325.83	329.96	336.16	342.10	350.36	360.69	372.82	387.28	403.55	422.14	440.47	461.12	481.52	503.98	526.70	551.23	575.76	602.35	629.20	657.86	672.06	700.72	725.50	741.77	762.17	774.55
Sutter Health Plus	Sutter Health Plus	HMO B	195.50	212.88	219.52	226.17	233.32	240.48	247.89	255.57	255.57	255.57	255.57	256.58	261.69	267.82	277.79	285.97	290.06	296.19	302.33	306.16	310.25	312.29	314.34	316.38	318.43	322.51	326.60	332.74	338.61	346.79	357.01	369.03	383.34	399.44	417.84	435.98	456.43	476.62	498.85	521.34	545.62	569.89	596.22	622.79	651.16	665.22	693.58	718.12	734.22	754.41	766.66
Western Health	Full	HMO B	196.64	214.11	220.80	227.48	234.68	241.87	249.33	257.04	257.04	257.04	257.04	258.07	263.21	269.38	279.40	287.63	291.74	297.91	304.08	307.93	312.05	314.10	316.16	318.21	320.27	324.38	328.50	334.67	340.58	348.80	359.08	371.16	385.56	401.75	420.26	438.51	459.07	479.38	501.74	524.36	548.78	573.20	599.67	626.41	654.94	669.07	697.60	722.28	738.47	758.78	771.12
Western Health	Full	HMO C	201.60	219.52	226.37	233.22	240.60	247.98	255.62	263.53	263.53	263.53	263.53	264.58	269.85	276.18	286.45	294.89	299.10	305.43	311.75	315.70	319.92	322.03	324.14	326.25	328.35	332.57	336.79	343.11	349.17	357.61	368.15	380.53	395.29	411.89	430.87	449.58	470.66	491.48	514.40	537.59	562.63	587.66	614.81	642.21	671.47	685.96	715.21	740.51	757.11	777.93	790.58

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	281.41	306.43	315.99	325.56	335.86	346.16	356.82	367.86	367.86	367.86	367.86	369.33	376.69	385.52	399.86	411.64	417.52	426.35	435.18	440.70	446.58	449.52	452.47	455.41	458.35	464.24	470.13	478.95	487.41	499.19	513.90	531.19	551.79	574.97	601.45	627.57	657.00	686.06	718.06	750.43	785.38	820.33	858.22	896.47	937.31	957.54	998.37	1033.69	1056.86	1085.92	1103.58
Anthem Blue Cross	CaliforniaCare HMO	HMO B	295.91	322.21	332.27	342.33	353.16	363.99	375.21	386.81	386.81	386.81	386.81	388.36	396.09	405.38	420.46	432.84	439.03	448.31	457.60	463.40	469.59	472.68	475.78	478.87	481.97	488.15	494.34	503.63	512.52	524.90	540.37	558.55	580.22	604.58	632.43	659.90	690.84	721.40	755.05	789.09	825.84	862.59	902.43	942.66	985.59	1006.87	1049.80	1086.94	1111.31	1141.86	1160.43
Anthem Blue Cross	Advantage PPO	PPO A	386.16	420.49	433.61	446.74	460.87	475.01	489.65	504.79	504.79	504.79	504.79	506.81	516.90	529.02	548.71	564.86	572.94	585.05	597.17	604.74	612.82	616.85	620.89	624.93	628.97	637.04	645.12	657.24	668.85	685.00	705.19	728.92	757.19	788.99	825.33	861.17	901.55	941.43	985.35	1029.77	1077.73	1125.68	1177.68	1230.17	1286.20	1313.97	1370.00	1418.46	1450.26	1490.14	1514.37
Anthem Blue Cross	Select PPO	PPO B	340.83	371.13	382.71	394.29	406.77	419.24	432.16	445.53	445.53	445.53	445.53	447.31	456.22	466.92	484.29	498.55	505.68	516.37	527.06	533.74	540.87	544.44	548.00	551.57	555.13	562.26	569.39	580.08	590.33	604.58	622.41	643.35	668.30	696.36	728.44	760.07	795.72	830.91	869.67	908.88	951.21	993.53	1039.42	1085.76	1135.21	1159.71	1209.17	1251.94	1280.01	1315.20	1336.59
Anthem Blue Cross	Prudent Buyer - Small Group	PPO C	377.50	411.06	423.89	436.72	450.54	464.36	478.67	493.47	493.47	493.47	493.47	495.44	505.31	517.16	536.40	552.19	560.09	571.93	583.78	591.18	599.07	603.02	606.97	610.92	614.86	622.76	630.65	642.50	653.85	669.64	689.38	712.57	740.21	771.29	806.82	841.86	881.34	920.32	963.25	1006.68	1053.56	1100.44	1151.27	1202.59	1257.36	1284.50	1339.28	1386.65	1417.74	1456.72	1480.41
Anthem Blue Cross	Prudent Buyer - Small Group	EPO A	373.59	406.80	419.49	432.19	445.86	459.54	473.70	488.35	488.35	488.35	488.35	490.30	500.07	511.79	530.84	546.46	554.28	566.00	577.72	585.04	592.86	596.76	600.67	604.58	608.48	616.30	624.11	635.83	647.06	662.69	682.22	705.18	732.53	763.29	798.45	833.13	872.19	910.77	953.26	996.23	1042.63	1089.02	1139.32	1190.11	1244.32	1271.18	1325.38	1372.26	1403.03	1441.61	1465.05
Anthem Blue Cross	Prudent Buyer - Small Group	EPO B	374.12	407.37	420.09	432.80	446.49	460.19	474.37	489.04	489.04	489.04	489.04	491.00	500.78	512.51	531.59	547.24	555.06	566.80	578.53	585.87	593.69	597.61	601.52	605.43	609.34	617.17	624.99	636.73	647.98	663.63	683.19	706.17	733.56	764.37	799.58	834.30	873.43	912.06	954.61	997.64	1044.10	1090.56	1140.93	1191.79	1246.07	1272.97	1327.25	1374.20	1405.01	1443.65	1467.12
Health Net	WholeCare	HMO A	389.21	423.81	437.04	450.27	464.51	478.76	493.51	508.78	508.78	508.78	508.78	510.81	520.99	533.20	553.04	569.32	577.46	589.67	601.88	609.51	617.66	621.73	625.80	629.87	633.94	642.08	650.22	662.43	674.13	690.41	710.76	734.67	763.17	795.22	831.85	867.97	908.68	948.87	993.13	1037.90	1086.24	1134.57	1186.98	1239.89	1296.36	1324.35	1380.82	1429.66	1461.72	1501.91	1526.34
Health Net	CommunityCare	HMO C	244.42	266.15	274.46	282.76	291.71	300.65	309.92	319.51	319.51	319.51	319.51	320.78	327.17	334.84	347.30	357.53	362.64	370.31	377.98	382.77	387.88	390.44	392.99	395.55	398.10	403.22	408.33	416.00	423.35	433.57	446.35	461.37	479.26	499.39	522.39	545.08	570.64	595.88	623.68	651.79	682.14	712.50	745.41	778.64	814.10	831.67	867.14	897.81	917.94	943.18	958.53
Kaiser Permanente	Full	HMO A	259.75	281.60	289.95	298.30	307.30	302.31	311.62	321.26	321.26	321.26	321.26	322.54	328.97	336.68	349.21	359.49	364.63	372.34	380.05	384.87	390.01	392.58	395.15	397.72	400.29	405.43	410.57	418.28	425.67	435.95	448.80	463.90	481.89	502.13	525.26	548.07	573.77	599.15	627.10	655.37	685.89	716.41	749.50	782.91	818.57	836.24	871.90	902.74	922.98	948.36	963.78
Kaiser Permanente	Full	HMO B	264.10	286.34	294.84	303.34	312.49	307.66	317.14	326.95	326.95	326.95	326.95	328.25	334.79	342.64	355.39	365.85	371.08	378.93	386.78	391.68	396.91	399.53	402.14	404.76	407.37	412.60	417.84	425.68	433.20	443.66	456.74	472.11	490.42	511.02	534.56	557.77	583.92	609.75	638.20	666.97	698.03	729.09	762.76	796.77	833.06	851.04	887.33	918.72	939.31	965.14	980.85
Kaiser Permanente	Full	HMO C	272.44	295.41	304.20	312.98	322.44	317.91	327.71	337.84	337.84	337.84	337.84	339.20	345.95	354.06	367.24	378.05	383.45	391.56	399.67	404.74	410.14	412.85	415.55	418.25	420.95	426.36	431.76	439.87	447.64	458.45	471.97	487.85	506.77	528.05	552.37	576.36	603.39	630.08	659.47	689.20	721.30	753.39	788.19	823.33	860.83	879.41	916.91	949.34	970.62	997.31	1013.52
Kaiser Permanente	Full	HMO D	244.89	265.41	273.26	281.10	289.56	284.02	292.77	301.82	301.82	301.82	301.82	303.03	309.07	316.31	328.08	337.74	342.57	349.81	357.06	361.59	366.41	368.83	371.24	373.66	376.07	380.90	385.73	392.97	399.92	409.58	421.65	435.83	452.74	471.75	493.48	514.91	539.06	562.90	589.16	615.72	644.39	673.07	704.16	735.55	769.05	785.65	819.15	848.13	867.14	890.98	905.46
Oscar	Oscar EPO	EPO A	214.28	233.32	240.61	247.89	255.73	263.57	271.70	280.10	280.10	280.10	280.10	281.22	286.82	293.55	304.47	313.43	317.91	324.64	331.36	335.56	340.04	342.28	344.52	346.76	349.00	353.49	357.97	364.69	371.13	380.10	391.30	404.46	420.15	437.80	457.96	477.85	500.26	522.39	546.76	571.40	598.01	624.62	653.47	682.60	713.70	729.10	760.19	787.08	804.73	826.86	840.30
Oscar	Oscar EPO	EPO B	241.22	262.66	270.86	279.06	287.88	296.71	305.86	315.32	315.32	315.32	315.32	316.58	322.88	330.46	342.75	352.84	357.88	365.45	373.02	377.75	382.79	385.32	387.84	390.36	392.88	397.93	402.97	410.54	417.79	427.89	440.50	455.32	472.98	492.84	515.54	537.93	563.16	588.07	615.50	643.25	673.20	703.16	735.63	768.43	803.43	820.77	855.77	886.04	905.91	930.82	945.95
Oscar	Oscar EPO	EPO C	214.01	233.03	240.31	247.58	255.41	263.25	271.36	279.75	279.75	279.75	279.75	280.87	286.47	293.18	304.09	313.04	317.52	324.23	330.95	335.14	339.62	341.86	344.10	346.33	348.57	353.05	357.52	364.24	370.67	379.62	390.82	403.96	419.63	437.25	457.40	477.26	499.64	521.74	546.08	570.70	597.27	623.85	652.66	681.76	712.81	728.20	759.25	786.11	803.73	825.83	839.25
Oscar	Oscar EPO	EPO D	240.70	262.09	270.27	278.46	287.27	296.08	305.20	314.64	314.64	314.64	314.64	315.90	322.19	329.74	342.01	352.08	357.12	364.67	372.22	376.94	381.97	384.49	387.01	389.52	392.04	397.07	402.11	409.66	416.90	426.97	439.55	454.34	471.96	491.78	514.43	536.77	561.95	586.80	614.18	641.86	671.75	701.64	734.05	766.78	801.70	819.01	853.93	884.14	903.96	928.81	943.92
Sharp Health Plan	Premier	HMO A	202.89	220.92	227.82	234.71	242.14	249.56	257.25	265.21	265.21	265.21	265.21	266.27	271.58	277.94	288.28	296.77	301.01	307.38	313.74	317.72	321.96	324.09	326.21	328.33	330.45	334.70	338.94	345.30	351.40	359.89	370.50	382.96	397.82	414.52	433.62	452.45	473.67	494.62	517.69	541.03	566.22	591.42	618.73	646.32	675.76	690.34	719.78	745.24	761.95	782.90	795.63
Sharp Health Plan	Performance	HMO B	215.29	234.42	241.74	249.06	256.94	264.82	272.98	281.42	281.42	281.42	281.42	282.55	288.17	294.93	305.90	314.91	319.41	326.17	332.92	337.14	341.64	343.90	346.15	348.40	350.65	355.15	359.65	366.41	372.88	381.89	393.14	406.37	422.13	439.86	460.12	480.10	502.62	524.85	549.33	574.10	600.83	627.57	656.55	685.82	717.06	732.54	763.77	790.79	808.52	830.75	844.26
Sharp Health Plan	Premier	HMO C	197.90	215.49	222.21	228.94	236.18	243.43	250.93	258.69	258.69	258.69	258.69	259.72	264.90	271.11	281.20	289.47	293.61	299.82	306.03	309.91	314.05	316.12	318.19	320.26	322.33	326.47	330.61	336.81	342.76	351.04	361.39	373.55	388.04	404.33	422.96	441.33	462.02	482.46	504.96	527.73	552.30	576.88	603.52	630.43	659.14	673.37	702.08	726.92	743.22	763.65	776.07
Sutter Health Plus	Sutter Health Plus	HMO B	253.45	275.98	284.60	293.21	302.49	311.77	321.37	331.32	331.32	331.32	331.32	332.64	339.26	347.22	360.14	370.74	376.04	383.99	391.94	396.91	402.21	404.86	407.52	410.17	412.82	418.12	423.42	431.37	438.99	449.59	462.84	478.42	496.97	517.84	541.70	565.22	591.73	617.90	646.72	675.88	707.35	738.83	772.95	807.41	844.19	862.41	899.18	930.99	951.86	978.04	993.93
Sutter Health Plus	Sutter Health Plus	HMO C	230.05	250.50	258.31	266.13	274.55	282.97	291.69	300.73	300.73	300.73	300.73	301.92	307.93	315.15	326.88	336.50	341.31	348.53	355.75	360.26	365.07	367.47	369.88	372.29	374.69	379.50	384.31	391.53	398.45	408.07	420.10	434.23	451.07	470.02	491.67	513.02	537.08	560.83	587.00	613.46	642.03	670.60	701.57	732.84	766.22	782.76	816.14	845.01	863.96	887.71	902.14
UnitedHealthcare	SignatureValue	HMO A	347.91	378.83	390.66	402.48	415.21	427.95	441.14	454.78	454.78	454.78	454.78	456.60	465.69	476.61	494.35	508.90	516.18	527.09	538.00	544.83	552.10	555.74	559.38	563.02	566.66	573.93	581.21	592.12	602.58	617.14	635.33	656.70	682.17	710.82	743.57	775.85	812.24	848.16	887.73	927.75	970.96	1014.16	1061.00	1108.30	1158.78	1183.79	1234.27	1277.93	1306.58	1342.51	1364.34
UnitedHealthcare	Advantage	HMO B	274.99	299.43	308.78	318.12	328.19	338.25	348.68	359.46	359.46	359.46	359.46	360.90	368.09	376.71	390.73	402.24	407.99	416.61	425.24	430.63	436.38	439.26	442.14	445.01	447.89	453.64	459.39	468.02	476.28	487.79	502.17	519.06	539.19	561.84	587.72	613.24	642.00	670.39	701.67	733.30	767.45	801.60	838.62	876.00	915.90	935.67	975.57	1010.08	1032.73	1061.13	1078.38
UnitedHealthcare	Focus	HMO D	328.30	357.48	368.64	379.80	391.81	403.83	416.28	429.15	429.15	429.15	429.15	430.87	439.45	449.75	466.49	480.22	487.09	497.38	507.68	514.12	520.99	524.42	527.85	531.29	534.72	541.59	548.45	558.75	568.62	582.36	599.52	619.69	643.73	670.76	701.66	732.13	766.46	800.36	837.70	875.47	916.24	957.00	1001.21	1045.84	1093.47	1117.08	1164.71	1205.91	1232.95	1266.85	1287.45
Western Health	Full	HMO A	221.05	240.70	248.21	255.73	263.82	271.91	280.29	288.96	288.96	288.96	288.96	290.11	295.89	302.83	314.10	323.34	327.97	334.90	341.83	346.17	350.79	353.10	355.42	357.73	360.04	364.66	369.29	376.22	382.87	392.11	403.67	417.25	433.43	451.64	472.44	492.96	516.08	538.90	564.04	589.47	616.92	644.37	674.13	704.19	736.26	752.15	784.23	811.97	830.17	853.00	866.87
Western Health	Full	HMO B	232.10	252.74	260.62	268.51	277.01	285.50	294.30	303.40	303.40	303.40	303.40	304.62	310.69	317.97	329.80	339.51	344.36	351.65	358.93	363.48	368.33	370.76	373.19	375.61	378.04	382.90	387.75	395.03	402.01	411.72	423.86	438.12	455.11	474.22	496.07	517.61	541.88	565.85	592.24	618.94	647.77	676.59	707.84	739.40	773.07	789.76	823.44	852.56	871.68	895.65	910.21
Western Health	Full	HMO C	216.67	235.93	243.30	250.66	258.59	266.52	274.74	283.23	283.23	283.23	283.23	284.36	290.03	296.83	307.87	316.94	321.47	328.27	335.06	339.31	343.84	346.11	348.38	350.64	352.91	357.44	361.97	368.77	375.28	384.35	395.68	408.99	424.85	442.69	463.08	483.19	505.85	528.23	552.87	577.79	604.70	631.61	660.78	690.24	721.68	737.25	768.69	795.88	813.73	836.10	849.70

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	351.63	382.89	394.84	406.79	419.66	432.53	445.86	459.65	459.65	459.65	459.65	461.49	470.68	481.71	499.64	514.35	521.70	532.73	543.77	550.66	558.02	561.69	565.37	569.05	572.72	580.08	587.43	598.46	609.04	623.75	642.13	663.73	689.48	718.43	751.53	784.16	820.93	857.25	897.24	937.69	981.35	1025.02	1072.36	1120.17	1171.19	1196.47	1247.49	1291.62	1320.57	1356.89	1378.95
Anthem Blue Cross	CaliforniaCare HMO	HMO B	369.75	402.61	415.18	427.75	441.28	454.81	468.83	483.33	483.33	483.33	483.33	485.26	494.93	506.53	525.38	540.85	548.58	560.18	571.78	579.03	586.76	590.63

USE EMPLOYER ZIP CODE FOR RATING

AREA 9 - Continued

10/01/20 - 12/01/20

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	402.73	438.52	452.21	465.90	480.64	495.38	510.65	526.44	526.44	526.44	526.44	528.55	539.07	551.71	572.24	589.09	597.51	610.14	622.78	630.68	639.10	643.31	647.52	651.73	655.94	664.37	672.79	685.42	697.53	714.38	735.44	760.18	789.66	822.83	860.73	898.11	940.22	981.81	1027.61	1073.94	1123.95	1173.96	1228.18	1282.93	1341.37	1370.32	1428.76	1479.30	1512.46	1554.05	1579.32
Health Net	WholeCare	HMO C	444.93	484.48	499.60	514.73	531.01	547.30	564.16	581.61	581.61	581.61	581.61	583.94	595.57	609.53	632.21	650.82	660.13	674.09	688.05	696.77	706.08	710.73	715.38	720.03	724.69	733.99	743.30	757.26	770.63	789.25	812.51	839.85	872.42	909.06	950.93	992.23	1038.76	1084.70	1135.30	1186.49	1241.74	1296.99	1356.90	1417.39	1481.94	1513.93	1578.49	1634.33	1670.97	1716.92	1744.83
Health Net	Salud HMO y Mas	HMO D	273.62	297.94	307.24	316.54	326.55	336.57	346.94	357.67	357.67	357.67	357.67	359.10	366.25	374.84	388.79	400.23	405.95	414.54	423.12	428.49	434.21	437.07	439.93	442.79	445.65	451.38	457.10	465.68	473.91	485.36	499.66	516.47	536.50	559.04	584.79	610.18	638.80	667.05	698.17	729.64	763.62	797.60	834.44	871.64	911.34	931.01	970.71	1005.05	1027.58	1055.84	1073.01
Health Net	Full	HMO E	447.07	486.81	502.00	517.20	533.56	549.93	566.87	584.41	584.41	584.41	584.41	586.74	598.43	612.46	635.25	653.95	663.30	677.33	691.35	700.12	709.47	714.14	718.82	723.49	728.17	737.52	746.87	760.90	774.34	793.04	816.41	843.88	876.61	913.43	955.50	997.00	1043.75	1089.92	1140.76	1192.19	1247.71	1303.22	1363.42	1424.20	1489.07	1521.21	1586.08	1642.18	1679.00	1725.17	1753.23
Kaiser Permanente	Full	HMO A	360.91	391.74	403.53	415.32	428.02	426.73	439.88	453.48	453.48	453.48	453.48	455.30	464.37	475.25	492.94	507.45	514.70	525.59	536.47	543.27	550.53	554.16	557.79	561.41	565.04	572.30	579.55	590.44	600.87	615.38	633.52	654.83	680.23	708.80	741.45	773.64	809.92	845.75	885.20	925.11	968.19	1011.27	1057.98	1105.14	1155.48	1180.42	1230.76	1274.29	1302.86	1338.69	1360.44
Kaiser Permanente	Full	HMO B	357.26	387.77	399.44	411.11	423.67	422.25	435.26	448.72	448.72	448.72	448.72	450.52	459.49	470.26	487.76	502.12	509.30	520.07	530.84	537.57	544.75	548.34	551.93	555.52	559.11	566.29	573.47	584.23	594.56	608.91	626.86	647.95	673.08	701.35	733.66	765.52	801.42	836.86	875.90	915.39	958.02	1000.65	1046.87	1093.53	1143.34	1168.02	1217.83	1260.91	1289.18	1324.62	1346.16
Oscar	Oscar EPO	EPO A	295.58	321.86	331.90	341.95	352.77	363.59	374.79	386.38	386.38	386.38	386.38	387.93	395.66	404.93	420.00	432.36	438.54	447.82	457.09	462.89	469.07	472.16	475.25	478.34	481.43	487.61	493.80	503.07	511.96	524.32	539.78	557.94	579.57	603.91	631.73	659.17	690.08	720.60	754.22	788.22	824.93	861.63	901.43	941.61	984.50	1005.75	1048.64	1085.73	1110.08	1140.60	1159.14
Oscar	Oscar EPO	EPO B	290.38	316.19	326.06	335.93	346.56	357.19	368.19	379.58	379.58	379.58	379.58	381.10	388.69	397.80	412.61	424.75	430.83	439.94	449.05	454.74	460.81	463.85	466.89	469.92	472.96	479.03	485.11	494.22	502.95	515.09	530.28	548.12	569.37	593.29	620.62	647.57	677.93	707.92	740.94	774.35	810.41	846.47	885.57	925.04	967.18	988.05	1030.19	1066.63	1090.54	1120.53	1138.74
Sharp Health Plan	Premier	HMO A	282.90	308.04	317.66	327.27	337.63	347.98	358.71	369.80	369.80	369.80	369.80	371.28	378.68	387.55	401.97	413.81	419.72	428.60	437.47	443.02	448.94	451.90	454.85	457.81	460.77	466.69	472.60	481.48	489.99	501.82	516.61	533.99	554.70	578.00	604.62	630.88	660.46	689.68	721.85	754.39	789.52	824.65	862.74	901.20	942.25	962.59	1003.64	1039.14	1062.44	1091.65	1109.40
Sharp Health Plan	Performance	HMO B	304.75	331.84	342.20	352.56	363.71	374.87	386.42	398.37	398.37	398.37	398.37	399.96	407.93	417.49	433.03	445.78	452.15	461.71	471.27	477.25	483.62	486.81	490.00	493.18	496.37	502.74	509.12	518.68	527.84	540.59	556.52	575.25	597.56	622.65	651.33	679.62	711.49	742.96	777.62	812.67	850.52	888.37	929.40	970.83	1015.05	1036.96	1081.18	1119.42	1144.52	1175.99	1195.11
Sharp Health Plan	Premier	HMO C	278.90	303.70	313.17	322.65	332.86	343.07	353.64	364.58	364.58	364.58	364.58	366.04	373.33	382.08	396.30	407.97	413.80	422.55	431.30	436.77	442.60	445.52	448.43	451.35	454.27	460.10	465.93	474.68	483.07	494.74	509.32	526.45	546.87	569.84	596.09	621.97	651.14	679.94	711.66	743.74	778.38	813.01	850.57	888.48	928.95	949.00	989.47	1024.47	1047.44	1076.24	1093.74
Sutter Health Plus	Sutter Health Plus	HMO A	330.63	360.02	371.26	382.49	394.60	406.70	419.23	432.21	432.21	432.21	432.21	433.93	442.57	452.94	469.80	483.63	490.54	500.92	511.29	517.77	524.69	528.14	531.60	535.06	538.52	545.43	552.35	562.72	572.66	586.49	603.78	624.09	648.30	675.52	706.64	737.33	771.90	806.05	843.65	881.68	922.74	963.80	1008.32	1053.26	1101.24	1125.01	1172.98	1214.47	1241.70	1275.85	1296.58
Sutter Health Plus	Sutter Health Plus	HMO B	326.53	355.55	366.65	377.75	389.70	401.65	414.03	426.84	426.84	426.84	426.84	428.54	437.08	447.32	463.97	477.62	484.45	494.70	504.94	511.34	518.17	521.59	525.00	528.42	531.83	538.66	545.49	555.73	565.55	579.21	596.28	616.34	640.25	667.14	697.87	728.17	762.32	796.04	833.18	870.74	911.29	951.83	995.80	1040.19	1087.57	1111.04	1158.42	1199.40	1226.29	1260.01	1280.48
UnitedHealthcare	SignatureValue	HMO A	460.61	501.55	517.20	532.86	549.72	566.58	584.04	602.10	602.10	602.10	602.10	604.51	616.55	631.00	654.48	673.75	683.38	697.83	712.28	721.32	730.95	735.77	740.58	745.40	750.22	759.85	769.48	783.93	797.78	817.05	841.13	869.43	903.15	941.08	984.43	1027.18	1075.35	1122.92	1175.30	1228.28	1285.48	1342.68	1404.70	1467.32	1534.15	1567.27	1634.10	1691.90	1729.83	1777.40	1806.30
UnitedHealthcare	Focus	HMO B	434.66	473.29	488.07	502.84	518.75	534.66	551.13	568.18	568.18	568.18	568.18	570.45	581.82	595.45	617.61	635.79	644.88	658.52	672.16	680.68	689.77	694.32	698.86	703.41	707.95	717.04	726.13	739.77	752.84	771.02	793.75	820.45	852.27	888.07	928.97	969.32	1014.77	1059.66	1109.09	1159.09	1213.06	1267.04	1325.56	1384.65	1447.72	1478.97	1542.04	1596.59	1632.38	1677.27	1704.54
Western Health	Full	HMO A	290.72	316.56	326.44	336.32	346.96	357.60	368.62	380.02	380.02	380.02	380.02	381.54	389.14	398.26	413.08	425.24	431.32	440.44	449.56	455.26	461.35	464.39	467.43	470.47	473.51	479.59	485.67	494.79	503.53	515.69	530.89	548.75	570.03	593.97	621.33	648.32	678.72	708.74	741.80	775.24	811.34	847.45	886.59	926.11	968.29	989.19	1031.38	1067.86	1091.80	1121.82	1140.06
Western Health	Full	HMO B	298.09	324.59	334.72	344.85	355.77	366.68	377.98	389.67	389.67	389.67	389.67	391.23	399.02	408.37	423.57	436.04	442.27	451.62	460.98	466.82	473.06	476.17	479.29	482.41	485.52	491.76	497.99	507.35	516.31	528.78	544.36	562.68	584.50	609.05	637.10	664.77	695.94	726.73	760.63	794.92	831.94	868.96	909.09	949.62	992.87	1014.30	1057.56	1094.96	1119.51	1150.30	1169.00

Health Care Service Plan rates will vary by county

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USE EMPLOYER ZIP CODE FOR RATING

AREA 10

10/01/20 - 12/01/20

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	258.02	280.95	289.72	298.49	307.94	317.38	327.16	337.28	337.28	337.28	337.28	338.63	345.37	353.47	366.62	377.42	382.81	390.91	399.00	404.06	409.46	412.16	414.85	417.55	420.25	425.65	431.04	439.14	446.90	457.69	471.18	487.03	505.92	527.17	551.45	575.40	602.38	629.03	658.37	688.05	720.09	752.13	786.87	821.95	859.39	877.94	915.38	947.76	969.01	995.65	1011.84
Anthem Blue Cross	Select PPO	PPO B	231.63	252.22	260.10	267.97	276.45	284.93	293.71	302.79	302.79	302.79	302.79	304.00	310.06	317.32	329.13	338.82	343.67	350.93	358.20	362.74	367.59	370.01	372.43	374.85	377.28	382.12	386.97	394.23	401.20	410.89	423.00	437.23	454.19	473.26	495.06	516.56	540.78	564.70	591.05	617.69	646.46	675.22	706.41	737.90	771.51	788.16	821.77	850.84	869.92	893.84	908.37
Anthem Blue Cross	Prudent Buyer - Small Group	EPO A	256.69	279.50	288.23	296.95	306.35	315.74	325.47	335.54	335.54	335.54	335.54	336.88	343.59	351.65	364.73	375.47	380.84	388.89	396.94	401.98	407.35	410.03	412.71	415.40	418.08	423.45	428.82	436.87	444.59	455.33	468.75	484.52	503.31	524.45	548.61	572.43	599.27	625.78	654.97	684.50	716.38	748.25	782.81	817.71	854.96	873.41	910.66	942.87	964.01	990.51	1006.62
Health Net	CommunityCare	HMO A	216.73	236.00	243.36	250.73	258.66	266.59	274.81	283.31	283.31	283.31	283.31	284.44	290.11	296.91	307.96	317.02	321.55	328.35	335.15	339.40	343.94	346.20	348.47	350.74	353.00	357.53	362.07	368.87	375.38	384.45	395.78	409.10	424.96	442.81	463.21	483.32	505.99	528.37	553.02	577.95	604.86	631.78	660.96	690.42	721.87	737.45	768.90	796.10	813.94	836.33	849.93
Kaiser Permanente	Full	HMO A	198.58	214.99	221.27	227.54	234.30	227.06	234.06	241.30	241.30	241.30	241.30	242.27	247.09	252.88	262.29	270.02	273.88	279.67	285.46	289.08	292.94	294.87	296.80	298.73	300.66	304.52	308.38	314.17	319.72	327.44	337.10	348.44	361.95	377.15	394.53	411.66	430.96	450.03	471.02	492.25	515.18	538.10	562.95	588.05	614.83	628.11	654.89	678.05	693.26	712.32	723.90
Kaiser Permanente	Full	HMO C	188.02	203.49	209.40	215.31	221.68	214.06	220.66	227.49	227.49	227.49	227.49	228.40	232.95	238.40	247.28	254.56	258.20	263.66	269.12	272.53	276.17	277.99	279.81	281.63	283.45	287.09	290.73	296.19	301.42	308.70	317.80	328.49	341.23	355.56	371.94	388.09	406.29	424.26	444.05	464.07	485.68	507.29	530.72	554.38	579.63	592.14	617.40	639.23	653.57	671.54	682.47
Oscar	Oscar EPO	EPO A	187.26	203.90	210.26	216.63	223.48	230.34	237.44	244.78	244.78	244.78	244.78	245.76	250.65	256.53	266.07	273.91	277.82	283.70	289.57	293.24	297.16	299.12	301.08	303.04	304.99	308.91	312.83	318.70	324.33	332.16	341.96	353.46	367.17	382.59	400.21	417.59	437.17	456.51	477.81	499.35	522.60	545.86	571.07	596.52	623.70	637.16	664.33	687.83	703.25	722.59	734.34
Oscar	Oscar EPO	EPO B	177.79	193.60	199.64	205.68	212.19	218.70	225.44	232.41	232.41	232.41	232.41	233.34	237.99	243.57	252.63	260.07	263.79	269.36	274.94	278.43	282.15	284.01	285.87	287.72	289.58	293.30	297.02	302.60	307.94	315.38	324.68	335.60	348.62	363.26	379.99	396.49	415.09	433.45	453.67	474.12	496.20	518.28	542.21	566.38	592.18	604.97	630.76	653.07	667.72	686.08	697.23
Oscar	Oscar EPO	EPO C	178.81	194.71	200.78	206.86	213.40	219.95	226.73	233.74	233.74	233.74	233.74	234.68	239.35	244.96	254.08	261.56	265.30	270.91	276.51	280.02	283.76	285.63	287.50	289.37	291.24	294.98	298.72	304.33	309.71	317.19	326.54	337.52	350.61	365.34	382.17	398.76	417.46	435.93	456.26	476.83	499.04	521.24	545.32	569.63	595.57	608.43	634.37	656.81	671.54	690.00	701.22
Sharp Health Plan	Premier	HMO A	172.72	188.07	193.95	199.82	206.14	212.46	219.01	225.78	225.78	225.78	225.78	226.68	231.20	236.62	245.42	252.65	256.26	261.68	267.10	270.48	274.10	275.90	277.71	279.52	281.32	284.93	288.55	293.97	299.16	306.38	315.41	326.03	338.67	352.89	369.15	385.18	403.24	421.08	440.72	460.59	482.04	503.49	526.74	550.23	575.29	587.71	612.77	634.44	648.67	666.50	677.34
Sharp Health Plan	Performance	HMO B	197.55	215.11	221.83	228.54	235.77	243.00	250.49	258.24	258.24	258.24	258.24	259.27	264.44	270.64	280.71	288.97	293.10	299.30	305.50	309.37	313.50	315.57	317.64	319.70	321.77	325.90	330.03	336.23	342.17	350.43	360.76	372.90	387.36	403.63	422.22	440.56	461.22	481.62	504.08	526.81	551.34	575.88	602.47	629.33	658.00	672.20	700.86	725.65	741.92	762.32	774.72
Sutter Health Plus	Sutter Health Plus	HMO A	181.23	197.34	203.50	209.66	216.29	222.92	229.79	236.91	236.91	236.91	236.91	237.85	242.59	248.27	257.51	265.09	268.88	274.57	280.25	283.81	287.60	289.49	291.39	293.28	295.18	298.97	302.76	308.44	313.89	321.47	330.95	342.08	355.35	370.27	387.33	404.15	423.10	441.82	462.43	483.28	505.78	528.29	552.69	577.32	603.62	616.65	642.95	665.69	680.61	699.33	710.69
Sutter Health Plus	Sutter Health Plus	HMO B	179.38	195.33	201.42	207.52	214.09	220.65	227.45	234.50	234.50	234.50	234.50	235.43	240.12	245.74	254.89	262.39	266.14	271.77	277.40	280.92	284.67	286.54	288.42	290.30	292.17	295.92	299.68	305.30	310.70	318.20	327.58	338.60	351.73	366.50	383.39	400.04	418.80	437.32	457.72	478.35	500.63	522.91	547.06	571.45	597.47	610.37	636.40	658.91	673.68	692.21	703.45
Western Health	Full	HMO B	196.64	214.11	220.80	227.48	234.68	241.87	249.33	257.04	257.04	257.04	257.04	258.07	263.21	269.38	279.40	287.63	291.74	297.91	304.08	307.93	312.05	314.10	316.16	318.21	320.27	324.38	328.50	334.67	340.58	348.80	359.08	371.16	385.56	401.75	420.26	438.51	459.07	479.38	501.74	524.36	548.78	573.20	599.67	626.41	654.94	669.07	697.60	722.28	738.47	758.78	771.12
Western Health	Full	HMO C	201.60	219.52	226.37	233.22	240.60	247.98	255.62	263.53	263.53	263.53	263.53	264.58	269.85	276.18	286.45	294.89	299.10	305.43	311.75	315.70	319.92	322.03	324.14	326.25	328.35	332.57	336.79	343.11	349.17	357.61	368.15	380.53	395.29	411.89	430.87	449.58	470.66	491.48	514.40	537.59	562.63	587.66	614.81	642.21	671.47	685.96	715.21	740.51	757.11	777.93	790.58

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	272.84	297.09	306.36	315.64	325.62	335.61	345.95	356.65	356.65	356.65	356.65	358.08	365.21	373.77	387.68	399.09	404.80	413.36	421.92	427.27	432.97	435.83	438.68	441.53	444.39	450.09	455.80	464.36	472.56	483.97	498.24	515.00	534.98	557.44	583.12	608.44	636.98	665.15	696.18	727.57	761.45	795.33	832.06	869.16	908.74	928.36	967.95	1002.19	1024.66	1052.83	1069.95
Anthem Blue Cross	CaliforniaCare HMO	HMO B	293.13	319.18	329.14	339.11	349.83	360.56	371.67	383.17	383.17	383.17	383.17	384.70	392.37	401.56	416.51	428.77	434.90	444.09	453.29	459.04	465.17	468.23	471.30	474.36	477.43	483.56	489.69	498.89	507.70	519.96	535.29	553.30	574.76	598.89	626.48	653.69	684.34	714.61	747.95	781.67	818.07	854.47	893.94	933.79	976.32	997.39	1039.92	1076.71	1100.85	1131.12	1149.51
Anthem Blue Cross	Advantage PPO	PPO A	298.07	324.56	334.69	344.82	355.73	366.64	377.94	389.63	389.63	389.63	389.63	391.19	398.98	408.33	423.53	436.00	442.23	451.58	460.93	466.78	473.01	476.13	479.24	482.36	485.48	491.71	497.95	507.30	516.26	528.73	544.31	562.63	584.45	608.99	637.05	664.71	695.88	726.66	760.56	794.85	831.86	868.87	909.01	949.53	992.78	1014.21	1057.46	1094.86	1119.41	1150.19	1168.89
Anthem Blue Cross	Select PPO	PPO B	261.57	284.82	293.71	302.60	312.17	321.75	331.66	341.92	341.92	341.92	341.92	343.29	350.13	358.33	371.67	382.61	388.08	396.29	404.49	409.62	415.09	417.83	420.56	423.30	426.03	431.50	436.97	445.18	453.04	463.99	477.66	493.73	512.88	534.42	559.04	583.32	610.67	637.68	667.43	697.52	730.00	762.48	797.70	833.26	871.21	890.02	927.97	960.80	982.34	1009.35	1025.76
Anthem Blue Cross	Prudent Buyer - Small Group	PPO C	291.39	317.29	327.19	337.10	347.76	358.43	369.47	380.90	380.90	380.90	380.90	382.42	390.04	399.18	414.04	426.23	432.32	441.46	450.60	456.32	462.41	465.46	468.51	471.55	474.60	480.70	486.79	495.93	504.69	516.88	532.12	550.02	571.35	595.35	622.77	649.82	680.29	710.38	743.52	777.04	813.22	849.41	888.64	928.25	970.53	991.48	1033.76	1070.33	1094.33	1124.42	1142.70
Anthem Blue Cross	Prudent Buyer - Small Group	EPO A	288.36	313.99	323.79	333.59	344.15	354.70	365.63	376.94	376.94	376.94	376.94	378.45	385.99	395.03	409.73	421.80	427.83	436.87	445.92	451.57	457.61	460.62	463.64	466.65	469.67	475.70	481.73	490.78	499.45	511.51	526.59	544.30	565.41	589.16	616.30	643.06	673.21	702.99	735.79	768.96	804.77	840.58	879.40	918.60	960.44	981.17	1023.02	1059.20	1082.95	1112.73	1130.82
Anthem Blue Cross	Prudent Buyer - Small Group	EPO B	288.76	314.43	324.25	334.06	344.63	355.20	366.15	377.47	377.47	377.47	377.47	378.98	386.53	395.59	410.31	422.39	428.43	437.49	446.55	452.21	458.25	461.27	464.29	467.31	470.33	476.37	482.41	491.47	500.15	512.23	527.33	545.07	566.21	589.99	617.16	643.96	674.16	703.98	736.82	770.04	805.90	841.76	880.64	919.89	961.79	982.55	1024.45	1060.69	1084.47	1114.29	1132.41
Health Net	WholeCare	HMO A	417.43	454.53	468.72	482.91	498.18	513.46	529.29	545.66	545.66	545.66	545.66	547.84	558.75	571.85	593.13	610.59	619.32	632.42	645.51	653.70	662.43	666.79	671.16	675.52	679.89	688.62	697.35	710.44	722.99	740.46	762.28	787.93	818.48	852.86	892.15	930.89	974.54	1017.65	1065.12	1113.14	1164.98	1216.81	1273.02	1329.76	1390.33	1420.34	1480.91	1533.29	1567.67	1610.78	1636.98
Health Net	CommunityCare	HMO C	244.42	266.15	274.46	282.76	291.71	300.65	309.92	319.51	319.51	319.51	319.51	320.78	327.17	334.84	347.30	357.53	362.64	370.31	377.98	382.77	387.88	390.44	392.99	395.55	398.10	403.22	408.33	416.00	423.35	433.57	446.35	461.37	479.26	499.39	522.39	545.08	570.64	595.88	623.68	651.79	682.14	712.50	745.41	778.64	814.10	831.67	867.14	897.81	917.94	943.18	958.53
Kaiser Permanente	Full	HMO A	228.73	247.82	255.12	262.42	270.28	264.15	272.29	280.71	280.71	280.71	280.71	281.83	287.45	294.19	305.13	314.12	318.61	325.35	332.08	336.29	340.78	343.03	345.28	347.52	349.77	354.26	358.75	365.49	371.94	380.93	392.15	405.35	421.07	438.75	458.96	478.89	501.35	523.53	547.95	572.65	599.32	625.99	654.90	684.10	715.25	730.69	761.85	788.80	806.49	828.66	842.13
Kaiser Permanente	Full	HMO B	232.54	251.96	259.39	266.82	274.82	268.83	277.11	285.68	285.68	285.68	285.68	286.82	292.54	299.39	310.53	319.68	324.25	331.10	337.96	342.25	346.82	349.10	351.39	353.67	355.96	360.53	365.10	371.96	378.53	387.67	399.10	412.52	428.52	446.52	467.09	487.37	510.23	532.79	557.65	582.79	609.93	637.07	666.49	696.20	727.91	743.63	775.34	802.76	820.76	843.33	857.04
Kaiser Permanente	Full	HMO C	239.82	259.89	267.57	275.24	283.51	277.79	286.35	295.20	295.20	295.20	295.20	296.38	302.29	309.37	320.89	330.33	335.06	342.14	349.23	353.65	358.38	360.74	363.10	365.46	367.82	372.55	377.27	384.35	391.14	400.59	412.40	426.27	442.80	461.40	482.66	503.62	527.23	550.55	576.24	602.21	630.26	658.30	688.71	719.41	752.18	768.41	801.18	829.52	848.12	871.44	885.60
Kaiser Permanente	Full	HMO D	215.74	233.68	240.53	247.39	254.78	248.17	255.82	263.73	263.73	263.73	263.73	264.78	270.06	276.39	286.67	295.11	299.33	305.66	311.99	315.95	320.17	322.28	324.39	326.50	328.61	332.83	337.05	343.38	349.44	357.88	368.43	380.83	395.59	412.21	431.20	449.92	471.02	491.86	514.80	538.01	563.06	588.12	615.28	642.71	671.98	686.49	715.76	741.08	757.70	778.53	791.19
Oscar	Oscar EPO	EPO A	214.28	233.32	240.61	247.89	255.73	263.57	271.70	280.10	280.10	280.10	280.10	281.22	286.82	293.55	304.47	313.43	317.91	324.64	331.36	335.56	340.04	342.28	344.52	346.76	349.00	353.49	357.97	364.69	371.13	380.10	391.30	404.46	420.15	437.80	457.96	477.85	500.26	522.39	546.76	571.40	598.01	624.62	653.47	682.60	713.70	729.10	760.19	787.08	804.73	826.86	840.30
Oscar	Oscar EPO	EPO B	241.22	262.66	270.86	279.06	287.88	296.71	305.86	315.32	315.32	315.32	315.32	316.58	322.88	330.45	342.75	352.84	357.88	365.45	373.02	377.75	382.79	385.32	387.84	390.36	392.88	397.93	402.97	410.54	417.79	427.89	440.50	455.32	472.98	492.84	515.54	537.93	563.16	588.07	615.50	643.25	673.20	703.16	735.63	768.43	803.43	820.77	855.77	886.04	905.91	930.82	945.95
Oscar	Oscar EPO	EPO C	214.01	233.03	240.31	247.58	255.41	263.25	271.36	279.75	279.75	279.75	279.75	280.87	286.47	293.18	304.09	313.04	317.52	324.23	330.95	335.14	339.62	341.86	344.10	346.33	348.57	353.05	357.52	364.24	370.67	379.62	390.82	403.96	419.63	437.25	457.40	477.26	499.64	521.74	546.08	570.70	597.27	623.85	652.66	681.76	712.81	728.20	759.25	786.11	803.73	825.83	839.25
Oscar	Oscar EPO	EPO D	240.70	262.09	270.27	278.46	287.27	296.08	305.20	314.64	314.64	314.64	314.64	315.90	322.19	329.74	342.01	352.08	357.12	364.67	372.22	376.94	381.97	384.49	387.01	389.52	392.04	397.07	402.11	409.66	416.90	426.97	439.55	454.34	471.96	491.78	514.43	536.77	561.95	586.80	614.18	641.86	671.75	701.64	734.05	766.78	801.70	819.01	853.93	884.14	903.96	928.81	943.92
Sharp Health Plan	Premier	HMO A	202.89	220.92	227.82	234.71	242.14	249.56	257.25	265.21	265.21	265.21	265.21	266.27	271.58	277.94	288.28	296.77	301.01	307.38	313.74	317.72	321.96	324.09	326.21	328.33	330.45	334.70	338.94	345.30	351.40	359.89	370.50	382.96	397.82	414.52	433.62	452.45	473.67	494.62	517.69	541.03	566.22	591.42	618.73	646.32	675.76	690.34	719.78	745.24	761.95	782.90	795.63
Sharp Health Plan	Performance	HMO B	215.29	234.42	241.74	249.06	256.94	264.82	272.98	281.42	281.42	281.42	281.42	282.55	288.17	294.93	305.90	314.91	319.41	326.17	332.92	337.14	341.64	343.90	346.15	348.40	350.65	355.15	359.65	366.41	372.88	381.89	393.14	406.37	422.13	439.86	460.12	480.10	502.62	524.85	549.33	574.10	600.83	627.57	656.55	685.82	717.06	732.54	763.77	790.79	808.52	830.75	844.26
Sharp Health Plan	Premier	HMO C	197.90	215.49	222.21	228.94	236.18	243.43	250.93	258.69	258.69	258.69	258.69	259.72	264.90	271.11	281.20	289.47	293.61	299.82	306.03	309.91	314.05	316.12	318.19	320.26	322.33	326.47	330.61	336.81	342.76	351.04	361.39	373.55	388.04	404.33	422.96	441.33	462.02	482.46	504.96	527.73	552.30	576.88	603.52	630.43	659.14	673.37	702.08	726.92	743.22	763.65	776.07
Sutter Health Plus	Sutter Health Plus	HMO B	232.56	253.23	261.13	269.04	277.55	286.06	294.88	304.01	304.01	304.01	304.01	305.21	311.29	318.59	330.44	340.17	345.04	352.33	359.63	364.19	369.05	371.48	373.92	376.35	378.78	383.64	388.51	395.80	402.80	412.52	424.68	438.97	456.00	475.15	497.04	518.62	542.94	566.95	593.40	620.15	649.03	677.91	709.23	740.84	774.58	791.30	825.05	854.23	873.38	897.40	911.98
Sutter Health Plus	Sutter Health Plus	HMO C	211.08	229.84	237.02	244.19	251.92	259.64	267.64	275.93	275.93	275.93	275.93	277.03	282.54	289.17	299.93	308.76	313.17	319.79	326.42	330.55	334.97	337.18	339.38	341.59	343.80	348.21	352.63	359.25	365.60	374.43	385.46	398.43	413.88	431.27	451.13	470.72	492.80	514.59	538.60	562.88	589.09	615.31	643.73	672.42	703.05	718.22	748.85	775.34	792.72	814.52	827.76
UnitedHealthcare	SignatureValue	HMO A	353.67	385.11	397.13	409.15	422.10	435.04	448.45	462.32	462.32	462.32	462.32	464.17	473.42	484.51	502.54	517.34	524.73	535.83	546.92	553.86	561.26	564.96	568.65	572.35	576.05	583.45	590.84	601.94	612.57	627.37	645.86	667.59	693.48	722.61	755.89	788.72	825.70	862.23	902.45	943.13	987.05	1030.97	1078.59	1126.67	1177.99	1203.42	1254.74	1299.12	1328.25	1364.77	1386.96
UnitedHealthcare	Advantage	HMO B	321.90	350.52	361.46	372.40	384.18	395.96	408.17	420.79	420.79	420.79	420.79	422.47	430.89	440.99	457.40	470.86	477.60	487.70	497.79	504.11	510.84	514.21	517.57	520.94	524.30	531.04	537.77	547.87	557.55	571.01	587.84	607.62	631.19	657.69	687.99	717.87	751.53	784.77	821.38	858.41	898.39	938.36	981.70	1025.47	1072.17	1095.32	1142.02	1182.42	1208.93	1242.17	1262.37
UnitedHealthcare	Focus	HMO D	321.90	350.52	361.46	372.40	384.18	395.96	408.17	420.79	420.79	420.79	420.79	422.47	430.89	440.99	457.40	470.86	477.60	487.70	497.79	504.11	510.84	514.21	517.57	520.94	524.30	531.04	537.77	547.87	557.55	571.01	587.84	607.62	631.19	657.69	687.99	717.87	751.53	784.77	821.38	858.41	898.39	938.36	981.70	1025.47	1072.17	1095.32	1142.02	1182.42	1208.93	1242.17	1262.37
Western Health	Full	HMO A	221.05	240.70	248.21	255.73	263.82	271.91	280.29	288.96	288.96	288.96	288.96	290.11	295.89	302.83	314.10	323.34	327.97	334.90	341.83	346.17	350.79	353.10	355.42	357.73	360.04	364.66	369.29	376.22	382.87	392.11	403.67	417.25	433.43	451.64	472.44	492.96	516.08	538.90	564.04	589.47	616.92	644.37	674.13	704.19	736.26	752.15	784.23	811.97	830.17	853.00	866.87
Western Health	Full	HMO B	232.10	252.74	260.62	268.51	277.01	285.50	294.30	303.40	303.40	303.40	303.40	304.62	310.69	317.97	329.80	339.51	344.36	351.65	358.93	363.48	368.33	370.76	373.19	375.61	378.04	382.90	387.75	395.03	402.01	411.72	423.86	438.12	455.11	474.22	496.07	517.61	541.88	565.85	592.24	618.94	647.77	676.59	707.84	739.40	773.07	789.76	823.44	852.56	871.68	895.65	910.21
Western Health	Full	HMO C	216.67	235.93	243.30	250.66	258.59	266.52	274.74	283.23	283.23	283.23	283.23	284.36	290.03	296.83	307.87	316.94	321.47	328.27	335.06	339.31	343.84	346.11	348.38	350.64	352.91	357.44	361.97	368.77	375.28	384.35	395.68	408.99	424.85	442.69	463.08	483.19	505.85	528.23	552.87	577.79	604.70	631.61	660.78	690.24	721.68	737.25	768.69	795.88	813.73	836.10	849.70

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	340.95	371.25	382.84	394.43	406.91	419.38	432.31	445.68	445.68	445.68	445.68	447.46	456.38	467.07	484.45	498.72	505.85	516.54	527.24	533.92	541.06	544.62	548.19	551.75	555.32	562.45	569.58	580.28	590.53	604.79	622.61	643.56	668.52	696.60	728.69	760.33	795.98	831.19	869.97	909.19	951.53	993.87	1039.77	1086.12	1135.59	1160.11	1209.58	1252.36	1280.44	1315.65	1337.04
Anthem Blue Cross	CaliforniaCare HMO	HMO B	366.29	398.85	411.30	423.75	437.15	450.56	464.45	478.81	478.81	478.81	478.81	480.73	490.30	501.79	520.47	535.79	543.45	554.94	566.43	573.61	581.28	585.11	588.94	592.77	596.60	604.26	611.92	623.41	634.42	649.75	668.90

USE EMPLOYER ZIP CODE FOR RATING

AREA 10 - Continued

10/01/20 - 12/01/20

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	390.53	425.25	438.52	451.79	466.09	480.38	495.19	510.50	510.50	510.50	510.50	512.54	522.75	535.00	554.91	571.25	579.42	591.67	603.92	611.58	619.75	623.83	627.92	632.00	636.08	644.25	652.42	664.67	676.41	692.75	713.17	737.16	765.75	797.91	834.67	870.91	911.75	952.08	996.50	1041.42	1089.92	1138.42	1191.00	1244.09	1300.75	1328.83	1385.50	1434.51	1466.67	1507.00	1531.50
Health Net	WholeCare	HMO C	477.18	519.60	535.82	552.04	569.50	586.97	605.06	623.77	623.77	623.77	623.77	626.27	638.74	653.71	678.04	698.00	707.98	722.95	737.92	747.28	757.26	762.25	767.24	772.23	777.22	787.20	797.18	812.15	826.50	846.46	871.41	900.72	935.66	974.95	1019.86	1064.15	1114.05	1163.33	1217.60	1272.49	1331.75	1391.01	1455.26	1520.13	1589.37	1623.67	1692.91	1752.79	1792.09	1841.37	1871.31
Health Net	Salud HMO y Mas	HMO D	273.62	297.94	307.24	316.54	326.55	336.57	346.94	357.67	357.67	357.67	357.67	359.10	366.25	374.84	388.79	400.23	405.95	414.54	423.12	428.49	434.21	437.07	439.93	442.79	445.65	451.38	457.10	465.68	473.91	485.36	499.66	516.47	536.50	559.04	584.79	610.18	638.80	667.05	698.17	729.64	763.62	797.60	834.44	871.64	911.34	931.01	970.71	1005.05	1027.58	1055.84	1073.01
Health Net	Full	HMO E	479.48	522.10	538.39	554.69	572.24	589.79	607.96	626.77	626.77	626.77	626.77	629.27	641.81	656.85	681.30	701.35	711.38	726.42	741.47	750.87	760.90	765.91	770.92	775.94	780.95	790.98	801.01	816.05	830.47	850.52	875.59	905.05	940.15	979.64	1024.76	1069.27	1119.41	1168.92	1223.45	1278.61	1338.15	1397.69	1462.25	1527.43	1597.00	1631.48	1701.05	1761.22	1800.70	1850.22	1880.31
Kaiser Permanente	Full	HMO A	317.12	344.06	354.37	364.67	375.76	372.87	384.36	396.25	396.25	396.25	396.25	397.83	405.76	415.27	430.72	443.40	449.74	459.25	468.76	474.71	481.05	484.22	487.39	490.56	493.73	500.07	506.41	515.92	525.03	537.71	553.56	572.18	594.37	619.34	647.87	676.00	707.70	739.00	773.48	808.35	845.99	883.63	924.45	965.66	1009.64	1031.43	1075.42	1113.46	1138.42	1169.73	1188.75
Kaiser Permanente	Full	HMO B	313.94	340.60	350.79	360.99	371.96	368.95	380.32	392.09	392.09	392.09	392.09	393.65	401.50	410.91	426.20	438.74	445.02	454.43	463.84	469.72	475.99	479.13	482.27	485.40	488.54	494.81	501.09	510.50	519.51	532.06	547.74	566.17	588.13	612.83	641.06	668.90	700.27	731.24	765.35	799.86	837.10	874.35	914.74	955.51	999.04	1020.60	1064.12	1101.76	1126.46	1157.44	1176.27
Oscar	Oscar EPO	EPO A	295.58	321.86	331.90	341.95	352.77	363.59	374.79	386.38	386.38	386.38	386.38	387.93	395.66	404.93	420.00	432.36	438.54	447.82	457.09	462.89	469.07	472.16	475.25	478.34	481.43	487.61	493.80	503.07	511.96	524.32	539.78	557.94	579.57	603.91	631.73	659.17	690.08	720.60	754.22	788.22	824.93	861.63	901.43	941.61	984.50	1005.75	1048.64	1085.73	1110.08	1140.60	1159.14
Oscar	Oscar EPO	EPO B	290.38	316.19	326.06	335.93	346.56	357.19	368.19	379.58	379.58	379.58	379.58	381.10	388.69	397.80	412.61	424.75	430.83	439.94	449.05	454.74	460.81	463.85	466.89	469.92	472.96	479.03	485.11	494.22	502.95	515.09	530.28	548.12	569.37	593.29	620.62	647.57	677.93	707.92	740.94	774.35	810.41	846.47	885.57	925.04	967.18	988.05	1030.19	1066.63	1090.54	1120.53	1138.74
Sharp Health Plan	Premier	HMO A	282.90	308.04	317.66	327.27	337.63	347.98	358.71	369.80	369.80	369.80	369.80	371.28	378.68	387.55	401.97	413.81	419.72	428.60	437.47	443.02	448.94	451.90	454.85	457.81	460.77	466.69	472.60	481.48	489.99	501.82	516.61	533.99	554.70	578.00	604.62	630.88	660.46	689.68	721.85	754.39	789.52	824.65	862.74	901.20	942.25	962.59	1003.64	1039.14	1062.44	1091.65	1109.40
Sharp Health Plan	Performance	HMO B	304.75	331.84	342.20	352.56	363.71	374.87	386.42	398.37	398.37	398.37	398.37	399.96	407.93	417.49	433.03	445.78	452.15	461.71	471.27	477.25	483.62	486.81	490.00	493.18	496.37	502.74	509.12	518.68	527.84	540.59	556.52	575.25	597.56	622.65	651.33	679.62	711.49	742.96	777.62	812.67	850.52	888.37	929.40	970.83	1015.05	1036.96	1081.18	1119.42	1144.52	1175.99	1195.11
Sharp Health Plan	Premier	HMO C	278.90	303.70	313.17	322.65	332.86	343.07	353.64	364.58	364.58	364.58	364.58	366.04	373.33	382.08	396.30	407.97	413.80	422.55	431.30	436.77	442.60	445.52	448.43	451.35	454.27	460.10	465.93	474.68	483.07	494.74	509.32	526.45	546.87	569.84	596.09	621.97	651.14	679.94	711.66	743.74	778.38	813.01	850.57	888.48	928.95	949.00	989.47	1024.47	1047.44	1076.24	1093.74
Sutter Health Plus	Sutter Health Plus	HMO A	303.37	330.34	340.65	350.96	362.06	373.17	384.67	396.57	396.57	396.57	396.57	398.15	406.08	415.60	431.06	443.75	450.10	459.62	469.13	475.08	481.43	484.60	487.77	490.95	494.12	500.46	506.81	516.33	525.45	538.14	554.00	572.64	594.84	619.83	648.38	676.54	708.26	739.59	774.09	808.99	846.66	884.34	925.18	966.42	1010.44	1032.25	1076.27	1114.34	1139.33	1170.65	1189.68
Sutter Health Plus	Sutter Health Plus	HMO B	299.60	326.24	336.42	346.60	357.57	368.53	379.89	391.65	391.65	391.65	391.65	393.21	401.04	410.44	425.71	438.25	444.51	453.91	463.31	469.18	475.45	478.58	481.72	484.85	487.98	494.25	500.52	509.92	518.92	531.46	547.12	565.53	587.46	612.13	640.33	668.14	699.47	730.41	764.48	798.95	836.15	873.36	913.70	954.43	997.90	1019.44	1062.91	1100.51	1125.18	1156.12	1174.91
UnitedHealthcare	SignatureValue	HMO A	468.26	509.88	525.79	541.71	558.85	575.99	593.74	612.10	612.10	612.10	612.10	614.55	626.79	641.48	665.35	684.94	694.73	709.42	724.11	733.30	743.09	747.99	752.88	757.78	762.68	772.47	782.26	796.95	811.03	830.62	855.10	883.87	918.15	956.71	1000.78	1044.24	1093.21	1141.57	1194.82	1248.68	1306.83	1364.98	1428.03	1491.69	1559.63	1593.30	1661.24	1720.00	1758.56	1806.92	1836.30
UnitedHealthcare	Focus	HMO B	426.19	464.07	478.56	493.04	508.64	524.24	540.40	557.11	557.11	557.11	557.11	559.34	570.48	583.85	605.58	623.41	632.32	645.69	659.06	667.42	676.33	680.79	685.25	689.70	694.16	703.07	711.99	725.36	738.17	756.00	778.28	804.47	835.67	870.76	910.87	950.43	995.00	1039.01	1087.48	1136.50	1189.43	1242.36	1299.74	1357.68	1419.52	1450.16	1512.00	1565.48	1600.58	1644.59	1671.33
Western Health	Full	HMO A	290.72	316.56	326.44	336.32	346.96	357.60	368.62	380.02	380.02	380.02	380.02	381.54	389.14	398.26	413.08	425.24	431.32	440.44	449.56	455.26	461.35	464.39	467.43	470.47	473.51	479.59	485.67	494.79	503.53	515.69	530.89	548.75	570.03	593.97	621.33	648.32	678.72	708.74	741.80	775.24	811.34	847.45	886.59	926.11	968.29	989.19	1031.38	1067.86	1091.80	1121.82	1140.06
Western Health	Full	HMO B	298.09	324.59	334.72	344.85	355.77	366.68	377.98	389.67	389.67	389.67	389.67	391.23	399.02	408.37	423.57	436.04	442.27	451.62	460.98	466.82	473.06	476.17	479.29	482.41	485.52	491.76	497.99	507.35	516.31	528.78	544.36	562.68	584.50	609.05	637.10	664.77	695.94	726.73	760.63	794.92	831.94	868.96	909.09	949.62	992.87	1014.30	1057.56	1094.96	1119.51	1150.30	1169.00

Health Care Service Plan rates will vary by county

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USE EMPLOYER ZIP CODE FOR RATING

AREA 11

10/01/20 - 12/01/20

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	226.62	246.76	254.46	262.16	270.46	278.75	287.34	296.23	296.23	296.23	296.23	297.41	303.34	310.45	322.00	331.48	336.22	343.33	350.44	354.88	359.62	361.99	364.36	366.73	369.10	373.84	378.58	385.69	392.50	401.98	413.83	427.76	444.35	463.01	484.34	505.37	529.07	552.47	578.24	604.31	632.45	660.59	691.10	721.91	754.79	771.09	803.97	832.41	851.07	874.47	888.69
Anthem Blue Cross	Select PPO	PPO B	220.92	240.55	248.06	255.57	263.66	271.74	280.12	288.78	288.78	288.78	288.78	289.94	295.71	302.64	313.90	323.14	327.77	334.70	341.63	345.96	350.58	352.89	355.20	357.51	359.82	364.44	369.06	375.99	382.63	391.87	403.43	417.00	433.17	451.36	472.16	492.66	515.76	538.57	563.70	589.11	616.55	643.98	673.72	703.76	735.81	751.69	783.75	811.47	829.66	852.48	866.34
Anthem Blue Cross	Prudent Buyer - Small Group	EPO A	225.46	245.50	253.16	260.83	269.08	277.33	285.88	294.72	294.72	294.72	294.72	295.90	301.79	308.87	320.36	329.79	334.51	341.58	348.65	353.07	357.79	360.15	362.51	364.86	367.22	371.94	376.65	383.73	390.50	399.94	411.72	425.58	442.08	460.65	481.87	502.79	526.37	549.65	575.29	601.23	629.23	657.23	687.58	718.23	750.95	767.16	799.87	828.16	846.73	870.01	884.16
Health Net	CommunityCare	HMO A	216.73	236.00	243.36	250.73	258.66	266.59	274.81	283.31	283.31	283.31	283.31	284.44	290.11	296.91	307.96	317.02	321.55	328.35	335.15	339.40	343.94	346.20	348.47	350.74	353.00	357.53	362.07	368.87	375.38	384.45	395.78	409.10	424.96	442.81	463.21	483.32	505.99	528.37	553.02	577.95	604.86	631.78	660.96	690.42	721.87	737.45	768.90	796.10	813.94	836.33	849.93
Kaiser Permanente	Full	HMO A	193.05	208.96	215.05	221.13	227.69	220.25	227.04	234.06	234.06	234.06	234.06	235.00	239.68	245.30	254.42	261.91	265.66	271.28	276.89	280.41	284.15	286.02	287.90	289.77	291.64	295.39	299.13	304.75	310.13	317.62	326.98	337.98	351.09	365.84	382.69	399.31	418.03	436.52	456.89	477.49	499.72	521.96	546.07	570.41	596.39	609.26	635.24	657.71	672.46	690.95	702.18
Kaiser Permanente	Full	HMO C	182.80	197.80	203.54	209.27	215.45	207.64	214.04	220.66	220.66	220.66	220.66	221.54	225.96	231.25	239.86	246.92	250.45	255.75	261.04	264.35	267.88	269.65	271.41	273.18	274.94	278.47	282.00	287.30	292.38	299.44	308.26	318.63	330.99	344.89	360.78	376.45	394.10	411.53	430.73	450.15	471.11	492.07	514.80	537.75	562.24	574.38	598.87	620.06	633.96	651.39	661.98
Oscar	Oscar EPO	EPO A	187.26	203.90	210.26	216.63	223.48	230.34	237.44	244.78	244.78	244.78	244.78	245.76	250.65	256.53	266.07	273.91	277.82	283.70	289.57	293.24	297.16	299.12	301.08	303.04	304.99	308.91	312.83	318.70	324.33	332.16	341.96	353.46	367.17	382.59	400.21	417.59	437.17	456.51	477.81	499.35	522.60	545.86	571.07	596.52	623.70	637.16	664.33	687.83	703.25	722.59	734.34
Oscar	Oscar EPO	EPO B	177.79	193.60	199.64	205.68	212.19	218.70	225.44	232.41	232.41	232.41	232.41	233.34	237.99	243.57	252.63	260.07	263.79	269.36	274.94	278.43	282.15	284.01	285.87	287.72	289.58	293.30	297.02	302.60	307.94	315.38	324.68	335.60	348.62	363.26	379.99	396.49	415.09	433.45	453.67	474.12	496.20	518.28	542.21	566.38	592.18	604.97	630.76	653.07	667.72	686.08	697.23
Oscar	Oscar EPO	EPO C	178.81	194.71	200.78	206.86	213.40	219.95	226.73	233.74	233.74	233.74	233.74	234.68	239.35	244.96	254.08	261.56	265.30	270.91	276.51	280.02	283.76	285.63	287.50	289.37	291.24	294.98	298.72	304.33	309.71	317.19	326.54	337.52	350.61	365.34	382.17	398.76	417.46	435.93	456.26	476.83	499.04	521.24	545.32	569.63	595.57	608.43	634.37	656.81	671.54	690.00	701.22
Sharp Health Plan	Premier	HMO A	172.72	188.07	193.95	199.82	206.14	212.46	219.01	225.78	225.78	225.78	225.78	226.68	231.20	236.62	245.42	252.65	256.26	261.68	267.10	270.48	274.10	275.90	277.71	279.52	281.32	284.93	288.55	293.97	299.16	306.38	315.41	326.03	338.67	352.89	369.15	385.18	403.24	421.08	440.72	460.59	482.04	503.49	526.74	550.23	575.29	587.71	612.77	634.44	648.67	666.50	677.34
Sharp Health Plan	Performance	HMO B	197.55	215.11	221.83	228.54	235.77	243.00	250.49	258.24	258.24	258.24	258.24	259.27	264.44	270.64	280.71	288.97	293.10	299.30	305.50	309.37	313.50	315.57	317.64	319.70	321.77	325.90	330.03	336.23	342.17	350.43	360.76	372.90	387.36	403.63	422.22	440.56	461.22	481.62	504.08	526.81	551.34	575.88	602.47	629.33	658.00	672.20	700.86	725.65	741.92	762.32	774.72
UnitedHealthcare	Alliance	HMO A	195.69	213.08	219.73	226.38	233.55	240.71	248.13	255.80	255.80	255.80	255.80	256.82	261.94	268.08	278.05	286.24	290.33	296.47	302.61	306.45	310.54	312.59	314.63	316.68	318.73	322.82	326.91	333.05	338.94	347.12	357.35	369.38	383.70	399.82	418.23	436.39	456.86	477.07	499.32	521.83	546.13	570.43	596.78	623.38	651.78	665.85	694.24	718.80	734.91	755.12	767.40
UnitedHealthcare	Alliance	HMO B	204.73	222.93	229.89	236.84	244.34	251.83	259.59	267.62	267.62	267.62	267.62	268.69	274.04	280.47	290.90	299.47	303.75	310.17	316.59	320.61	324.89	327.03	329.17	331.31	333.45	337.74	342.02	348.44	354.60	363.16	373.87	386.44	401.43	418.29	437.56	456.56	477.97	499.11	522.39	545.94	571.37	596.79	624.36	652.19	681.90	696.61	726.32	752.01	768.87	790.01	802.86
Western Health	Full	HMO B	196.64	214.11	220.80	227.48	234.68	241.87	249.33	257.04	257.04	257.04	257.04	258.07	263.21	269.38	279.40	287.63	291.74	297.91	304.08	307.93	312.05	314.10	316.16	318.21	320.27	324.38	328.50	334.67	340.58	348.80	359.08	371.16	385.56	401.75	420.26	438.51	459.07	479.38	501.74	524.36	548.78	573.20	599.67	626.41	654.94	669.07	697.60	722.28	738.47	758.78	771.12
Western Health	Full	HMO C	201.60	219.52	226.37	233.22	240.60	247.98	255.62	263.53	263.53	263.53	263.53	264.58	269.85	276.18	286.45	294.89	299.10	305.43	311.75	315.70	319.92	322.03	324.14	326.25	328.35	332.57	336.79	343.11	349.17	357.61	368.15	380.53	395.29	411.89	430.87	449.58	470.66	491.48	514.40	537.59	562.63	587.66	614.81	642.21	671.47	685.96	715.21	740.51	757.11	777.93	790.58

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	252.36	274.79	283.37	291.94	301.18	310.42	319.98	329.88	329.88	329.88	329.88	331.20	337.80	345.71	358.58	369.14	374.41	382.33	390.25	395.20	400.47	403.11	405.75	408.39	411.03	416.31	421.59	429.50	437.09	447.65	460.84	476.35	494.82	515.60	539.35	562.78	589.17	615.23	643.93	672.96	704.29	735.63	769.61	803.92	840.53	858.68	895.29	926.96	947.75	973.81	989.64
Anthem Blue Cross	CaliforniaCare HMO	HMO B	252.36	274.79	283.37	291.94	301.18	310.42	319.98	329.88	329.88	329.88	329.88	331.20	337.80	345.71	358.58	369.14	374.41	382.33	390.25	395.20	400.47	403.11	405.75	408.39	411.03	416.31	421.59	429.50	437.09	447.65	460.84	476.35	494.82	515.60	539.35	562.78	589.17	615.23	643.93	672.96	704.29	735.63	769.61	803.92	840.53	858.68	895.29	926.96	947.75	973.81	989.64
Anthem Blue Cross	Advantage PPO	PPO A	261.78	285.05	293.95	302.85	312.43	322.01	331.93	342.20	342.20	342.20	342.20	343.57	350.41	358.63	371.97	382.92	388.40	396.61	404.82	409.96	415.43	418.17	420.91	423.64	426.38	431.86	437.33	445.54	453.42	464.37	478.05	494.14	513.30	534.86	559.50	583.79	611.17	638.20	667.97	698.09	730.60	763.11	798.35	833.94	871.93	890.75	928.73	961.58	983.14	1010.17	1026.60
Anthem Blue Cross	Select PPO	PPO B	249.47	271.64	280.12	288.60	297.73	306.86	316.32	326.10	326.10	326.10	326.10	327.40	333.93	341.75	354.47	364.91	370.12	377.95	385.78	390.67	395.89	398.49	401.10	403.71	406.32	411.54	416.76	424.58	432.08	442.52	455.56	470.89	489.15	509.69	533.17	556.33	582.41	608.18	636.55	665.24	696.22	727.20	760.79	794.71	830.90	848.84	885.04	916.34	936.89	962.65	978.30
Anthem Blue Cross	Prudent Buyer - Small Group	PPO C	255.94	278.69	287.39	296.09	305.45	314.82	324.52	334.56	334.56	334.56	334.56	335.90	342.59	350.62	363.67	374.37	379.73	387.76	395.78	400.80	406.16	408.83	411.51	414.19	416.86	422.21	427.57	435.60	443.29	454.00	467.38	483.10	501.84	522.92	547.01	570.76	597.52	623.95	653.06	682.50	714.29	746.07	780.53	815.32	852.46	870.86	908.00	940.11	961.19	987.62	1003.68
Anthem Blue Cross	Prudent Buyer - Small Group	EPO A	253.27	275.78	284.39	293.00	302.27	311.54	321.14	331.07	331.07	331.07	331.07	332.39	339.02	346.96	359.87	370.47	375.76	383.71	391.66	396.62	401.92	404.57	407.22	409.86	412.51	417.81	423.11	431.05	438.67	449.26	462.50	478.07	496.61	517.46	541.30	564.81	591.29	617.45	646.25	675.38	706.83	738.29	772.39	806.82	843.57	861.78	898.52	930.31	951.16	977.32	993.21
Anthem Blue Cross	Prudent Buyer - Small Group	EPO B	253.63	276.17	284.79	293.41	302.70	311.98	321.59	331.54	331.54	331.54	331.54	332.87	339.50	347.45	360.38	370.99	376.30	384.25	392.21	397.18	402.49	405.14	407.79	410.45	413.10	418.40	423.71	431.67	439.29	449.90	463.16	478.74	497.31	518.20	542.07	565.61	592.13	618.32	647.17	676.34	707.84	739.33	773.48	807.96	844.76	863.00	899.80	931.63	952.51	978.71	994.62
Health Net	WholeCare	HMO A	326.98	356.05	367.16	378.28	390.24	402.21	414.61	427.43	427.43	427.43	427.43	429.14	437.69	447.95	464.62	478.29	485.13	495.39	505.65	512.06	518.90	522.32	525.74	529.16	532.58	539.42	546.26	556.51	566.35	580.02	597.12	617.21	641.15	668.07	698.85	729.20	763.39	797.16	834.34	871.96	912.56	953.17	997.19	1041.65	1089.09	1112.60	1160.05	1201.08	1228.01	1261.77	1282.29
Health Net	CommunityCare	HMO C	244.42	266.15	274.46	282.76	291.71	300.65	309.92	319.51	319.51	319.51	319.51	320.78	327.17	334.84	347.30	357.53	362.64	370.31	377.98	382.77	387.88	390.44	392.99	395.55	398.10	403.22	408.33	416.00	423.35	433.57	446.35	461.37	479.26	499.39	522.39	545.08	570.64	595.88	623.68	651.79	682.14	712.50	745.41	778.64	814.10	831.67	867.14	897.81	917.94	943.18	958.53
Kaiser Permanente	Full	HMO A	222.29	240.81	247.89	254.97	262.59	256.23	264.12	272.29	272.29	272.29	272.29	273.38	278.83	285.36	295.98	304.69	309.05	315.58	322.12	326.20	330.56	332.74	334.92	337.10	339.27	343.63	347.99	354.52	360.79	369.50	380.39	393.19	408.44	425.59	445.20	464.53	486.31	507.82	531.51	555.47	581.34	607.21	635.25	663.57	693.80	708.77	739.00	765.14	782.29	803.80	816.87
Kaiser Permanente	Full	HMO B	225.98	244.82	252.03	259.23	266.99	260.76	268.80	277.11	277.11	277.11	277.11	278.22	283.76	290.41	301.22	310.09	314.52	321.17	327.82	331.98	336.41	338.63	340.85	343.06	345.28	349.71	354.15	360.80	367.17	376.04	387.12	400.15	415.66	433.12	453.07	472.75	494.92	516.81	540.92	565.30	591.63	617.96	646.50	675.32	706.08	721.32	752.08	778.68	796.14	818.03	831.33
Kaiser Permanente	Full	HMO C	233.05	252.52	259.96	267.41	275.42	269.45	277.76	286.35	286.35	286.35	286.35	287.49	293.22	300.09	311.26	320.42	325.00	331.88	338.75	343.04	347.63	349.92	352.21	354.50	356.79	361.37	365.95	372.82	379.41	388.57	400.03	413.49	429.52	447.56	468.18	488.51	511.42	534.04	558.95	584.15	611.35	638.55	668.05	697.83	729.61	745.36	777.15	804.64	822.68	845.30	859.05
Kaiser Permanente	Full	HMO D	209.69	227.09	233.74	240.39	247.55	240.72	248.14	255.82	255.82	255.82	255.82	256.84	261.96	268.10	278.07	286.26	290.35	296.49	302.63	306.47	310.56	312.61	314.66	316.70	318.75	322.84	326.94	333.07	338.96	347.14	357.38	369.40	383.73	399.84	418.26	436.43	456.89	477.10	499.36	521.87	546.17	570.47	596.82	623.43	651.82	665.89	694.29	718.85	734.96	755.17	767.46
Oscar	Oscar EPO	EPO A	214.28	233.32	240.61	247.89	255.73	263.57	271.70	280.10	280.10	280.10	280.10	281.22	286.82	293.55	304.47	313.43	317.91	324.64	331.36	335.56	340.04	342.28	344.52	346.76	349.00	353.49	357.97	364.69	371.13	380.10	391.30	404.46	420.15	437.80	457.96	477.85	500.26	522.39	546.76	571.40	598.01	624.62	653.47	682.60	713.70	729.10	760.19	787.08	804.73	826.86	840.30
Oscar	Oscar EPO	EPO B	241.22	262.66	270.86	279.06	287.88	296.71	305.86	315.32	315.32	315.32	315.32	316.58	322.88	330.45	342.75	352.84	357.88	365.45	373.02	377.52	382.79	385.32	387.84	390.36	392.88	397.93	402.97	410.54	417.79	427.89	440.50	455.32	472.98	492.84	515.54	537.93	563.16	588.07	615.50	643.25	673.20	703.16	735.63	768.43	803.43	820.77	855.77	886.04	905.91	930.82	945.95
Oscar	Oscar EPO	EPO C	214.01	233.03	240.31	247.58	255.41	263.25	271.36	279.75	279.75	279.75	279.75	280.87	286.47	293.18	304.09	313.04	317.52	324.23	330.95	335.14	339.62	341.86	344.10	346.33	348.57	353.05	357.52	364.24	370.67	379.62	390.82	403.96	419.63	437.25	457.40	477.26	499.64	521.74	546.08	570.70	597.27	623.85	652.66	681.76	712.81	728.20	759.25	786.11	803.73	825.83	839.25
Oscar	Oscar EPO	EPO D	240.70	262.09	270.27	278.46	287.27	296.08	305.20	314.64	314.64	314.64	314.64	315.90	322.19	329.74	342.01	352.08	357.12	364.67	372.22	376.94	381.97	384.49	387.01	389.52	392.04	397.07	402.11	409.66	416.90	426.97	439.55	454.34	471.96	491.78	514.43	536.77	561.95	586.80	614.18	641.86	671.75	701.64	734.05	766.78	801.70	819.01	853.93	884.14	903.96	928.81	943.92
Sharp Health Plan	Premier	HMO A	202.89	220.92	227.82	234.71	242.14	249.56	257.25	265.21	265.21	265.21	265.21	266.27	271.58	277.94	288.28	296.77	301.01	307.38	313.74	317.72	321.96	324.09	326.21	328.33	330.45	334.70	338.94	345.30	351.40	359.89	370.50	382.96	397.82	414.52	433.62	452.45	473.67	494.62	517.69	541.03	566.22	591.42	618.73	646.32	675.76	690.34	719.78	745.24	761.95	782.90	795.63
Sharp Health Plan	Performance	HMO B	215.29	234.42	241.74	249.06	256.94	264.82	272.98	281.42	281.42	281.42	281.42	282.55	288.17	294.93	305.90	314.91	319.41	326.17	332.92	337.14	341.64	343.90	346.15	348.40	350.65	355.15	359.65	366.41	372.88	381.89	393.14	406.37	422.13	439.86	460.12	480.10	502.62	524.85	549.33	574.10	600.83	627.57	656.55	685.82	717.06	732.54	763.77	790.79	808.52	830.75	844.26
Sharp Health Plan	Premier	HMO C	197.90	215.49	222.21	228.94	236.18	243.43	250.93	258.69	258.69	258.69	258.69	259.72	264.90	271.11	281.20	289.47	293.61	299.82	306.03	309.91	314.05	316.12	318.19	320.26	322.33	326.47	330.61	336.81	342.76	351.04	361.39	373.55	388.04	404.33	422.96	441.33	462.02	482.46	504.96	527.73	552.30	576.88	603.52	630.43	659.14	673.37	702.08	726.92	743.22	763.65	776.07
UnitedHealthcare	SignatureValue	HMO A	270.63	294.69	303.89	313.09	322.99	332.90	343.16	353.77	353.77	353.77	353.77	355.19	362.26	370.75	384.55	395.87	401.53	410.02	418.51	423.82	429.48	432.31	435.14	437.97	440.80	446.46	452.12	460.61	468.75	480.07	494.22	510.84	530.66	552.94	578.41	603.53	631.83	659.78	690.56	721.69	755.30	788.91	825.35	862.14	901.41	920.86	960.13	994.09	1016.38	1044.33	1061.31
UnitedHealthcare	Alliance	HMO C	218.43	237.85	245.27	252.69	260.69	268.68	276.96	285.53	285.53	285.53	285.53	286.67	292.38	299.24	310.37	319.51	324.08	330.93	337.78	342.06	346.63	348.92	351.20	353.49	355.77	360.34	364.91	371.76	378.33	387.46	398.89	412.31	428.30	446.28	466.84	487.11	509.96	532.51	557.35	582.48	609.61	636.73	666.14	695.84	727.53	743.23	774.93	802.34	820.33	842.88	856.59
Western Health	Full	HMO A	221.05	240.70	248.21	255.73	263.82	271.91	280.29	288.96	288.96	288.96	288.96	290.11	295.89	302.83	314.10	323.34	327.97	334.90	341.83	346.17	350.79	353.10	355.42	357.73	360.04	364.66	369.29	376.22	382.87	392.11	403.67	417.25	433.43	451.64	472.44	492.96	516.08	538.90	564.04	589.47	616.92	644.37	674.13	704.19	736.26	752.15	784.23	811.97	830.17	853.00	866.87
Western Health	Full	HMO B	232.10	252.74	260.62	268.51	277.01	285.50	294.30	303.40	303.40	303.40	303.40	304.62	310.69	317.97	329.80	339.51	344.36	351.65	358.93	363.48	368.33	370.76	373.19	375.61	378.04	382.90	387.75	395.03	402.01	411.72	423.86	438.12	455.11	474.22	496.07	517.61	541.88	565.85	592.24	618.94	647.77	676.59	707.84	739.40	773.07	789.76	823.44	852.56	871.68	895.65	910.21
Western Health	Full	HMO C	216.67	235.93	243.30	250.66	258.59	266.52	274.74	283.23	283.23	283.23	283.23	284.36	290.03	296.83	307.87	316.94	321.47	328.27	335.06	339.31	343.84	346.11	348.38	350.64	352.91	357.44	361.97	368.77	375.28	384.35	395.68	408.99	424.85	442.69	463.08	483.19	505.85	528.23	552.87	577.79	604.70	631.61	660.78	690.24	721.68	737.25	768.69	795.88	813.73	836.10	849.70

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	315.33	343.36	354.08	364.80	376.34	387.88	399.83	412.20	412.20	412.20	412.20	413.85	422.09	431.99	448.06	461.25	467.85	477.74	487.63	493.82	500.41	503.71	507.01	510.30	513.60	520.20	526.79	536.68	546.17	559.36	575.84	595.22	618.30	644.27	673.95	703.21	736.19	768.75	804.61	840.89	880.05	919.21	961.66	1004.53	1050.29	1072.96	1118.71	1158.28	1184.25	1216.81	1236.60
Anthem Blue Cross	CaliforniaCare HMO	HMO B	315.33	343.36	354.08	364.80	376.34	387.88	399.83	412.20	412.20	412.20	412.20	413.85	422.09	431.99	448.06	461.25	467.85	477.74	487.63	493.82	500.41	503.71	507.01	510.30	513.60	520.20	526.79	536.68	546.17	559.36	575.84	595.22	618.30	644.27	673.95	703.21	736.19	768.75	804.61	840.89	880.05	919.21	961.66	1004.53	1050.29	1072.96	1118.71	1158.28	1184.25	1216.81	1236.60
Anthem Blue Cross	Advantage PPO	PPO A	314.75	342.73	353.43	364.12	375.64	387.17	399.10	411.44	411.44	411.44	411.44	413.09	421.31	431.19	447.24	460.40	466.98	476.86	486.73	492.91	499.49	502.78	506.07	509.36	512.65	519.24	525.82	535.69	545.16	558.32	574.78	594.12	617.16	643.08	672.70	701.92	734.83	767.34	803.13	839.34	878.42	917.51	959.89	1002.68	1048.35	1070.98	1116.65	1156.15	1182.07	1214.57	1234.32
Anthem Blue Cross	Select PPO	PPO B	295.85	322.15	332.20	342.26	353.08	363.91	375.13	386.73	386.73	386.73	386.73	388.28	396.01	405.29	420.38	432.75	438.94	448.22	457.50	463.30	469.49	472.58	475.68	478.77	481.87	488.05	494.24	503.52	512.42	524.79	540.26	558.44	580.10	604.46	632.30	659.76	690.70	721.25	754.90	788.93	825.67	862.41	902.24	942.46	985.39	1006.66	1049.59	1086.71	1111.08	1141.63	1160.19
Anthem Blue Cross	Select PPO	PPO C	300.12	326.79	336.99	347.19	358.18	369.16	380.54	392.31	392.31	392.31	392.31	393.88	401.73	411.14	426.44	438.99	445.27	454.69	464.10	469.99	476.26	479.40	482.54	485.68	488.82	495.10	501.37	510.79	519.81	532.36	548.06	566.50	588.47	613.18	641.43	669.28	700.67	731.66	765.79

USE EMPLOYER ZIP CODE FOR RATING

AREA 11 - Continued

10/01/20 - 12/01/20

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	361.19	393.29	405.57	417.84	431.06	444.28	457.98	472.14	472.14	472.14	472.14	474.03	483.47	494.80	513.22	528.32	535.88	547.21	558.54	565.62	573.18	576.96	580.73	584.51	588.29	595.84	603.39	614.73	625.59	640.69	659.58	681.77	708.21	737.95	771.95	805.47	843.24	880.54	921.62	963.17	1008.02	1052.87	1101.50	1150.61	1203.01	1228.98	1281.39	1326.71	1356.46	1393.76	1416.42
Health Net	WholeCare	HMO C	373.79	407.02	419.72	432.43	446.11	459.79	473.96	488.62	488.62	488.62	488.62	490.57	500.35	512.07	531.13	546.76	554.58	566.31	578.04	585.37	593.18	597.09	601.00	604.91	608.82	616.64	624.46	636.18	647.42	663.06	682.60	705.57	732.93	763.71	798.89	833.58	872.67	911.27	953.78	996.78	1043.20	1089.62	1139.95	1190.77	1245.00	1271.88	1326.11	1373.02	1403.80	1442.40	1465.86
Health Net	Salud HMO y Mas	HMO D	273.62	297.94	307.24	316.54	326.55	336.57	346.94	357.67	357.67	357.67	357.67	359.10	366.25	374.84	388.79	400.23	405.95	414.54	423.12	428.49	434.21	437.07	439.93	442.79	445.65	451.38	457.10	465.68	473.91	485.36	499.66	516.47	536.50	559.04	584.79	610.18	638.80	667.05	698.17	729.64	763.62	797.60	834.44	871.64	911.34	931.01	970.71	1005.05	1027.58	1055.84	1073.01
Health Net	Full	HMO E	375.59	408.98	421.74	434.51	448.25	462.00	476.24	490.97	490.97	490.97	490.97	492.93	502.75	514.53	533.68	549.39	557.25	569.03	580.81	588.18	596.03	599.96	603.89	607.82	611.75	619.60	627.46	639.24	650.53	666.24	685.88	708.96	736.45	767.38	802.73	837.59	876.87	915.65	958.37	1001.57	1048.22	1094.86	1145.43	1196.49	1250.98	1277.99	1332.49	1379.62	1410.55	1449.34	1472.91
Kaiser Permanente	Full	HMO A	308.03	334.16	344.16	354.15	364.91	361.68	372.83	384.36	384.36	384.36	384.36	385.90	393.59	402.81	417.80	430.10	436.25	445.47	454.70	460.46	466.61	469.69	472.76	475.84	478.91	485.06	491.21	500.44	509.28	521.58	536.95	555.02	576.54	600.76	628.43	655.72	686.47	716.83	750.27	784.10	820.61	857.12	896.71	936.69	979.35	1000.49	1043.16	1080.05	1104.27	1134.63	1153.08
Kaiser Permanente	Full	HMO B	304.94	330.80	340.69	350.58	361.23	357.88	368.91	380.32	380.32	380.32	380.32	381.84	389.45	398.58	413.41	425.58	431.67	440.80	449.92	455.63	461.71	464.76	467.80	470.84	473.88	479.97	486.05	495.18	503.93	516.10	531.31	549.19	570.49	594.45	621.83	648.83	679.26	709.30	742.39	775.86	811.99	848.12	887.30	926.85	969.06	989.98	1032.20	1068.71	1092.67	1122.72	1140.96
Oscar	Oscar EPO	EPO A	295.58	321.86	331.90	341.95	352.77	363.59	374.79	386.38	386.38	386.38	386.38	387.93	395.66	404.93	420.00	432.36	438.54	447.82	457.09	462.89	469.07	472.16	475.25	478.34	481.43	487.61	493.80	503.07	511.96	524.32	539.78	557.94	579.57	603.91	631.73	659.17	690.08	720.60	754.22	788.22	824.93	861.63	901.43	941.61	984.50	1005.75	1048.64	1085.73	1110.08	1140.60	1159.14
Oscar	Oscar EPO	EPO B	290.38	316.19	326.06	335.93	346.56	357.19	368.19	379.58	379.58	379.58	379.58	381.10	388.69	397.80	412.61	424.75	430.83	439.94	449.05	454.74	460.81	463.85	466.89	469.92	472.96	479.03	485.11	494.22	502.95	515.09	530.28	548.12	569.37	593.29	620.62	647.57	677.93	707.92	740.94	774.35	810.41	846.47	885.57	925.04	967.18	988.05	1030.19	1066.63	1090.54	1120.53	1138.74
Sharp Health Plan	Premier	HMO A	282.90	308.04	317.66	327.27	337.63	347.98	358.71	369.80	369.80	369.80	369.80	371.28	378.68	387.55	401.97	413.81	419.72	428.60	437.47	443.02	448.94	451.90	454.85	457.81	460.77	466.69	472.60	481.48	489.99	501.82	516.61	533.99	554.70	578.00	604.62	630.88	660.46	689.68	721.85	754.39	789.52	824.65	862.74	901.20	942.25	962.59	1003.64	1039.14	1062.44	1091.65	1109.40
Sharp Health Plan	Performance	HMO B	304.75	331.84	342.20	352.56	363.71	374.87	386.42	398.37	398.37	398.37	398.37	399.96	407.93	417.49	433.03	445.78	452.15	461.71	471.27	477.25	483.62	486.81	490.00	493.18	496.37	502.74	509.12	518.68	527.84	540.59	556.52	575.25	597.56	622.65	651.33	679.62	711.49	742.96	777.62	812.67	850.52	888.37	929.40	970.83	1015.05	1036.96	1081.18	1119.42	1144.52	1175.99	1195.11
Sharp Health Plan	Premier	HMO C	278.90	303.70	313.17	322.65	332.86	343.07	353.64	364.58	364.58	364.58	364.58	366.04	373.33	382.08	396.30	407.97	413.80	422.55	431.30	436.77	442.60	445.52	448.43	451.35	454.27	460.10	465.93	474.68	483.07	494.74	509.32	526.45	546.87	569.84	596.09	621.97	651.14	679.94	711.66	743.74	778.38	813.01	850.57	888.48	928.95	949.00	989.47	1024.47	1047.44	1076.24	1093.74
UnitedHealthcare	SignatureValue	HMO A	358.31	390.16	402.34	414.52	427.63	440.75	454.33	468.38	468.38	468.38	468.38	470.25	479.62	490.86	509.13	524.12	531.61	542.85	554.09	561.12	568.61	572.36	576.11	579.85	583.60	591.10	598.59	609.83	620.60	635.59	654.33	676.34	702.57	732.08	765.80	799.06	836.53	873.53	914.28	955.50	999.99	1044.49	1092.73	1141.44	1193.43	1219.19	1271.18	1316.15	1345.66	1382.66	1405.14
UnitedHealthcare	Alliance	HMO C	319.47	347.87	358.73	369.58	381.28	392.97	405.08	417.61	417.61	417.61	417.61	419.28	427.63	437.66	453.94	467.31	473.99	484.01	494.03	500.30	506.98	510.32	513.66	517.00	520.34	527.02	533.71	543.73	553.33	566.70	583.40	603.03	626.42	652.72	682.79	712.44	745.85	778.84	815.17	851.92	891.60	931.27	974.28	1017.72	1064.07	1087.04	1133.39	1173.48	1199.79	1232.78	1252.83
Western Health	Full	HMO A	290.72	316.56	326.44	336.32	346.96	357.60	368.62	380.02	380.02	380.02	380.02	381.54	389.14	398.26	413.08	425.24	431.32	440.44	449.56	455.26	461.35	464.39	467.43	470.47	473.51	479.59	485.67	494.79	503.53	515.69	530.89	548.75	570.03	593.97	621.33	648.32	678.72	708.74	741.80	775.24	811.34	847.45	886.59	926.11	968.29	989.19	1031.38	1067.86	1091.80	1121.82	1140.06
Western Health	Full	HMO B	298.09	324.59	334.72	344.85	355.77	366.68	377.98	389.67	389.67	389.67	389.67	391.23	399.02	408.37	423.57	436.04	442.27	451.62	460.98	466.82	473.06	476.17	479.29	482.41	485.52	491.76	497.99	507.35	516.31	528.78	544.36	562.68	584.50	609.05	637.10	664.77	695.94	726.73	760.63	794.92	831.94	868.96	909.09	949.62	992.87	1014.30	1057.56	1094.96	1119.51	1150.30	1169.00

Health Care Service Plan rates will vary by county

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USE EMPLOYER ZIP CODE FOR RATING

AREA 12

10/01/20 - 12/01/20

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	252.04	274.45	283.01	291.58	300.81	310.03	319.59	329.47	329.47	329.47	329.47	330.79	337.38	345.28	358.13	368.68	373.95	381.86	389.76	394.71	399.98	402.61	405.25	407.88	410.52	415.79	421.06	428.97	436.55	447.09	460.27	475.75	494.21	514.96	538.68	562.08	588.43	614.46	643.13	672.12	703.42	734.72	768.65	802.92	839.49	857.61	894.18	925.81	946.57	972.60	988.41
Anthem Blue Cross	Select PPO	PPO B	247.48	269.48	277.89	286.30	295.36	304.41	313.80	323.50	323.50	323.50	323.50	324.79	331.26	339.03	351.64	362.00	367.17	374.94	382.70	387.55	392.73	395.32	397.91	400.49	403.08	408.26	413.43	421.20	428.64	438.99	451.93	467.13	485.25	505.63	528.92	551.89	577.77	603.33	631.47	659.94	690.67	721.41	754.73	788.37	824.28	842.07	877.98	909.04	929.42	954.97	970.50
Anthem Blue Cross	Prudent Buyer - Small Group	EPO A	250.75	273.04	281.56	290.09	299.26	308.44	317.95	327.78	327.78	327.78	327.78	329.09	335.65	343.51	356.30	366.79	372.03	379.90	387.76	392.68	397.92	400.55	403.17	405.79	408.41	413.66	418.90	426.77	434.31	444.80	457.91	473.31	491.67	512.32	535.92	559.19	585.42	611.31	639.83	668.67	699.81	730.95	764.71	798.80	835.18	853.21	889.59	921.06	941.71	967.61	983.34
Health Net	CommunityCare	HMO A	216.73	236.00	243.36	250.73	258.66	266.59	274.81	283.31	283.31	283.31	283.31	284.44	290.11	296.91	307.96	317.02	321.55	328.35	335.15	339.40	343.94	346.20	348.47	350.74	353.00	357.53	362.07	368.87	375.38	384.45	395.78	409.10	424.96	442.81	463.21	483.32	505.99	528.37	553.02	577.95	604.86	631.78	660.96	690.42	721.87	737.45	768.90	796.10	813.94	836.33	849.93
Kaiser Permanente	Full	HMO A	201.62	218.30	224.68	231.06	237.92	230.80	237.91	245.27	245.27	245.27	245.27	246.25	251.16	257.05	266.61	274.46	278.38	284.27	290.16	293.84	297.76	299.72	301.68	303.65	305.61	309.53	313.46	319.34	324.99	332.83	342.65	354.17	367.91	383.36	401.02	418.43	438.06	457.43	478.77	500.36	523.66	546.96	572.22	597.73	624.95	638.44	665.67	689.21	704.67	724.04	735.81
Kaiser Permanente	Full	HMO C	190.88	206.60	212.62	218.63	225.10	217.59	224.29	231.23	231.23	231.23	231.23	232.15	236.78	242.33	251.35	258.75	262.45	268.00	273.54	277.01	280.71	282.56	284.41	286.26	288.11	291.81	295.51	301.06	306.38	313.78	323.03	333.90	346.84	361.41	378.06	394.48	412.98	431.24	451.36	471.71	493.68	515.64	539.46	563.51	589.17	601.89	627.56	649.76	664.32	682.59	693.69
Oscar	Oscar EPO	EPO A	187.26	203.90	210.26	216.63	223.48	230.34	237.44	244.78	244.78	244.78	244.78	245.76	250.65	256.53	266.07	273.91	277.82	283.70	289.57	293.24	297.16	299.12	301.08	303.04	304.99	308.91	312.83	318.70	324.33	332.16	341.96	353.46	367.17	382.59	400.21	417.59	437.17	456.51	477.81	499.35	522.60	545.86	571.07	596.52	623.70	637.16	664.33	687.83	703.25	722.59	734.34
Oscar	Oscar EPO	EPO B	177.79	193.60	199.64	205.68	212.19	218.70	225.44	232.41	232.41	232.41	232.41	233.34	237.99	243.57	252.63	260.07	263.79	269.36	274.94	278.43	282.15	284.01	285.87	287.72	289.58	293.30	297.02	302.60	307.94	315.38	324.68	335.60	348.62	363.26	379.99	396.49	415.09	433.45	453.67	474.12	496.20	518.28	542.21	566.38	592.18	604.97	630.76	653.07	667.72	686.08	697.23
Oscar	Oscar EPO	EPO C	178.81	194.71	200.78	206.86	213.40	219.95	226.73	233.74	233.74	233.74	233.74	234.68	239.35	244.96	254.08	261.56	265.30	270.91	276.51	280.02	283.76	285.63	287.50	289.37	291.24	294.98	298.72	304.33	309.71	317.19	326.54	337.52	350.61	365.34	382.17	398.76	417.46	435.93	456.26	476.83	499.04	521.24	545.32	569.63	595.57	608.43	634.37	656.81	671.54	690.00	701.22
Sharp Health Plan	Premier	HMO A	172.72	188.07	193.95	199.82	206.14	212.46	219.01	225.78	225.78	225.78	225.78	226.68	231.20	236.62	245.42	252.65	256.26	261.68	267.10	270.48	274.10	275.90	277.71	279.52	281.32	284.93	288.55	293.97	299.16	306.38	315.41	326.03	338.67	352.89	369.15	385.18	403.24	421.08	440.72	460.59	482.04	503.49	526.74	550.23	575.29	587.71	612.77	634.44	648.67	666.50	677.34
Sharp Health Plan	Performance	HMO B	197.55	215.11	221.83	228.54	235.77	243.00	250.49	258.24	258.24	258.24	258.24	259.27	264.44	270.64	280.71	288.97	293.10	299.30	305.50	309.37	313.50	315.57	317.64	319.70	321.77	325.90	330.03	336.23	342.17	350.43	360.76	372.90	387.36	403.63	422.22	440.56	461.22	481.62	504.08	526.81	551.34	575.88	602.47	629.33	658.00	672.20	700.86	725.65	741.92	762.32	774.72
UnitedHealthcare	Alliance	HMO A	183.68	200.00	206.25	212.49	219.21	225.93	232.90	240.10	240.10	240.10	240.10	241.06	245.86	251.62	260.99	268.67	272.51	278.28	284.04	287.64	291.48	293.40	295.32	297.24	299.16	303.01	306.85	312.61	318.13	325.82	335.42	346.70	360.15	375.28	392.56	409.61	428.82	447.79	468.68	489.80	512.61	535.42	560.15	585.12	611.77	624.98	651.63	674.68	689.81	708.78	720.30
UnitedHealthcare	Alliance	HMO B	192.16	209.24	215.77	222.30	229.34	236.37	243.65	251.19	251.19	251.19	251.19	252.19	257.22	263.25	273.04	281.08	285.10	291.13	297.16	300.93	304.94	306.95	308.96	310.97	312.98	317.00	321.02	327.05	332.83	340.86	350.91	362.72	376.79	392.61	410.70	428.53	448.63	468.47	490.32	512.43	536.29	560.15	586.03	612.15	640.03	653.85	681.73	705.84	721.67	741.51	753.57
Western Health	Full	HMO B	196.64	214.11	220.80	227.48	234.68	241.87	249.33	257.04	257.04	257.04	257.04	258.07	263.21	269.38	279.40	287.63	291.74	297.91	304.08	307.93	312.05	314.10	316.16	318.21	320.27	324.38	328.50	334.67	340.58	348.80	359.08	371.16	385.56	401.75	420.26	438.51	459.07	479.38	501.74	524.36	548.78	573.20	599.67	626.41	654.94	669.07	697.60	722.28	738.47	758.78	771.12
Western Health	Full	HMO C	201.60	219.52	226.37	233.22	240.60	247.98	255.62	263.53	263.53	263.53	263.53	264.58	269.85	276.18	286.45	294.89	299.10	305.43	311.75	315.70	319.92	322.03	324.14	326.25	328.35	332.57	336.79	343.11	349.17	357.61	368.15	380.53	395.29	411.89	430.87	449.58	470.66	491.48	514.40	537.59	562.63	587.66	614.81	642.21	671.47	685.96	715.21	740.51	757.11	777.93	790.58

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	227.23	247.43	255.15	262.87	271.19	279.51	288.12	297.03	297.03	297.03	297.03	298.22	304.16	311.29	322.87	332.38	337.13	344.26	351.39	355.84	360.59	362.97	365.35	367.72	370.10	374.85	379.60	386.73	393.56	403.07	414.95	428.91	445.55	464.26	485.64	506.73	530.50	553.96	579.80	605.94	634.16	662.38	692.97	723.86	756.83	773.17	806.14	834.65	853.37	876.83	891.09
Anthem Blue Cross	CaliforniaCare HMO	HMO B	267.48	291.26	300.35	309.44	319.23	329.02	339.16	349.65	349.65	349.65	349.65	351.05	358.04	366.43	380.07	391.26	396.85	405.24	413.64	418.88	424.48	427.27	430.07	432.87	435.66	441.26	446.85	455.24	463.29	474.48	488.46	504.89	524.48	546.50	571.68	596.50	624.47	652.10	682.52	713.29	746.50	779.72	815.73	852.10	890.91	910.14	948.95	982.52	1004.54	1032.17	1048.95
Anthem Blue Cross	Advantage PPO	PPO A	291.16	317.04	326.94	336.83	347.49	358.14	369.18	380.60	380.60	380.60	380.60	382.12	389.73	398.87	413.71	425.89	431.98	441.12	450.25	455.96	462.05	465.09	468.14	471.18	474.23	480.32	486.41	495.54	504.30	516.47	531.70	549.59	570.90	594.88	622.28	649.30	679.75	709.82	742.93	776.42	812.58	848.74	887.94	927.52	969.77	990.70	1032.95	1069.49	1093.46	1123.53	1141.80
Anthem Blue Cross	Select PPO	PPO B	279.46	304.30	313.80	323.30	333.53	343.76	354.35	365.31	365.31	365.31	365.31	366.77	374.08	382.84	397.09	408.78	414.63	423.39	432.16	437.64	443.49	446.41	449.33	452.25	455.18	461.02	466.87	475.63	484.04	495.73	510.34	527.51	547.97	570.98	597.28	623.22	652.44	681.30	713.09	745.23	779.94	814.64	852.27	890.26	930.81	950.90	991.45	1026.52	1049.54	1078.40	1095.93
Anthem Blue Cross	Prudent Buyer - Small Group	PPO C	284.65	309.95	319.63	329.30	339.72	350.14	360.93	372.09	372.09	372.09	372.09	373.58	381.02	389.95	404.46	416.37	422.32	431.25	440.18	445.76	451.72	454.69	457.67	460.65	463.62	469.58	475.53	484.46	493.02	504.93	519.81	537.30	558.14	581.58	608.37	634.79	664.55	693.95	726.32	759.06	794.41	829.76	868.09	906.78	948.09	968.55	1009.85	1045.57	1069.01	1098.41	1116.27
Anthem Blue Cross	Prudent Buyer - Small Group	EPO A	281.69	306.73	316.30	325.87	336.18	346.50	357.17	368.22	368.22	368.22	368.22	369.69	377.06	385.89	400.26	412.04	417.93	426.77	435.60	441.13	447.02	449.96	452.91	455.86	458.80	464.69	470.59	479.42	487.89	499.67	514.40	531.71	552.33	575.53	602.04	628.18	657.64	686.73	718.77	751.17	786.15	821.13	859.06	897.35	938.22	958.48	999.35	1034.70	1057.90	1086.99	1104.66
Anthem Blue Cross	Prudent Buyer - Small Group	EPO B	282.09	307.16	316.75	326.33	336.66	346.98	357.68	368.74	368.74	368.74	368.74	370.21	377.59	386.44	400.82	412.62	418.52	427.37	436.22	441.75	447.65	450.60	453.55	456.50	459.45	465.35	471.25	480.10	488.58	500.38	515.13	532.46	553.11	576.34	602.89	629.07	658.57	687.70	719.78	752.23	787.26	822.29	860.27	898.62	939.55	959.83	1000.76	1036.16	1059.39	1088.52	1106.22
Health Net	WholeCare	HMO A	347.55	378.45	390.26	402.07	414.79	427.51	440.69	454.32	454.32	454.32	454.32	456.14	465.22	476.13	493.84	508.38	515.65	526.56	537.46	544.27	551.54	555.18	558.81	562.45	566.08	573.35	580.62	591.52	601.97	616.51	634.68	656.04	681.48	710.10	742.81	775.07	811.41	847.31	886.83	926.81	969.97	1013.13	1059.93	1107.18	1157.60	1182.59	1233.02	1276.64	1305.26	1341.15	1362.96
Health Net	CommunityCare	HMO C	244.42	266.15	274.46	282.76	291.71	300.65	309.92	319.51	319.51	319.51	319.51	320.78	327.17	334.84	347.30	357.53	362.64	370.31	377.98	382.77	387.88	390.44	392.99	395.55	398.10	403.22	408.33	416.00	423.35	433.57	446.35	461.37	479.26	499.39	522.39	545.08	570.64	595.88	623.68	651.79	682.14	712.50	745.41	778.64	814.10	831.67	867.14	897.81	917.94	943.18	958.53
Kaiser Permanente	Full	HMO A	232.27	251.67	259.09	266.51	274.50	268.50	276.77	285.33	285.33	285.33	285.33	286.47	292.18	299.03	310.16	319.29	323.85	330.70	337.55	341.83	346.39	348.68	350.96	353.24	355.52	360.09	364.65	371.50	378.07	387.20	398.61	412.02	428.00	445.97	466.52	486.78	509.60	532.14	556.97	582.08	609.18	636.29	665.68	695.36	727.03	742.72	774.39	801.78	819.76	842.30	855.99
Kaiser Permanente	Full	HMO B	236.13	255.88	263.43	270.98	279.11	273.25	281.67	290.38	290.38	290.38	290.38	291.54	297.35	304.32	315.65	324.94	329.58	336.55	343.52	347.88	352.52	354.85	357.17	359.49	361.82	366.46	371.11	378.08	384.76	394.05	405.66	419.31	435.57	453.87	474.78	495.39	518.62	541.56	566.83	592.38	619.97	647.55	677.46	707.66	739.89	755.87	788.10	815.97	834.27	857.21	871.14
Kaiser Permanente	Full	HMO C	243.54	263.94	271.74	279.54	287.95	282.36	291.06	300.06	300.06	300.06	300.06	301.26	307.26	314.47	326.17	335.77	340.57	347.77	354.97	359.47	364.28	366.68	369.08	371.48	373.88	378.68	383.48	390.68	397.58	407.18	419.19	433.29	450.09	469.00	490.60	511.91	535.91	559.62	585.72	612.13	640.63	669.14	700.04	731.25	764.56	781.06	814.37	843.17	862.08	885.78	900.18
Kaiser Permanente	Full	HMO D	219.06	237.29	244.26	251.23	258.74	252.25	260.03	268.07	268.07	268.07	268.07	269.14	274.50	280.94	291.39	299.97	304.26	310.69	317.13	321.15	325.44	327.58	329.73	331.87	334.02	338.31	342.59	349.03	355.19	363.77	374.49	387.09	402.11	418.99	438.30	457.33	478.77	499.95	523.27	546.86	572.33	597.80	625.41	653.29	683.04	697.79	727.54	753.28	770.17	791.34	804.21
Oscar	Oscar EPO	EPO A	214.28	233.32	240.61	247.89	255.73	263.57	271.70	280.10	280.10	280.10	280.10	281.22	286.82	293.55	304.47	313.43	317.91	324.64	331.36	335.56	340.04	342.28	344.52	346.76	349.00	353.49	357.97	364.69	371.13	380.10	391.30	404.46	420.15	437.80	457.96	477.85	500.26	522.39	546.76	571.40	598.01	624.62	653.47	682.60	713.70	729.10	760.19	787.08	804.73	826.86	840.30
Oscar	Oscar EPO	EPO B	241.22	262.66	270.86	279.06	287.88	296.71	305.86	315.32	315.32	315.32	315.32	316.58	322.88	330.46	342.75	352.84	357.88	365.45	373.02	377.75	382.79	385.32	387.84	390.36	392.88	397.93	402.97	410.54	417.79	427.89	440.50	455.32	472.98	492.84	515.54	537.93	563.16	588.07	615.50	643.25	673.20	703.16	735.63	768.43	803.43	820.77	855.77	886.04	905.91	930.82	945.95
Oscar	Oscar EPO	EPO C	214.01	233.03	240.31	247.58	255.41	263.25	271.36	279.75	279.75	279.75	279.75	280.87	286.47	293.18	304.09	313.04	317.52	324.23	330.95	335.14	339.62	341.86	344.10	346.33	348.57	353.05	357.52	364.24	370.67	379.62	390.82	403.96	419.63	437.25	457.40	477.26	499.64	521.74	546.08	570.70	597.27	623.85	652.66	681.76	712.81	728.20	759.25	786.11	803.73	825.83	839.25
Oscar	Oscar EPO	EPO D	240.70	262.09	270.27	278.46	287.27	296.08	305.20	314.64	314.64	314.64	314.64	315.90	322.19	329.74	342.01	352.08	357.12	364.67	372.22	376.94	381.97	384.49	387.01	389.52	392.04	397.07	402.11	409.66	416.90	426.97	439.55	454.34	471.96	491.78	514.43	536.77	561.95	586.80	614.18	641.86	671.75	701.64	734.05	766.78	801.70	819.01	853.93	884.14	903.96	928.81	943.92
Sharp Health Plan	Premier	HMO A	202.89	220.92	227.82	234.71	242.14	249.56	257.25	265.21	265.21	265.21	265.21	266.27	271.58	277.94	288.28	296.77	301.01	307.38	313.74	317.72	321.96	324.09	326.21	328.33	330.45	334.70	338.94	345.30	351.40	359.89	370.50	382.96	397.82	414.52	433.62	452.45	473.67	494.62	517.69	541.03	566.22	591.42	618.73	646.32	675.76	690.34	719.78	745.24	761.95	782.90	795.63
Sharp Health Plan	Performance	HMO B	215.29	234.42	241.74	249.06	256.94	264.82	272.98	281.42	281.42	281.42	281.42	282.55	288.17	294.93	305.90	314.91	319.41	326.17	332.92	337.14	341.64	343.90	346.15	348.40	350.65	355.15	359.65	366.41	372.88	381.89	393.14	406.37	422.13	439.86	460.12	480.10	502.62	524.85	549.33	574.10	600.83	627.57	656.55	685.82	717.06	732.54	763.77	790.79	808.52	830.75	844.26
Sharp Health Plan	Premier	HMO C	197.90	215.49	222.21	228.94	236.18	243.43	250.93	258.69	258.69	258.69	258.69	259.72	264.90	271.11	281.20	289.47	293.61	299.82	306.03	309.91	314.05	316.12	318.19	320.26	322.33	326.47	330.61	336.81	342.76	351.04	361.39	373.55	388.04	404.33	422.96	441.33	462.02	482.46	504.96	527.73	552.30	576.88	603.52	630.43	659.14	673.37	702.08	726.92	743.22	763.65	776.07
UnitedHealthcare	SignatureValue	HMO A	260.93	284.12	292.99	301.86	311.41	320.96	330.85	341.08	341.08	341.08	341.08	342.44	349.27	357.45	370.75	381.67	387.13	395.31	403.50	408.61	414.07	416.80	419.53	422.26	424.99	430.44	435.90	444.09	451.93	462.85	476.49	492.52	511.62	533.11	557.67	581.88	609.17	636.11	665.79	695.80	728.21	760.61	795.74	831.21	869.07	887.83	925.69	958.43	979.92	1006.87	1023.24
UnitedHealthcare	Advantage	HMO B	237.49	258.60	266.68	274.75	283.44	292.13	301.14	310.45	310.45	310.45	310.45	311.69	317.90	325.35	337.46	347.39	352.36	359.81	367.26	371.92	376.89	379.37	381.85	384.34	386.82	391.79	396.76	404.21	411.35	421.28	433.70	448.29	465.68	485.23	507.59	529.63	554.46	578.99	606.00	633.32	662.81	692.30	724.28	756.57	791.03	808.10	842.56	872.36	891.92	916.45	931.35
UnitedHealthcare	Alliance	HMO C	205.02	223.24	230.21	237.18	244.68	252.19	259.96	268.00	268.00	268.00	268.00	269.07	274.43	280.86	291.32	299.89	304.18	310.61	317.04	321.06	325.35	327.50	329.64	331.78	333.93	338.22	342.50	348.94	355.10	363.68	374.40	386.99	402.00	418.88	438.18	457.21	478.65	499.82	523.14	546.72	572.18	597.64	625.24	653.12	682.86	697.50	727.35	753.08	769.96	791.14	804.00
UnitedHealthcare	Focus	HMO D	246.22	268.10	276.47	284.84	293.85	302.86	312.19	321.85	321.85	321.85	321.85	323.14	329.57	337.30	349.85	360.15	365.30	373.02	380.75	385.58	390.73	393.30	395.88	398.45	401.03	406.17	411.32	419.05	426.45	436.75	449.62	464.75	482.78	503.05	526.22	549.08	574.82	600.25	628.25	656.57	687.15	717.73	750.88	784.35	820.07	837.78	873.50	904.40	924.68	950.10	965.55
Western Health	Full	HMO A	221.05	240.70	248.21	255.73	263.82	271.91	280.29	288.96	288.96	288.96	288.96	290.11	295.89	302.83	314.10	323.34	327.97	334.90	341.83	346.17	350.79	353.10	355.42	357.73	360.04	364.66	369.29	376.22	382.87	392.11	403.67	417.25	433.43	451.64	472.44	492.96	516.08	538.90	564.04	589.47	616.92	644.37	674.13	704.19	736.26	752.15	784.23	811.97	830.17	853.00	866.87
Western Health	Full	HMO B	232.10	252.74	260.62	268.51	277.01	285.50	294.30	303.40	303.40	303.40	303.40	304.62	310.69	317.97	329.80	339.51	344.36	351.65	358.93	363.48	368.33	370.76	373.19	375.61	378.04	382.90	387.75	395.03	402.01	411.72	423.86	438.12	455.11	474.22	496.07	517.61	541.88	565.85	592.24	618.94	647.77	676.59	707.84	739.40	773.07	789.76	823.44	852.56	871.68	895.65	910.21
Western Health	Full	HMO C	216.67	235.93	243.30	250.66	258.59	266.52	274.74	283.23	283.23	283.23	283.23	284.36	290.03	296.83	307.87	316.94	321.47	328.27	335.06	339.31	343.84	346.11	348.38	350.64	352.91	357.44	361.97	368.77	375.28	384.35	395.68	408.99	424.85	442.69	463.08	483.19	505.85	528.23	552.87	577.79	604.70	631.61	660.78	690.24	721.68	737.25	768.69	795.88	813.73	836.10	849.70

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	283.94	309.18	318.83	328.48	338.87	349.26	360.03	371.16	371.16	371.16	371.16	372.64	380.07	388.98	403.45	415.33	421.27	430.17	439.08	444.65	450.59	453.56	456.53	459.50	462.47	468.40	474.34	483.25	491.79	503.66	518.51	535.96	556.74	580.12	606.85	633.20	662.89	692.21	724.50	757.17	792.43	827.69	865.92	904.52	945.72	966.13	1007.33	1042.96	1066.34	1095.66	1113.48
Anthem Blue Cross	CaliforniaCare HMO	HMO B	334.26	363.97	375.33	386.69	398.93	411.16	423.83	436.94	436.94	436.94	436.94	438.69	447.43	457.91	474.95	488.94	495.93	506.41	516.90	523.45	530.45	533.94	537.44	540.93	544.43	551.42	558.41	568.90	578.95	592.93	610.41	630.94	655.41	682.94	714.40	745.42	780.37	814.89	852.91	891.36	932.87	974.38	1019.38	1064.82	1113.32	1137.35	1185.86	1227.80	1255.33	1289.85	1310.82
Anthem Blue Cross	Advantage PPO	PPO A	350.07	381.19	393.09	404.98	417.80	430.61	443.88	457.61	457.61	457.61	457.61	459.44	468.59	479.58	497.42	512.07	519.39	530.37	541.35	548.22	555.54	559.20	562.86	566.52	570.18	577.50	584.83	595.81	606.33	620.98	639.28	660.79	686.42	715.24	748.19	780.68	817.29	853.44	893.25

USE EMPLOYER ZIP CODE FOR RATING

AREA 12 - Continued

10/01/20 - 12/01/20

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	325.22	354.12	365.18	376.23	388.13	400.04	412.37	425.12	425.12	425.12	425.12	426.82	435.32	445.53	462.11	475.71	482.51	492.71	502.92	509.29	516.10	519.50	522.90	526.30	529.70	536.50	543.30	553.51	563.28	576.89	593.89	613.87	637.68	664.46	695.07	725.25	759.26	792.85	829.83	867.24	907.63	948.02	991.80	1036.02	1083.21	1106.59	1153.78	1194.59	1221.37	1254.95	1275.36
Health Net	WholeCare	HMO C	397.31	432.62	446.13	459.63	474.17	488.72	503.78	519.36	519.36	519.36	519.36	521.43	531.82	544.29	564.54	581.16	589.47	601.94	614.40	622.19	630.50	634.65	638.81	642.96	647.12	655.43	663.74	676.20	688.15	704.77	725.54	749.95	779.04	811.76	849.15	886.02	927.57	968.60	1013.79	1059.49	1108.83	1158.17	1211.66	1265.67	1323.32	1351.89	1409.54	1459.39	1492.11	1533.14	1558.08
Health Net	Salud HMO y Mas	HMO D	273.62	297.94	307.24	316.54	326.55	336.57	346.94	357.67	357.67	357.67	357.67	359.10	366.25	374.84	388.79	400.23	405.95	414.54	423.12	428.49	434.21	437.07	439.93	442.79	445.65	451.38	457.10	465.68	473.91	485.36	499.66	516.47	536.50	559.04	584.79	610.18	638.80	667.05	698.17	729.64	763.62	797.60	834.44	871.64	911.34	931.01	970.71	1005.05	1027.58	1055.84	1073.01
Health Net	Full	HMO E	399.22	434.70	448.27	461.84	476.45	491.06	506.20	521.85	521.85	521.85	521.85	523.94	534.38	546.90	567.25	583.95	592.30	604.83	617.35	625.18	633.53	637.70	641.88	646.05	650.23	658.58	666.93	679.45	691.46	708.15	729.03	753.56	782.78	815.66	853.23	890.28	932.03	973.26	1018.66	1064.58	1114.16	1163.73	1217.48	1271.76	1329.68	1358.38	1416.31	1466.41	1499.28	1540.51	1565.55
Kaiser Permanente	Full	HMO A	322.11	349.50	359.97	370.44	381.72	379.01	390.69	402.77	402.77	402.77	402.77	404.38	412.44	422.10	437.81	450.70	457.14	466.81	476.48	482.52	488.96	492.19	495.41	498.63	501.85	508.30	514.74	524.41	533.67	546.56	562.67	581.60	604.16	629.53	658.53	687.13	719.35	751.17	786.21	821.65	859.91	898.18	939.66	981.55	1026.26	1048.41	1093.12	1131.78	1157.16	1188.98	1208.31
Kaiser Permanente	Full	HMO B	318.87	345.97	356.34	366.70	377.86	375.03	386.58	398.54	398.54	398.54	398.54	400.13	408.10	417.67	433.21	445.97	452.34	461.91	471.47	477.45	483.83	487.02	490.20	493.39	496.58	502.96	509.33	518.90	528.07	540.82	556.76	575.49	597.81	622.92	651.61	679.91	711.79	743.28	777.95	813.02	850.88	888.74	929.79	971.24	1015.48	1037.40	1081.64	1119.90	1145.00	1176.49	1195.62
Oscar	Oscar EPO	EPO A	295.58	321.86	331.90	341.95	352.77	363.59	374.79	386.38	386.38	386.38	386.38	387.93	395.66	404.93	420.00	432.36	438.54	447.82	457.09	462.89	469.07	472.16	475.25	478.34	481.43	487.61	493.80	503.07	511.96	524.32	539.78	557.94	579.57	603.91	631.73	659.17	690.08	720.60	754.22	788.22	824.93	861.63	901.43	941.61	984.50	1005.75	1048.64	1085.73	1110.08	1140.60	1159.14
Oscar	Oscar EPO	EPO B	290.38	316.19	326.06	335.93	346.56	357.19	368.19	379.58	379.58	379.58	379.58	381.10	388.69	397.80	412.61	424.75	430.83	439.94	449.05	454.74	460.81	463.85	466.89	469.92	472.96	479.03	485.11	494.22	502.95	515.09	530.28	548.12	569.37	593.29	620.62	647.57	677.93	707.92	740.94	774.35	810.41	846.47	885.57	925.04	967.18	988.05	1030.19	1066.63	1090.54	1120.53	1138.74
Sharp Health Plan	Premier	HMO A	282.90	308.04	317.66	327.27	337.63	347.98	358.71	369.80	369.80	369.80	369.80	371.28	378.68	387.55	401.97	413.81	419.72	428.60	437.47	443.02	448.94	451.90	454.85	457.81	460.77	466.69	472.60	481.48	489.99	501.82	516.61	533.99	554.70	578.00	604.62	630.88	660.46	689.68	721.85	754.39	789.52	824.65	862.74	901.20	942.25	962.59	1003.64	1039.14	1062.44	1091.65	1109.40
Sharp Health Plan	Performance	HMO B	304.75	331.84	342.20	352.56	363.71	374.87	386.42	398.37	398.37	398.37	398.37	399.96	407.93	417.49	433.03	445.78	452.15	461.71	471.27	477.25	483.62	486.81	490.00	493.18	496.37	502.74	509.12	518.68	527.84	540.59	556.52	575.25	597.56	622.65	651.33	679.62	711.49	742.96	777.62	812.67	850.52	888.37	929.40	970.83	1015.05	1036.96	1081.18	1119.42	1144.52	1175.99	1195.11
Sharp Health Plan	Premier	HMO C	278.90	303.70	313.17	322.65	332.86	343.07	353.64	364.58	364.58	364.58	364.58	366.04	373.33	382.08	396.30	407.97	413.80	422.55	431.30	436.77	442.60	445.52	448.43	451.35	454.27	460.10	465.93	474.68	483.07	494.74	509.32	526.45	546.87	569.84	596.09	621.97	651.14	679.94	711.66	743.74	778.38	813.01	850.57	888.48	928.95	949.00	989.47	1024.47	1047.44	1076.24	1093.74
UnitedHealthcare	SignatureValue	HMO A	345.46	376.17	387.91	399.65	412.29	424.94	438.03	451.58	451.58	451.58	451.58	453.39	462.42	473.26	490.87	505.32	512.54	523.38	534.22	540.99	548.22	551.83	555.44	559.06	562.67	569.89	577.12	587.96	598.34	612.79	630.86	652.08	677.37	705.82	738.33	770.40	806.52	842.20	881.48	921.22	964.12	1007.02	1053.54	1100.50	1150.63	1175.46	1225.59	1268.94	1297.39	1333.06	1354.74
UnitedHealthcare	Focus	HMO B	325.98	354.96	366.04	377.12	389.05	400.98	413.34	426.12	426.12	426.12	426.12	427.82	436.35	446.57	463.19	476.83	483.65	493.87	504.10	510.49	517.31	520.72	524.13	527.54	530.95	537.76	544.58	554.81	564.61	578.24	595.29	615.32	639.18	666.03	696.71	726.96	761.05	794.71	831.79	869.28	909.77	950.25	994.14	1038.45	1085.75	1109.19	1156.49	1197.40	1224.24	1257.91	1278.36
UnitedHealthcare	Alliance	HMO C	299.86	326.51	336.70	346.89	357.87	368.84	380.21	391.97	391.97	391.97	391.97	393.54	401.38	410.78	426.07	438.61	444.89	454.29	463.70	469.58	475.85	478.99	482.12	485.26	488.39	494.67	500.94	510.34	519.36	531.90	547.58	566.00	587.96	612.65	640.87	668.70	700.06	731.02	765.13	799.62	836.86	874.09	914.47	955.23	998.74	1020.30	1063.81	1101.44	1126.13	1157.10	1175.91
Western Health	Full	HMO A	290.72	316.56	326.44	336.32	346.96	357.60	368.62	380.02	380.02	380.02	380.02	381.54	389.14	398.26	413.08	425.24	431.32	440.44	449.56	455.26	461.35	464.39	467.43	470.47	473.51	479.59	485.67	494.79	503.53	515.69	530.89	548.75	570.03	593.97	621.33	648.32	678.72	708.74	741.80	775.24	811.34	847.45	886.59	926.11	968.29	989.19	1031.38	1067.86	1091.80	1121.82	1140.06
Western Health	Full	HMO B	298.09	324.59	334.72	344.85	355.77	366.68	377.98	389.67	389.67	389.67	389.67	391.23	399.02	408.37	423.57	436.04	442.27	451.62	460.98	466.82	473.06	476.17	479.29	482.41	485.52	491.76	497.99	507.35	516.31	528.78	544.36	562.68	584.50	609.05	637.10	664.77	695.94	726.73	760.63	794.92	831.94	868.96	909.09	949.62	992.87	1014.30	1057.56	1094.96	1119.51	1150.30	1169.00

Health Care Service Plan rates will vary by county

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USE EMPLOYER ZIP CODE FOR RATING

AREA 13

10/01/20 - 12/01/20

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	261.55	284.79	293.68	302.57	312.15	321.72	331.63	341.89	341.89	341.89	341.89	343.26	350.10	358.30	371.63	382.57	388.05	396.25	404.46	409.58	415.05	417.79	420.52	423.26	425.99	431.47	436.94	445.14	453.00	463.94	477.62	493.69	512.84	534.37	558.99	583.26	610.62	637.62	667.37	697.46	729.94	762.41	797.63	833.19	871.14	889.94	927.89	960.71	982.25	1009.26	1025.67
Anthem Blue Cross	Select PPO	PPO B	247.84	269.88	278.30	286.72	295.79	304.87	314.26	323.98	323.98	323.98	323.98	325.28	331.76	339.53	352.17	362.53	367.72	375.49	383.27	388.13	393.31	395.90	398.50	401.09	403.68	408.86	414.05	421.82	429.27	439.64	452.60	467.83	485.97	506.38	529.71	552.71	578.63	604.22	632.41	660.92	691.70	722.48	755.85	789.54	825.50	843.32	879.28	910.38	930.79	956.39	971.94
Anthem Blue Cross	Prudent Buyer - Small Group	EPO A	260.18	283.31	292.15	301.00	310.52	320.04	329.91	340.11	340.11	340.11	340.11	341.47	348.27	356.44	369.70	380.58	386.02	394.19	402.35	407.45	412.89	415.61	418.34	421.06	423.78	429.22	434.66	442.82	450.65	461.53	475.13	491.12	510.17	531.59	556.08	580.23	607.44	634.31	663.89	693.82	726.13	758.45	793.48	828.85	866.60	885.31	923.06	955.71	977.14	1004.00	1020.33
Health Net	CommunityCare	HMO A	216.73	236.00	243.36	250.73	258.66	266.59	274.81	283.31	283.31	283.31	283.31	284.44	290.11	296.91	307.96	317.02	321.55	328.35	335.15	339.40	343.94	346.20	348.47	350.74	353.00	357.53	362.07	368.87	375.38	384.45	395.78	409.10	424.96	442.81	463.21	483.32	505.99	528.37	553.02	577.95	604.86	631.78	660.96	690.42	721.87	737.45	768.90	796.10	813.94	836.33	849.93
Kaiser Permanente	Full	HMO A	192.24	208.09	214.14	220.20	226.73	219.26	226.02	233.01	233.01	233.01	233.01	233.94	238.60	244.19	253.28	260.74	264.46	270.06	275.65	279.14	282.87	284.74	286.60	288.46	290.33	294.06	297.78	303.38	308.74	316.19	325.51	336.46	349.51	364.19	380.97	397.51	416.15	434.56	454.83	475.34	497.47	519.61	543.61	567.84	593.71	606.52	632.39	654.75	669.43	687.84	699.03
Kaiser Permanente	Full	HMO C	182.04	196.97	202.68	208.40	214.55	206.71	213.08	219.67	219.67	219.67	219.67	220.55	224.94	230.21	238.78	245.81	249.32	254.60	259.87	263.16	266.68	268.43	270.19	271.95	273.71	277.22	280.74	286.01	291.06	298.09	306.88	317.20	329.50	343.34	359.16	374.75	392.33	409.68	428.79	448.12	468.99	489.86	512.49	535.33	559.71	571.80	596.18	617.27	631.11	648.46	659.01
Oscar	Oscar EPO	EPO A	193.25	210.43	216.99	223.56	230.63	237.71	245.03	252.61	252.61	252.61	252.61	253.62	258.67	264.74	274.59	282.67	286.71	292.78	298.84	302.63	306.67	308.69	310.71	312.73	314.75	318.80	322.84	328.90	334.71	342.79	352.90	364.77	378.92	394.83	413.02	430.95	451.16	471.12	493.10	515.33	539.33	563.32	589.34	615.61	643.65	657.55	685.59	709.84	725.75	745.71	757.83
Oscar	Oscar EPO	EPO B	183.48	199.79	206.03	212.27	218.98	225.70	232.65	239.85	239.85	239.85	239.85	240.81	245.60	251.36	260.71	268.39	272.23	277.98	283.74	287.34	291.18	293.09	295.01	296.93	298.85	302.69	306.53	312.28	317.80	325.47	335.07	346.34	359.77	374.88	392.15	409.18	428.37	447.32	468.18	489.29	512.08	534.86	559.57	584.51	611.13	624.32	650.95	673.97	689.08	708.03	719.54
Oscar	Oscar EPO	EPO C	184.53	200.94	207.21	213.48	220.23	226.99	233.98	241.22	241.22	241.22	241.22	242.18	247.01	252.80	262.21	269.93	273.78	279.57	285.36	288.98	292.84	294.77	296.70	298.63	300.56	304.42	308.28	314.07	319.62	327.34	336.98	348.32	361.83	377.03	394.39	411.52	430.82	449.88	470.86	492.09	515.00	537.92	562.77	587.85	614.63	627.90	654.67	677.83	693.03	712.08	723.66
Sharp Health Plan	Premier	HMO A	172.72	188.07	193.95	199.82	206.14	212.46	219.01	225.78	225.78	225.78	225.78	226.68	231.20	236.62	245.42	252.65	256.26	261.68	267.10	270.48	274.10	275.90	277.71	279.52	281.32	284.93	288.55	293.97	299.16	306.38	315.41	326.03	338.67	352.89	369.15	385.18	403.24	421.08	440.72	460.59	482.04	503.49	526.74	550.23	575.29	587.71	612.77	634.44	648.67	666.50	677.34
Sharp Health Plan	Performance	HMO B	197.55	215.11	221.83	228.54	235.77	243.00	250.49	258.24	258.24	258.24	258.24	259.27	264.44	270.64	280.71	288.97	293.10	299.30	305.50	309.37	313.50	315.57	317.64	319.70	321.77	325.90	330.03	336.23	342.17	350.43	360.76	372.90	387.36	403.63	422.22	440.56	461.22	481.62	504.08	526.81	551.34	575.88	602.47	629.33	658.00	672.20	700.86	725.65	741.92	762.32	774.72
Western Health	Full	HMO B	196.64	214.11	220.80	227.48	234.68	241.87	249.33	257.04	257.04	257.04	257.04	258.07	263.21	269.38	279.40	287.63	291.74	297.91	304.08	307.93	312.05	314.10	316.16	318.21	320.27	324.38	328.50	334.67	340.58	348.80	359.08	371.16	385.56	401.75	420.26	438.51	459.07	479.38	501.74	524.36	548.78	573.20	599.67	626.41	654.94	669.07	697.60	722.28	738.47	758.78	771.12
Western Health	Full	HMO C	201.60	219.52	226.37	233.22	240.60	247.98	255.62	263.53	263.53	263.53	263.53	264.58	269.85	276.18	286.45	294.89	299.10	305.43	311.75	315.70	319.92	322.03	324.14	326.25	328.35	332.57	336.79	343.11	349.17	357.61	368.15	380.53	395.29	411.89	430.87	449.58	470.66	491.48	514.40	537.59	562.63	587.66	614.81	642.21	671.47	685.96	715.21	740.51	757.11	777.93	790.58

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	288.57	314.22	324.02	333.83	344.39	354.95	365.89	377.21	377.21	377.21	377.21	378.72	386.26	395.32	410.03	422.10	428.13	437.19	446.24	451.90	457.93	460.95	463.97	466.99	470.00	476.04	482.07	491.13	499.80	511.87	526.96	544.69	565.82	589.58	616.74	643.52	673.70	703.50	736.31	769.51	805.34	841.18	880.03	919.26	961.13	981.88	1023.75	1059.96	1083.72	1113.52	1131.63
Anthem Blue Cross	CaliforniaCare HMO	HMO B	311.72	339.43	350.03	360.62	372.03	383.44	395.26	407.48	407.48	407.48	407.48	409.11	417.26	427.04	442.93	455.97	462.49	472.27	482.05	488.16	494.68	497.94	501.20	504.46	507.72	514.24	520.76	530.54	539.91	552.95	569.25	588.40	611.22	636.89	666.23	695.16	727.76	759.95	795.40	831.26	869.97	908.68	950.65	993.03	1038.26	1060.67	1105.90	1145.02	1170.69	1202.88	1222.44
Anthem Blue Cross	Advantage PPO	PPO A	302.11	328.97	339.24	349.50	360.56	371.62	383.07	394.92	394.92	394.92	394.92	396.50	404.40	413.88	429.28	441.92	448.23	457.71	467.19	473.11	479.43	482.59	485.75	488.91	492.07	498.39	504.71	514.19	523.27	535.91	551.70	570.26	592.38	617.26	645.69	673.73	705.33	736.53	770.88	805.64	843.15	880.67	921.35	962.42	1006.26	1027.98	1071.81	1109.73	1134.61	1165.80	1184.76
Anthem Blue Cross	Select PPO	PPO B	279.88	304.76	314.27	323.79	334.03	344.27	354.88	365.86	365.86	365.86	365.86	367.32	374.64	383.42	397.69	409.40	415.25	424.03	432.81	438.30	444.15	447.08	450.01	452.93	455.86	461.72	467.57	476.35	484.76	496.47	511.11	528.30	548.79	571.84	598.18	624.16	653.43	682.33	714.16	746.35	781.11	815.87	853.55	891.60	932.21	952.33	992.94	1028.07	1051.12	1080.02	1097.58
Anthem Blue Cross	Prudent Buyer - Small Group	PPO C	295.34	321.59	331.63	341.66	352.47	363.28	374.48	386.06	386.06	386.06	386.06	387.60	395.33	404.59	419.65	432.00	438.18	447.44	456.71	462.50	468.68	471.77	474.85	477.94	481.03	487.21	493.38	502.65	511.53	523.88	539.33	557.47	579.09	603.41	631.21	658.62	689.50	720.00	753.59	787.56	824.24	860.91	900.68	940.83	983.68	1004.91	1047.77	1084.83	1109.15	1139.65	1158.18
Anthem Blue Cross	Prudent Buyer - Small Group	EPO A	292.28	318.26	328.19	338.12	348.82	359.52	370.60	382.06	382.06	382.06	382.06	383.59	391.23	400.40	415.30	427.53	433.64	442.81	451.98	457.71	463.82	466.88	469.93	472.99	476.05	482.16	488.27	497.44	506.23	518.46	533.74	551.69	573.09	597.16	624.67	651.79	682.36	712.54	745.78	779.40	815.70	851.99	891.35	931.08	973.49	994.50	1036.91	1073.59	1097.66	1127.84	1146.18
Anthem Blue Cross	Prudent Buyer - Small Group	EPO B	292.71	318.73	328.68	338.63	349.34	360.05	371.15	382.63	382.63	382.63	382.63	384.16	391.81	401.00	415.92	428.16	434.29	443.47	452.65	458.39	464.51	467.57	470.63	473.70	476.76	482.88	489.00	498.18	506.98	519.23	534.53	552.52	573.95	598.05	625.60	652.77	683.38	713.60	746.89	780.57	816.92	853.26	892.68	932.47	974.94	995.99	1038.46	1075.19	1099.30	1129.52	1147.89
Health Net	WholeCare	HMO A	443.21	482.60	497.67	512.73	528.95	545.17	561.98	579.36	579.36	579.36	579.36	581.67	593.26	607.17	629.76	648.30	657.57	671.47	685.38	694.07	703.34	707.97	712.61	717.24	721.88	731.15	740.42	754.32	767.65	786.19	809.36	836.59	869.03	905.53	947.25	988.38	1034.73	1080.50	1130.90	1181.89	1236.93	1291.96	1351.64	1411.89	1476.20	1508.06	1572.37	1627.99	1664.49	1710.26	1738.08
Health Net	CommunityCare	HMO C	244.42	266.15	274.46	282.76	291.71	300.65	309.92	319.51	319.51	319.51	319.51	320.78	327.17	334.84	347.30	357.53	362.64	370.31	377.98	382.77	387.88	390.44	392.99	395.55	398.10	403.22	408.33	416.00	423.35	433.57	446.35	461.37	479.26	499.39	522.39	545.08	570.64	595.88	623.68	651.79	682.14	712.50	745.41	778.64	814.10	831.67	867.14	897.81	917.94	943.18	958.53
Kaiser Permanente	Full	HMO A	221.36	239.79	246.84	253.88	261.47	255.07	262.93	271.07	271.07	271.07	271.07	272.15	277.58	284.08	294.65	303.32	307.66	314.17	320.67	324.74	329.07	331.24	333.41	335.58	337.75	342.09	346.42	352.93	359.16	367.84	378.68	391.42	406.60	423.68	443.19	462.44	484.12	505.54	529.12	552.97	578.73	604.48	632.40	660.59	690.68	705.58	735.67	761.69	778.77	800.19	813.21
Kaiser Permanente	Full	HMO B	225.03	243.78	250.96	258.13	265.85	259.59	267.59	275.86	275.86	275.86	275.86	276.97	282.48	289.10	299.86	308.69	313.10	319.73	326.35	330.48	334.90	337.11	339.31	341.52	343.73	348.14	352.55	359.17	365.52	374.35	385.38	398.35	413.80	431.17	451.04	470.62	492.69	514.49	538.49	562.76	588.97	615.18	643.59	672.28	702.90	718.07	748.69	775.18	792.56	814.35	827.58
Kaiser Permanente	Full	HMO C	232.06	251.44	258.86	266.27	274.25	268.24	276.51	285.06	285.06	285.06	285.06	286.20	291.90	298.74	309.86	318.98	323.54	330.38	337.22	341.50	346.06	348.34	350.62	352.90	355.18	359.74	364.31	371.15	377.70	386.83	398.23	411.63	427.59	445.55	466.07	486.31	509.12	531.64	556.44	581.52	608.60	635.68	665.04	694.69	726.33	742.01	773.65	801.02	818.97	841.49	855.18
Kaiser Permanente	Full	HMO D	208.81	226.13	232.75	239.37	246.50	239.64	247.03	254.67	254.67	254.67	254.67	255.69	260.78	266.89	276.82	284.97	289.05	295.16	301.27	305.09	309.17	311.20	313.24	315.28	317.32	321.39	325.46	331.58	337.43	345.58	355.77	367.74	382.00	398.04	416.38	434.46	454.84	474.95	497.11	519.52	543.71	567.91	594.14	620.62	648.89	662.90	691.17	715.61	731.66	751.78	764.01
Oscar	Oscar EPO	EPO A	221.13	240.79	248.31	255.82	263.91	272.01	280.39	289.06	289.06	289.06	289.06	290.22	296.00	302.94	314.21	323.46	328.09	335.02	341.96	346.30	350.92	353.24	355.55	357.86	360.17	364.80	369.42	376.36	383.01	392.26	403.82	417.41	433.60	451.81	472.62	493.14	516.27	539.10	564.25	589.69	617.15	644.61	674.38	704.45	736.53	752.43	784.52	812.27	830.48	853.32	867.18
Oscar	Oscar EPO	EPO B	248.94	271.06	279.52	287.99	297.10	306.21	315.64	325.41	325.41	325.41	325.41	326.71	333.22	341.03	353.72	364.13	369.34	377.15	384.96	389.84	395.04	397.65	400.25	402.85	405.46	410.66	415.87	423.68	431.16	441.58	454.59	469.89	488.11	508.61	532.04	555.14	581.18	606.88	635.19	663.83	694.74	725.66	759.17	793.02	829.14	847.03	883.15	914.39	934.89	960.60	976.22
Oscar	Oscar EPO	EPO C	220.86	240.49	248.00	255.50	263.59	271.67	280.04	288.71	288.71	288.71	288.71	289.86	295.63	302.56	313.82	323.06	327.68	334.61	341.54	345.87	350.49	352.80	355.11	357.42	359.73	364.35	368.97	375.89	382.53	391.77	403.32	416.89	433.06	451.25	472.03	492.53	515.63	538.44	563.55	588.96	616.39	643.81	673.55	703.57	735.62	751.50	783.55	811.26	829.45	852.26	866.12
Oscar	Oscar EPO	EPO D	248.40	270.48	278.92	287.37	296.46	305.55	314.97	324.71	324.71	324.71	324.71	326.01	332.50	340.29	352.96	363.35	368.54	376.34	384.13	389.00	394.19	396.79	399.39	401.99	404.59	409.78	414.98	422.77	430.24	440.63	453.62	468.88	487.06	507.52	530.90	553.95	579.93	605.58	633.83	662.40	693.25	724.10	757.54	791.31	827.35	845.21	881.26	912.43	932.88	958.54	974.12
Sharp Health Plan	Premier	HMO A	202.89	220.92	227.82	234.71	242.14	249.56	257.25	265.21	265.21	265.21	265.21	266.27	271.58	277.94	288.28	296.77	301.01	307.38	313.74	317.72	321.96	324.09	326.21	328.33	330.45	334.70	338.94	345.30	351.40	359.89	370.50	382.96	397.82	414.52	433.62	452.45	473.67	494.62	517.69	541.03	566.22	591.42	618.73	646.32	675.76	690.34	719.78	745.24	761.95	782.90	795.63
Sharp Health Plan	Performance	HMO B	215.29	234.42	241.74	249.06	256.94	264.82	272.98	281.42	281.42	281.42	281.42	282.55	288.17	294.93	305.90	314.91	319.41	326.17	332.92	337.14	341.64	343.90	346.15	348.40	350.65	355.15	359.65	366.41	372.88	381.89	393.14	406.37	422.13	439.86	460.12	480.10	502.62	524.85	549.33	574.10	600.83	627.57	656.55	685.82	717.06	732.54	763.77	790.79	808.52	830.75	844.26
Sharp Health Plan	Premier	HMO C	197.90	215.49	222.21	228.94	236.18	243.43	250.93	258.69	258.69	258.69	258.69	259.72	264.90	271.11	281.20	289.47	293.61	299.82	306.03	309.91	314.05	316.12	318.19	320.26	322.33	326.47	330.61	336.81	342.76	351.04	361.39	373.55	388.04	404.33	422.96	441.33	462.02	482.46	504.96	527.73	552.30	576.88	603.52	630.43	659.14	673.37	702.08	726.92	743.22	763.65	776.07
UnitedHealthcare	SignatureValue	HMO A	291.48	317.39	327.30	337.20	347.87	358.54	369.59	381.02	381.02	381.02	381.02	382.54	390.16	399.31	414.17	426.36	432.46	441.60	450.75	456.46	462.56	465.61	468.65	471.70	474.75	480.85	486.94	496.09	504.85	517.04	532.28	550.19	571.53	595.53	622.97	650.02	680.50	710.60	743.75	777.28	813.48	849.67	888.92	928.55	970.84	991.80	1034.09	1070.67	1094.67	1124.77	1143.06
Western Health	Full	HMO A	221.05	240.70	248.21	255.73	263.82	271.91	280.29	288.96	288.96	288.96	288.96	290.11	295.89	302.83	314.10	323.34	327.97	334.90	341.83	346.17	350.79	353.10	355.42	357.73	360.04	364.66	369.29	376.22	382.87	392.11	403.67	417.25	433.43	451.64	472.44	492.96	516.08	538.90	564.04	589.47	616.92	644.37	674.13	704.19	736.26	752.15	784.23	811.97	830.17	853.00	866.87
Western Health	Full	HMO B	232.10	252.74	260.62	268.51	277.01	285.50	294.30	303.40	303.40	303.40	303.40	304.62	310.69	317.97	329.80	339.51	344.36	351.65	358.93	363.48	368.33	370.76	373.19	375.61	378.04	382.90	387.75	395.03	402.01	411.72	423.86	438.12	455.11	474.22	496.07	517.61	541.88	565.85	592.24	618.94	647.77	676.59	707.84	739.40	773.07	789.76	823.44	852.56	871.68	895.65	910.21
Western Health	Full	HMO C	216.67	235.93	243.30	250.66	258.59	266.52	274.74	283.23	283.23	283.23	283.23	284.36	290.03	296.83	307.87	316.94	321.47	328.27	335.06	339.31	343.84	346.11	348.38	350.64	352.91	357.44	361.97	368.77	375.28	384.35	395.68	408.99	424.85	442.69	463.08	483.19	505.85	528.23	552.87	577.79	604.70	631.61	660.78	690.24	721.68	737.25	768.69	795.88	813.73	836.10	849.70

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	360.61	392.66	404.92	417.17	430.37	443.57	457.24	471.38	471.38	471.38	471.38	473.27	482.69	494.01	512.39	527.47	535.02	546.33	557.64	564.71	572.26	576.03	579.80	583.57	587.34	594.88	602.42	613.74	624.58	639.66	658.52	680.67	707.07	736.77	770.71	804.17	841.88	879.12	920.13	961.62	1006.40	1051.18	1099.73	1148.75	1201.08	1227.00	1279.33	1324.58	1354.27	1391.51	1414.14
Anthem Blue Cross	CaliforniaCare HMO	HMO B	389.52	424.14	437.38	450.62	464.87	479.13	493.89	509.17	509.17	509.17	509.17	511.21	521.39	533.61	553.47	569.76	577.91	590.13	602.35	609.99	618.13	622.21	626.28	630.35	634.43	642.57	650.72	662.94	674.65	690.94	711.31	735.24	763.76	795.83	832.49	868.64	909.38	949.60	993.90	1038.71	1087.08	1135.45	1187.89	1240.85	1297.37	1325.37	1381.89	1430.77	1462.85	1503.07	1527.51
Anthem Blue Cross	Advantage PPO	PPO A	363.24	395.53	407.87	420.22	433.51	446.81	460.58	474.82	474.82	474.82	474.82	476.72	486.22	497.61	516.13	531.32	538.92	550.32	561.71	568.83	576.43	580.23	584.03	587.83	591.63	599.22	606.82	618.22	629.14	644.33	663.32	685.64	712.23	742.14	776.33	810.04	848.03	885.54	926.85	968.63	1013.74	1058.85	1107.76	1157.14	1209.84	1235.96	1288.66	1334.24	1364.16	1401.67	1424.46
Anthem Blue Cross	Select PPO	PPO B	331.92	361.42	372.70	383.98	396.13	408.28	420.86	433.88	433.88	433.88	433.88	435.62	444.29	454.71	471.63	485.51	492.45	502.87	513.28	519.79	526.73	530.20	533.67	537.14	540.61	547.56	554.50	564.91	574.89	588.78	606.13	626.52	650.82	678.15	709.39	740.20	774.91	809.19	846.93	885.12	926.33	967.55	1012.24	1057.37	1105.53	1129.39	1177.55	1219.20	1246.54	1280.81	1301.64
Anthem Blue Cross	Select PPO	PPO C	336.71	366.64	378.08	389.52	401.85	414.17	426.94	440.14	440.14	440.14	440.14	441.90	450.70	461.27	478.43	492.52	499.56	510.12	520.69	527.29	534.33	537.85	541.37	544.89	548.41	555.46	562.50	573.06	583.19	597.27	614.88	635.56	660.21	687.94	719.63	750.88	786.09	820.86	859.15	897.89	939.70	981.51	1026.85	1072.62	1121.48	1145.68	1194.54	1236.79	1264.52	1299.29	1320.42
Anthem Blue Cross	Select PPO	PPO D	330.95	360.37	371.62	382.87	394.98	407.10	419.64	432.62	432.62	432.62	432.62	434.35	443.00	453.39	470.26	484.10	491.02	501.41	511.79	518.28	525.20	528.66	532.12	535.58	539.04	545.97	552.89	563.27	573.22	587.07	604.37	624.70	648.93	676.19	707.33	738.05	772.66	806.84	844.47	882.54	923.64	964.74	1009.30	1054.29	1102.32	1126.11	1174.13	1215.66	1242.92	1277.09	1297.86
Anthem Blue Cross	Prudent Buyer - Small Group	PPO E	355.32	386.90	398.98	411.06	424.06	437.07	450.54	464.47	464.47	464.47	464.47	466.33	475.62	486.76	504.88	519.74	527.17	538.32	549.47	556.44	563.87	567.58	571.30	575.01	578.73	586.16	593.59	604.74	615.42	630.29	648.86	670.69	696.71	725.97	759.41	792.39	829.54	866.24	906.65	947.52	991.64	1035.77	1083.61	1131.91	1183.47	1209.02	1260.57	1305.16	1334.42	1371.12	1393.41
Health Net	WholeCare	HMO A	501.61	546.20	563.25	580.30	598.66	617.02	636.03	655.70	655.70	655.70	655.70	658.32	671.44	687.18	712.75	733.73	744.22	759.96	775.69	785.53	796.02	801.27	806.51

USE EMPLOYER ZIP CODE FOR RATING

AREA 13 - Continued

10/01/20 - 12/01/20

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	413.05	449.76	463.80	477.84	492.96	508.07	523.73	539.93	539.93	539.93	539.93	542.09	552.89	565.85	586.90	604.18	612.82	625.78	638.74	646.84	655.48	659.79	664.11	668.43	672.75	681.39	690.03	702.99	715.41	732.69	754.28	779.66	809.90	843.91	882.79	921.12	964.31	1006.97	1053.94	1101.46	1152.75	1204.04	1259.66	1315.81	1375.74	1405.44	1465.37	1517.20	1551.22	1593.87	1619.79
Health Net	WholeCare	HMO C	506.65	551.69	568.91	586.13	604.67	623.22	642.43	662.29	662.29	662.29	662.29	664.94	678.19	694.08	719.91	741.11	751.70	767.60	783.49	793.43	804.02	809.32	814.62	819.92	825.22	835.81	846.41	862.31	877.54	898.73	925.22	956.35	993.44	1035.17	1082.85	1129.87	1182.86	1235.18	1292.80	1351.08	1414.00	1476.92	1545.13	1614.01	1687.52	1723.95	1797.47	1861.05	1902.77	1955.09	1986.87
Health Net	Salud HMO y Mas	HMO D	273.62	297.94	307.24	316.54	326.55	336.57	346.94	357.67	357.67	357.67	357.67	359.10	366.25	374.84	388.79	400.23	405.95	414.54	423.12	428.49	434.21	437.07	439.93	442.79	445.65	451.38	457.10	465.68	473.91	485.36	499.66	516.47	536.50	559.04	584.79	610.18	638.80	667.05	698.17	729.64	763.62	797.60	834.44	871.64	911.34	931.01	970.71	1005.05	1027.58	1055.84	1073.01
Health Net	Full	HMO E	509.09	554.34	571.64	588.95	607.58	626.21	645.51	665.48	665.48	665.48	665.48	668.14	681.45	697.42	723.37	744.67	755.32	771.29	787.26	797.24	807.89	813.21	818.54	823.86	829.18	839.83	850.48	866.45	881.76	903.05	929.67	960.95	998.21	1040.14	1088.05	1135.30	1188.54	1241.11	1299.01	1357.57	1420.79	1484.01	1552.56	1621.77	1695.63	1732.24	1806.10	1869.99	1911.91	1964.49	1996.44
Kaiser Permanente	Full	HMO A	306.70	332.72	342.67	352.62	363.33	360.06	371.15	382.63	382.63	382.63	382.63	384.16	391.82	401.00	415.92	428.17	434.29	443.47	452.65	458.39	464.52	467.58	470.64	473.70	476.76	482.88	489.00	498.19	506.99	519.23	534.54	552.52	573.95	598.05	625.60	652.77	683.38	713.61	746.90	780.57	816.92	853.27	892.68	932.47	974.95	995.99	1038.46	1075.20	1099.30	1129.53	1147.89
Kaiser Permanente	Full	HMO B	303.63	329.37	339.22	349.06	359.66	356.27	367.25	378.61	378.61	378.61	378.61	380.13	387.70	396.79	411.55	423.67	429.73	438.81	447.90	453.58	459.64	462.66	465.69	468.72	471.75	477.81	483.87	492.95	501.66	513.78	528.92	546.72	567.92	591.77	619.03	645.91	676.20	706.11	739.05	772.37	808.34	844.31	883.30	922.68	964.71	985.53	1027.56	1063.90	1087.75	1117.66	1135.83
Oscar	Oscar EPO	EPO A	305.04	332.16	342.52	352.89	364.06	375.22	386.78	398.75	398.75	398.75	398.75	400.34	408.32	417.89	433.44	446.20	452.58	462.15	471.72	477.70	484.08	487.27	490.46	493.65	496.84	503.22	509.60	519.17	528.34	541.10	557.05	575.79	598.12	623.24	651.95	680.26	712.16	743.66	778.35	813.44	851.32	889.20	930.27	971.74	1016.01	1037.94	1082.20	1120.48	1145.60	1177.10	1196.24
Oscar	Oscar EPO	EPO B	299.67	326.31	336.49	346.68	357.65	368.62	379.98	391.73	391.73	391.73	391.73	393.30	401.13	410.53	425.81	438.34	444.61	454.01	463.42	469.29	475.56	478.69	481.83	484.96	488.09	494.36	500.63	510.03	519.04	531.58	547.25	565.66	587.59	612.27	640.48	668.29	699.63	730.57	764.65	799.13	836.34	873.56	913.90	954.64	998.12	1019.67	1063.15	1100.76	1125.44	1156.38	1175.19
Sharp Health Plan	Premier	HMO A	282.90	308.04	317.66	327.27	337.63	347.98	358.71	369.80	369.80	369.80	369.80	371.28	378.68	387.55	401.97	413.81	419.72	428.60	437.47	443.02	448.94	451.90	454.85	457.81	460.77	466.69	472.60	481.48	489.99	501.82	516.61	533.99	554.70	578.00	604.62	630.88	660.46	689.68	721.85	754.39	789.52	824.65	862.74	901.20	942.25	962.59	1003.64	1039.14	1062.44	1091.65	1109.40
Sharp Health Plan	Performance	HMO B	304.75	331.84	342.20	352.56	363.71	374.87	386.42	398.37	398.37	398.37	398.37	399.96	407.93	417.49	433.03	445.78	452.15	461.71	471.27	477.25	483.62	486.81	490.00	493.18	496.37	502.74	509.12	518.68	527.84	540.59	556.52	575.25	597.56	622.65	651.33	679.62	711.49	742.96	777.62	812.67	850.52	888.37	929.40	970.83	1015.05	1036.96	1081.18	1119.42	1144.52	1175.99	1195.11
Sharp Health Plan	Premier	HMO C	278.90	303.70	313.17	322.65	332.86	343.07	353.64	364.58	364.58	364.58	364.58	366.04	373.33	382.08	396.30	407.97	413.80	422.55	431.30	436.77	442.60	445.52	448.43	451.35	454.27	460.10	465.93	474.68	483.07	494.74	509.32	526.45	546.87	569.84	596.09	621.97	651.14	679.94	711.66	743.74	778.38	813.01	850.57	888.48	928.95	949.00	989.47	1024.47	1047.44	1076.24	1093.74
UnitedHealthcare	SignatureValue	HMO A	385.91	420.22	433.33	446.45	460.57	474.70	489.33	504.46	504.46	504.46	504.46	506.48	516.57	528.67	548.35	564.49	572.56	584.67	596.78	604.34	612.41	616.45	620.49	624.52	628.56	636.63	644.70	656.81	668.41	684.55	704.73	728.44	756.69	788.47	824.79	860.61	900.97	940.82	984.71	1029.10	1077.02	1124.95	1176.91	1229.37	1285.36	1313.11	1369.10	1417.53	1449.31	1489.17	1513.38
Western Health	Full	HMO A	290.72	316.56	326.44	336.32	346.96	357.60	368.62	380.02	380.02	380.02	380.02	381.54	389.14	398.26	413.08	425.24	431.32	440.44	449.56	455.26	461.35	464.39	467.43	470.47	473.51	479.59	485.67	494.79	503.53	515.69	530.89	548.75	570.03	593.97	621.33	648.32	678.72	708.74	741.80	775.24	811.34	847.45	886.59	926.11	968.29	989.19	1031.38	1067.86	1091.80	1121.82	1140.06
Western Health	Full	HMO B	298.09	324.59	334.72	344.85	355.77	366.68	377.98	389.67	389.67	389.67	389.67	391.23	399.02	408.37	423.57	436.04	442.27	451.62	460.98	466.82	473.06	476.17	479.29	482.41	485.52	491.76	497.99	507.35	516.31	528.78	544.36	562.68	584.50	609.05	637.10	664.77	695.94	726.73	760.63	794.92	831.94	868.96	909.09	949.62	992.87	1014.30	1057.56	1094.96	1119.51	1150.30	1169.00

Health Care Service Plan rates will vary by county

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USE EMPLOYER ZIP CODE FOR RATING

AREA 14

10/01/20 - 12/01/20

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	208.89	227.46	234.56	241.66	249.30	256.95	264.87	273.06	273.06	273.06	273.06	274.15	279.61	286.17	296.82	305.55	309.92	316.48	323.03	327.13	331.49	333.68	335.86	338.05	340.23	344.60	348.97	355.52	361.80	370.54	381.46	394.30	409.59	426.79	446.45	465.84	487.69	509.26	533.01	557.04	582.98	608.92	637.05	665.45	695.76	710.78	741.08	767.30	784.50	806.07	819.18
Anthem Blue Cross	Select PPO	PPO B	204.35	222.52	229.46	236.41	243.89	251.37	259.12	267.13	267.13	267.13	267.13	268.20	273.54	279.95	290.37	298.92	303.19	309.60	316.01	320.02	324.30	326.43	328.57	330.71	332.84	337.12	341.39	347.80	353.95	362.50	373.18	385.74	400.70	417.52	436.76	455.72	477.09	498.20	521.44	544.95	570.32	595.70	623.21	651.00	680.65	695.34	724.99	750.64	767.46	788.57	801.39
Anthem Blue Cross	Prudent Buyer - Small Group	EPO A	207.80	226.27	233.33	240.39	248.00	255.60	263.48	271.63	271.63	271.63	271.63	272.72	278.15	284.67	295.26	303.95	308.30	314.82	321.34	325.41	329.76	331.93	334.10	336.28	338.45	342.80	347.14	353.66	359.91	368.60	379.47	392.23	407.45	424.56	444.12	463.40	485.13	506.59	530.22	554.13	579.93	605.73	633.71	661.96	692.11	707.05	737.20	763.28	780.39	801.85	814.89
Health Net	CommunityCare	HMO A	216.73	236.00	243.36	250.73	258.66	266.59	274.81	283.31	283.31	283.31	283.31	284.44	290.11	296.91	307.96	317.02	321.55	328.35	335.15	339.40	343.94	346.20	348.47	350.74	353.00	357.53	362.07	368.87	375.38	384.45	395.78	409.10	424.96	442.81	463.21	483.32	505.99	528.37	553.02	577.95	604.86	631.78	660.96	690.42	721.87	737.45	768.90	796.10	813.94	836.33	849.93
Kaiser Permanente	Full	HMO A	192.24	208.09	214.14	220.20	226.73	219.26	226.02	233.01	233.01	233.01	233.01	233.94	238.60	244.19	253.28	260.74	264.46	270.06	275.65	279.14	282.87	284.74	286.60	288.46	290.33	294.06	297.78	303.38	308.74	316.19	325.51	336.46	349.51	364.19	380.97	397.51	416.15	434.56	454.83	475.34	497.47	519.61	543.61	567.84	593.71	606.52	632.39	654.75	669.43	687.84	699.03
Kaiser Permanente	Full	HMO C	182.04	196.97	202.68	208.40	214.55	206.71	213.08	219.67	219.67	219.67	219.67	220.55	224.94	230.21	238.78	245.81	249.32	254.60	259.87	263.16	266.68	268.43	270.19	271.95	273.71	277.22	280.74	286.01	291.06	298.09	306.88	317.20	329.50	343.34	359.16	374.75	392.33	409.68	428.79	448.12	468.99	489.86	512.49	535.33	559.71	571.80	596.18	617.27	631.11	648.46	659.01
Oscar	Oscar EPO	EPO A	187.26	203.90	210.26	216.63	223.48	230.34	237.44	244.78	244.78	244.78	244.78	245.76	250.65	256.53	266.07	273.91	277.82	283.70	289.57	293.24	297.16	299.12	301.08	303.04	304.99	308.91	312.83	318.70	324.33	332.16	341.96	353.46	367.17	382.59	400.21	417.59	437.17	456.51	477.81	499.35	522.60	545.86	571.07	596.52	623.70	637.16	664.33	687.83	703.25	722.59	734.34
Oscar	Oscar EPO	EPO B	177.79	193.60	199.64	205.68	212.19	218.70	225.44	232.41	232.41	232.41	232.41	233.34	237.99	243.57	252.63	260.07	263.79	269.36	274.94	278.43	282.15	284.01	285.87	287.72	289.58	293.30	297.02	302.60	307.94	315.38	324.68	335.60	348.62	363.26	379.99	396.49	415.09	433.45	453.67	474.12	496.20	518.28	542.21	566.38	592.18	604.97	630.76	653.07	667.72	686.08	697.23
Oscar	Oscar EPO	EPO C	178.81	194.71	200.78	206.86	213.40	219.95	226.73	233.74	233.74	233.74	233.74	234.68	239.35	244.96	254.08	261.56	265.30	270.91	276.51	280.02	283.76	285.63	287.50	289.37	291.24	294.98	298.72	304.33	309.71	317.19	326.54	337.52	350.61	365.34	382.17	398.76	417.46	435.93	456.26	476.83	499.04	521.24	545.32	569.63	595.57	608.43	634.37	656.81	671.54	690.00	701.22
Sharp Health Plan	Premier	HMO A	172.72	188.07	193.95	199.82	206.14	212.46	219.01	225.78	225.78	225.78	225.78	226.68	231.20	236.62	245.42	252.65	256.26	261.68	267.10	270.48	274.10	275.90	277.71	279.52	281.32	284.93	288.55	293.97	299.16	306.38	315.41	326.03	338.67	352.89	369.15	385.18	403.24	421.08	440.72	460.59	482.04	503.49	526.74	550.23	575.29	587.71	612.77	634.44	648.67	666.50	677.34
Sharp Health Plan	Performance	HMO B	197.55	215.11	221.83	228.54	235.77	243.00	250.49	258.24	258.24	258.24	258.24	259.27	264.44	270.64	280.71	288.97	293.10	299.30	305.50	309.37	313.50	315.57	317.64	319.70	321.77	325.90	330.03	336.23	342.17	350.43	360.76	372.90	387.36	403.63	422.22	440.56	461.22	481.62	504.08	526.81	551.34	575.88	602.47	629.33	658.00	672.20	700.86	725.65	741.92	762.32	774.72
UnitedHealthcare	Alliance	HMO A	203.81	221.93	228.85	235.78	243.24	250.70	258.43	266.42	266.42	266.42	266.42	267.49	272.81	279.21	289.60	298.12	302.39	308.78	315.17	319.17	323.43	325.57	327.70	329.83	331.96	336.22	340.48	346.88	353.01	361.53	372.19	384.71	399.63	416.41	435.60	454.51	475.83	496.87	520.05	543.50	568.81	594.12	621.56	649.27	678.84	693.49	723.06	748.64	765.42	786.47	799.26
UnitedHealthcare	Alliance	HMO B	213.24	232.19	239.44	246.68	254.49	262.29	270.38	278.74	278.74	278.74	278.74	279.85	285.43	292.12	302.99	311.91	316.37	323.06	329.75	333.93	338.39	340.62	342.85	345.08	347.31	351.77	356.23	362.92	369.33	378.25	389.40	402.50	418.11	435.67	455.74	475.53	497.83	519.85	544.10	568.63	595.11	621.59	650.30	679.29	710.23	725.56	756.50	783.26	800.82	822.84	836.22
Western Health	Full	HMO B	196.64	214.11	220.80	227.48	234.68	241.87	249.33	257.04	257.04	257.04	257.04	258.07	263.21	269.38	279.40	287.63	291.74	297.91	304.08	307.93	312.05	314.10	316.16	318.21	320.27	324.38	328.50	334.67	340.58	348.80	359.08	371.16	385.56	401.75	420.26	438.51	459.07	479.38	501.74	524.36	548.78	573.20	599.67	626.41	654.94	669.07	697.60	722.28	738.47	758.78	771.12
Western Health	Full	HMO C	201.60	219.52	226.37	233.22	240.60	247.98	255.62	263.53	263.53	263.53	263.53	264.58	269.85	276.18	286.45	294.89	299.10	305.43	311.75	315.70	319.92	322.03	324.14	326.25	328.35	332.57	336.79	343.11	349.17	357.61	368.15	380.53	395.29	411.89	430.87	449.58	470.66	491.48	514.40	537.59	562.63	587.66	614.81	642.21	671.47	685.96	715.21	740.51	757.11	777.93	790.58

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	211.93	230.77	237.97	245.17	252.93	260.69	268.72	277.03	277.03	277.03	277.03	278.14	283.68	290.33	301.13	310.00	314.43	321.08	327.73	331.88	336.31	338.53	340.75	342.96	345.18	349.61	354.04	360.69	367.06	375.93	387.01	400.03	415.55	433.00	452.94	472.61	494.78	516.66	540.76	565.14	591.46	617.78	646.31	675.12	705.87	721.11	751.86	778.45	795.91	817.79	831.09
Anthem Blue Cross	CaliforniaCare HMO	HMO B	237.34	258.44	266.50	274.57	283.26	291.95	300.94	310.25	310.25	310.25	310.25	311.49	317.70	325.14	337.24	347.17	352.13	359.58	367.03	371.68	376.64	379.13	381.61	384.09	386.57	391.54	396.50	403.95	411.08	421.01	433.42	448.00	465.38	484.92	507.26	529.29	554.11	578.62	605.61	632.91	662.38	691.86	723.81	756.08	790.52	807.58	842.02	871.80	891.35	915.86	930.75
Anthem Blue Cross	Advantage PPO	PPO A	241.30	262.74	270.95	279.15	287.98	296.81	305.96	315.42	315.42	315.42	315.42	316.68	322.99	330.56	342.86	352.95	358.00	365.57	373.14	377.87	382.92	385.44	387.97	390.49	393.01	398.06	403.11	410.68	417.93	428.02	440.64	455.47	473.13	493.00	515.71	538.11	563.34	588.26	615.70	643.46	673.42	703.39	735.87	768.68	803.69	821.04	856.05	886.33	906.20	931.12	946.26
Anthem Blue Cross	Select PPO	PPO B	230.77	251.28	259.13	266.97	275.42	283.86	292.61	301.66	301.66	301.66	301.66	302.87	308.90	316.14	327.90	337.56	342.38	349.62	356.86	361.39	366.22	368.63	371.04	373.46	375.87	380.69	385.52	392.76	399.70	409.35	421.42	435.60	452.49	471.49	493.21	514.63	538.76	562.60	588.84	615.39	644.04	672.70	703.77	735.15	768.63	785.22	818.71	847.66	866.67	890.50	904.98
Anthem Blue Cross	Prudent Buyer - Small Group	PPO C	235.90	256.86	264.88	272.90	281.53	290.17	299.11	308.36	308.36	308.36	308.36	309.59	315.76	323.16	335.19	345.05	349.99	357.39	364.79	369.42	374.35	376.82	379.28	381.75	384.22	389.15	394.08	401.48	408.58	418.44	430.78	445.27	462.54	481.97	504.17	526.06	550.73	575.09	601.92	629.05	658.35	687.64	719.40	751.47	785.70	802.66	836.89	866.49	885.92	910.28	925.08
Anthem Blue Cross	Prudent Buyer - Small Group	EPO A	233.45	254.20	262.13	270.07	278.61	287.16	296.01	305.16	305.16	305.16	305.16	306.38	312.48	319.81	331.71	341.47	346.36	353.68	361.00	365.58	370.46	372.91	375.35	377.79	380.23	385.11	389.99	397.32	404.34	414.10	426.31	440.65	457.74	476.97	498.94	520.60	545.02	569.12	595.67	622.53	651.52	680.51	711.94	743.67	777.55	794.33	828.20	857.50	876.72	900.83	915.48
Anthem Blue Cross	Prudent Buyer - Small Group	EPO B	233.78	254.56	262.50	270.45	279.00	287.56	296.42	305.59	305.59	305.59	305.59	306.81	312.92	320.26	332.18	341.96	346.84	354.18	361.51	366.10	370.99	373.43	375.88	378.32	380.77	385.65	390.54	397.88	404.91	414.69	426.91	441.27	458.39	477.64	499.64	521.34	545.78	569.93	596.51	623.40	652.43	681.47	712.94	744.72	778.64	795.45	829.37	858.71	877.96	902.10	916.77
Health Net	WholeCare	HMO A	286.63	312.11	321.85	331.59	342.08	352.57	363.44	374.68	374.68	374.68	374.68	376.18	383.67	392.66	407.27	419.26	425.26	434.25	443.24	448.86	454.86	457.86	460.85	463.85	466.85	472.84	478.84	487.83	496.45	508.44	523.43	541.03	562.02	585.62	612.60	639.20	669.17	698.77	731.37	764.34	799.94	835.53	874.12	913.09	954.68	975.29	1016.88	1052.85	1076.45	1106.05	1124.04
Health Net	CommunityCare	HMO C	244.42	266.15	274.46	282.76	291.71	300.65	309.92	319.51	319.51	319.51	319.51	320.78	327.17	334.84	347.30	357.53	362.64	370.31	377.98	382.77	387.88	390.44	392.99	395.55	398.10	403.22	408.33	416.00	423.35	433.57	446.35	461.37	479.26	499.39	522.39	545.08	570.64	595.88	623.68	651.79	682.14	712.50	745.41	778.64	814.10	831.67	867.14	897.81	917.94	943.18	958.53
Kaiser Permanente	Full	HMO A	221.36	239.79	246.84	253.88	261.47	255.07	262.93	271.07	271.07	271.07	271.07	272.15	277.57	284.08	294.65	303.32	307.66	314.17	320.67	324.74	329.07	331.24	333.41	335.58	337.75	342.09	346.42	352.93	359.16	367.84	378.68	391.42	406.60	423.68	443.19	462.44	484.12	505.54	529.12	552.97	578.73	604.48	632.40	660.59	690.68	705.58	735.67	761.69	778.77	800.19	813.21
Kaiser Permanente	Full	HMO B	225.03	243.78	250.96	258.13	265.85	259.59	267.59	275.86	275.86	275.86	275.86	276.97	282.48	289.10	299.86	308.69	313.10	319.73	326.35	330.48	334.90	337.11	339.31	341.52	343.73	348.14	352.55	359.17	365.52	374.35	385.38	398.35	413.80	431.17	451.04	470.62	492.69	514.49	538.49	562.76	588.97	615.18	643.59	672.28	702.90	718.07	748.69	775.18	792.56	814.35	827.58
Kaiser Permanente	Full	HMO C	232.06	251.44	258.86	266.27	274.25	268.24	276.51	285.06	285.06	285.06	285.06	286.20	291.90	298.74	309.86	318.98	323.54	330.38	337.22	341.50	346.06	348.34	350.62	352.90	355.18	359.74	364.31	371.15	377.70	386.83	398.23	411.63	427.59	445.55	466.07	486.31	509.12	531.64	556.44	581.52	608.60	635.68	665.04	694.69	726.33	742.01	773.65	801.02	818.97	841.49	855.18
Kaiser Permanente	Full	HMO D	208.81	226.13	232.75	239.37	246.50	239.64	247.03	254.67	254.67	254.67	254.67	255.69	260.78	266.89	276.82	284.97	289.05	295.16	301.27	305.09	309.17	311.20	313.24	315.28	317.32	321.39	325.46	331.58	337.43	345.58	355.77	367.74	382.00	398.04	416.38	434.46	454.84	474.95	497.11	519.52	543.71	567.91	594.14	620.62	648.89	662.90	691.17	715.61	731.66	751.78	764.01
Oscar	Oscar EPO	EPO A	214.28	233.32	240.61	247.89	255.73	263.57	271.70	280.10	280.10	280.10	280.10	281.22	286.82	293.55	304.47	313.43	317.91	324.64	331.36	335.56	340.04	342.28	344.52	346.76	349.00	353.49	357.97	364.69	371.13	380.10	391.30	404.46	420.15	437.80	457.96	477.85	500.26	522.39	546.76	571.40	598.01	624.62	653.47	682.60	713.70	729.10	760.19	787.08	804.73	826.86	840.30
Oscar	Oscar EPO	EPO B	241.22	262.66	270.86	279.06	287.88	296.71	305.86	315.32	315.32	315.32	315.32	316.58	322.88	330.45	342.75	352.84	357.88	365.45	373.02	377.75	382.79	385.32	387.84	390.36	392.88	397.93	402.97	410.54	417.79	427.89	440.50	455.32	472.98	492.84	515.54	537.93	563.16	588.07	615.50	643.25	673.20	703.16	735.63	768.43	803.43	820.77	855.77	886.04	905.91	930.82	945.95
Oscar	Oscar EPO	EPO C	214.01	233.03	240.31	247.58	255.41	263.25	271.36	279.75	279.75	279.75	279.75	280.87	286.47	293.18	304.09	313.04	317.52	324.23	330.95	335.14	339.62	341.86	344.10	346.33	348.57	353.05	357.52	364.24	370.67	379.62	390.82	403.96	419.63	437.25	457.40	477.26	499.64	521.74	546.08	570.70	597.27	623.85	652.66	681.76	712.81	728.20	759.25	786.11	803.73	825.83	839.25
Oscar	Oscar EPO	EPO D	240.70	262.09	270.27	278.46	287.27	296.08	305.20	314.64	314.64	314.64	314.64	315.90	322.19	329.74	342.01	352.08	357.12	364.67	372.22	376.94	381.97	384.49	387.01	389.52	392.04	397.07	402.11	409.66	416.90	426.97	439.55	454.34	471.96	491.78	514.43	536.77	561.95	586.80	614.18	641.86	671.75	701.64	734.05	766.78	801.70	819.01	853.93	884.14	903.96	928.81	943.92
Sharp Health Plan	Premier	HMO A	202.89	220.92	227.82	234.71	242.14	249.56	257.25	265.21	265.21	265.21	265.21	266.27	271.58	277.94	288.28	296.77	301.01	307.38	313.74	317.72	321.96	324.09	326.21	328.33	330.45	334.70	338.94	345.30	351.40	359.89	370.50	382.96	397.82	414.52	433.62	452.45	473.67	494.62	517.69	541.03	566.22	591.42	618.73	646.32	675.76	690.34	719.78	745.24	761.95	782.90	795.63
Sharp Health Plan	Performance	HMO B	215.29	234.42	241.74	249.06	256.94	264.82	272.98	281.42	281.42	281.42	281.42	282.55	288.17	294.93	305.90	314.91	319.41	326.17	332.92	337.14	341.64	343.90	346.15	348.40	350.65	355.15	359.65	366.41	372.88	381.89	393.14	406.37	422.13	439.86	460.12	480.10	502.62	524.85	549.33	574.10	600.83	627.57	656.55	685.82	717.06	732.54	763.77	790.79	808.52	830.75	844.26
Sharp Health Plan	Premier	HMO C	197.90	215.49	222.21	228.94	236.18	243.43	250.93	258.69	258.69	258.69	258.69	259.72	264.90	271.11	281.20	289.47	293.61	299.82	306.03	309.91	314.05	316.12	318.19	320.26	322.33	326.47	330.61	336.81	342.76	351.04	361.39	373.55	388.04	404.33	422.96	441.33	462.02	482.46	504.96	527.73	552.30	576.88	603.52	630.43	659.14	673.37	702.08	726.92	743.22	763.65	776.07
UnitedHealthcare	SignatureValue	HMO A	285.83	311.24	320.96	330.67	341.13	351.60	362.43	373.64	373.64	373.64	373.64	375.13	382.61	391.57	406.15	418.10	424.08	433.05	442.02	447.62	453.60	456.59	459.58	462.57	465.56	471.53	477.51	486.48	495.07	507.03	521.98	539.54	560.46	584.00	610.90	637.43	667.32	696.84	729.35	762.23	797.72	833.22	871.70	910.56	952.03	972.58	1014.06	1049.93	1073.47	1102.99	1120.92
UnitedHealthcare	Advantage	HMO B	260.15	283.27	292.11	300.95	310.47	320.00	329.86	340.06	340.06	340.06	340.06	341.42	348.22	356.38	369.65	380.53	385.97	394.13	402.29	407.39	412.83	415.55	418.27	420.99	423.71	429.16	434.60	442.76	450.58	461.46	475.06	491.05	510.09	531.51	556.00	580.14	607.35	634.21	663.80	693.72	726.03	758.33	793.36	828.73	866.47	885.18	922.92	955.57	976.99	1003.86	1020.18
UnitedHealthcare	Alliance	HMO C	227.50	247.72	255.45	263.18	271.51	279.83	288.46	297.38	297.38	297.38	297.38	298.57	304.52	311.65	323.25	332.77	337.53	344.66	351.80	356.26	361.02	363.40	365.78	368.16	370.54	375.29	380.05	387.19	394.03	403.54	415.44	429.42	446.07	464.80	486.22	507.33	531.12	554.61	580.49	606.66	634.91	663.16	693.79	724.72	757.72	774.08	807.09	835.64	854.37	877.87	892.14
Western Health	Full	HMO A	221.05	240.70	248.21	255.73	263.82	271.91	280.29	288.96	288.96	288.96	288.96	290.11	295.89	302.83	314.10	323.34	327.97	334.90	341.83	346.17	350.79	353.10	355.42	357.73	360.04	364.66	369.29	376.22	382.87	392.11	403.67	417.25	433.43	451.64	472.44	492.96	516.08	538.90	564.04	589.47	616.92	644.37	674.13	704.19	736.26	752.15	784.23	811.97	830.17	853.00	866.87
Western Health	Full	HMO B	232.10	252.74	260.62	268.51	277.01	285.50	294.30	303.40	303.40	303.40	303.40	304.62	310.69	317.97	329.80	339.51	344.36	351.65	358.93	363.48	368.33	370.76	373.19	375.61	378.04	382.90	387.75	395.03	402.01	411.72	423.86	438.12	455.11	474.22	496.07	517.61	541.88	565.85	592.24	618.94	647.77	676.59	707.84	739.40	773.07	789.76	823.44	852.56	871.68	895.65	910.21
Western Health	Full	HMO C	216.67	235.93	243.30	250.66	258.59	266.52	274.74	283.23	283.23	283.23	283.23	284.36	290.03	296.83	307.87	316.94	321.47	328.27	335.06	339.31	343.84	346.11	348.38	350.64	352.91	357.44	361.97	368.77	375.28	384.35	395.68	408.99	424.85	442.69	463.08	483.19	505.85	528.23	552.87	577.79	604.70	631.61	660.78	690.24	721.68	737.25	768.69	795.88	813.73	836.10	849.70

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	264.83	288.37	297.37	306.37	316.06	325.76	335.79	346.18	346.18	346.18	346.18	347.56	354.49	362.80	376.30	387.38	392.91	401.22	409.53	414.72	420.26	423.03	425.80	428.57	431.34	436.88	442.42	450.73	458.69	469.77	483.61	499.88	519.27	541.08	566.00	590.58	618.28	645.63	675.74	706.21	739.09	771.98	807.64	843.64	882.07	901.11	939.53	972.77	994.58	1021.92	1038.54
Anthem Blue Cross	CaliforniaCare HMO	HMO B	296.59	322.95	333.03	343.11	353.97	364.83	376.07	387.70	387.70	387.70	387.70	389.25	397.00	406.31	421.43	433.84	440.04	449.34	458.65	464.46	470.67	473.77	476.87	479.97	483.07	489.28	495.48	504.79	513.70	526.11	541.62	559.84	581.55	605.98	633.89	661.42	692.43	723.06	756.79	790.91	827.74	864.57	904.50	944.82	987.86	1009.18	1052.22	1089.44	1113.86	1144.49	1163.10
Anthem Blue Cross	Advantage PPO	PPO A	290.12	315.91	325.77	335.63	346.25	356.86	367.86	379.24	379.24	379.24	379.24	380.76	388.34	397.44	412.23	424.37	430.44	439.54	448.64	454.33	460.40	463.43	466.47	469.50	472.53	478.60	484.67	493.77	502.49	514.63	529.80	547.62	568.86	592.75	620.06	646.98	677.32	707.28	740.28	773.65	809.68	845.71	884.77	924.21	966.30	987.16	1029.26	1065.66	1089.56	1119.52	1137.72
Anthem Blue Cross	Select PPO	PPO B	273.67	298.00	307.30	316.60	326.62	336.63	347.01	357.74	357.74	357.74	357.74	359.17	366.33	374.91	388.86	400.31	406.03	414.62	423.21	428.57	434.30	437.16	440.02	442.88	445.74	451.47	457.19	465.78	474.01	485.45	499.76	516.58	536.61	559.15	584.90	610.30	638.92	667.19	698.31	729.79	763.77	797.76	834.61

USE EMPLOYER ZIP CODE FOR RATING

AREA 14 - Continued

10/01/20 - 12/01/20

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	303.32	330.28	340.59	350.90	362.00	373.11	384.61	396.50	396.50	396.50	396.50	398.09	406.02	415.53	431.00	443.68	450.03	459.54	469.06	475.01	481.35	484.52	487.70	490.87	494.04	500.38	506.73	516.24	525.36	538.05	553.91	572.55	594.75	619.73	648.28	676.43	708.15	739.47	773.97	808.86	846.53	884.20	925.03	966.27	1010.28	1032.09	1076.10	1114.17	1139.14	1170.47	1189.50
Health Net	WholeCare	HMO C	327.66	356.79	367.92	379.06	391.05	403.04	415.47	428.32	428.32	428.32	428.32	430.03	438.59	448.87	465.58	479.28	486.14	496.42	506.70	513.12	519.97	523.40	526.83	530.25	533.68	540.53	547.39	557.67	567.52	581.22	598.36	618.49	642.47	669.46	700.30	730.71	764.97	798.81	836.07	873.76	914.45	955.14	999.26	1043.80	1091.35	1114.90	1162.45	1203.57	1230.55	1264.39	1284.96
Health Net	Salud HMO y Mas	HMO D	273.62	297.94	307.24	316.54	326.55	336.57	346.94	357.67	357.67	357.67	357.67	359.10	366.25	374.84	388.79	400.23	405.95	414.54	423.12	428.49	434.21	437.07	439.93	442.79	445.65	451.38	457.10	465.68	473.91	485.36	499.66	516.47	536.50	559.04	584.79	610.18	638.80	667.05	698.17	729.64	763.62	797.60	834.44	871.64	911.34	931.01	970.71	1005.05	1027.58	1055.84	1073.01
Health Net	Full	HMO E	329.24	358.50	369.69	380.88	392.93	404.98	417.46	430.37	430.37	430.37	430.37	432.09	440.70	451.03	467.82	481.59	488.47	498.80	509.13	515.59	522.47	525.92	529.36	532.80	536.25	543.13	550.02	560.35	570.24	584.02	601.23	621.46	645.56	672.67	703.66	734.22	768.65	802.65	840.09	877.96	918.85	959.73	1004.06	1048.82	1096.59	1120.26	1168.03	1209.35	1236.46	1270.46	1291.11
Kaiser Permanente	Full	HMO A	306.70	332.72	342.67	352.62	363.33	360.06	371.15	382.63	382.63	382.63	382.63	384.16	391.82	401.00	415.92	428.17	434.29	443.47	452.65	458.39	464.52	467.58	470.64	473.70	476.76	482.88	489.00	498.19	506.99	519.23	534.54	552.52	573.95	598.05	625.60	652.77	683.38	713.61	746.90	780.57	816.92	853.27	892.68	932.47	974.95	995.99	1038.46	1075.20	1099.30	1129.53	1147.89
Kaiser Permanente	Full	HMO B	303.63	329.37	339.22	349.06	359.66	356.27	367.25	378.61	378.61	378.61	378.61	380.13	387.70	396.79	411.55	423.67	429.73	438.81	447.90	453.58	459.64	462.66	465.69	468.72	471.75	477.81	483.87	492.95	501.66	513.78	528.92	546.72	567.92	591.77	619.03	645.91	676.20	706.11	739.05	772.37	808.34	844.31	883.30	922.68	964.71	985.53	1027.56	1063.90	1087.75	1117.66	1135.83
Oscar	Oscar EPO	EPO A	295.58	321.86	331.90	341.95	352.77	363.59	374.79	386.38	386.38	386.38	386.38	387.93	395.66	404.93	420.00	432.36	438.54	447.82	457.09	462.89	469.07	472.16	475.25	478.34	481.43	487.61	493.80	503.07	511.96	524.32	539.78	557.94	579.57	603.91	631.73	659.17	690.08	720.60	754.22	788.22	824.93	861.63	901.43	941.61	984.50	1005.75	1048.64	1085.73	1110.08	1140.60	1159.14
Oscar	Oscar EPO	EPO B	290.38	316.19	326.06	335.93	346.56	357.19	368.19	379.58	379.58	379.58	379.58	381.10	388.69	397.80	412.61	424.75	430.83	439.94	449.05	454.74	460.81	463.85	466.89	469.92	472.96	479.03	485.11	494.22	502.95	515.09	530.28	548.12	569.37	593.29	620.62	647.57	677.93	707.92	740.94	774.35	810.41	846.47	885.57	925.04	967.18	988.05	1030.19	1066.63	1090.54	1120.53	1138.74
Sharp Health Plan	Premier	HMO A	282.90	308.04	317.66	327.27	337.63	347.98	358.71	369.80	369.80	369.80	369.80	371.28	378.68	387.55	401.97	413.81	419.72	428.60	437.47	443.02	448.94	451.90	454.85	457.81	460.77	466.69	472.60	481.48	489.99	501.82	516.61	533.99	554.70	578.00	604.62	630.88	660.46	689.68	721.85	754.39	789.52	824.65	862.74	901.20	942.25	962.59	1003.64	1039.14	1062.44	1091.65	1109.40
Sharp Health Plan	Performance	HMO B	304.75	331.84	342.20	352.56	363.71	374.87	386.42	398.37	398.37	398.37	398.37	399.96	407.93	417.49	433.03	445.78	452.15	461.71	471.27	477.25	483.62	486.81	490.00	493.18	496.37	502.74	509.12	518.68	527.84	540.59	556.52	575.25	597.56	622.65	651.33	679.62	711.49	742.96	777.62	812.67	850.52	888.37	929.40	970.83	1015.05	1036.96	1081.18	1119.42	1144.52	1175.99	1195.11
Sharp Health Plan	Premier	HMO C	278.90	303.70	313.17	322.65	332.86	343.07	353.64	364.58	364.58	364.58	364.58	366.04	373.33	382.08	396.30	407.97	413.80	422.55	431.30	436.77	442.60	445.52	448.43	451.35	454.27	460.10	465.93	474.68	483.07	494.74	509.32	526.45	546.87	569.84	596.09	621.97	651.14	679.94	711.66	743.74	778.38	813.01	850.57	888.48	928.95	949.00	989.47	1024.47	1047.44	1076.24	1093.74
UnitedHealthcare	SignatureValue	HMO A	378.44	412.08	424.94	437.80	451.65	465.50	479.85	494.69	494.69	494.69	494.69	496.67	506.56	518.44	537.73	553.56	561.47	573.35	585.22	592.64	600.55	604.51	608.47	612.43	616.38	624.30	632.21	644.09	655.46	671.29	691.08	714.33	742.04	773.20	808.82	843.94	883.52	922.60	965.63	1009.17	1056.16	1103.16	1154.11	1205.56	1260.47	1287.68	1342.59	1390.08	1421.24	1460.32	1484.07
UnitedHealthcare	Alliance	HMO C	332.74	362.31	373.62	384.93	397.11	409.29	421.90	434.95	434.95	434.95	434.95	436.69	445.39	455.83	472.79	486.71	493.67	504.11	514.55	521.07	528.03	531.51	534.99	538.47	541.95	548.91	555.87	566.30	576.31	590.23	607.63	628.07	652.43	679.83	711.14	742.02	776.82	811.18	849.02	887.30	928.62	969.94	1014.74	1059.97	1108.25	1132.17	1180.45	1222.21	1249.61	1283.97	1304.85
Western Health	Full	HMO A	290.72	316.56	326.44	336.32	346.96	357.60	368.62	380.02	380.02	380.02	380.02	381.54	389.14	398.26	413.08	425.24	431.32	440.44	449.56	455.26	461.35	464.39	467.43	470.47	473.51	479.59	485.67	494.79	503.53	515.69	530.89	548.75	570.03	593.97	621.33	648.32	678.72	708.74	741.80	775.24	811.34	847.45	886.59	926.11	968.29	989.19	1031.38	1067.86	1091.80	1121.82	1140.06
Western Health	Full	HMO B	298.09	324.59	334.72	344.85	355.77	366.68	377.98	389.67	389.67	389.67	389.67	391.23	399.02	408.37	423.57	436.04	442.27	451.62	460.98	466.82	473.06	476.17	479.29	482.41	485.52	491.76	497.99	507.35	516.31	528.78	544.36	562.68	584.50	609.05	637.10	664.77	695.94	726.73	760.63	794.92	831.94	868.96	909.09	949.62	992.87	1014.30	1057.56	1094.96	1119.51	1150.30	1169.00

Health Care Service Plan rates will vary by county

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USE EMPLOYER ZIP CODE FOR RATING

AREA 15

10/01/20 - 12/01/20

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	236.41	257.42	265.46	273.49	282.14	290.80	299.76	309.03	309.03	309.03	309.03	310.27	316.45	323.86	335.92	345.80	350.75	358.17	365.58	370.22	375.16	377.63	380.11	382.58	385.05	390.00	394.94	402.36	409.46	419.35	431.71	446.24	463.55	483.01	505.26	527.21	551.93	576.34	603.23	630.42	659.78	689.14	720.97	753.11	787.41	804.41	838.71	868.37	887.84	912.26	927.09
Anthem Blue Cross	Select PPO	PPO B	232.69	253.37	261.28	269.19	277.71	286.22	295.04	304.17	304.17	304.17	304.17	305.39	311.47	318.77	330.63	340.37	345.23	352.53	359.83	364.40	369.26	371.70	374.13	376.56	379.00	383.86	388.73	396.03	403.03	412.76	424.93	439.22	456.26	475.42	497.32	518.91	543.25	567.28	593.74	620.51	649.40	678.30	709.63	741.26	775.03	791.75	825.52	854.72	873.88	897.91	912.51
Anthem Blue Cross	Prudent Buyer - Small Group	EPO A	235.18	256.09	264.08	272.08	280.68	289.29	298.21	307.43	307.43	307.43	307.43	308.66	314.81	322.19	334.18	344.01	348.93	356.31	363.69	368.30	373.22	375.68	378.14	380.60	383.06	387.98	392.90	400.27	407.34	417.18	429.48	443.93	461.15	480.51	502.65	524.48	549.07	573.36	600.10	627.16	656.36	685.57	717.23	749.21	783.33	800.24	834.37	863.88	883.25	907.53	922.29
Health Net	CommunityCare	HMO A	179.65	195.61	201.72	207.83	214.40	220.98	227.79	234.83	234.83	234.83	234.83	235.77	240.47	246.10	255.26	262.78	266.53	272.17	277.80	281.33	285.08	286.96	288.84	290.72	292.60	296.36	300.11	305.75	311.15	318.67	328.06	339.10	352.25	367.04	383.95	400.62	419.41	437.96	458.39	479.05	501.36	523.67	547.86	572.28	598.35	611.26	637.33	659.87	674.67	693.22	704.49
Kaiser Permanente	Full	HMO A	187.05	202.43	208.31	214.20	220.53	212.87	219.44	226.22	226.22	226.22	226.22	227.13	231.65	237.08	245.90	253.14	256.76	262.19	267.62	271.01	274.63	276.44	278.25	280.06	281.87	285.49	289.11	294.54	299.74	306.98	316.03	326.66	339.33	353.58	369.87	385.93	404.03	421.90	441.59	461.49	482.98	504.47	527.78	551.30	576.41	588.86	613.97	635.68	649.94	667.81	678.66
Kaiser Permanente	Full	HMO C	177.14	191.64	197.19	202.73	208.71	200.69	206.87	213.27	213.27	213.27	213.27	214.12	218.39	223.51	231.82	238.65	242.06	247.18	252.30	255.50	258.91	260.62	262.32	264.03	265.73	269.15	272.56	277.68	282.58	289.41	297.94	307.96	319.91	333.34	348.70	363.84	380.90	397.75	416.30	435.07	455.33	475.59	497.56	519.74	543.41	555.14	578.81	599.29	612.72	629.57	639.81
Oscar	Oscar EPO	EPO A	181.83	197.99	204.17	210.35	217.00	223.66	230.55	237.68	237.68	237.68	237.68	238.63	243.38	249.09	258.36	265.96	269.77	275.47	281.18	284.74	288.54	290.44	292.35	294.25	296.15	299.95	303.75	309.46	314.93	322.53	332.04	343.21	356.52	371.49	388.61	405.48	424.50	443.27	463.95	484.87	507.45	530.03	554.51	579.23	605.61	618.68	645.06	667.88	682.85	701.63	713.04
Oscar	Oscar EPO	EPO B	172.64	187.98	193.85	199.72	206.04	212.36	218.90	225.67	225.67	225.67	225.67	226.57	231.09	236.50	245.30	252.53	256.14	261.55	266.97	270.35	273.96	275.77	277.58	279.38	281.19	284.80	288.41	293.82	299.01	306.24	315.26	325.87	338.51	352.72	368.97	384.99	403.05	420.88	440.51	460.37	481.81	503.25	526.49	549.96	575.01	587.42	612.47	634.13	648.35	666.18	677.01
Oscar	Oscar EPO	EPO C	173.63	189.06	194.96	200.86	207.22	213.57	220.15	226.96	226.96	226.96	226.96	227.87	232.41	237.86	246.71	253.97	257.60	263.05	268.50	271.90	275.53	277.35	279.16	280.98	282.79	286.43	290.06	295.50	300.72	307.99	317.07	327.73	340.44	354.74	371.08	387.20	405.35	423.28	443.03	463.00	484.56	506.13	529.50	553.11	578.30	590.78	615.97	637.76	652.06	669.99	680.88
Sharp Health Plan	Premier	HMO A	172.72	188.07	193.95	199.82	206.14	212.46	219.01	225.78	225.78	225.78	225.78	226.68	231.20	236.62	245.42	252.65	256.26	261.68	267.10	270.48	274.10	275.90	277.71	279.52	281.32	284.93	288.55	293.97	299.16	306.38	315.41	326.03	338.67	352.89	369.15	385.18	403.24	421.08	440.72	460.59	482.04	503.49	526.74	550.23	575.29	587.71	612.77	634.44	648.67	666.50	677.34
Sharp Health Plan	Performance	HMO B	197.55	215.11	221.83	228.54	235.77	243.00	250.49	258.24	258.24	258.24	258.24	259.27	264.44	270.64	280.71	288.97	293.10	299.30	305.50	309.37	313.50	315.57	317.64	319.70	321.77	325.90	330.03	336.23	342.17	350.43	360.76	372.90	387.36	403.63	422.22	440.56	461.22	481.62	504.08	526.81	551.34	575.88	602.47	629.33	658.00	672.20	700.86	725.65	741.92	762.32	774.72
UnitedHealthcare	Alliance	HMO A	168.79	183.79	189.53	195.27	201.44	207.62	214.02	220.64	220.64	220.64	220.64	221.52	225.94	231.23	239.84	246.90	250.43	255.72	261.02	264.33	267.86	269.62	271.39	273.15	274.92	278.45	281.98	287.27	292.35	299.41	308.23	318.60	330.96	344.86	360.75	376.41	394.06	411.49	430.69	450.11	471.07	492.03	514.75	537.70	562.19	574.33	598.82	620.00	633.90	651.33	661.92
UnitedHealthcare	Alliance	HMO B	176.59	192.29	198.29	204.29	210.76	217.22	223.91	230.84	230.84	230.84	230.84	231.76	236.38	241.92	250.92	258.31	262.00	267.54	273.08	276.55	280.24	282.09	283.93	285.78	287.63	291.32	295.01	300.55	305.86	313.25	322.48	333.33	346.26	360.80	377.42	393.81	412.28	430.52	450.60	470.91	492.84	514.77	538.55	562.56	588.18	600.88	626.50	648.66	663.20	681.44	692.52
Western Health	Full	HMO B	196.64	214.11	220.80	227.48	234.68	241.87	249.33	257.04	257.04	257.04	257.04	258.07	263.21	269.38	279.40	287.63	291.74	297.91	304.08	307.93	312.05	314.10	316.16	318.21	320.27	324.38	328.50	334.67	340.58	348.80	359.08	371.16	385.56	401.75	420.26	438.51	459.07	479.38	501.74	524.36	548.78	573.20	599.67	626.41	654.94	669.07	697.60	722.28	738.47	758.78	771.12
Western Health	Full	HMO C	201.60	219.52	226.37	233.22	240.60	247.98	255.62	263.53	263.53	263.53	263.53	264.58	269.85	276.18	286.45	294.89	299.10	305.43	311.75	315.70	319.92	322.03	324.14	326.25	328.35	332.57	336.79	343.11	349.17	357.61	368.15	380.53	395.29	411.89	430.87	449.58	470.66	491.48	514.40	537.59	562.63	587.66	614.81	642.21	671.47	685.96	715.21	740.51	757.11	777.93	790.58

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	200.67	218.51	225.33	232.15	239.50	246.84	254.45	262.32	262.32	262.32	262.32	263.37	268.62	274.91	285.14	293.54	297.73	304.03	310.32	314.26	318.46	320.56	322.65	324.75	326.85	331.05	335.24	341.54	347.57	355.97	366.46	378.79	393.48	410.01	428.89	447.52	468.50	489.23	512.05	535.13	560.05	584.97	611.99	639.27	668.39	682.82	711.94	737.12	753.65	774.37	786.96
Anthem Blue Cross	CaliforniaCare HMO	HMO B	224.30	244.24	251.86	259.48	267.69	275.90	284.40	293.20	293.20	293.20	293.20	294.37	300.24	307.27	318.71	328.09	332.78	339.82	346.86	351.25	355.94	358.29	360.64	362.98	365.33	370.02	374.71	381.75	388.49	397.87	409.60	423.38	439.80	458.27	479.38	500.20	523.66	546.82	572.33	598.13	625.98	653.84	684.04	714.53	747.07	763.20	795.74	823.89	842.36	865.53	879.60
Anthem Blue Cross	Advantage PPO	PPO A	273.10	297.37	306.65	315.94	325.93	335.93	346.28	356.99	356.99	356.99	356.99	358.42	365.56	374.13	388.05	399.47	405.18	413.75	422.32	427.67	433.39	436.24	439.10	441.95	444.81	450.52	456.23	464.80	473.01	484.44	498.72	515.49	535.49	557.98	583.68	609.02	637.58	665.79	696.84	728.26	762.17	796.09	832.86	869.98	909.61	929.24	968.87	1003.14	1025.63	1053.83	1070.97
Anthem Blue Cross	Select PPO	PPO B	262.76	286.12	295.05	303.98	313.60	323.21	333.18	343.48	343.48	343.48	343.48	344.85	351.72	359.97	373.36	384.35	389.85	398.09	406.34	411.49	416.98	419.73	422.48	425.23	427.98	433.47	438.97	447.21	455.11	466.10	479.84	495.99	515.22	536.86	561.59	585.98	613.46	640.59	670.47	700.70	733.33	765.96	801.34	837.06	875.19	894.08	932.20	965.18	986.82	1013.95	1030.44
Anthem Blue Cross	Prudent Buyer - Small Group	EPO A	267.00	290.73	299.81	308.88	318.66	328.43	338.55	349.02	349.02	349.02	349.02	350.42	357.40	365.77	379.38	390.55	396.14	404.51	412.89	418.13	423.71	426.50	429.29	432.09	434.88	440.46	446.05	454.42	462.45	473.62	487.58	503.98	523.53	545.52	570.65	595.43	623.35	650.92	681.29	712.00	745.16	778.31	814.26	850.56	889.30	908.50	947.24	980.70	1002.73	1030.31	1047.06
Anthem Blue Cross	Prudent Buyer - Small Group	EPO B	264.59	288.11	297.10	306.09	315.78	325.46	335.49	345.87	345.87	345.87	345.87	347.25	354.17	362.47	375.96	387.03	392.56	400.86	409.16	414.35	419.89	422.65	425.42	428.19	430.95	436.49	442.02	450.32	458.28	469.35	483.18	499.44	518.81	540.59	565.50	590.05	617.72	645.05	675.14	705.57	738.43	771.29	806.91	842.89	881.28	900.30	938.69	971.89	993.68	1021.01	1037.61
Health Net	WholeCare	HMO A	203.45	221.53	228.45	235.36	242.81	250.25	257.97	265.95	265.95	265.95	265.95	267.01	272.33	278.71	289.08	297.59	301.85	308.23	314.61	318.60	322.86	324.99	327.11	329.24	331.37	335.62	339.88	346.26	352.38	360.89	371.53	384.02	398.92	415.67	434.82	453.70	474.98	495.99	519.13	542.53	567.79	593.06	620.45	648.11	677.63	692.26	721.78	747.31	764.06	785.07	797.85
Health Net	CommunityCare	HMO C	202.60	220.61	227.49	234.38	241.79	249.21	256.89	264.83	264.83	264.83	264.83	265.89	271.19	277.55	287.88	296.35	300.59	306.94	313.30	317.27	321.51	323.63	325.75	327.87	329.98	334.22	338.46	344.81	350.91	359.38	369.97	382.42	397.25	413.94	433.00	451.81	472.99	493.92	516.96	540.26	565.42	590.58	617.86	645.40	674.80	689.36	718.76	744.19	760.87	781.79	794.49
Kaiser Permanente	Full	HMO A	215.32	233.21	240.05	246.90	254.26	247.64	255.28	263.17	263.17	263.17	263.17	264.22	269.49	275.80	286.07	294.49	298.70	305.01	311.33	315.28	319.49	321.59	323.70	325.81	327.91	332.12	336.33	342.65	348.70	357.12	367.65	380.02	394.76	411.34	430.28	448.97	470.02	490.81	513.71	536.87	561.87	586.87	613.98	641.35	670.56	685.03	714.25	739.51	756.09	776.88	789.51
Kaiser Permanente	Full	HMO B	218.88	237.09	244.05	251.02	258.52	252.03	259.79	267.83	267.83	267.83	267.83	268.90	274.26	280.68	291.13	299.70	303.99	310.41	316.84	320.86	325.14	327.29	329.43	331.57	333.71	338.00	342.28	348.71	354.87	363.44	374.16	386.74	401.74	418.62	437.90	456.92	478.34	499.50	522.80	546.37	571.81	597.26	624.84	652.70	682.43	697.16	726.89	752.60	769.47	790.63	803.49
Kaiser Permanente	Full	HMO C	225.71	244.53	251.72	258.92	266.67	260.43	268.45	276.76	276.76	276.76	276.76	277.86	283.40	290.04	300.83	309.69	314.12	320.76	327.40	331.55	335.98	338.20	340.41	342.62	344.84	349.27	353.69	360.34	366.70	375.56	386.63	399.64	415.13	432.57	452.50	472.15	494.29	516.15	540.23	564.58	590.87	617.17	645.67	674.46	705.18	720.40	751.12	777.69	795.12	816.98	830.28
Kaiser Permanente	Full	HMO D	203.14	219.95	226.38	232.81	239.73	232.66	239.83	247.25	247.25	247.25	247.25	248.24	253.18	259.12	268.76	276.67	280.63	286.56	292.50	296.21	300.16	302.14	304.12	306.09	308.07	312.03	315.98	321.92	327.61	335.52	345.41	357.03	370.87	386.45	404.25	421.81	441.59	461.12	482.63	504.39	527.88	551.37	576.83	602.55	629.99	643.59	671.04	694.77	710.35	729.88	741.75
Oscar	Oscar EPO	EPO A	208.06	226.56	233.63	240.70	248.32	255.93	263.82	271.98	271.98	271.98	271.98	273.07	278.50	285.03	295.64	304.34	308.69	315.22	321.75	325.83	330.18	332.36	334.53	336.71	338.88	343.24	347.59	354.11	360.37	369.07	379.95	392.74	407.97	425.10	444.68	463.99	485.75	507.24	530.90	554.83	580.67	606.51	634.52	662.81	693.00	707.96	738.15	764.26	781.39	802.88	815.93
Oscar	Oscar EPO	EPO B	234.22	255.04	263.00	270.96	279.54	288.11	296.99	306.17	306.17	306.17	306.17	307.40	313.52	320.87	332.81	342.61	347.51	354.85	362.20	366.79	371.69	374.14	376.59	379.04	381.49	386.39	391.29	398.64	405.68	415.48	427.72	442.11	459.26	478.55	500.59	522.33	546.82	571.01	597.65	624.59	653.68	682.77	714.30	746.14	780.13	796.97	830.95	860.35	879.63	903.82	918.51
Oscar	Oscar EPO	EPO C	207.80	226.28	233.34	240.40	248.01	255.61	263.49	271.64	271.64	271.64	271.64	272.73	278.16	284.68	295.27	303.97	308.31	314.83	321.35	325.43	329.77	331.94	334.12	336.29	338.46	342.81	347.16	353.68	359.92	368.62	379.48	392.25	407.46	424.57	444.13	463.42	485.15	506.61	530.24	554.15	579.95	605.76	633.74	661.99	692.14	707.08	737.23	763.31	780.42	801.88	814.92
Oscar	Oscar EPO	EPO D	233.72	254.49	262.44	270.38	278.93	287.49	296.35	305.51	305.51	305.51	305.51	306.74	312.85	320.18	332.09	341.87	346.76	354.09	361.42	366.01	370.89	373.34	375.78	378.23	380.67	385.56	390.45	397.78	404.81	414.58	426.80	441.16	458.27	477.52	499.52	521.21	545.65	569.78	596.36	623.25	652.27	681.30	712.77	744.54	778.45	795.25	829.17	858.50	877.74	901.88	916.53
Sharp Health Plan	Premier	HMO A	202.89	220.92	227.82	234.71	242.14	249.56	257.25	265.21	265.21	265.21	265.21	266.27	271.58	277.94	288.28	296.77	301.01	307.38	313.74	317.72	321.96	324.09	326.21	328.33	330.45	334.70	338.94	345.30	351.40	359.89	370.50	382.96	397.82	414.52	433.62	452.45	473.67	494.62	517.69	541.03	566.22	591.42	618.73	646.32	675.76	690.34	719.78	745.24	761.95	782.90	795.63
Sharp Health Plan	Performance	HMO B	215.29	234.42	241.74	249.06	256.94	264.82	272.98	281.42	281.42	281.42	281.42	282.55	288.17	294.93	305.90	314.91	319.41	326.17	332.92	337.14	341.64	343.90	346.15	348.40	350.65	355.15	359.65	366.41	372.88	381.89	393.14	406.37	422.13	439.86	460.12	480.10	502.62	524.85	549.33	574.10	600.83	627.57	656.55	685.82	717.06	732.54	763.77	790.79	808.52	830.75	844.26
Sharp Health Plan	Premier	HMO C	197.90	215.49	222.21	228.94	236.18	243.43	250.93	258.69	258.69	258.69	258.69	259.72	264.90	271.11	281.20	289.47	293.61	299.82	306.03	309.91	314.05	316.12	318.19	320.26	322.33	326.47	330.61	336.81	342.76	351.04	361.39	373.55	388.04	404.33	422.96	441.33	462.02	482.46	504.96	527.73	552.30	576.88	603.52	630.43	659.14	673.37	702.08	726.92	743.22	763.65	776.07
UnitedHealthcare	SignatureValue	HMO A	236.72	257.76	265.81	273.85	282.52	291.18	300.16	309.44	309.44	309.44	309.44	310.68	316.87	324.29	336.36	346.26	351.21	358.64	366.07	370.71	375.66	378.14	380.61	383.09	385.56	390.51	395.46	402.89	410.01	419.91	432.29	446.83	464.16	483.65	505.93	527.90	552.66	577.11	604.03	631.26	660.65	690.05	721.92	754.11	788.45	805.47	839.82	869.53	889.02	913.47	928.32
UnitedHealthcare	Advantage	HMO B	215.46	234.61	241.94	249.26	257.15	265.03	273.20	281.65	281.65	281.65	281.65	282.78	288.41	295.17	306.15	315.17	319.67	326.43	333.19	337.42	341.92	344.18	346.43	348.68	350.94	355.44	359.95	366.71	373.19	382.20	393.47	406.70	422.48	440.22	460.50	480.49	503.03	525.28	549.78	574.57	601.32	628.08	657.09	686.38	717.64	733.13	764.40	791.44	809.18	831.43	844.95
UnitedHealthcare	Alliance	HMO C	188.40	205.15	211.55	217.96	224.85	231.75	238.89	246.28	246.28	246.28	246.28	247.27	252.19	258.10	267.71	275.59	279.53	285.44	291.35	295.04	298.98	300.95	302.92	304.89	306.86	310.81	314.75	320.66	326.32	334.20	344.05	355.63	369.42	384.94	402.67	420.15	439.86	459.31	480.74	502.41	525.81	549.20	574.57	600.18	627.52	641.07	668.40	692.05	707.56	727.02	738.84
UnitedHealthcare	Focus	HMO D	215.15	234.27	241.59	248.90	256.77	264.65	272.80	281.24	281.24	281.24	281.24	282.36	287.99	294.74	305.71	314.71	319.21	325.96	332.71	336.93	341.43	343.68	345.93	348.18	350.43	354.92	359.42	366.17	372.64	381.64	392.89	406.11	421.86	439.58	459.83	479.80	502.29	524.51	548.98	573.73	600.45	627.17	656.13	685.38	716.60	732.07	763.29	790.28	808.00	830.22	843.72
Western Health	Full	HMO A	221.05	240.70	248.21	255.73	263.82	271.91	280.29	288.96	288.96	288.96	288.96	290.11	295.89	302.83	314.10	323.34	327.97	334.90	341.83	346.17	350.79	353.10	355.42	357.73	360.04	364.66	369.29	376.22	382.87	392.11	403.67	417.25	433.43	451.64	472.44	492.96	516.08	538.90	564.04	589.47	616.92	644.37	674.13	704.19	736.26	752.15	784.23	811.97	830.17	853.00	866.87
Western Health	Full	HMO B	232.10	252.74	260.62	268.51	277.01	285.50	294.30	303.40	303.40	303.40	303.40	304.62	310.69	317.97	329.80	339.51	344.36	351.65	358.93	363.48	368.33	370.76	373.19	375.61	378.04	382.90	387.75	395.03	402.01	411.72	423.86	438.12	455.11	474.22	496.07	517.61	541.88	565.85	592.24	618.94	647.77	676.59	707.84	739.40	773.07	789.76	823.44	852.56	871.68	895.65	910.21
Western Health	Full	HMO C	216.67	235.93	243.30	250.66	258.59	266.52	274.74	283.23	283.23	283.23	283.23	284.36	290.03	296.83	307.87	316.94	321.47	328.27	335.06	339.31	343.84	346.11	348.38	350.64	352.91	357.44	361.97	368.77	375.28	384.35	395.68	408.99	424.85	442.69	463.08	483.19	505.85	528.23	552.87	577.79	604.70	631.61	660.78	690.24	721.68	737.25	768.69	795.88	813.73	836.10	849.70

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	250.74	273.03	281.55	290.08	299.25	308.43	317.94	327.77	327.77	327.77	327.77	329.08	335.64	343.50	356.29	366.77	372.02	379.89	387.75	392.67	397.91	400.53	403.16	405.78	408.40	413.65	418.89	426.76	434.30	444.78	457.89	473.30	491.66	512.30	535.90	559.18	585.40	611.29	639.81	668.65	699.79	730.93	764.69	798.78	835.16	853.19	889.57	921.03	941.68	967.58	983.31
Anthem Blue Cross	CaliforniaCare HMO	HMO B	280.27	305.18	314.70	324.23	334.49	344.74	355.37	366.36	366.36	366.36	366.36	367.83	375.15	383.95	398.23	409.96	415.82	424.61	433.40	438.90	444.76	447.69	450.62	453.55	456.48	462.35	468.21	477.00	485.43	497.15	511.80	529.02	549.54	572.62	599.00	625.01	654.32	683.26	715.13	747.37	782.18	816.98	854.72	892.82	933.49	953.64	994.30	1029.47	1052.55	1081.49	1099.08
Anthem Blue Cross	Advantage PPO	PPO A	328.37	357.56	368.72	379.88	391.90	403.91	416.36	429.24	429.24	429.24	429.24	430.96	439.54	449.84	466.58	480.32	487.19	497.49	507.79	514.23	521.10	524.53	527.97	531.40	534.83	541.70	548.57	558.87	568.74	582.48	599.65	619.82	643.86	670.90	701.81	732.28	766.62	800.53	837.88	875.65	916.43	957.21	1001.42	1046.06	1093.70	1117.31	1164.96	1206.16	1233.21	1267.12	1287.72
Anthem Blue Cross	Select PPO	PPO B	311.62	339.31	349.91	360.50	371.90	383.31	395.12	407.34	407.34	407.34	407.34	408.97	417.12	426.89	442.78	455.81	462.33	472.11	481.88	487.99	494.51	497.77	501.03	504.29	507.55	514.06	520.58	530.36	539.73	552.76	569.05	588.20	611.01	636.67	666.00	694.92	727.51	759.69	795.13	830.97	869.67	908.37	950.32	992.69	1037.

USE EMPLOYER ZIP CODE FOR RATING

AREA 15 - Continued

10/01/20 - 12/01/20

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	287.17	312.70	322.46	332.22	342.73	353.24	364.13	375.39	375.39	375.39	375.39	376.89	384.40	393.41	408.05	420.06	426.07	435.08	444.09	449.72	455.72	458.73	461.73	464.73	467.74	473.74	479.75	488.76	497.39	509.40	524.42	542.06	563.09	586.73	613.76	640.42	670.45	700.10	732.76	765.80	801.46	837.12	875.78	914.83	956.49	977.14	1018.81	1054.85	1078.50	1108.15	1126.17
Health Net	WholeCare	HMO C	232.57	253.25	261.15	269.05	277.57	286.08	294.90	304.02	304.02	304.02	304.02	305.23	311.31	318.61	330.47	340.19	345.06	352.36	359.65	364.21	369.08	371.51	373.94	376.37	378.80	383.67	388.53	395.83	402.82	412.55	424.71	439.00	456.03	475.18	497.07	518.65	542.97	566.99	593.44	620.19	649.08	677.96	709.27	740.89	774.63	791.36	825.10	854.29	873.44	897.46	912.06
Health Net	Salud HMO y Mas	HMO D	216.62	235.88	243.24	250.61	258.53	266.46	274.67	283.17	283.17	283.17	283.17	284.30	289.97	296.76	307.81	316.87	321.40	328.19	334.99	339.24	343.77	346.03	348.30	350.56	352.83	357.36	361.89	368.69	375.20	384.26	395.59	408.90	424.75	442.59	462.98	483.09	505.74	528.11	552.75	577.67	604.57	631.47	660.64	690.08	721.52	737.09	768.52	795.71	813.55	835.92	849.51
Health Net	Full	HMO E	267.46	291.23	300.32	309.41	319.20	328.99	339.13	349.62	349.62	349.62	349.62	351.02	358.01	366.40	380.04	391.22	396.82	405.21	413.60	418.84	424.44	427.23	430.03	432.83	435.63	441.22	446.81	455.20	463.25	474.43	488.42	504.85	524.43	546.45	571.63	596.45	624.42	652.04	682.46	713.22	746.44	779.65	815.66	852.02	890.83	910.06	948.87	982.43	1004.46	1032.08	1048.86
Kaiser Permanente	Full	HMO A	298.18	323.44	333.10	342.76	353.16	349.57	360.34	371.49	371.49	371.49	371.49	372.97	380.40	389.32	403.81	415.69	421.64	430.55	439.47	445.04	450.99	453.96	456.93	459.90	462.87	468.82	474.76	483.68	492.22	504.11	518.97	536.43	557.23	580.63	607.38	633.76	663.48	692.82	725.14	757.83	793.13	828.42	866.68	905.31	946.55	966.98	1008.22	1043.88	1067.28	1096.63	1114.47
Kaiser Permanente	Full	HMO B	295.19	320.19	329.75	339.30	349.60	345.90	356.56	367.59	367.59	367.59	367.59	369.06	376.41	385.23	399.57	411.33	417.21	426.03	434.85	440.37	446.25	449.19	452.13	455.07	458.01	463.89	469.77	478.60	487.05	498.81	513.52	530.79	551.38	574.54	601.00	627.10	656.51	685.55	717.53	749.87	784.79	819.72	857.58	895.81	936.61	956.82	997.63	1032.91	1056.07	1085.11	1102.77
Oscar	Oscar EPO	EPO A	287.01	312.52	322.28	332.03	342.54	353.04	363.92	375.18	375.18	375.18	375.18	376.68	384.18	393.19	407.82	419.82	425.83	434.83	443.83	449.46	455.46	458.47	461.47	464.47	467.47	473.47	479.48	488.48	497.11	509.11	524.12	541.76	562.77	586.40	613.41	640.05	670.07	699.70	732.35	765.36	801.00	836.64	875.29	914.31	955.95	976.59	1018.23	1054.25	1077.88	1107.52	1125.53
Oscar	Oscar EPO	EPO B	281.96	307.02	316.61	326.19	336.51	346.83	357.52	368.57	368.57	368.57	368.57	370.05	377.42	386.27	400.64	412.43	418.33	427.18	436.02	441.55	447.45	450.40	453.35	456.29	459.24	465.14	471.04	479.88	488.36	500.16	514.90	532.22	552.86	576.08	602.62	628.79	658.27	687.39	719.46	751.89	786.91	821.92	859.88	898.22	939.13	959.40	1000.31	1035.69	1058.91	1088.03	1105.71
Sharp Health Plan	Premier	HMO A	282.90	308.04	317.66	327.27	337.63	347.98	358.71	369.80	369.80	369.80	369.80	371.28	378.68	387.55	401.97	413.81	419.72	428.60	437.47	443.02	448.94	451.90	454.85	457.81	460.77	466.69	472.60	481.48	489.99	501.82	516.61	533.99	554.70	578.00	604.62	630.88	660.46	689.68	721.85	754.39	789.52	824.65	862.74	901.20	942.25	962.59	1003.64	1039.14	1062.44	1091.65	1109.40
Sharp Health Plan	Performance	HMO B	304.75	331.84	342.20	352.56	363.71	374.87	386.42	398.37	398.37	398.37	398.37	399.96	407.93	417.49	433.03	445.78	452.15	461.71	471.27	477.25	483.62	486.81	490.00	493.18	496.37	502.74	509.12	518.68	527.84	540.59	556.52	575.25	597.56	622.65	651.33	679.62	711.49	742.96	777.62	812.67	850.52	888.37	929.40	970.83	1015.05	1036.96	1081.18	1119.42	1144.52	1175.99	1195.11
Sharp Health Plan	Premier	HMO C	278.90	303.70	313.17	322.65	332.86	343.07	353.64	364.58	364.58	364.58	364.58	366.04	373.33	382.08	396.30	407.97	413.80	422.55	431.30	436.77	442.60	445.52	448.43	451.35	454.27	460.10	465.93	474.68	483.07	494.74	509.32	526.45	546.87	569.84	596.09	621.97	651.14	679.94	711.66	743.74	778.38	813.01	850.57	888.48	928.95	949.00	989.47	1024.47	1047.44	1076.24	1093.74
UnitedHealthcare	SignatureValue	HMO A	313.41	341.26	351.92	362.57	374.04	385.51	397.39	409.68	409.68	409.68	409.68	411.32	419.51	429.34	445.32	458.43	464.99	474.82	484.65	490.80	497.35	500.63	503.91	507.18	510.46	517.02	523.57	533.40	542.83	555.94	572.32	591.58	614.52	640.33	669.83	698.91	731.69	764.05	799.70	835.75	874.67	913.59	955.78	998.39	1043.86	1066.40	1111.87	1151.20	1177.01	1209.38	1229.04
UnitedHealthcare	Focus	HMO B	284.85	310.17	319.85	329.53	339.96	350.38	361.18	372.35	372.35	372.35	372.35	373.84	381.29	390.22	404.74	416.66	422.62	431.55	440.49	446.08	452.03	455.01	457.99	460.97	463.95	469.91	475.86	484.80	493.36	505.28	520.17	537.67	558.53	581.98	608.79	635.23	665.02	694.43	726.83	759.59	794.97	830.34	868.69	907.42	948.75	969.23	1010.56	1046.30	1069.76	1099.18	1117.05
UnitedHealthcare	Alliance	HMO C	275.56	300.05	309.42	318.79	328.87	338.96	349.40	360.21	360.21	360.21	360.21	361.65	368.86	377.50	391.55	403.07	408.84	417.48	426.13	431.53	437.29	440.18	443.06	445.94	448.82	454.59	460.35	468.99	477.28	488.80	503.21	520.14	540.32	563.01	588.94	614.52	643.34	671.79	703.13	734.83	769.05	803.27	840.37	877.83	917.82	937.63	977.61	1012.19	1034.88	1063.34	1080.63
Western Health	Full	HMO A	290.72	316.56	326.44	336.32	346.96	357.60	368.62	380.02	380.02	380.02	380.02	381.54	389.14	398.26	413.08	425.24	431.32	440.44	449.56	455.26	461.35	464.39	467.43	470.47	473.51	479.59	485.67	494.79	503.53	515.69	530.89	548.75	570.03	593.97	621.33	648.32	678.72	708.74	741.80	775.24	811.34	847.45	886.59	926.11	968.29	989.19	1031.38	1067.86	1091.80	1121.82	1140.06
Western Health	Full	HMO B	298.09	324.59	334.72	344.85	355.77	366.68	377.98	389.67	389.67	389.67	389.67	391.23	399.02	408.37	423.57	436.04	442.27	451.62	460.98	466.82	473.06	476.17	479.29	482.41	485.52	491.76	497.99	507.35	516.31	528.78	544.36	562.68	584.50	609.05	637.10	664.77	695.94	726.73	760.63	794.92	831.94	868.96	909.09	949.62	992.87	1014.30	1057.56	1094.96	1119.51	1150.30	1169.00

Health Care Service Plan rates will vary by county

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USE EMPLOYER ZIP CODE FOR RATING

AREA 16

10/01/20 - 12/01/20

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	278.00	302.71	312.16	321.61	331.78	341.96	352.50	363.40	363.40	363.40	363.40	364.85	372.12	380.84	395.02	406.64	412.46	421.18	429.90	435.35	441.17	444.07	446.98	449.89	452.80	458.61	464.43	473.15	481.51	493.13	507.67	524.75	545.10	567.99	594.16	619.96	649.03	677.74	709.36	741.34	775.86	810.38	847.81	885.61	925.94	945.93	986.27	1021.15	1044.05	1072.76	1090.20
Anthem Blue Cross	Select PPO	PPO B	278.00	302.71	312.16	321.61	331.78	341.96	352.50	363.40	363.40	363.40	363.40	364.85	372.12	380.84	395.02	406.64	412.46	421.18	429.90	435.35	441.17	444.07	446.98	449.89	452.80	458.61	464.43	473.15	481.51	493.13	507.67	524.75	545.10	567.99	594.16	619.96	649.03	677.74	709.36	741.34	775.86	810.38	847.81	885.61	925.94	945.93	986.27	1021.15	1044.05	1072.76	1090.20
Anthem Blue Cross	Prudent Buyer - Small Group	EPO A	276.55	301.13	310.53	319.93	330.05	340.17	350.66	361.50	361.50	361.50	361.50	362.95	370.18	378.85	392.95	404.52	410.30	418.98	427.65	433.08	438.86	441.75	444.65	447.54	450.43	456.21	462.00	470.67	478.99	490.56	505.02	522.01	542.25	565.02	591.05	616.72	645.64	674.20	705.65	737.46	771.80	806.15	843.38	880.98	921.10	940.98	981.11	1015.82	1038.59	1067.15	1084.50
Health Net	CommunityCare	HMO A	199.12	216.82	223.59	230.36	237.65	244.94	252.48	260.29	260.29	260.29	260.29	261.33	266.54	272.79	282.94	291.27	295.43	301.68	307.93	311.83	316.00	318.08	320.16	322.24	324.33	328.49	332.66	338.90	344.89	353.22	363.63	375.86	390.44	406.84	425.58	444.06	464.88	485.45	508.09	531.00	555.73	580.46	607.27	634.34	663.23	677.54	706.44	731.43	747.82	768.39	780.87
Kaiser Permanente	Full	HMO A	195.70	211.86	218.03	224.21	230.86	223.52	230.41	237.53	237.53	237.53	237.53	238.48	243.23	248.93	258.20	265.80	269.60	275.30	281.00	284.56	288.37	290.27	292.17	294.07	295.97	299.77	303.57	309.27	314.73	322.33	331.83	343.00	356.30	371.26	388.37	405.23	424.23	443.00	463.66	484.57	507.13	529.70	554.16	578.87	605.23	618.30	644.66	667.47	682.43	701.20	712.59
Kaiser Permanente	Full	HMO C	185.30	200.53	206.35	212.17	218.44	210.72	217.22	223.93	223.93	223.93	223.93	224.83	229.31	234.68	243.42	250.58	254.16	259.54	264.91	268.27	271.86	273.65	275.44	277.23	279.02	282.60	286.19	291.56	296.71	303.88	312.84	323.36	335.90	350.01	366.13	382.03	399.95	417.64	437.12	456.82	478.10	499.37	522.44	545.73	570.58	582.90	607.76	629.25	643.36	661.05	671.79
Oscar	Oscar EPO	EPO A	187.26	203.90	210.26	216.63	223.48	230.34	237.44	244.78	244.78	244.78	244.78	245.76	250.65	256.53	266.07	273.91	277.82	283.70	289.57	293.24	297.16	299.12	301.08	303.04	304.99	308.91	312.83	318.70	324.33	332.16	341.96	353.46	367.17	382.59	400.21	417.59	437.17	456.51	477.81	499.35	522.60	545.86	571.07	596.52	623.70	637.16	664.33	687.83	703.25	722.59	734.34
Oscar	Oscar EPO	EPO B	177.79	193.60	199.64	205.68	212.19	218.70	225.44	232.41	232.41	232.41	232.41	233.34	237.99	243.57	252.63	260.07	263.79	269.36	274.94	278.43	282.15	284.01	285.87	287.72	289.58	293.30	297.02	302.60	307.94	315.38	324.68	335.60	348.62	363.26	379.99	396.49	415.09	433.45	453.67	474.12	496.20	518.28	542.21	566.38	592.18	604.97	630.76	653.07	667.72	686.08	697.23
Oscar	Oscar EPO	EPO C	178.81	194.71	200.78	206.86	213.40	219.95	226.73	233.74	233.74	233.74	233.74	234.68	239.35	244.96	254.08	261.56	265.30	270.91	276.51	280.02	283.76	285.63	287.50	289.37	291.24	294.98	298.72	304.33	309.71	317.19	326.54	337.52	350.61	365.34	382.17	398.76	417.46	435.93	456.26	476.83	499.04	521.24	545.32	569.63	595.57	608.43	634.37	656.81	671.54	690.00	701.22
Sharp Health Plan	Premier	HMO A	172.72	188.07	193.95	199.82	206.14	212.46	219.01	225.78	225.78	225.78	225.78	226.68	231.20	236.62	245.42	252.65	256.26	261.68	267.10	270.48	274.10	275.90	277.71	279.52	281.32	284.93	288.55	293.97	299.16	306.38	315.41	326.03	338.67	352.89	369.15	385.18	403.24	421.08	440.72	460.59	482.04	503.49	526.74	550.23	575.29	587.71	612.77	634.44	648.67	666.50	677.34
Sharp Health Plan	Performance	HMO B	197.55	215.11	221.83	228.54	235.77	243.00	250.49	258.24	258.24	258.24	258.24	259.27	264.44	270.64	280.71	288.97	293.10	299.30	305.50	309.37	313.50	315.57	317.64	319.70	321.77	325.90	330.03	336.23	342.17	350.43	360.76	372.90	387.36	403.63	422.22	440.56	461.22	481.62	504.08	526.81	551.34	575.88	602.47	629.33	658.00	672.20	700.86	725.65	741.92	762.32	774.72
UnitedHealthcare	Alliance	HMO A	168.79	183.79	189.53	195.27	201.44	207.62	214.02	220.64	220.64	220.64	220.64	221.52	225.94	231.23	239.84	246.90	250.43	255.72	261.02	264.33	267.86	269.62	271.39	273.15	274.92	278.45	281.98	287.27	292.35	299.41	308.23	318.60	330.96	344.86	360.75	376.41	394.06	411.49	430.69	450.11	471.07	492.03	514.75	537.70	562.19	574.33	598.82	620.00	633.90	651.33	661.92
UnitedHealthcare	Alliance	HMO B	176.59	192.29	198.29	204.29	210.76	217.22	223.91	230.84	230.84	230.84	230.84	231.76	236.38	241.92	250.92	258.31	262.00	267.54	273.08	276.55	280.24	282.09	283.93	285.78	287.63	291.32	295.01	300.55	305.86	313.25	322.48	333.33	346.26	360.80	377.42	393.81	412.28	430.52	450.60	470.91	492.84	514.77	538.55	562.56	588.18	600.88	626.50	648.66	663.20	681.44	692.52
Western Health	Full	HMO B	196.64	214.11	220.80	227.48	234.68	241.87	249.33	257.04	257.04	257.04	257.04	258.07	263.21	269.38	279.40	287.63	291.74	297.91	304.08	307.93	312.05	314.10	316.16	318.21	320.27	324.38	328.50	334.67	340.58	348.80	359.08	371.16	385.56	401.75	420.26	438.51	459.07	479.38	501.74	524.36	548.78	573.20	599.67	626.41	654.94	669.07	697.60	722.28	738.47	758.78	771.12
Western Health	Full	HMO C	201.60	219.52	226.37	233.22	240.60	247.98	255.62	263.53	263.53	263.53	263.53	264.58	269.85	276.18	286.45	294.89	299.10	305.43	311.75	315.70	319.92	322.03	324.14	326.25	328.35	332.57	336.79	343.11	349.17	357.61	368.15	380.53	395.29	411.89	430.87	449.58	470.66	491.48	514.40	537.59	562.63	587.66	614.81	642.21	671.47	685.96	715.21	740.51	757.11	777.93	790.58

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	222.86	242.67	250.24	257.82	265.98	274.13	282.58	291.32	291.32	291.32	291.32	292.49	298.31	305.30	316.66	325.99	330.65	337.64	344.63	349.00	353.66	355.99	358.32	360.65	362.98	367.65	372.31	379.30	386.00	395.32	406.97	420.67	436.98	455.33	476.31	496.99	520.30	543.31	568.66	594.29	621.97	649.64	679.65	709.95	742.28	758.31	790.64	818.61	836.96	859.98	873.96
Anthem Blue Cross	CaliforniaCare HMO	HMO B	257.85	280.77	289.53	298.30	307.74	317.17	326.95	337.06	337.06	337.06	337.06	338.41	345.15	353.24	366.38	377.17	382.56	390.65	398.74	403.80	409.19	411.89	414.58	417.28	419.98	425.37	430.76	438.85	446.60	457.39	470.87	486.71	505.59	526.82	551.09	575.02	601.99	628.62	657.94	687.60	719.62	751.64	786.36	821.42	858.83	877.37	914.78	947.14	968.37	995.00	1011.18
Anthem Blue Cross	Advantage PPO	PPO A	321.11	349.65	360.57	371.48	383.23	394.98	407.16	419.75	419.75	419.75	419.75	421.43	429.82	439.90	456.27	469.70	476.42	486.49	496.56	502.86	509.58	512.93	516.29	519.65	523.01	529.72	536.44	546.51	556.17	569.60	586.39	606.12	629.63	656.07	686.29	716.09	749.67	782.83	819.35	856.29	896.17	936.04	979.28	1022.93	1069.52	1092.61	1139.20	1179.50	1205.94	1239.10	1259.25
Anthem Blue Cross	Select PPO	PPO B	313.93	341.84	352.51	363.18	374.67	386.16	398.06	410.37	410.37	410.37	410.37	412.01	420.22	430.07	446.07	459.20	465.77	475.62	485.47	491.62	498.19	501.47	504.76	508.04	511.32	517.89	524.45	534.30	543.74	556.87	573.29	592.57	615.56	641.41	670.95	700.09	732.92	765.34	801.04	837.15	876.14	915.13	957.39	1000.07	1045.62	1068.19	1113.74	1153.14	1178.99	1211.41	1231.11
Anthem Blue Cross	Prudent Buyer - Small Group	PPO C	313.93	341.84	352.51	363.18	374.67	386.16	398.06	410.37	410.37	410.37	410.37	412.01	420.22	430.07	446.07	459.20	465.77	475.62	485.47	491.62	498.19	501.47	504.76	508.04	511.32	517.89	524.45	534.30	543.74	556.87	573.29	592.57	615.56	641.41	670.95	700.09	732.92	765.34	801.04	837.15	876.14	915.13	957.39	1000.07	1045.62	1068.19	1113.74	1153.14	1178.99	1211.41	1231.11
Anthem Blue Cross	Prudent Buyer - Small Group	EPO A	310.67	338.29	348.85	359.41	370.78	382.15	393.93	406.11	406.11	406.11	406.11	407.73	415.86	425.60	441.44	454.44	460.93	470.68	480.43	486.52	493.02	496.27	499.52	502.76	506.01	512.51	519.01	528.76	538.10	551.09	567.34	586.42	609.17	634.75	663.99	692.82	725.31	757.40	792.73	828.46	867.04	905.63	947.45	989.69	1034.77	1057.10	1102.18	1141.17	1166.75	1198.84	1218.33
Anthem Blue Cross	Prudent Buyer - Small Group	EPO B	311.13	338.78	349.36	359.93	371.32	382.70	394.50	406.70	406.70	406.70	406.70	408.33	416.46	426.22	442.08	455.10	461.60	471.37	481.13	487.23	493.73	496.99	500.24	503.49	506.75	513.26	519.76	529.52	538.88	551.89	568.16	587.27	610.05	635.67	664.95	693.83	726.37	758.50	793.88	829.67	868.30	906.94	948.83	991.13	1036.27	1058.64	1103.78	1142.83	1168.45	1200.58	1220.10
Health Net	WholeCare	HMO A	203.45	221.53	228.45	235.36	242.81	250.25	257.97	265.95	265.95	265.95	265.95	267.01	272.33	278.71	289.08	297.59	301.85	308.23	314.61	318.60	322.86	324.99	327.11	329.24	331.37	335.62	339.88	346.26	352.38	360.89	371.53	384.02	398.92	415.67	434.82	453.70	474.98	495.99	519.13	542.53	567.79	593.06	620.45	648.11	677.63	692.26	721.78	747.31	764.06	785.07	797.85
Health Net	CommunityCare	HMO C	224.57	244.53	252.16	259.79	268.01	276.23	284.74	293.55	293.55	293.55	293.55	294.73	300.60	307.64	319.09	328.48	333.18	340.23	347.27	351.67	356.37	358.72	361.07	363.42	365.76	370.46	375.16	382.20	388.96	398.35	410.09	423.89	440.33	458.82	479.96	500.80	524.28	547.47	573.01	598.84	626.73	654.62	684.85	715.38	747.97	764.11	796.70	824.88	843.37	866.56	880.65
Kaiser Permanente	Full	HMO A	225.38	244.17	251.36	258.54	266.28	260.03	268.04	276.33	276.33	276.33	276.33	277.43	282.96	289.59	300.37	309.21	313.63	320.27	326.90	331.04	335.46	337.67	339.88	342.10	344.31	348.73	353.15	359.78	366.14	374.98	386.03	399.02	414.49	431.90	451.80	471.42	493.52	515.35	539.39	563.71	589.96	616.21	644.68	673.41	704.09	719.28	749.96	776.49	793.89	815.72	828.99
Kaiser Permanente	Full	HMO B	229.12	248.25	255.56	262.87	270.74	264.63	272.78	281.22	281.22	281.22	281.22	282.34	287.97	294.72	305.69	314.69	319.18	325.93	332.68	336.90	341.40	343.65	345.90	348.15	350.40	354.90	359.40	366.15	372.62	381.62	392.86	406.08	421.83	439.55	459.79	479.76	502.26	524.48	548.94	573.69	600.40	627.12	656.09	685.33	716.55	732.02	763.23	790.23	807.94	830.16	843.66
Kaiser Permanente	Full	HMO C	236.29	256.05	263.61	271.17	279.30	273.45	281.88	290.59	290.59	290.59	290.59	291.76	297.57	304.54	315.88	325.17	329.82	336.80	343.77	348.13	352.78	355.11	357.43	359.76	362.08	366.73	371.38	378.35	385.04	394.34	405.96	419.62	435.89	454.20	475.12	495.75	519.00	541.96	567.24	592.81	620.42	648.02	677.96	708.18	740.43	756.42	788.67	816.57	834.88	857.83	871.77
Kaiser Permanente	Full	HMO D	212.59	230.25	237.00	243.75	251.02	244.29	251.82	259.61	259.61	259.61	259.61	260.65	265.84	272.07	282.20	290.51	294.66	300.89	307.12	311.02	315.17	317.25	319.32	321.40	323.48	327.63	331.78	338.01	343.99	352.29	362.68	374.88	389.42	405.77	424.47	442.90	463.67	484.18	506.76	529.61	554.27	578.93	605.67	632.67	661.49	675.77	704.59	729.51	745.87	766.37	778.83
Oscar	Oscar EPO	EPO A	214.28	233.32	240.61	247.89	255.73	263.57	271.70	280.10	280.10	280.10	280.10	281.22	286.82	293.55	304.47	313.43	317.91	324.64	331.36	335.56	340.04	342.28	344.52	346.76	349.00	353.49	357.97	364.69	371.13	380.10	391.30	404.46	420.15	437.80	457.96	477.85	500.26	522.39	546.76	571.40	598.01	624.62	653.47	682.60	713.70	729.10	760.19	787.08	804.73	826.86	840.30
Oscar	Oscar EPO	EPO B	241.22	262.66	270.86	279.06	287.88	296.71	305.86	315.32	315.32	315.32	315.32	316.58	322.88	330.45	342.75	352.84	357.88	365.45	373.02	377.75	382.79	385.32	387.84	390.36	392.88	397.93	402.97	410.54	417.79	427.89	440.50	455.32	472.98	492.84	515.54	537.93	563.16	588.07	615.50	643.25	673.20	703.16	735.63	768.43	803.43	820.77	855.77	886.04	905.91	930.82	945.95
Oscar	Oscar EPO	EPO C	214.01	233.03	240.31	247.58	255.41	263.25	271.36	279.75	279.75	279.75	279.75	280.87	286.47	293.18	304.09	313.04	317.52	324.23	330.95	335.14	339.62	341.86	344.10	346.33	348.57	353.05	357.52	364.24	370.67	379.62	390.82	403.96	419.63	437.25	457.40	477.26	499.64	521.74	546.08	570.70	597.27	623.85	652.66	681.76	712.81	728.20	759.25	786.11	803.73	825.83	839.25
Oscar	Oscar EPO	EPO D	240.70	262.09	270.27	278.46	287.27	296.08	305.20	314.64	314.64	314.64	314.64	315.90	322.19	329.74	342.01	352.08	357.12	364.67	372.22	376.94	381.97	384.49	387.01	389.52	392.04	397.07	402.11	409.66	416.90	426.97	439.55	454.34	471.96	491.78	514.43	536.77	561.95	586.80	614.18	641.86	671.75	701.64	734.05	766.78	801.70	819.01	853.93	884.14	903.96	928.81	943.92
Sharp Health Plan	Premier	HMO A	202.89	220.92	227.82	234.71	242.14	249.56	257.25	265.21	265.21	265.21	265.21	266.27	271.58	277.94	288.28	296.77	301.01	307.38	313.74	317.72	321.96	324.09	326.21	328.33	330.45	334.70	338.94	345.30	351.40	359.89	370.50	382.96	397.82	414.52	433.62	452.45	473.67	494.62	517.69	541.03	566.22	591.42	618.73	646.32	675.76	690.34	719.78	745.24	761.95	782.90	795.63
Sharp Health Plan	Performance	HMO B	215.29	234.42	241.74	249.06	256.94	264.82	272.98	281.42	281.42	281.42	281.42	282.55	288.17	294.93	305.90	314.91	319.41	326.17	332.92	337.14	341.64	343.90	346.15	348.40	350.65	355.15	359.65	366.41	372.88	381.89	393.14	406.37	422.13	439.86	460.12	480.10	502.62	524.85	549.33	574.10	600.83	627.57	656.55	685.82	717.06	732.54	763.77	790.79	808.52	830.75	844.26
Sharp Health Plan	Premier	HMO C	197.90	215.49	222.21	228.94	236.18	243.43	250.93	258.69	258.69	258.69	258.69	259.72	264.90	271.11	281.20	289.47	293.61	299.82	306.03	309.91	314.05	316.12	318.19	320.26	322.33	326.47	330.61	336.81	342.76	351.04	361.39	373.55	388.04	404.33	422.96	441.33	462.02	482.46	504.96	527.73	552.30	576.88	603.52	630.43	659.14	673.37	702.08	726.92	743.22	763.65	776.07
UnitedHealthcare	SignatureValue	HMO A	246.14	268.02	276.38	284.75	293.76	302.77	312.10	321.75	321.75	321.75	321.75	323.04	329.47	337.19	349.74	360.04	365.19	372.91	380.63	385.46	390.60	393.18	395.75	398.33	400.90	406.05	411.20	418.92	426.32	436.61	449.48	464.61	482.63	502.90	526.06	548.91	574.65	600.06	628.06	656.37	686.94	717.50	750.64	784.10	819.82	837.52	873.23	904.12	924.39	949.81	965.25
UnitedHealthcare	Advantage	HMO B	217.58	236.92	244.32	251.71	259.68	267.64	275.89	284.42	284.42	284.42	284.42	285.56	291.25	298.07	309.16	318.27	322.82	329.64	336.47	340.74	345.29	347.56	349.84	352.11	354.39	358.94	363.49	370.31	376.86	385.96	397.33	410.70	426.63	444.55	465.03	485.22	507.97	530.44	555.19	580.22	607.24	634.26	663.55	693.13	724.70	740.35	771.92	799.22	817.14	839.61	853.26
UnitedHealthcare	Alliance	HMO C	188.40	205.15	211.55	217.96	224.85	231.75	238.89	246.28	246.28	246.28	246.28	247.27	252.19	258.10	267.71	275.59	279.53	285.44	291.35	295.04	298.98	300.95	302.92	304.89	306.86	310.81	314.75	320.66	326.32	334.20	344.05	355.63	369.42	384.94	402.67	420.15	439.86	459.31	480.74	502.41	525.81	549.20	574.57	600.18	627.52	641.07	668.40	692.05	707.56	727.02	738.84
UnitedHealthcare	Focus	HMO D	215.15	234.27	241.59	248.90	256.77	264.65	272.80	281.24	281.24	281.24	281.24	282.36	287.99	294.74	305.71	314.71	319.21	325.96	332.71	336.93	341.43	343.68	345.93	348.18	350.43	354.92	359.42	366.17	372.64	381.64	392.89	406.11	421.86	439.58	459.83	479.80	502.29	524.51	548.98	573.73	600.45	627.17	656.13	685.38	716.60	732.07	763.29	790.28	808.00	830.22	843.72
Western Health	Full	HMO A	221.05	240.70	248.21	255.73	263.82	271.91	280.29	288.96	288.96	288.96	288.96	290.11	295.89	302.83	314.10	323.34	327.97	334.90	341.83	346.17	350.79	353.10	355.42	357.73	360.04	364.66	369.29	376.22	382.87	392.11	403.67	417.25	433.43	451.64	472.44	492.96	516.08	538.90	564.04	589.47	616.92	644.37	674.13	704.19	736.26	752.15	784.23	811.97	830.17	853.00	866.87
Western Health	Full	HMO B	232.10	252.74	260.62	268.51	277.01	285.50	294.30	303.40	303.40	303.40	303.40	304.62	310.69	317.97	329.80	339.51	344.36	351.65	358.93	363.48	368.33	370.76	373.19	375.61	378.04	382.90	387.75	395.03	402.01	411.72	423.86	438.12	455.11	474.22	496.07	517.61	541.88	565.85	592.24	618.94	647.77	676.59	707.84	739.40	773.07	789.76	823.44	852.56	871.68	895.65	910.21
Western Health	Full	HMO C	216.67	235.93	243.30	250.66	258.59	266.52	274.74	283.23	283.23	283.23	283.23	284.36	290.03	296.83	307.87	316.94	321.47	328.27	335.06	339.31	343.84	346.11	348.38	350.64	352.91	357.44	361.97	368.77	375.28	384.35	395.68	408.99	424.85	442.69	463.08	483.19	505.85	528.23	552.87	577.79	604.70	631.61	660.78	690.24	721.68	737.25	768.69	795.88	813.73	836.10	849.70

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	278.45	303.20	312.67	322.13	332.32	342.51	353.07	363.99	363.99	363.99	363.99	365.45	372.73	381.46	395.66	407.30	413.13	421.86	430.60	436.06	441.88	444.80	447.71	450.62	453.53	459.36	465.18	473.91	482.29	493.93	508.49	525.60	545.99	568.92	595.12	620.97	650.09	678.84	710.51	742.54	777.12	811.70	849.19	887.04	927.45	947.47	987.87	1022.81	1045.74	1074.50	1091.97
Anthem Blue Cross	CaliforniaCare HMO	HMO B	322.22	350.86	361.81	372.76	384.56	396.35	408.56	421.20	421.20	421.20	421.20	422.88	431.31	441.42	457.84	471.32	478.06	488.17	498.28	504.60	511.34	514.71	518.08	521.45	524.82	531.55	538.29	548.40	558.09	571.57	588.42	608.21	631.80	658.34	688.66	718.57	752.26	785.54	822.18	859.25	899.26	939.28	982.66	1026.46	1073.22	1096.38	1143.14	1183.57	1210.11	1243.38	1263.60
Anthem Blue Cross	Advantage PPO	PPO A	386.10	420.42	433.55	446.67	460.80	474.93	489.57	504.71	504.71	504.71	504.71	506.73	516.82	528.94	548.62	564.77	572.85	584.96	597.07	604.64	612.72	616.76	620.79	624.83	628.87	636.94	645.02	657.13	668.74	684.89	705.08	728.80	757.07	788.86	825.20	861.04	901.41

USE EMPLOYER ZIP CODE FOR RATING

AREA 16 - Continued

10/01/20 - 12/01/20

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	318.93	347.28	358.12	368.96	380.63	392.30	404.39	416.90	416.90	416.90	416.90	418.57	426.91	436.91	453.17	466.51	473.18	483.19	493.19	499.45	506.12	509.45	512.79	516.12	519.46	526.13	532.80	542.80	552.39	565.73	582.41	602.00	625.35	651.61	681.63	711.23	744.58	777.52	813.79	850.48	890.08	929.69	972.63	1015.99	1062.26	1085.19	1131.47	1171.49	1197.75	1230.69	1250.70
Health Net	WholeCare	HMO C	232.57	253.25	261.15	269.05	277.57	286.08	294.90	304.02	304.02	304.02	304.02	305.23	311.31	318.61	330.47	340.19	345.06	352.36	359.65	364.21	369.08	371.51	373.94	376.37	378.80	383.67	388.53	395.83	402.82	412.55	424.71	439.00	456.03	475.18	497.07	518.65	542.97	566.99	593.44	620.19	649.08	677.96	709.27	740.89	774.63	791.36	825.10	854.29	873.44	897.46	912.06
Health Net	Salud HMO y Mas	HMO D	229.25	249.63	257.42	265.21	273.60	281.99	290.68	299.67	299.67	299.67	299.67	300.87	306.87	314.06	325.75	335.33	340.13	347.32	354.51	359.01	363.80	366.20	368.60	371.00	373.39	378.19	382.98	390.18	397.07	406.66	418.64	432.73	449.51	468.39	489.97	511.24	535.22	558.89	584.96	611.33	639.80	668.27	699.14	730.30	763.57	780.05	813.31	842.08	860.96	884.64	899.01
Health Net	Full	HMO E	279.09	303.90	313.38	322.87	333.08	343.30	353.88	364.82	364.82	364.82	364.82	366.28	373.58	382.33	396.56	408.23	414.07	422.83	431.58	437.05	442.89	445.81	448.73	451.65	454.57	460.40	466.24	475.00	483.39	495.06	509.65	526.80	547.23	570.21	596.48	622.38	651.57	680.39	712.13	744.23	778.89	813.55	851.13	889.07	929.56	949.63	990.12	1025.14	1048.13	1076.95	1094.46
Kaiser Permanente	Full	HMO A	312.39	338.91	349.05	359.19	370.12	367.05	378.36	390.06	390.06	390.06	390.06	391.62	399.42	408.78	424.00	436.48	442.72	452.08	461.44	467.29	473.53	476.66	479.78	482.90	486.02	492.26	498.50	507.86	516.83	529.31	544.92	563.25	585.09	609.67	637.75	665.45	696.65	727.46	761.40	795.73	832.78	869.84	910.01	950.58	993.88	1015.33	1058.63	1096.07	1120.65	1151.46	1170.18
Kaiser Permanente	Full	HMO B	309.25	335.50	345.53	355.57	366.38	363.19	374.39	385.96	385.96	385.96	385.96	387.51	395.23	404.49	419.54	431.89	438.07	447.33	456.60	462.39	468.56	471.65	474.74	477.82	480.91	487.09	493.26	502.53	511.40	523.75	539.19	557.33	578.95	603.26	631.05	658.46	689.33	719.82	753.40	787.37	824.03	860.70	900.46	940.60	983.44	1004.67	1047.51	1084.56	1108.88	1139.37	1157.88
Oscar	Oscar EPO	EPO A	295.58	321.86	331.90	341.95	352.77	363.59	374.79	386.38	386.38	386.38	386.38	387.93	395.66	404.93	420.00	432.36	438.54	447.82	457.09	462.89	469.07	472.16	475.25	478.34	481.43	487.61	493.80	503.07	511.96	524.32	539.78	557.94	579.57	603.91	631.73	659.17	690.08	720.60	754.22	788.22	824.93	861.63	901.43	941.61	984.50	1005.75	1048.64	1085.73	1110.08	1140.60	1159.14
Oscar	Oscar EPO	EPO B	290.38	316.19	326.06	335.93	346.56	357.19	368.19	379.58	379.58	379.58	379.58	381.10	388.69	397.80	412.61	424.75	430.83	439.94	449.05	454.74	460.81	463.85	466.89	469.92	472.96	479.03	485.11	494.22	502.95	515.09	530.28	548.12	569.37	593.29	620.62	647.57	677.93	707.92	740.94	774.35	810.41	846.47	885.57	925.04	967.18	988.05	1030.19	1066.63	1090.54	1120.53	1138.74
Sharp Health Plan	Premier	HMO A	282.90	308.04	317.66	327.27	337.63	347.98	358.71	369.80	369.80	369.80	369.80	371.28	378.68	387.55	401.97	413.81	419.72	428.60	437.47	443.02	448.94	451.90	454.85	457.81	460.77	466.69	472.60	481.48	489.99	501.82	516.61	533.99	554.70	578.00	604.62	630.88	660.46	689.68	721.85	754.39	789.52	824.65	862.74	901.20	942.25	962.59	1003.64	1039.14	1062.44	1091.65	1109.40
Sharp Health Plan	Performance	HMO B	304.75	331.84	342.20	352.56	363.71	374.87	386.42	398.37	398.37	398.37	398.37	399.96	407.93	417.49	433.03	445.78	452.15	461.71	471.27	477.25	483.62	486.81	490.00	493.18	496.37	502.74	509.12	518.68	527.84	540.59	556.52	575.25	597.56	622.65	651.33	679.62	711.49	742.96	777.62	812.67	850.52	888.37	929.40	970.83	1015.05	1036.96	1081.18	1119.42	1144.52	1175.99	1195.11
Sharp Health Plan	Premier	HMO C	278.90	303.70	313.17	322.65	332.86	343.07	353.64	364.58	364.58	364.58	364.58	366.04	373.33	382.08	396.30	407.97	413.80	422.55	431.30	436.77	442.60	445.52	448.43	451.35	454.27	460.10	465.93	474.68	483.07	494.74	509.32	526.45	546.87	569.84	596.09	621.97	651.14	679.94	711.66	743.74	778.38	813.01	850.57	888.48	928.95	949.00	989.47	1024.47	1047.44	1076.24	1093.74
UnitedHealthcare	SignatureValue	HMO A	325.88	354.85	365.93	377.00	388.93	400.86	413.21	425.99	425.99	425.99	425.99	427.69	436.21	446.44	463.05	476.68	483.50	493.72	503.95	510.34	517.15	520.56	523.97	527.38	530.78	537.60	544.42	554.64	564.44	578.07	595.11	615.13	638.99	665.82	696.49	726.74	760.82	794.47	831.53	869.02	909.49	949.96	993.83	1038.14	1085.42	1108.85	1156.14	1197.03	1223.87	1257.52	1277.97
UnitedHealthcare	Focus	HMO B	284.85	310.17	319.85	329.53	339.96	350.38	361.18	372.35	372.35	372.35	372.35	373.84	381.29	390.22	404.74	416.66	422.62	431.55	440.49	446.08	452.03	455.01	457.99	460.97	463.95	469.91	475.86	484.80	493.36	505.28	520.17	537.67	558.53	581.98	608.79	635.23	665.02	694.43	726.83	759.59	794.97	830.34	868.69	907.42	948.75	969.23	1010.56	1046.30	1069.76	1099.18	1117.05
UnitedHealthcare	Alliance	HMO C	275.56	300.05	309.42	318.79	328.87	338.96	349.40	360.21	360.21	360.21	360.21	361.65	368.86	377.50	391.55	403.07	408.84	417.48	426.13	431.53	437.29	440.18	443.06	445.94	448.82	454.59	460.35	468.99	477.28	488.80	503.21	520.14	540.32	563.01	588.94	614.52	643.34	671.79	703.13	734.83	769.05	803.27	840.37	877.83	917.82	937.63	977.61	1012.19	1034.88	1063.34	1080.63
Western Health	Full	HMO A	290.72	316.56	326.44	336.32	346.96	357.60	368.62	380.02	380.02	380.02	380.02	381.54	389.14	398.26	413.08	425.24	431.32	440.44	449.56	455.26	461.35	464.39	467.43	470.47	473.51	479.59	485.67	494.79	503.53	515.69	530.89	548.75	570.03	593.97	621.33	648.32	678.72	708.74	741.80	775.24	811.34	847.45	886.59	926.11	968.29	989.19	1031.38	1067.86	1091.80	1121.82	1140.06
Western Health	Full	HMO B	298.09	324.59	334.72	344.85	355.77	366.68	377.98	389.67	389.67	389.67	389.67	391.23	399.02	408.37	423.57	436.04	442.27	451.62	460.98	466.82	473.06	476.17	479.29	482.41	485.52	491.76	497.99	507.35	516.31	528.78	544.36	562.68	584.50	609.05	637.10	664.77	695.94	726.73	760.63	794.92	831.94	868.96	909.09	949.62	992.87	1014.30	1057.56	1094.96	1119.51	1150.30	1169.00

Health Care Service Plan rates will vary by county

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USE EMPLOYER ZIP CODE FOR RATING

AREA 17

10/01/20 - 12/01/20

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	250.33	272.58	281.09	289.60	298.76	307.92	317.41	327.23	327.23	327.23	327.23	328.54	335.08	342.94	355.70	366.17	371.41	379.26	387.11	392.02	397.26	399.88	402.49	405.11	407.73	412.96	418.20	426.05	433.58	444.05	457.14	472.52	490.85	511.46	535.02	558.25	584.43	610.28	638.75	667.55	698.64	729.72	763.43	797.46	833.78	851.78	888.10	919.52	940.13	965.98	981.69
Anthem Blue Cross	Select PPO	PPO B	240.98	262.40	270.59	278.78	287.60	296.42	305.56	315.01	315.01	315.01	315.01	316.27	322.57	330.13	342.42	352.50	357.54	365.10	372.66	377.38	382.42	384.94	387.46	389.98	392.50	397.54	402.58	410.14	417.39	427.47	440.07	454.87	472.52	492.36	515.04	537.41	562.61	587.49	614.90	642.62	672.55	702.47	734.92	767.68	802.65	819.97	854.94	885.18	905.02	929.91	945.03
Anthem Blue Cross	Prudent Buyer - Small Group	EPO A	249.04	271.17	279.64	288.10	297.22	306.33	315.77	325.54	325.54	325.54	325.54	326.84	333.35	341.17	353.86	364.28	369.49	377.30	385.11	390.00	395.21	397.81	400.41	403.02	405.62	410.83	416.04	423.85	431.34	441.76	454.78	470.08	488.31	508.82	532.26	555.37	581.41	607.13	635.45	664.10	695.03	725.95	759.48	793.34	829.48	847.38	883.52	914.77	935.28	960.99	976.62
Health Net	CommunityCare	HMO A	216.73	236.00	243.36	250.73	258.66	266.59	274.81	283.31	283.31	283.31	283.31	284.44	290.11	296.91	307.96	317.02	321.55	328.35	335.15	339.40	343.94	346.20	348.47	350.74	353.00	357.53	362.07	368.87	375.38	384.45	395.78	409.10	424.96	442.81	463.21	483.32	505.99	528.37	553.02	577.95	604.86	631.78	660.96	690.42	721.87	737.45	768.90	796.10	813.94	836.33	849.93
Kaiser Permanente	Full	HMO A	192.24	208.09	214.14	220.20	226.73	219.26	226.02	233.01	233.01	233.01	233.01	233.94	238.60	244.19	253.28	260.74	264.46	270.06	275.65	279.14	282.87	284.74	286.60	288.46	290.33	294.06	297.78	303.38	308.74	316.19	325.51	336.46	349.51	364.19	380.97	397.51	416.15	434.56	454.83	475.34	497.47	519.61	543.61	567.84	593.71	606.52	632.39	654.75	669.43	687.84	699.03
Kaiser Permanente	Full	HMO C	182.04	196.97	202.68	208.40	214.55	206.71	213.08	219.67	219.67	219.67	219.67	220.55	224.94	230.21	238.78	245.81	249.32	254.60	259.87	263.16	266.68	268.43	270.19	271.95	273.71	277.22	280.74	286.01	291.06	298.09	306.88	317.20	329.50	343.34	359.16	374.75	392.33	409.68	428.79	448.12	468.99	489.86	512.49	535.33	559.71	571.80	596.18	617.27	631.11	648.46	659.01
Oscar	Oscar EPO	EPO A	193.25	210.43	216.99	223.56	230.63	237.71	245.03	252.61	252.61	252.61	252.61	253.62	258.67	264.74	274.59	282.67	286.71	292.78	298.84	302.63	306.67	308.69	310.71	312.73	314.75	318.80	322.84	328.90	334.71	342.79	352.90	364.77	378.92	394.83	413.02	430.95	451.16	471.12	493.10	515.33	539.33	563.32	589.34	615.61	643.65	657.55	685.59	709.84	725.75	745.71	757.83
Oscar	Oscar EPO	EPO B	183.48	199.79	206.03	212.27	218.98	225.70	232.65	239.85	239.85	239.85	239.85	240.81	245.60	251.36	260.71	268.39	272.23	277.98	283.74	287.34	291.18	293.09	295.01	296.93	298.85	302.69	306.53	312.28	317.80	325.47	335.07	346.34	359.77	374.88	392.15	409.18	428.37	447.32	468.18	489.29	512.08	534.86	559.57	584.51	611.13	624.32	650.95	673.97	689.08	708.03	719.54
Oscar	Oscar EPO	EPO C	184.53	200.94	207.21	213.48	220.23	226.99	233.98	241.22	241.22	241.22	241.22	242.18	247.01	252.80	262.21	269.93	273.78	279.57	285.36	288.98	292.84	294.77	296.70	298.63	300.56	304.42	308.28	314.07	319.62	327.34	336.98	348.32	361.83	377.03	394.39	411.52	430.82	449.88	470.86	492.09	515.00	537.92	562.77	587.85	614.63	627.90	654.67	677.83	693.03	712.08	723.66
Sharp Health Plan	Premier	HMO A	172.72	188.07	193.95	199.82	206.14	212.46	219.01	225.78	225.78	225.78	225.78	226.68	231.20	236.62	245.42	252.65	256.26	261.68	267.10	270.48	274.10	275.90	277.71	279.52	281.32	284.93	288.55	293.97	299.16	306.38	315.41	326.03	338.67	352.89	369.15	385.18	403.24	421.08	440.72	460.59	482.04	503.49	526.74	550.23	575.29	587.71	612.77	634.44	648.67	666.50	677.34
Sharp Health Plan	Performance	HMO B	197.55	215.11	221.83	228.54	235.77	243.00	250.49	258.24	258.24	258.24	258.24	259.27	264.44	270.64	280.71	288.97	293.10	299.30	305.50	309.37	313.50	315.57	317.64	319.70	321.77	325.90	330.03	336.23	342.17	350.43	360.76	372.90	387.36	403.63	422.22	440.56	461.22	481.62	504.08	526.81	551.34	575.88	602.47	629.33	658.00	672.20	700.86	725.65	741.92	762.32	774.72
UnitedHealthcare	Alliance	HMO A	162.04	176.45	181.95	187.46	193.39	199.32	205.47	211.82	211.82	211.82	211.82	212.67	216.90	221.99	230.25	237.03	240.42	245.50	250.58	253.76	257.15	258.84	260.54	262.23	263.93	267.32	270.71	275.79	280.66	287.44	295.91	305.87	317.73	331.07	346.33	361.36	378.31	395.04	413.47	432.11	452.24	472.36	494.18	516.21	539.72	551.37	574.88	595.21	608.56	625.29	635.46
UnitedHealthcare	Alliance	HMO B	169.53	184.60	190.36	196.12	202.33	208.54	214.96	221.61	221.61	221.61	221.61	222.50	226.93	232.25	240.89	247.98	251.53	256.85	262.16	265.49	269.03	270.81	272.58	274.35	276.13	279.67	283.22	288.54	293.63	300.72	309.59	320.00	332.42	346.38	362.33	378.07	395.80	413.30	432.58	452.08	473.14	494.19	517.02	540.06	564.66	576.85	601.45	622.72	636.69	654.19	664.83
Western Health	Full	HMO B	196.64	214.11	220.80	227.48	234.68	241.87	249.33	257.04	257.04	257.04	257.04	258.07	263.21	269.38	279.40	287.63	291.74	297.91	304.08	307.93	312.05	314.10	316.16	318.21	320.27	324.38	328.50	334.67	340.58	348.80	359.08	371.16	385.56	401.75	420.26	438.51	459.07	479.38	501.74	524.36	548.78	573.20	599.67	626.41	654.94	669.07	697.60	722.28	738.47	758.78	771.12
Western Health	Full	HMO C	201.60	219.52	226.37	233.22	240.60	247.98	255.62	263.53	263.53	263.53	263.53	264.58	269.85	276.18	286.45	294.89	299.10	305.43	311.75	315.70	319.92	322.03	324.14	326.25	328.35	332.57	336.79	343.11	349.17	357.61	368.15	380.53	395.29	411.89	430.87	449.58	470.66	491.48	514.40	537.59	562.63	587.66	614.81	642.21	671.47	685.96	715.21	740.51	757.11	777.93	790.58

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	213.99	233.01	240.28	247.55	255.38	263.22	271.33	279.72	279.72	279.72	279.72	280.84	286.43	293.15	304.06	313.01	317.48	324.20	330.91	335.10	339.58	341.82	344.06	346.29	348.53	353.01	357.48	364.20	370.63	379.58	390.77	403.92	419.58	437.20	457.34	477.20	499.58	521.68	546.01	570.63	597.20	623.78	652.59	681.68	712.73	728.11	759.16	786.01	803.64	825.73	839.16
Anthem Blue Cross	CaliforniaCare HMO	HMO B	235.42	256.35	264.35	272.35	280.97	289.58	298.51	307.74	307.74	307.74	307.74	308.97	315.13	322.51	334.51	344.36	349.28	356.67	364.06	368.67	373.60	376.06	378.52	380.98	383.44	388.37	393.29	400.68	407.76	417.60	429.91	444.38	461.61	481.00	503.15	525.00	549.62	573.94	600.71	627.79	657.02	686.26	717.96	749.96	784.12	801.05	835.21	864.75	884.14	908.45	923.22
Anthem Blue Cross	Advantage PPO	PPO A	289.17	314.87	324.70	334.53	345.11	355.70	366.66	378.00	378.00	378.00	378.00	379.51	387.07	396.14	410.89	422.98	429.03	438.10	447.17	452.84	458.89	461.92	464.94	467.96	470.99	477.04	483.08	492.16	500.85	512.95	528.07	545.83	567.00	590.81	618.03	644.87	675.11	704.97	737.86	771.12	807.03	842.94	881.87	921.19	963.14	983.93	1025.89	1062.18	1085.99	1115.86	1134.00
Anthem Blue Cross	Select PPO	PPO B	272.13	296.31	305.56	314.81	324.77	334.73	345.05	355.72	355.72	355.72	355.72	357.14	364.26	372.79	386.67	398.05	403.74	412.28	420.82	426.15	431.84	434.69	437.54	440.38	443.23	448.92	454.61	463.15	471.33	482.71	496.94	513.66	533.58	555.99	581.60	606.86	635.32	663.42	694.37	725.67	759.46	793.26	829.89	866.89	906.37	925.94	965.42	999.57	1021.98	1050.09	1067.16
Anthem Blue Cross	Prudent Buyer - Small Group	PPO C	282.71	307.84	317.44	327.05	337.40	347.75	358.46	369.55	369.55	369.55	369.55	371.03	378.42	387.29	401.70	413.53	419.44	428.31	437.18	442.72	448.63	451.59	454.55	457.50	460.46	466.37	472.28	481.15	489.65	501.48	516.26	533.63	554.33	577.61	604.21	630.45	660.02	689.21	721.36	753.88	788.99	824.10	862.16	900.59	941.61	961.94	1002.96	1038.44	1061.72	1090.91	1108.65
Anthem Blue Cross	Prudent Buyer - Small Group	EPO A	279.76	304.63	314.14	323.64	333.88	344.12	354.73	365.70	365.70	365.70	365.70	367.16	374.48	383.25	397.52	409.22	415.07	423.85	432.62	438.11	443.96	446.89	449.81	452.74	455.66	461.51	467.36	476.14	484.55	496.25	510.88	528.07	548.55	571.59	597.92	623.88	653.14	682.03	713.85	746.03	780.77	815.51	853.18	891.21	931.80	951.92	992.51	1027.62	1050.66	1079.55	1097.10
Anthem Blue Cross	Prudent Buyer - Small Group	EPO B	280.15	305.05	314.57	324.10	334.35	344.60	355.22	366.21	366.21	366.21	366.21	367.67	375.00	383.79	398.07	409.79	415.65	424.44	433.23	438.72	444.58	447.51	450.44	453.37	456.30	462.16	468.02	476.81	485.23	496.95	511.60	528.81	549.32	572.39	598.75	624.75	654.05	682.98	714.84	747.07	781.86	816.65	854.37	892.45	933.10	953.24	993.89	1029.05	1052.12	1081.05	1098.63
Health Net	WholeCare	HMO A	221.47	241.15	248.68	256.21	264.31	272.42	280.82	289.50	289.50	289.50	289.50	290.66	296.45	303.40	314.69	323.95	328.58	335.53	342.48	346.82	351.45	353.77	356.09	358.40	360.72	365.35	369.98	376.93	383.59	392.85	404.43	418.04	434.25	452.49	473.33	493.89	517.05	539.92	565.10	590.58	618.08	645.59	675.40	705.51	737.65	753.57	785.70	813.50	831.73	854.61	868.50
Health Net	CommunityCare	HMO C	244.42	266.15	274.46	282.76	291.71	300.65	309.92	319.51	319.51	319.51	319.51	320.78	327.17	334.84	347.30	357.53	362.64	370.31	377.98	382.77	387.88	390.44	392.99	395.55	398.10	403.22	408.33	416.00	423.35	433.57	446.35	461.37	479.26	499.39	522.39	545.08	570.64	595.88	623.68	651.79	682.14	712.50	745.41	778.64	814.10	831.67	867.14	897.81	917.94	943.18	958.53
Kaiser Permanente	Full	HMO A	221.36	239.79	246.84	253.88	261.47	255.07	262.93	271.07	271.07	271.07	271.07	272.15	277.57	284.08	294.65	303.32	307.66	314.17	320.67	324.74	329.07	331.24	333.41	335.58	337.75	342.09	346.42	352.93	359.16	367.84	378.68	391.42	406.60	423.68	443.19	462.44	484.12	505.54	529.12	552.97	578.73	604.48	632.40	660.59	690.68	705.58	735.67	761.69	778.77	800.19	813.21
Kaiser Permanente	Full	HMO B	225.03	243.78	250.96	258.13	265.85	259.59	267.59	275.86	275.86	275.86	275.86	276.97	282.48	289.10	299.86	308.69	313.10	319.73	326.35	330.48	334.90	337.11	339.31	341.52	343.73	348.14	352.55	359.17	365.52	374.35	385.38	398.35	413.80	431.17	451.04	470.62	492.69	514.49	538.49	562.76	588.97	615.18	643.59	672.28	702.90	718.07	748.69	775.18	792.56	814.35	827.58
Kaiser Permanente	Full	HMO C	232.06	251.44	258.86	266.27	274.25	268.24	276.51	285.06	285.06	285.06	285.06	286.20	291.90	298.74	309.86	318.98	323.54	330.38	337.22	341.50	346.06	348.34	350.62	352.90	355.18	359.74	364.31	371.15	377.70	386.83	398.23	411.63	427.59	445.55	466.07	486.31	509.12	531.64	556.44	581.52	608.60	635.68	665.04	694.69	726.33	742.01	773.65	801.02	818.97	841.49	855.18
Kaiser Permanente	Full	HMO D	208.81	226.13	232.75	239.37	246.50	239.64	247.03	254.67	254.67	254.67	254.67	255.69	260.78	266.89	276.82	284.97	289.05	295.16	301.27	305.09	309.17	311.20	313.24	315.28	317.32	321.39	325.46	331.58	337.55	345.58	355.77	367.74	382.00	398.04	416.38	434.46	454.84	474.95	497.11	519.52	543.71	567.91	594.14	620.62	648.89	662.90	691.17	715.61	731.66	751.78	764.01
Oscar	Oscar EPO	EPO A	221.13	240.79	248.31	255.82	263.91	272.01	280.39	289.06	289.06	289.06	289.06	290.22	296.00	302.94	314.21	323.46	328.09	335.02	341.96	346.30	350.92	353.24	355.55	357.86	360.17	364.80	369.42	376.36	383.01	392.26	403.82	417.41	433.60	451.81	472.62	493.14	516.27	539.10	564.25	589.69	617.15	644.61	674.38	704.45	736.53	752.43	784.52	812.27	830.48	853.32	867.18
Oscar	Oscar EPO	EPO B	248.94	271.06	279.52	287.99	297.10	306.21	315.64	325.41	325.41	325.41	325.41	326.71	333.22	341.03	353.72	364.13	369.34	377.15	384.96	389.84	395.04	397.65	400.25	402.85	405.46	410.66	415.87	423.68	431.16	441.58	454.59	469.89	488.11	508.61	532.04	555.14	581.18	606.88	635.19	663.83	694.74	725.66	759.17	793.02	829.14	847.03	883.15	914.39	934.89	960.60	976.22
Oscar	Oscar EPO	EPO C	220.86	240.49	248.00	255.50	263.59	271.67	280.04	288.71	288.71	288.71	288.71	289.86	295.63	302.56	313.82	323.06	327.68	334.61	341.54	345.87	350.49	352.80	355.11	357.42	359.73	364.35	368.97	375.89	382.53	391.77	403.32	416.89	433.06	451.25	472.03	492.53	515.63	538.44	563.55	588.96	616.39	643.81	673.55	703.57	735.62	751.50	783.55	811.26	829.45	852.26	866.12
Oscar	Oscar EPO	EPO D	248.40	270.48	278.92	287.37	296.46	305.55	314.97	324.71	324.71	324.71	324.71	326.01	332.50	340.29	352.96	363.35	368.54	376.34	384.13	389.00	394.19	396.79	399.39	401.99	404.59	409.78	414.98	422.77	430.24	440.63	453.62	468.88	487.06	507.52	530.90	553.95	579.93	605.58	633.83	662.40	693.25	724.10	757.54	791.31	827.35	845.21	881.26	912.43	932.88	958.54	974.12
Sharp Health Plan	Premier	HMO A	202.89	220.92	227.82	234.71	242.14	249.56	257.25	265.21	265.21	265.21	265.21	266.27	271.58	277.94	288.28	296.77	301.01	307.38	313.74	317.72	321.96	324.09	326.21	328.33	330.45	334.70	338.94	345.30	351.40	359.89	370.50	382.96	397.82	414.52	433.62	452.45	473.67	494.62	517.69	541.03	566.22	591.42	618.73	646.32	675.76	690.34	719.78	745.24	761.95	782.90	795.63
Sharp Health Plan	Performance	HMO B	215.29	234.42	241.74	249.06	256.94	264.82	272.98	281.42	281.42	281.42	281.42	282.55	288.17	294.93	305.90	314.91	319.41	326.17	332.92	337.14	341.64	343.90	346.15	348.40	350.65	355.15	359.65	366.41	372.88	381.89	393.14	406.37	422.13	439.86	460.12	480.10	502.62	524.85	549.33	574.10	600.83	627.57	656.55	685.82	717.06	732.54	763.77	790.79	808.52	830.75	844.26
Sharp Health Plan	Premier	HMO C	197.90	215.49	222.21	228.94	236.18	243.43	250.93	258.69	258.69	258.69	258.69	259.72	264.90	271.11	281.20	289.47	293.61	299.82	306.03	309.91	314.05	316.12	318.19	320.26	322.33	326.47	330.61	336.81	342.76	351.04	361.39	373.55	388.04	404.33	422.96	441.33	462.02	482.46	504.96	527.73	552.30	576.88	603.52	630.43	659.14	673.37	702.08	726.92	743.22	763.65	776.07
UnitedHealthcare	SignatureValue	HMO A	230.19	250.65	258.47	266.30	274.72	283.15	291.87	300.90	300.90	300.90	300.90	302.10	308.12	315.34	327.08	336.71	341.52	348.74	355.96	360.48	365.29	367.70	370.11	372.51	374.92	379.74	384.55	391.77	398.69	408.32	420.36	434.50	451.35	470.31	491.97	513.34	537.41	561.18	587.36	613.84	642.42	671.01	702.00	733.29	766.69	783.24	816.64	845.53	864.49	888.26	902.70
UnitedHealthcare	Advantage	HMO B	220.84	240.47	247.98	255.48	263.56	271.65	280.02	288.68	288.68	288.68	288.68	289.83	295.61	302.54	313.80	323.03	327.65	334.58	341.51	345.84	350.46	352.77	355.08	357.39	359.70	364.31	368.93	375.86	382.50	391.74	403.29	416.85	433.02	451.21	471.99	492.49	515.58	538.39	563.50	588.91	616.33	643.76	673.49	703.51	735.56	751.43	783.48	811.19	829.38	852.18	866.04
UnitedHealthcare	Alliance	HMO C	180.88	196.95	203.10	209.25	215.87	222.49	229.35	236.44	236.44	236.44	236.44	237.39	242.11	247.79	257.01	264.58	268.36	274.03	279.71	283.26	287.04	288.93	290.82	292.71	294.60	298.39	302.17	307.84	313.28	320.85	330.31	341.42	354.66	369.56	386.58	403.37	422.28	440.96	461.53	482.34	504.80	527.26	551.61	576.20	602.45	615.45	641.70	664.40	679.29	697.97	709.32
UnitedHealthcare	Focus	HMO D	217.22	236.53	243.91	251.30	259.25	267.20	275.43	283.95	283.95	283.95	283.95	285.09	290.76	297.58	308.65	317.74	322.28	329.10	335.91	340.17	344.72	346.99	349.26	351.53	353.80	358.34	362.89	369.70	376.23	385.32	396.68	410.02	425.93	443.81	464.26	484.42	507.13	529.57	554.27	579.26	606.23	633.21	662.46	691.99	723.50	739.12	770.64	797.90	815.79	838.22	851.85
Western Health	Full	HMO A	221.05	240.70	248.21	255.73	263.82	271.91	280.29	288.96	288.96	288.96	288.96	290.11	295.89	302.83	314.10	323.34	327.97	334.90	341.83	346.17	350.79	353.10	355.42	357.73	360.04	364.66	369.29	376.22	382.87	392.11	403.67	417.25	433.43	451.64	472.44	492.96	516.08	538.90	564.04	589.47	616.92	644.37	674.13	704.19	736.26	752.15	784.23	811.97	830.17	853.00	866.87
Western Health	Full	HMO B	232.10	252.74	260.62	268.51	277.01	285.50	294.30	303.40	303.40	303.40	303.40	304.62	310.69	317.97	329.80	339.51	344.36	351.65	358.93	363.48	368.33	370.76	373.19	375.61	378.04	382.90	387.75	395.03	402.01	411.72	423.86	438.12	455.11	474.22	496.07	517.61	541.88	565.85	592.24	618.94	647.77	676.59	707.84	739.40	773.07	789.76	823.44	852.56	871.68	895.65	910.21
Western Health	Full	HMO C	216.67	235.93	243.30	250.66	258.59	266.52	274.74	283.23	283.23	283.23	283.23	284.36	290.03	296.83	307.87	316.94	321.47	328.27	335.06	339.31	343.84	346.11	348.38	350.64	352.91	357.44	361.97	368.77	375.28	384.35	395.68	408.99	424.85	442.69	463.08	483.19	505.85	528.23	552.87	577.79	604.70	631.61	660.78	690.24	721.68	737.25	768.69	795.88	813.73	836.10	849.70

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	267.38	291.14	300.23	309.32	319.10	328.89	339.02	349.51	349.51	349.51	349.51	350.91	357.90	366.29	379.92	391.10	396.69	405.08	413.47	418.71	424.31	427.10	429.90	432.69	435.49	441.08	446.67	455.06	463.10	474.29	488.27	504.69	524.27	546.28	571.45	596.26	624.22	651.84	682.24	713.00	746.20	779.41	815.41	851.76	890.55	909.77	948.57	982.12	1004.14	1031.75	1048.53
Anthem Blue Cross	CaliforniaCare HMO	HMO B	294.17	320.31	330.31	340.31	351.08	361.84	372.99	384.53	384.53	384.53	384.53	386.07	393.76	402.99	417.98	430.29	436.44	445.67	454.90	460.67	466.82	469.90	472.97	476.05	479.12	485.28	491.43	500.66	509.50	521.81	537.19	555.26	576.80	601.02	628.71	656.01	686.77	717.15	750.60	784.44	820.97	857.50	897.11	937.10	979.78	1000.93	1043.61	1080.53	1104.75	1135.13	1153.59
Anthem Blue Cross	Advantage PPO	PPO A	347.70	378.61	390.42	402.24	414.97	427.69	440.87	454.51	454.51	454.51	454.51	456.33	465.42	476.33	494.05	508.60	515.87	526.78	537.69	544.50	551.78	555.41	559.05	562.68	566.32	573.59	580.86	591.77	602.23	616.77	634.95	656.31	681.77	710.40	743.12	775.39	811.75	847.66	887.20	927.20	970.38	1013.56

USE EMPLOYER ZIP CODE FOR RATING

AREA 17 - Continued

10/01/20 - 12/01/20

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	306.21	333.43	343.84	354.25	365.46	376.66	388.27	400.28	400.28	400.28	400.28	401.88	409.89	419.49	435.10	447.91	454.32	463.92	473.53	479.54	485.94	489.14	492.34	495.55	498.75	505.15	511.56	521.16	530.37	543.18	559.19	578.00	600.42	625.64	654.46	682.88	714.90	746.52	781.35	816.57	854.60	892.62	933.85	975.48	1019.91	1041.93	1086.36	1124.79	1150.00	1181.63	1200.84
Health Net	WholeCare	HMO C	253.17	275.68	284.28	292.89	302.15	311.42	321.02	330.94	330.94	330.94	330.94	332.27	338.89	346.83	359.74	370.33	375.62	383.56	391.51	396.47	401.77	404.41	407.06	409.71	412.36	417.65	422.95	430.89	438.50	449.09	462.33	477.88	496.42	517.27	541.09	564.59	591.07	617.21	646.00	675.13	706.57	738.00	772.09	806.51	843.25	861.45	898.18	929.95	950.80	976.95	992.82
Health Net	Salud HMO y Mas	HMO D	233.90	254.69	262.64	270.59	279.15	287.71	296.58	305.75	305.75	305.75	305.75	306.98	313.09	320.43	332.35	342.14	347.03	354.37	361.71	366.29	371.19	373.63	376.08	378.52	380.97	385.86	390.75	398.09	405.12	414.91	427.14	441.51	458.63	477.89	499.91	521.62	546.08	570.23	596.83	623.74	652.78	681.83	713.32	745.12	779.06	795.88	829.82	859.17	878.43	902.59	917.25
Health Net	Full	HMO E	278.49	303.24	312.71	322.17	332.37	342.56	353.12	364.04	364.04	364.04	364.04	365.49	372.78	381.51	395.71	407.36	413.18	421.92	430.66	436.12	441.94	444.85	447.77	450.68	453.59	459.42	465.24	473.98	482.35	494.00	508.56	525.67	546.06	568.99	595.20	621.05	650.17	678.93	710.60	742.64	777.22	811.81	849.30	887.16	927.57	947.59	988.00	1022.95	1045.88	1074.64	1092.12
Kaiser Permanente	Full	HMO A	306.70	332.72	342.67	352.62	363.33	360.06	371.15	382.63	382.63	382.63	382.63	384.16	391.82	401.00	415.92	428.17	434.29	443.47	452.65	458.39	464.52	467.58	470.64	473.70	476.76	482.88	489.00	498.19	506.99	519.23	534.54	552.52	573.95	598.05	625.60	652.77	683.38	713.61	746.90	780.57	816.92	853.27	892.68	932.47	974.95	995.99	1038.46	1075.20	1099.30	1129.53	1147.89
Kaiser Permanente	Full	HMO B	303.63	329.37	339.22	349.06	359.66	356.27	367.25	378.61	378.61	378.61	378.61	380.13	387.70	396.79	411.55	423.67	429.73	438.81	447.90	453.58	459.64	462.66	465.69	468.72	471.75	477.81	483.87	492.95	501.66	513.78	528.92	546.72	567.92	591.77	619.03	645.91	676.20	706.11	739.05	772.37	808.34	844.31	883.30	922.68	964.71	985.53	1027.56	1063.90	1087.75	1117.66	1135.83
Oscar	Oscar EPO	EPO A	305.04	332.16	342.52	352.89	364.06	375.22	386.78	398.75	398.75	398.75	398.75	400.34	408.32	417.89	433.44	446.20	452.58	462.15	471.72	477.70	484.08	487.27	490.46	493.65	496.84	503.22	509.60	519.17	528.34	541.10	557.05	575.79	598.12	623.24	651.95	680.26	712.16	743.66	778.35	813.44	851.32	889.20	930.27	971.74	1016.01	1037.94	1082.20	1120.48	1145.60	1177.10	1196.24
Oscar	Oscar EPO	EPO B	299.67	326.31	336.49	346.68	357.65	368.62	379.98	391.73	391.73	391.73	391.73	393.30	401.13	410.53	425.81	438.34	444.61	454.01	463.42	469.29	475.56	478.69	481.83	484.96	488.09	494.36	500.63	510.03	519.04	531.58	547.25	565.66	587.59	612.27	640.48	668.29	699.63	730.57	764.65	799.13	836.34	873.56	913.90	954.64	998.12	1019.67	1063.15	1100.76	1125.44	1156.38	1175.19
Sharp Health Plan	Premier	HMO A	282.90	308.04	317.66	327.27	337.63	347.98	358.71	369.80	369.80	369.80	369.80	371.28	378.68	387.55	401.97	413.81	419.72	428.60	437.47	443.02	448.94	451.90	454.85	457.81	460.77	466.69	472.60	481.48	489.99	501.82	516.61	533.99	554.70	578.00	604.62	630.88	660.46	689.68	721.85	754.39	789.52	824.65	862.74	901.20	942.25	962.59	1003.64	1039.14	1062.44	1091.65	1109.40
Sharp Health Plan	Performance	HMO B	304.75	331.84	342.20	352.56	363.71	374.87	386.42	398.37	398.37	398.37	398.37	399.96	407.93	417.49	433.03	445.78	452.15	461.71	471.27	477.25	483.62	486.81	490.00	493.18	496.37	502.74	509.12	518.68	527.84	540.59	556.52	575.25	597.56	622.65	651.33	679.62	711.49	742.96	777.62	812.67	850.52	888.37	929.40	970.83	1015.05	1036.96	1081.18	1119.42	1144.52	1175.99	1195.11
Sharp Health Plan	Premier	HMO C	278.90	303.70	313.17	322.65	332.86	343.07	353.64	364.58	364.58	364.58	364.58	366.04	373.33	382.08	396.30	407.97	413.80	422.55	431.30	436.77	442.60	445.52	448.43	451.35	454.27	460.10	465.93	474.68	483.07	494.74	509.32	526.45	546.87	569.84	596.09	621.97	651.14	679.94	711.66	743.74	778.38	813.01	850.57	888.48	928.95	949.00	989.47	1024.47	1047.44	1076.24	1093.74
UnitedHealthcare	SignatureValue	HMO A	304.76	331.85	342.21	352.57	363.72	374.88	386.43	398.38	398.38	398.38	398.38	399.97	407.94	417.50	433.04	445.79	452.16	461.72	471.28	477.26	483.63	486.82	490.01	493.19	496.38	502.76	509.13	518.69	527.85	540.60	556.54	575.26	597.57	622.67	651.35	679.64	711.51	742.98	777.64	812.70	850.54	888.39	929.42	970.85	1015.07	1036.98	1081.20	1119.45	1144.55	1176.02	1195.14
UnitedHealthcare	Focus	HMO B	287.59	313.16	322.93	332.71	343.23	353.76	364.66	375.94	375.94	375.94	375.94	377.44	384.96	393.99	408.65	420.68	426.69	435.71	444.74	450.38	456.39	459.40	462.41	465.41	468.42	474.44	480.45	489.47	498.12	510.15	525.19	542.86	563.91	587.59	614.66	641.35	671.43	701.13	733.83	766.92	802.63	838.35	877.07	916.17	957.90	978.57	1020.30	1056.39	1080.08	1109.77	1127.82
UnitedHealthcare	Alliance	HMO C	264.55	288.07	297.06	306.05	315.73	325.42	335.45	345.82	345.82	345.82	345.82	347.20	354.12	362.42	375.91	386.97	392.51	400.81	409.11	414.29	419.83	422.59	425.36	428.13	430.89	436.42	441.96	450.26	458.21	469.28	483.11	499.36	518.73	540.52	565.42	589.97	617.63	644.95	675.04	705.47	738.33	771.18	806.80	842.76	881.15	900.17	938.56	971.75	993.54	1020.86	1037.46
Western Health	Full	HMO A	290.72	316.56	326.44	336.32	346.96	357.60	368.62	380.02	380.02	380.02	380.02	381.54	389.14	398.26	413.08	425.24	431.32	440.44	449.56	455.26	461.35	464.39	467.43	470.47	473.51	479.59	485.67	494.79	503.53	515.69	530.89	548.75	570.03	593.97	621.33	648.32	678.72	708.74	741.80	775.24	811.34	847.45	886.59	926.11	968.29	989.19	1031.38	1067.86	1091.80	1121.82	1140.06
Western Health	Full	HMO B	298.09	324.59	334.72	344.85	355.77	366.68	377.98	389.67	389.67	389.67	389.67	391.23	399.02	408.37	423.57	436.04	442.27	451.62	460.98	466.82	473.06	476.17	479.29	482.41	485.52	491.76	497.99	507.35	516.31	528.78	544.36	562.68	584.50	609.05	637.10	664.77	695.94	726.73	760.63	794.92	831.94	868.96	909.09	949.62	992.87	1014.30	1057.56	1094.96	1119.51	1150.30	1169.00

Health Care Service Plan rates will vary by county

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USE EMPLOYER ZIP CODE FOR RATING

AREA 18

10/01/20 - 12/01/20

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	243.64	265.30	273.58	281.86	290.78	299.70	308.94	318.49	318.49	318.49	318.49	319.76	326.13	333.78	346.20	356.39	361.49	369.13	376.77	381.55	386.65	389.19	391.74	394.29	396.84	401.93	407.03	414.67	422.00	432.19	444.93	459.90	477.74	497.80	520.73	543.34	568.82	593.98	621.69	649.72	679.98	710.23	743.04	776.16	811.51	829.03	864.38	894.96	915.02	940.18	955.47
Anthem Blue Cross	Select PPO	PPO B	238.76	259.99	268.10	276.22	284.96	293.70	302.75	312.11	312.11	312.11	312.11	313.36	319.60	327.09	339.26	349.25	354.24	361.74	369.23	373.91	378.90	381.40	383.90	386.39	388.89	393.88	398.88	406.37	413.55	423.53	436.02	450.69	468.17	487.83	510.30	532.46	557.43	582.09	609.24	636.70	666.35	696.01	728.15	760.61	795.26	812.42	847.07	877.03	896.69	921.35	936.33
Anthem Blue Cross	Prudent Buyer - Small Group	EPO A	242.40	263.94	272.18	280.42	289.29	298.17	307.35	316.86	316.86	316.86	316.86	318.13	324.46	332.07	344.43	354.57	359.64	367.24	374.85	379.60	384.67	387.20	389.74	392.27	394.81	399.88	404.95	412.55	419.84	429.98	442.65	457.55	475.29	495.25	518.07	540.56	565.91	590.94	618.51	646.39	676.50	706.60	739.23	772.19	807.36	824.79	859.96	890.38	910.34	935.37	950.58
Health Net	CommunityCare	HMO A	207.34	225.78	232.82	239.87	247.46	255.05	262.91	271.04	271.04	271.04	271.04	272.12	277.54	284.05	294.62	303.29	307.63	314.13	320.64	324.70	329.04	331.21	333.38	335.55	337.71	342.05	346.39	352.89	359.13	367.80	378.64	391.38	406.56	423.63	443.15	462.39	484.07	505.49	529.07	552.92	578.67	604.42	632.33	660.52	690.61	705.51	735.60	761.62	778.69	800.11	813.12
Kaiser Permanente	Full	HMO A	205.27	222.27	228.77	235.27	242.27	235.28	242.53	250.03	250.03	250.03	250.03	251.03	256.04	262.04	271.79	279.79	283.79	289.79	295.79	299.54	303.54	305.54	307.54	309.54	311.54	315.54	319.54	325.55	331.30	339.30	349.30	361.05	375.05	390.80	408.81	426.56	446.56	466.31	488.07	510.07	533.82	557.58	583.33	609.33	637.09	650.84	678.59	702.60	718.35	738.10	750.09
Kaiser Permanente	Full	HMO C	194.32	210.34	216.47	222.60	229.20	221.81	228.65	235.72	235.72	235.72	235.72	236.66	241.38	247.03	256.23	263.77	267.54	273.20	278.86	282.39	286.16	288.05	289.94	291.82	293.71	297.48	301.25	306.91	312.33	319.87	329.30	340.38	353.58	368.43	385.40	402.14	421.00	439.62	460.12	480.87	503.26	525.65	549.93	574.45	600.61	613.58	639.74	662.37	677.22	695.84	707.16
Oscar	Oscar EPO	EPO A	193.25	210.43	216.99	223.56	230.63	237.71	245.03	252.61	252.61	252.61	252.61	253.62	258.67	264.74	274.59	282.67	286.71	292.78	298.84	302.63	306.67	308.69	310.71	312.73	314.75	318.80	322.84	328.90	334.71	342.79	352.90	364.77	378.92	394.83	413.02	430.95	451.16	471.12	493.10	515.33	539.33	563.32	589.34	615.61	643.65	657.55	685.59	709.84	725.75	745.71	757.83
Oscar	Oscar EPO	EPO B	183.48	199.79	206.03	212.27	218.98	225.70	232.65	239.85	239.85	239.85	239.85	240.81	245.60	251.36	260.71	268.39	272.23	277.98	283.74	287.34	291.18	293.09	295.01	296.93	298.85	302.69	306.53	312.28	317.80	325.47	335.07	346.34	359.77	374.88	392.15	409.18	428.37	447.32	468.18	489.29	512.08	534.86	559.57	584.51	611.13	624.32	650.95	673.97	689.08	708.03	719.54
Oscar	Oscar EPO	EPO C	184.53	200.94	207.21	213.48	220.23	226.99	233.98	241.22	241.22	241.22	241.22	242.18	247.01	252.80	262.21	269.93	273.78	279.57	285.36	288.98	292.84	294.77	296.70	298.63	300.56	304.42	308.28	314.07	319.62	327.34	336.98	348.32	361.83	377.03	394.39	411.52	430.82	449.88	470.86	492.09	515.00	537.92	562.77	587.85	614.63	627.90	654.67	677.83	693.03	712.08	723.66
Sharp Health Plan	Premier	HMO A	172.72	188.07	193.95	199.82	206.14	212.46	219.01	225.78	225.78	225.78	225.78	226.68	231.20	236.62	245.42	252.65	256.26	261.68	267.10	270.48	274.10	275.90	277.71	279.52	281.32	284.93	288.55	293.97	299.16	306.38	315.41	326.03	338.67	352.89	369.15	385.18	403.24	421.08	440.72	460.59	482.04	503.49	526.74	550.23	575.29	587.71	612.77	634.44	648.67	666.50	677.34
Sharp Health Plan	Performance	HMO B	197.55	215.11	221.83	228.54	235.77	243.00	250.49	258.24	258.24	258.24	258.24	259.27	264.44	270.64	280.71	288.97	293.10	299.30	305.50	309.37	313.50	315.57	317.64	319.70	321.77	325.90	330.03	336.23	342.17	350.43	360.76	372.90	387.36	403.63	422.22	440.56	461.22	481.62	504.08	526.81	551.34	575.88	602.47	629.33	658.00	672.20	700.86	725.65	741.92	762.32	774.72
UnitedHealthcare	Alliance	HMO A	172.92	188.29	194.17	200.05	206.37	212.70	219.26	226.04	226.04	226.04	226.04	226.94	231.46	236.89	245.71	252.94	256.56	261.98	267.41	270.80	274.41	276.22	278.03	279.84	281.65	285.26	288.88	294.30	299.50	306.74	315.78	326.40	339.06	353.30	369.58	385.62	403.71	421.56	441.23	461.12	482.60	504.07	527.35	550.86	575.95	588.38	613.47	635.17	649.41	667.27	678.12
UnitedHealthcare	Alliance	HMO B	180.91	197.00	203.14	209.29	215.92	222.54	229.40	236.49	236.49	236.49	236.49	237.44	242.17	247.84	257.06	264.63	268.42	274.09	279.77	283.32	287.10	288.99	290.88	292.77	294.67	298.45	302.23	307.91	313.35	320.92	330.38	341.49	354.74	369.63	386.66	403.45	422.37	441.05	461.63	482.44	504.91	527.37	551.73	576.33	602.58	615.58	641.83	664.54	679.44	698.12	709.47
Western Health	Full	HMO B	196.64	214.11	220.80	227.48	234.68	241.87	249.33	257.04	257.04	257.04	257.04	258.07	263.21	269.38	279.40	287.63	291.74	297.91	304.08	307.93	312.05	314.10	316.16	318.21	320.27	324.38	328.50	334.67	340.58	348.80	359.08	371.16	385.56	401.75	420.26	438.51	459.07	479.38	501.74	524.36	548.78	573.20	599.67	626.41	654.94	669.07	697.60	722.28	738.47	758.78	771.12
Western Health	Full	HMO C	201.60	219.52	226.37	233.22	240.60	247.98	255.62	263.53	263.53	263.53	263.53	264.58	269.85	276.18	286.45	294.89	299.10	305.43	311.75	315.70	319.92	322.03	324.14	326.25	328.35	332.57	336.79	343.11	349.17	357.61	368.15	380.53	395.29	411.89	430.87	449.58	470.66	491.48	514.40	537.59	562.63	587.66	614.81	642.21	671.47	685.96	715.21	740.51	757.11	777.93	790.58

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	214.97	234.07	241.38	248.69	256.55	264.42	272.57	281.00	281.00	281.00	281.00	282.12	287.74	294.49	305.45	314.44	318.94	325.68	332.42	336.64	341.13	343.38	345.63	347.88	350.13	354.62	359.12	365.86	372.33	381.32	392.56	405.76	421.50	439.20	459.44	479.39	501.87	524.07	548.51	573.24	599.94	626.63	655.57	684.80	715.99	731.44	762.63	789.61	807.31	829.51	843.00
Anthem Blue Cross	CaliforniaCare HMO	HMO B	233.34	254.08	262.01	269.94	278.48	287.02	295.87	305.02	305.02	305.02	305.02	306.24	312.34	319.66	331.56	341.32	346.20	353.52	360.84	365.41	370.29	372.73	375.17	377.61	380.05	384.94	389.82	397.14	404.15	413.91	426.11	440.45	457.53	476.75	498.71	520.36	544.77	568.86	595.40	622.24	651.22	680.19	711.61	743.33	777.19	793.97	827.82	857.11	876.32	900.42	915.06
Anthem Blue Cross	Advantage PPO	PPO A	281.44	306.46	316.03	325.59	335.89	346.19	356.86	367.90	367.90	367.90	367.90	369.37	376.73	385.56	399.91	411.68	417.57	426.40	435.23	440.74	446.63	449.57	452.52	455.46	458.40	464.29	470.18	479.01	487.47	499.24	513.96	531.25	551.85	575.03	601.52	627.64	657.07	686.13	718.14	750.52	785.47	820.42	858.31	896.57	937.41	957.64	998.48	1033.80	1056.98	1086.04	1103.70
Anthem Blue Cross	Select PPO	PPO B	269.62	293.59	302.75	311.92	321.79	331.66	341.88	352.45	352.45	352.45	352.45	353.86	360.91	369.37	383.11	394.39	400.03	408.49	416.95	422.24	427.87	430.69	433.51	436.33	439.15	444.79	450.43	458.89	467.00	478.27	492.37	508.94	528.68	550.88	576.26	601.28	629.48	657.32	687.98	719.00	752.48	785.96	822.27	858.92	898.04	917.43	956.55	990.38	1012.59	1040.43	1057.35
Anthem Blue Cross	Prudent Buyer - Small Group	EPO A	275.16	299.62	308.97	318.33	328.40	338.47	348.90	359.69	359.69	359.69	359.69	361.13	368.32	376.96	390.98	402.49	408.25	416.88	425.51	430.91	436.66	439.54	442.42	445.30	448.17	453.93	459.68	468.32	476.59	488.10	502.49	519.39	539.54	562.20	588.09	613.63	642.41	670.82	702.11	733.77	767.94	802.11	839.16	876.56	916.49	936.27	976.20	1010.73	1033.39	1061.80	1079.07
Anthem Blue Cross	Prudent Buyer - Small Group	EPO B	272.27	296.47	305.73	314.98	324.95	334.91	345.23	355.91	355.91	355.91	355.91	357.33	364.45	372.99	386.87	398.26	403.96	412.50	421.04	426.38	432.07	434.92	437.77	440.62	443.46	449.16	454.85	463.39	471.58	482.97	497.21	513.93	533.87	556.29	581.91	607.18	635.66	663.77	694.74	726.06	759.87	793.68	830.34	867.35	906.86	926.43	965.94	1000.11	1022.53	1050.65	1067.73
Anthem Blue Cross	Prudent Buyer - Small Group	EPO B	272.69	296.93	306.20	315.47	325.45	335.43	345.77	356.46	356.46	356.46	356.46	357.89	365.02	373.57	387.47	398.88	404.58	413.14	421.69	427.04	432.74	435.59	438.45	441.30	444.15	449.85	455.56	464.11	472.31	483.72	497.97	514.73	534.69	557.15	582.81	608.12	636.64	664.80	695.81	727.18	761.04	794.91	831.62	868.69	908.26	927.87	967.43	1001.65	1024.11	1052.27	1069.38
Health Net	WholeCare	HMO A	262.74	286.09	295.02	303.95	313.57	323.19	333.15	343.45	343.45	343.45	343.45	344.82	351.69	359.93	373.33	384.32	389.81	398.06	406.30	411.45	416.95	419.70	422.44	425.19	427.94	433.43	438.93	447.17	455.07	466.06	479.80	495.94	515.17	536.81	561.54	585.92	613.40	640.53	670.41	700.64	733.26	765.89	801.27	836.99	875.11	894.00	932.12	965.09	986.73	1013.86	1030.35
Health Net	CommunityCare	HMO C	233.84	254.62	262.57	270.52	279.08	287.63	296.50	305.67	305.67	305.67	305.67	306.89	313.00	320.34	332.26	342.04	346.93	354.27	361.61	366.19	371.08	373.53	375.97	378.42	380.86	385.75	390.64	397.98	405.01	414.79	427.02	441.39	458.50	477.76	499.77	521.47	545.92	570.07	596.67	623.56	652.60	681.64	713.12	744.91	778.84	795.66	829.58	858.93	878.19	902.33	917.01
Kaiser Permanente	Full	HMO A	236.51	256.29	263.85	271.41	279.56	273.71	282.15	290.87	290.87	290.87	290.87	292.04	297.85	304.83	316.18	325.49	330.14	337.12	344.10	348.47	353.12	355.45	357.77	360.10	362.43	367.08	371.74	378.72	385.41	394.71	406.35	420.02	436.31	454.63	475.58	496.23	519.50	542.48	567.78	593.38	621.01	648.65	678.61	708.86	741.14	757.14	789.43	817.35	835.68	858.66	872.61
Kaiser Permanente	Full	HMO B	240.45	260.58	268.27	275.97	284.26	278.56	287.14	296.02	296.02	296.02	296.02	297.21	303.13	310.23	321.77	331.25	335.98	343.09	350.19	354.63	359.37	361.74	364.11	366.47	368.84	373.58	378.31	385.42	392.23	401.70	413.54	427.45	444.03	462.68	483.99	505.01	528.69	552.08	577.83	603.88	632.00	660.13	690.62	721.40	754.26	770.54	803.40	831.82	850.47	873.85	888.06
Kaiser Permanente	Full	HMO C	247.99	268.80	276.75	284.70	293.27	287.84	296.71	305.89	305.89	305.89	305.89	307.11	313.23	320.57	332.50	342.29	347.18	354.52	361.87	366.45	371.35	373.80	376.24	378.69	381.14	386.03	390.93	398.27	405.30	415.09	427.33	441.70	458.83	478.10	500.13	521.85	546.32	570.48	597.09	624.01	653.07	682.13	713.64	745.45	779.40	796.23	830.18	859.55	878.82	902.98	917.67
Kaiser Permanente	Full	HMO D	223.05	241.63	248.73	255.84	263.49	257.15	265.08	273.28	273.28	273.28	273.28	274.37	279.83	286.39	297.05	305.80	310.17	316.73	323.29	327.33	331.76	333.94	336.13	338.32	340.50	344.87	349.25	355.81	362.09	370.84	381.77	394.61	409.91	427.13	446.81	466.21	488.07	509.66	533.43	557.48	583.44	609.41	637.55	665.97	696.31	711.34	741.67	767.91	785.12	806.71	819.84
Oscar	Oscar EPO	EPO A	221.13	240.79	248.31	255.82	263.91	272.01	280.39	289.06	289.06	289.06	289.06	290.22	296.00	302.94	314.21	323.46	328.09	335.02	341.96	346.30	350.92	353.24	355.55	357.86	360.17	364.80	369.42	376.36	383.01	392.26	403.82	417.41	433.60	451.81	472.62	493.14	516.27	539.10	564.25	589.69	617.15	644.61	674.38	704.45	736.53	752.43	784.52	812.27	830.48	853.32	867.18
Oscar	Oscar EPO	EPO B	248.94	271.06	279.52	287.99	297.10	306.21	315.64	325.41	325.41	325.41	325.41	326.71	333.22	341.03	353.72	364.13	369.34	377.15	384.96	389.84	395.04	397.65	400.25	402.85	405.46	410.66	415.87	423.68	431.16	441.58	454.59	469.89	488.11	508.61	532.04	555.14	581.18	606.88	635.19	663.83	694.74	725.66	759.17	793.02	829.14	847.03	883.15	914.39	934.89	960.60	976.22
Oscar	Oscar EPO	EPO C	220.86	240.49	248.00	255.50	263.59	271.67	280.04	288.71	288.71	288.71	288.71	289.86	295.63	302.56	313.82	323.06	327.68	334.61	341.54	345.87	350.49	352.80	355.11	357.42	359.73	364.35	368.97	375.89	382.53	391.77	403.32	416.89	433.06	451.25	472.03	492.53	515.63	538.44	563.55	588.96	616.39	643.81	673.55	703.57	735.62	751.50	783.55	811.26	829.45	852.26	866.12
Oscar	Oscar EPO	EPO D	248.40	270.48	278.92	287.37	296.46	305.55	314.97	324.71	324.71	324.71	324.71	326.01	332.50	340.29	352.96	363.35	368.54	376.34	384.13	389.00	394.19	396.79	399.39	401.99	404.59	409.78	414.98	422.77	430.24	440.63	453.62	468.88	487.06	507.52	530.90	553.95	579.93	605.58	633.83	662.40	693.25	724.10	757.54	791.31	827.35	845.21	881.26	912.43	932.88	958.54	974.12
Sharp Health Plan	Premier	HMO A	202.89	220.92	227.82	234.71	242.14	249.56	257.25	265.21	265.21	265.21	265.21	266.27	271.58	277.94	288.28	296.77	301.01	307.38	313.74	317.72	321.96	324.09	326.21	328.33	330.45	334.70	338.94	345.30	351.40	359.89	370.50	382.96	397.82	414.52	433.62	452.45	473.67	494.62	517.69	541.03	566.22	591.42	618.73	646.32	675.76	690.34	719.78	745.24	761.95	782.90	795.63
Sharp Health Plan	Performance	HMO B	215.29	234.42	241.74	249.06	256.94	264.82	272.98	281.42	281.42	281.42	281.42	282.55	288.17	294.93	305.90	314.91	319.41	326.17	332.92	337.14	341.64	343.90	346.15	348.40	350.65	355.15	359.65	366.41	372.88	381.89	393.14	406.37	422.13	439.86	460.12	480.10	502.62	524.85	549.33	574.10	600.83	627.57	656.55	685.82	717.06	732.54	763.77	790.79	808.52	830.75	844.26
Sharp Health Plan	Premier	HMO C	197.90	215.49	222.21	228.94	236.18	243.43	250.93	258.69	258.69	258.69	258.69	259.72	264.90	271.11	281.20	289.47	293.61	299.82	306.03	309.91	314.05	316.12	318.19	320.26	322.33	326.47	330.61	336.81	342.76	351.04	361.39	373.55	388.04	404.33	422.96	441.33	462.02	482.46	504.96	527.73	552.30	576.88	603.52	630.43	659.14	673.37	702.08	726.92	743.22	763.65	776.07
UnitedHealthcare	SignatureValue	HMO A	246.97	268.93	277.32	285.71	294.75	303.79	313.15	322.84	322.84	322.84	322.84	324.13	330.59	338.34	350.93	361.26	366.42	374.17	381.92	386.76	391.93	394.51	397.09	399.68	402.26	407.42	412.59	420.34	427.76	438.09	451.01	466.18	484.26	504.60	527.84	550.77	576.59	602.10	630.18	658.59	689.26	719.93	753.19	786.76	822.60	840.35	876.19	907.18	927.52	953.02	968.52
UnitedHealthcare	Advantage	HMO B	224.78	244.76	252.40	260.04	268.27	276.49	285.02	293.83	293.83	293.83	293.83	295.01	300.88	307.93	319.39	328.80	333.50	340.55	347.60	352.01	356.71	359.06	361.41	363.76	366.11	370.81	375.51	382.57	389.32	398.73	410.48	424.29	440.75	459.26	480.41	501.27	524.78	547.99	573.56	599.41	627.33	655.24	685.51	716.06	748.68	764.84	797.45	825.66	844.17	867.39	881.49
UnitedHealthcare	Alliance	HMO C	193.02	210.18	216.74	223.30	230.37	237.43	244.75	252.32	252.32	252.32	252.32	253.33	258.38	264.43	274.27	282.35	286.38	292.44	298.49	302.28	306.32	308.34	310.35	312.37	314.39	318.43	322.46	328.52	334.32	342.40	352.49	364.35	378.48	394.38	412.54	430.46	450.64	470.58	492.53	514.73	538.70	562.67	588.66	614.90	642.91	656.79	684.80	709.02	724.92	744.85	756.96
UnitedHealthcare	Focus	HMO D	224.78	244.76	252.40	260.04	268.27	276.49	285.02	293.83	293.83	293.83	293.83	295.01	300.88	307.93	319.39	328.80	333.50	340.55	347.60	352.01	356.71	359.06	361.41	363.76	366.11	370.81	375.51	382.57	389.32	398.73	410.48	424.29	440.75	459.26	480.41	501.27	524.78	547.99	573.56	599.41	627.33	655.24	685.51	716.06	748.68	764.84	797.45	825.66	844.17	867.39	881.49
Western Health	Full	HMO A	221.05	240.70	248.21	255.73	263.82	271.91	280.29	288.96	288.96	288.96	288.96	290.11	295.89	302.83	314.10	323.34	327.97	334.90	341.83	346.17	350.79	353.10	355.42	357.73	360.04	364.66	369.29	376.22	382.87	392.11	403.67	417.25	433.43	451.64	472.44	492.96	516.08	538.90	564.04	589.47	616.92	644.37	674.13	704.19	736.26	752.15	784.23	811.97	830.17	853.00	866.87
Western Health	Full	HMO B	232.10	252.74	260.62	268.51	277.01	285.50	294.30	303.40	303.40	303.40	303.40	304.62	310.69	317.97	329.80	339.51	344.36	351.65	358.93	363.48	368.33	370.76	373.19	375.61	378.04	382.90	387.75	395.03	402.01	411.72	423.86	438.12	455.11	474.22	496.07	517.61	541.88	565.85	592.24	618.94	647.77	676.59	707.84	739.40	773.07	789.76	823.44	852.56	871.68	895.65	910.21
Western Health	Full	HMO C	216.67	235.93	243.30	250.66	258.59	266.52	274.74	283.23	283.23	283.23	283.23	284.36	290.03	296.83	307.87	316.94	321.47	328.27	335.06	339.31	343.84	346.11	348.38	350.64	352.91	357.44	361.97	368.77	375.28	384.35	395.68	408.99	424.85	442.69	463.08	483.19	505.85	528.23	552.87	577.79	604.70	631.61	660.78	690.24	721.68	737.25	768.69	795.88	813.73	836.10	849.70

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	268.58	292.45	301.58	310.71	320.54	330.37	340.55	351.08	351.08	351.08	351.08	352.48	359.51	367.93	381.62	392.86	398.48	406.90	415.33	420.59	426.21	429.02	431.83	434.64	437.45	443.06	448.68	457.11	465.18	476.42	490.46	506.96	526.62	548.74	574.02	598.94	627.03	654.76	685.31	716.20	749.56	782.91	819.07	855.58	894.55	913.86	952.83	986.53	1008.65	1036.39	1053.24
Anthem Blue Cross	CaliforniaCare HMO	HMO B	291.57	317.49	327.40	337.31	347.98	358.65	369.71	381.14	381.14	381.14	381.14	382.66	390.29	399.43	414.30	426.50	432.59	441.74	450.89	456.61	462.70	465.75	468.80	471.85	474.90	481.00	487.10	496.24	505.01	517.21	532.45	550.37	571.71	595.72	623.16	650.22	680.72	710.83	743.99	777.53	813.73	849.94	889.20	928.84	971.14	992.11	1034.41	1071.00	1095.02	1125.13	1143.42
Anthem Blue Cross	Advantage PPO	PPO A	338.40	368.48	379.98	391.48	403.87	416.25	429.08	442.35	442.35	442.35	442.35	444.12	452.97	463.58	480.83	494.99	502.07	512.68	523.30	529.94	537.01	540.55	544.09	547.63	551.17	558.25	565.32	575.94	586.11	600.27	617.96	638.75	663.53	691.39	723.24	754.65	790.04	824.98	863.47	902.39	944.42	986.44	1032

USE EMPLOYER ZIP CODE FOR RATING

AREA 18 - Continued

10/01/20 - 12/01/20

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	307.63	334.97	345.43	355.89	367.14	378.40	390.07	402.13	402.13	402.13	402.13	403.74	411.78	421.43	437.12	449.98	456.42	466.07	475.72	481.75	488.19	491.40	494.62	497.84	501.05	507.49	513.92	523.57	532.82	545.69	561.78	580.68	603.20	628.53	657.48	686.03	718.20	749.97	784.96	820.35	858.55	896.75	938.17	979.99	1024.63	1046.74	1091.38	1129.99	1155.32	1187.09	1206.39
Health Net	WholeCare	HMO C	300.35	327.05	337.26	347.47	358.46	369.45	380.84	392.62	392.62	392.62	392.62	394.19	402.04	411.46	426.77	439.34	445.62	455.04	464.46	470.35	476.64	479.78	482.92	486.06	489.20	495.48	501.76	511.19	520.22	532.78	548.48	566.94	588.92	613.66	641.93	669.80	701.21	732.23	766.39	800.94	838.23	875.53	915.97	956.80	1000.39	1021.98	1065.56	1103.25	1127.99	1159.00	1177.86
Health Net	Salud HMO y Mas	HMO D	246.53	268.44	276.82	285.20	294.22	303.24	312.59	322.26	322.26	322.26	322.26	323.55	329.99	337.73	350.29	360.61	365.76	373.50	381.23	386.06	391.22	393.80	396.38	398.96	401.53	406.69	411.85	419.58	426.99	437.30	450.19	465.34	483.39	503.69	526.89	549.77	575.55	601.01	629.05	657.41	688.02	718.63	751.83	785.34	821.11	838.84	874.61	905.54	925.85	951.30	966.78
Health Net	Full	HMO E	300.35	327.05	337.26	347.47	358.46	369.45	380.84	392.62	392.62	392.62	392.62	394.19	402.04	411.46	426.77	439.34	445.62	455.04	464.46	470.35	476.64	479.78	482.92	486.06	489.20	495.48	501.76	511.19	520.22	532.78	548.48	566.94	588.92	613.66	641.93	669.80	701.21	732.23	766.39	800.94	838.23	875.53	915.97	956.80	1000.39	1021.98	1065.56	1103.25	1127.99	1159.00	1177.86
Kaiser Permanente	Full	HMO A	328.09	356.01	366.69	377.36	388.86	386.37	398.27	410.59	410.59	410.59	410.59	412.23	420.45	430.30	446.31	459.45	466.02	475.88	485.73	491.89	498.46	501.74	505.03	508.31	511.60	518.17	524.74	534.59	544.03	557.17	573.60	592.89	615.89	641.75	671.32	700.47	733.32	765.75	801.47	837.61	876.61	915.62	957.91	1000.61	1046.19	1068.77	1114.34	1153.76	1179.63	1212.07	1231.77
Kaiser Permanente	Full	HMO B	324.79	352.42	362.98	373.55	384.92	382.31	394.09	406.28	406.28	406.28	406.28	407.90	416.03	425.78	441.62	454.63	461.13	470.88	480.63	486.72	493.22	496.47	499.72	502.97	506.22	512.72	519.22	528.97	538.32	551.32	567.57	586.67	609.42	635.01	664.27	693.11	725.61	757.71	793.06	828.81	867.40	906.00	947.85	990.10	1035.20	1057.54	1102.64	1141.64	1167.24	1199.33	1218.84
Oscar	Oscar EPO	EPO A	305.04	332.16	342.52	352.89	364.06	375.22	386.78	398.75	398.75	398.75	398.75	400.34	408.32	417.89	433.44	446.20	452.58	462.15	471.72	477.70	484.08	487.27	490.46	493.65	496.84	503.22	509.60	519.17	528.34	541.10	557.05	575.79	598.12	623.24	651.95	680.26	712.16	743.66	778.35	813.44	851.32	889.20	930.27	971.74	1016.01	1037.94	1082.20	1120.48	1145.60	1177.10	1196.24
Oscar	Oscar EPO	EPO B	299.67	326.31	336.49	346.68	357.65	368.62	379.98	391.73	391.73	391.73	391.73	393.30	401.13	410.53	425.81	438.34	444.61	454.01	463.42	469.29	475.56	478.69	481.83	484.96	488.09	494.36	500.63	510.03	519.04	531.58	547.25	565.66	587.59	612.27	640.48	668.29	699.63	730.57	764.65	799.13	836.34	873.56	913.90	954.64	998.12	1019.67	1063.15	1100.76	1125.44	1156.38	1175.19
Sharp Health Plan	Premier	HMO A	282.90	308.04	317.66	327.27	337.63	347.98	358.71	369.80	369.80	369.80	369.80	371.28	378.68	387.55	401.97	413.81	419.72	428.60	437.47	443.02	448.94	451.90	454.85	457.81	460.77	466.69	472.60	481.48	489.99	501.82	516.61	533.99	554.70	578.00	604.62	630.88	660.46	689.68	721.85	754.39	789.52	824.65	862.74	901.20	942.25	962.59	1003.64	1039.14	1062.44	1091.65	1109.40
Sharp Health Plan	Performance	HMO B	304.75	331.84	342.20	352.56	363.71	374.87	386.42	398.37	398.37	398.37	398.37	399.96	407.93	417.49	433.03	445.78	452.15	461.71	471.27	477.25	483.62	486.81	490.00	493.18	496.37	502.74	509.12	518.68	527.84	540.59	556.52	575.25	597.56	622.65	651.33	679.62	711.49	742.96	777.62	812.67	850.52	888.37	929.40	970.83	1015.05	1036.96	1081.18	1119.42	1144.52	1175.99	1195.11
Sharp Health Plan	Premier	HMO C	278.90	303.70	313.17	322.65	332.86	343.07	353.64	364.58	364.58	364.58	364.58	366.04	373.33	382.08	396.30	407.97	413.80	422.55	431.30	436.77	442.60	445.52	448.43	451.35	454.27	460.10	465.93	474.68	483.07	494.74	509.32	526.45	546.87	569.84	596.09	621.97	651.14	679.94	711.66	743.74	778.38	813.01	850.57	888.48	928.95	949.00	989.47	1024.47	1047.44	1076.24	1093.74
UnitedHealthcare	SignatureValue	HMO A	326.98	356.05	367.16	378.28	390.24	402.21	414.61	427.43	427.43	427.43	427.43	429.14	437.69	447.95	464.62	478.29	485.13	495.39	505.65	512.06	518.90	522.32	525.74	529.16	532.58	539.42	546.26	556.51	566.34	580.02	597.12	617.21	641.15	668.07	698.85	729.20	763.39	797.16	834.34	871.96	912.56	953.17	997.19	1041.65	1089.09	1112.60	1160.05	1201.08	1228.01	1261.77	1282.29
UnitedHealthcare	Focus	HMO B	297.60	324.05	334.17	344.28	355.18	366.07	377.35	389.02	389.02	389.02	389.02	390.58	398.36	407.69	422.86	435.31	441.54	450.87	460.21	466.05	472.27	475.38	478.49	481.61	484.72	490.94	497.17	506.50	515.45	527.90	543.46	561.74	583.53	608.04	636.05	663.67	694.79	725.52	759.37	793.60	830.56	867.51	907.58	948.04	991.22	1012.62	1055.80	1093.15	1117.65	1148.39	1167.06
UnitedHealthcare	Alliance	HMO C	282.31	307.40	317.00	326.59	336.92	347.26	357.96	369.03	369.03	369.03	369.03	370.51	377.89	386.74	401.14	412.94	418.85	427.71	436.56	442.10	448.00	450.95	453.91	456.86	459.81	465.72	471.62	480.48	488.96	500.77	515.53	532.88	553.55	576.79	603.36	629.57	659.09	688.24	720.35	752.82	787.88	822.94	860.95	899.33	940.29	960.59	1001.55	1036.97	1060.22	1089.38	1107.09
Western Health	Full	HMO A	290.72	316.56	326.44	336.32	346.96	357.60	368.62	380.02	380.02	380.02	380.02	381.54	389.14	398.26	413.08	425.24	431.32	440.44	449.56	455.26	461.35	464.39	467.43	470.47	473.51	479.59	485.67	494.79	503.53	515.69	530.89	548.75	570.03	593.97	621.33	648.32	678.72	708.74	741.80	775.24	811.34	847.45	886.59	926.11	968.29	989.19	1031.38	1067.86	1091.80	1121.82	1140.06
Western Health	Full	HMO B	298.09	324.59	334.72	344.85	355.77	366.68	377.98	389.67	389.67	389.67	389.67	391.23	399.02	408.37	423.57	436.04	442.27	451.62	460.98	466.82	473.06	476.17	479.29	482.41	485.52	491.76	497.99	507.35	516.31	528.78	544.36	562.68	584.50	609.05	637.10	664.77	695.94	726.73	760.63	794.92	831.94	868.96	909.09	949.62	992.87	1014.30	1057.56	1094.96	1119.51	1150.30	1169.00

Health Care Service Plan rates will vary by county

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USE EMPLOYER ZIP CODE FOR RATING

AREA 19

10/01/20 - 12/01/20

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	282.02	307.09	316.68	326.26	336.59	346.91	357.60	368.66	368.66	368.66	368.66	370.13	377.51	386.36	400.73	412.53	418.43	427.28	436.12	441.65	447.55	450.50	453.45	456.40	459.35	465.25	471.15	480.00	488.47	500.27	515.02	532.35	552.99	576.22	602.76	628.93	658.43	687.55	719.62	752.07	787.09	822.11	860.08	898.42	939.35	959.62	1000.54	1035.93	1059.16	1088.28	1105.98
Anthem Blue Cross	Select PPO	PPO B	250.35	272.61	281.12	289.63	298.79	307.95	317.44	327.26	327.26	327.26	327.26	328.57	335.11	342.97	355.73	366.20	371.44	379.29	387.15	392.06	397.29	399.91	402.53	405.15	407.77	413.00	418.24	426.09	433.62	444.09	457.18	472.56	490.89	511.51	535.07	558.31	584.49	610.34	638.81	667.61	698.70	729.79	763.50	797.53	833.86	851.86	888.18	919.60	940.22	966.07	981.78
Anthem Blue Cross	Prudent Buyer - Small Group	EPO A	280.56	305.49	315.03	324.56	334.83	345.10	355.74	366.74	366.74	366.74	366.74	368.21	375.54	384.34	398.65	410.38	416.25	425.05	433.85	439.35	445.22	448.16	451.09	454.02	456.96	462.83	468.69	477.50	485.93	497.67	512.34	529.57	550.11	573.21	599.62	625.66	655.00	683.97	715.88	748.15	782.99	817.83	855.60	893.75	934.45	954.62	995.33	1030.54	1053.64	1082.62	1100.22
Health Net	CommunityCare	HMO A	216.73	236.00	243.36	250.73	258.66	266.59	274.81	283.31	283.31	283.31	283.31	284.44	290.11	296.91	307.96	317.02	321.55	328.35	335.15	339.40	343.94	346.20	348.47	350.74	353.00	357.53	362.07	368.87	375.38	384.45	395.78	409.10	424.96	442.81	463.21	483.32	505.99	528.37	553.02	577.95	604.86	631.78	660.96	690.42	721.87	737.45	768.90	796.10	813.94	836.33	849.93
Kaiser Permanente	Full	HMO A	192.24	208.09	214.14	220.20	226.73	219.26	226.02	233.01	233.01	233.01	233.01	233.94	238.60	244.19	253.28	260.74	264.46	270.06	275.65	279.14	282.87	284.74	286.60	288.46	290.33	294.06	297.78	303.38	308.74	316.19	325.51	336.46	349.51	364.19	380.97	397.51	416.15	434.56	454.83	475.34	497.47	519.61	543.61	567.84	593.71	606.52	632.39	654.75	669.43	687.84	699.03
Kaiser Permanente	Full	HMO C	182.04	196.97	202.68	208.40	214.55	206.71	213.08	219.67	219.67	219.67	219.67	220.55	224.94	230.21	238.78	245.81	249.32	254.60	259.87	263.16	266.68	268.43	270.19	271.95	273.71	277.22	280.74	286.01	291.06	298.09	306.88	317.20	329.50	343.34	359.16	374.75	392.33	409.68	428.79	448.12	468.99	489.86	512.49	535.33	559.71	571.80	596.18	617.27	631.11	648.46	659.01
Oscar	Oscar EPO	EPO A	193.25	210.43	216.99	223.56	230.63	237.71	245.03	252.61	252.61	252.61	252.61	253.62	258.67	264.74	274.59	282.67	286.71	292.78	298.84	302.63	306.67	308.69	310.71	312.73	314.75	318.80	322.84	328.90	334.71	342.79	352.90	364.77	378.92	394.83	413.02	430.95	451.16	471.12	493.10	515.33	539.33	563.32	589.34	615.61	643.65	657.55	685.59	709.84	725.75	745.71	757.83
Oscar	Oscar EPO	EPO B	183.48	199.79	206.03	212.27	218.98	225.70	232.65	239.85	239.85	239.85	239.85	240.81	245.60	251.36	260.71	268.39	272.23	277.98	283.74	287.34	291.18	293.09	295.01	296.93	298.85	302.69	306.53	312.28	317.80	325.47	335.07	346.34	359.77	374.88	392.15	409.18	428.37	447.32	468.18	489.29	512.08	534.86	559.57	584.51	611.13	624.32	650.95	673.97	689.08	708.03	719.54
Oscar	Oscar EPO	EPO C	184.53	200.94	207.21	213.48	220.23	226.99	233.98	241.22	241.22	241.22	241.22	242.18	247.01	252.80	262.21	269.93	273.78	279.57	285.36	288.98	292.84	294.77	296.70	298.63	300.56	304.42	308.28	314.07	319.62	327.34	336.98	348.32	361.83	377.03	394.39	411.52	430.82	449.88	470.86	492.09	515.00	537.92	562.77	587.85	614.63	627.90	654.67	677.83	693.03	712.08	723.66
Sharp Health Plan	Premier	HMO A	172.72	188.07	193.95	199.82	206.14	212.46	219.01	225.78	225.78	225.78	225.78	226.68	231.20	236.62	245.42	252.65	256.26	261.68	267.10	270.48	274.10	275.90	277.71	279.52	281.32	284.93	288.55	293.97	299.16	306.38	315.41	326.03	338.67	352.89	369.15	385.18	403.24	421.08	440.72	460.59	482.04	503.49	526.74	550.23	575.29	587.71	612.77	634.44	648.67	666.50	677.34
Sharp Health Plan	Performance	HMO B	197.55	215.11	221.83	228.54	235.77	243.00	250.49	258.24	258.24	258.24	258.24	259.27	264.44	270.64	280.71	288.97	293.10	299.30	305.50	309.37	313.50	315.57	317.64	319.70	321.77	325.90	330.03	336.23	342.17	350.43	360.76	372.90	387.36	403.63	422.22	440.56	461.22	481.62	504.08	526.81	551.34	575.88	602.47	629.33	658.00	672.20	700.86	725.65	741.92	762.32	774.72
UnitedHealthcare	Alliance	HMO A	190.71	207.66	214.14	220.62	227.60	234.58	241.81	249.29	249.29	249.29	249.29	250.29	255.27	261.26	270.98	278.96	282.94	288.93	294.91	298.65	302.64	304.63	306.63	308.62	310.62	314.60	318.59	324.58	330.31	338.29	348.26	359.97	373.94	389.64	407.59	425.29	445.23	464.93	486.61	508.55	532.23	555.92	581.59	607.52	635.19	648.90	676.57	700.50	716.21	735.90	747.87
UnitedHealthcare	Alliance	HMO B	199.52	217.25	224.04	230.82	238.12	245.42	252.99	260.81	260.81	260.81	260.81	261.85	267.07	273.33	283.50	291.85	296.02	302.28	308.54	312.45	316.62	318.71	320.80	322.88	324.97	329.14	333.32	339.57	345.57	353.92	364.35	376.61	391.22	407.65	426.42	444.94	465.81	486.41	509.10	532.05	556.83	581.61	608.47	635.59	664.54	678.89	707.84	732.88	749.31	769.91	782.43
Western Health	Full	HMO B	196.64	214.11	220.80	227.48	234.68	241.87	249.33	257.04	257.04	257.04	257.04	258.07	263.21	269.38	279.40	287.63	291.74	297.91	304.08	307.93	312.05	314.10	316.16	318.21	320.27	324.38	328.50	334.67	340.58	348.80	359.08	371.16	385.56	401.75	420.26	438.51	459.07	479.38	501.74	524.36	548.78	573.20	599.67	626.41	654.94	669.07	697.60	722.28	738.47	758.78	771.12
Western Health	Full	HMO C	201.60	219.52	226.37	233.22	240.60	247.98	255.62	263.53	263.53	263.53	263.53	264.58	269.85	276.18	286.45	294.89	299.10	305.43	311.75	315.70	319.92	322.03	324.14	326.25	328.35	332.57	336.79	343.11	349.17	357.61	368.15	380.53	395.29	411.89	430.87	449.58	470.66	491.48	514.40	537.59	562.63	587.66	614.81	642.21	671.47	685.96	715.21	740.51	757.11	777.93	790.58

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	229.34	249.73	257.52	265.31	273.71	282.10	290.80	299.79	299.79	299.79	299.79	300.99	306.98	314.18	325.87	335.47	340.26	347.46	354.65	359.15	363.95	366.34	368.74	371.14	373.54	378.33	383.13	390.33	397.22	406.82	418.81	432.90	449.69	468.57	490.16	511.44	535.42	559.11	585.19	611.57	640.05	668.53	699.41	730.59	763.86	780.35	813.63	842.41	861.30	884.98	899.37
Anthem Blue Cross	CaliforniaCare HMO	HMO B	267.13	290.88	299.95	309.03	318.81	328.59	338.71	349.19	349.19	349.19	349.19	350.59	357.57	365.95	379.57	390.74	396.33	404.71	413.09	418.33	423.92	426.71	429.50	432.30	435.09	440.68	446.26	454.65	462.68	473.85	487.82	504.23	523.79	545.78	570.93	595.72	623.65	651.24	681.62	712.35	745.52	778.69	814.66	850.98	889.74	908.94	947.70	981.22	1003.22	1030.81	1047.57
Anthem Blue Cross	Advantage PPO	PPO A	325.78	354.74	365.81	376.89	388.81	400.73	413.08	425.86	425.86	425.86	425.86	427.56	436.08	446.30	462.91	476.54	483.35	493.57	503.79	510.18	516.99	520.40	523.81	527.21	530.62	537.44	544.25	554.47	564.26	577.89	594.93	614.94	638.79	665.62	696.28	726.52	760.59	794.23	831.28	868.75	909.21	949.67	993.53	1037.82	1085.09	1108.51	1155.78	1196.67	1223.50	1257.14	1277.58
Anthem Blue Cross	Select PPO	PPO B	282.71	307.84	317.45	327.06	337.41	347.76	358.47	369.56	369.56	369.56	369.56	371.04	378.43	387.30	401.71	413.54	419.45	428.32	437.19	442.73	448.65	451.60	454.56	457.52	460.47	466.38	472.30	481.17	489.67	501.49	516.28	533.64	554.34	577.62	604.23	630.47	660.03	689.23	721.38	753.90	789.01	824.12	862.18	900.62	941.64	961.96	1002.99	1038.46	1061.75	1090.94	1108.68
Anthem Blue Cross	Prudent Buyer - Small Group	PPO C	318.50	346.81	357.64	368.46	380.12	391.78	403.85	416.34	416.34	416.34	416.34	418.01	426.33	436.32	452.56	465.88	472.55	482.54	492.53	498.78	505.44	508.77	512.10	515.43	518.76	525.42	532.08	542.07	551.65	564.97	581.63	601.19	624.51	650.74	680.72	710.28	743.58	776.47	812.70	849.33	888.89	928.44	971.32	1014.62	1060.83	1083.73	1129.95	1169.92	1196.14	1229.04	1249.02
Anthem Blue Cross	Prudent Buyer - Small Group	EPO A	315.20	343.21	353.93	364.64	376.17	387.71	399.66	412.02	412.02	412.02	412.02	413.67	421.91	431.80	447.87	461.05	467.64	477.53	487.42	493.60	500.19	503.49	506.78	510.08	513.38	519.97	526.56	536.45	545.93	559.11	575.59	594.96	618.03	643.99	673.65	702.91	735.87	768.42	804.26	840.52	879.66	918.80	961.24	1004.09	1049.83	1072.49	1118.22	1157.78	1183.73	1216.28	1236.06
Anthem Blue Cross	Prudent Buyer - Small Group	EPO B	315.63	343.69	354.41	365.14	376.69	388.25	400.21	412.59	412.59	412.59	412.59	414.24	422.49	432.39	448.49	461.69	468.29	478.19	488.09	494.28	500.88	504.18	507.49	510.79	514.09	520.69	527.29	537.19	546.68	559.88	576.39	595.78	618.89	644.88	674.58	703.88	736.89	769.48	805.38	841.68	880.88	920.08	962.57	1005.48	1051.28	1073.97	1119.77	1159.38	1185.37	1217.97	1237.77
Health Net	WholeCare	HMO A	245.30	267.10	275.44	283.78	292.76	301.74	311.03	320.65	320.65	320.65	320.65	321.94	328.35	336.05	348.55	358.81	363.94	371.64	379.33	384.14	389.27	391.84	394.40	396.97	399.53	404.67	409.80	417.49	424.87	435.13	447.95	463.02	480.98	501.18	524.27	547.04	572.69	598.02	625.92	654.13	684.60	715.06	748.09	781.43	817.03	834.66	870.25	901.04	921.24	946.57	961.95
Health Net	CommunityCare	HMO C	244.42	266.15	274.46	282.76	291.71	300.65	309.92	319.51	319.51	319.51	319.51	320.78	327.17	334.84	347.30	357.53	362.64	370.31	377.98	382.77	387.88	390.44	392.99	395.55	398.10	403.22	408.33	416.00	423.35	433.57	446.35	461.37	479.26	499.39	522.39	545.08	570.64	595.88	623.68	651.79	682.14	712.50	745.41	778.64	814.10	831.67	867.14	897.81	917.94	943.18	958.53
Kaiser Permanente	Full	HMO A	221.36	239.79	246.84	253.88	261.47	255.07	262.93	271.07	271.07	271.07	271.07	272.15	277.54	284.08	294.65	303.32	307.66	314.17	320.67	324.74	329.07	331.24	333.41	335.58	337.75	342.09	346.42	352.93	359.16	367.84	378.68	391.42	406.60	423.68	443.19	462.44	484.12	505.54	529.12	552.97	578.73	604.48	632.40	660.59	690.68	705.58	735.67	761.69	778.77	800.19	813.21
Kaiser Permanente	Full	HMO B	225.03	243.78	250.96	258.13	265.85	259.59	267.59	275.86	275.86	275.86	275.86	276.97	282.48	289.10	299.86	308.69	313.10	319.73	326.35	330.48	334.90	337.11	339.31	341.52	343.73	348.14	352.55	359.17	365.52	374.35	385.38	398.35	413.80	431.17	451.04	470.62	492.69	514.49	538.49	562.76	588.97	615.18	643.59	672.28	702.90	718.07	748.69	775.18	792.56	814.35	827.58
Kaiser Permanente	Full	HMO C	232.06	251.44	258.86	266.27	274.25	268.24	276.51	285.06	285.06	285.06	285.06	286.20	291.90	298.74	309.86	318.98	323.54	330.38	337.22	341.50	346.06	348.34	350.62	352.90	355.18	359.74	364.31	371.15	377.70	386.83	398.23	411.63	427.59	445.55	466.07	486.31	509.12	531.64	556.44	581.52	608.60	635.68	665.04	694.69	726.33	742.01	773.65	801.02	818.97	841.49	855.18
Kaiser Permanente	Full	HMO D	208.81	226.13	232.75	239.37	246.50	239.64	247.03	254.67	254.67	254.67	254.67	255.69	260.78	266.89	276.82	284.97	289.05	295.16	301.27	305.09	309.17	311.20	313.24	315.28	317.32	321.39	325.46	331.58	337.43	345.58	355.77	367.74	382.00	398.04	416.38	434.46	454.84	474.95	497.11	519.52	543.71	567.91	594.14	620.62	648.89	662.90	691.17	715.61	731.66	751.78	764.01
Oscar	Oscar EPO	EPO A	221.13	240.79	248.31	255.82	263.91	272.01	280.39	289.06	289.06	289.06	289.06	290.22	296.00	302.94	314.21	323.46	328.09	335.02	341.96	346.30	350.92	353.24	355.55	357.86	360.17	364.80	369.42	376.36	383.01	392.26	403.82	417.41	433.60	451.81	472.62	493.14	516.27	539.10	564.25	589.69	617.15	644.61	674.38	704.45	736.53	752.43	784.52	812.27	830.48	853.32	867.18
Oscar	Oscar EPO	EPO B	248.94	271.06	279.52	287.99	297.10	306.21	315.64	325.41	325.41	325.41	325.41	326.71	333.22	341.03	353.72	364.13	369.34	377.15	384.96	389.84	395.04	397.65	400.25	402.85	405.46	410.66	415.87	423.68	431.16	441.58	454.59	469.89	488.11	508.61	532.04	555.14	581.18	606.88	635.19	663.83	694.74	725.66	759.17	793.02	829.14	847.03	883.15	914.39	934.89	960.60	976.22
Oscar	Oscar EPO	EPO C	220.86	240.49	248.00	255.50	263.59	271.67	280.04	288.71	288.71	288.71	288.71	289.86	295.63	302.56	313.82	323.06	327.68	334.61	341.54	345.87	350.49	352.80	355.11	357.42	359.73	364.35	368.97	375.89	382.53	391.77	403.32	416.89	433.06	451.25	472.03	492.53	515.63	538.44	563.55	588.96	616.39	643.81	673.55	703.57	735.62	751.50	783.55	811.26	829.45	852.26	866.12
Oscar	Oscar EPO	EPO D	248.40	270.48	278.92	287.37	296.46	305.55	314.97	324.71	324.71	324.71	324.71	326.01	332.50	340.29	352.96	363.35	368.54	376.34	384.13	389.00	394.19	396.79	399.39	401.99	404.59	409.78	414.98	422.77	430.24	440.63	453.62	468.88	487.06	507.52	530.90	553.95	579.93	605.58	633.83	662.40	693.25	724.10	757.54	791.31	827.35	845.21	881.26	912.43	932.88	958.54	974.12
Sharp Health Plan	Premier	HMO A	202.89	220.92	227.82	234.71	242.14	249.56	257.25	265.21	265.21	265.21	265.21	266.27	271.58	277.94	288.28	296.77	301.01	307.38	313.74	317.72	321.96	324.09	326.21	328.33	330.45	334.70	338.94	345.30	351.40	359.89	370.50	382.96	397.82	414.52	433.62	452.45	473.67	494.62	517.69	541.03	566.22	591.42	618.73	646.32	675.76	690.34	719.78	745.24	761.95	782.90	795.63
Sharp Health Plan	Performance	HMO B	215.29	234.42	241.74	249.06	256.94	264.82	272.98	281.42	281.42	281.42	281.42	282.55	288.17	294.93	305.90	314.91	319.41	326.17	332.92	337.14	341.64	343.90	346.15	348.40	350.65	355.15	359.65	366.41	372.88	381.89	393.14	406.37	422.13	439.86	460.12	480.10	502.62	524.85	549.33	574.10	600.83	627.57	656.55	685.82	717.06	732.54	763.77	790.79	808.52	830.75	844.26
Sharp Health Plan	Premier	HMO C	197.90	215.49	222.21	228.94	236.18	243.43	250.93	258.69	258.69	258.69	258.69	259.72	264.90	271.11	281.20	289.47	293.61	299.82	306.03	309.91	314.05	316.12	318.19	320.26	322.33	326.47	330.61	336.81	342.76	351.04	361.39	373.55	388.04	404.33	422.96	441.33	462.02	482.46	504.96	527.73	552.30	576.88	603.52	630.43	659.14	673.37	702.08	726.92	743.22	763.65	776.07
UnitedHealthcare	SignatureValue	HMO A	263.75	287.19	296.16	305.12	314.78	324.43	334.43	344.77	344.77	344.77	344.77	346.15	353.04	361.32	374.76	385.80	391.31	399.59	407.86	413.03	418.55	421.31	424.07	426.83	429.58	435.10	440.62	448.89	456.82	467.85	481.64	497.85	517.16	538.88	563.70	588.18	615.76	643.00	672.99	703.33	736.08	768.84	804.35	840.20	878.47	897.44	935.71	968.80	990.52	1017.76	1034.31
UnitedHealthcare	Advantage	HMO B	253.03	275.52	284.12	292.72	301.98	311.25	320.84	330.76	330.76	330.76	330.76	332.08	338.70	346.64	359.54	370.12	375.41	383.35	391.29	396.25	401.54	404.19	406.83	409.48	412.13	417.42	422.71	430.65	438.26	448.84	462.07	477.62	496.14	516.98	540.79	564.28	590.74	616.87	645.64	674.75	706.17	737.59	771.66	806.06	842.78	860.97	897.68	929.44	950.27	976.40	992.28
UnitedHealthcare	Alliance	HMO C	212.87	231.79	239.03	246.26	254.05	261.84	269.91	278.26	278.26	278.26	278.26	279.37	284.94	291.62	302.47	311.37	315.83	322.50	329.18	333.36	337.81	340.03	342.26	344.49	346.71	351.16	355.62	362.29	368.69	377.60	388.73	401.81	417.39	434.92	454.96	474.71	496.97	518.95	543.16	567.65	594.09	620.52	649.18	678.12	709.01	724.31	755.20	781.91	799.44	821.42	834.78
UnitedHealthcare	Focus	HMO D	248.89	271.01	279.47	287.93	297.04	306.14	315.58	325.34	325.34	325.34	325.34	326.64	333.15	340.96	353.64	364.06	369.26	377.07	384.88	389.76	394.96	397.57	400.17	402.77	405.37	410.58	415.78	423.59	431.08	441.49	454.50	469.79	488.01	508.51	531.93	555.03	581.06	606.76	635.06	663.69	694.60	725.51	759.02	792.85	828.97	846.86	882.97	914.21	934.70	960.40	976.02
Western Health	Full	HMO A	221.05	240.70	248.21	255.73	263.82	271.91	280.29	288.96	288.96	288.96	288.96	290.11	295.89	302.83	314.10	323.34	327.97	334.90	341.83	346.17	350.79	353.10	355.42	357.73	360.04	364.66	369.29	376.22	382.87	392.11	403.67	417.25	433.43	451.64	472.44	492.96	516.08	538.90	564.04	589.47	616.92	644.37	674.13	704.19	736.26	752.15	784.23	811.97	830.17	853.00	866.87
Western Health	Full	HMO B	232.10	252.74	260.62	268.51	277.01	285.50	294.30	303.40	303.40	303.40	303.40	304.62	310.69	317.97	329.80	339.51	344.36	351.65	358.93	363.48	368.33	370.76	373.19	375.61	378.04	382.90	387.75	395.03	402.01	411.72	423.86	438.12	455.11	474.22	496.07	517.61	541.88	565.85	592.24	618.94	647.77	676.59	707.84	739.40	773.07	789.76	823.44	852.56	871.68	895.65	910.21
Western Health	Full	HMO C	216.67	235.93	243.30	250.66	258.59	266.52	274.74	283.23	283.23	283.23	283.23	284.36	290.03	296.83	307.87	316.94	321.47	328.27	335.06	339.31	343.84	346.11	348.38	350.64	352.91	357.44	361.97	368.77	375.28	384.35	395.68	408.99	424.85	442.69	463.08	483.19	505.85	528.23	552.87	577.79	604.70	631.61	660.78	690.24	721.68	737.25	768.69	795.88	813.73	836.10	849.70

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	286.52	311.99	321.73	331.47	341.96	352.44	363.30	374.54	374.54	374.54	374.54	376.04	383.53	392.52	407.12	419.11	425.10	434.09	443.08	448.70	454.69	457.69	460.68	463.68	466.68	472.67	478.66	487.65	496.27	508.25	523.23	540.84	561.81	585.41	612.37	638.97	668.93	698.52	731.10	764.06	799.64	835.22	873.80	912.75	954.33	974.93	1016.50	1052.46	1076.05	1105.64	1123.62
Anthem Blue Cross	CaliforniaCare HMO	HMO B	333.78	363.45	374.79	386.13	398.35	410.57	423.22	436.31	436.31	436.31	436.31	438.06	446.78	457.25	474.27	488.23	495.21	505.68	516.15	522.70	529.68	533.17	536.66	540.15	543.64	550.62	557.60	568.08	578.11	592.07	609.53	630.03	654.47	681.95	713.37	744.34	779.25	813.72	851.68	890.07	931.52	972.97	1017.91	1063.29	1111.72	1135.71	1184.15	1226.03	1253.52	1287.99	1308.93
Anthem Blue Cross	Advantage PPO	PPO A	391.71	426.53	439.84	453.16	467.49	481.83	496.68	512.04	512.04	512.04	512.04	514.09	524.33	536.62	556.59	572.97	581.17	593.45	605.74	613.42	621.62	625.71	629.81	633.91	638.00	646.19	654.39	666.68	678.45	694.84	715.32	739.39	768.06	800.32	837.19	873.54	914.

USE EMPLOYER ZIP CODE FOR RATING

AREA 19 - Continued

10/01/20 - 12/01/20

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	328.19	357.36	368.51	379.67	391.68	403.69	416.13	429.00	429.00	429.00	429.00	430.72	439.30	449.59	466.32	480.05	486.92	497.21	507.51	513.94	520.81	524.24	527.67	531.10	534.53	541.40	548.26	558.56	568.43	582.15	599.31	619.48	643.50	670.53	701.42	731.87	766.19	800.09	837.41	875.16	915.92	956.67	1000.86	1045.47	1093.09	1116.69	1164.31	1205.49	1232.52	1266.41	1287.00
Health Net	WholeCare	HMO C	280.42	305.34	314.87	324.40	334.67	344.93	355.56	366.56	366.56	366.56	366.56	368.02	375.35	384.15	398.45	410.18	416.04	424.84	433.64	439.14	445.00	447.93	450.87	453.80	456.73	462.60	468.46	477.26	485.69	497.42	512.08	529.31	549.84	572.93	599.32	625.35	654.67	683.63	715.52	747.78	782.60	817.42	855.18	893.30	933.99	954.15	994.84	1030.03	1053.12	1082.08	1099.68
Health Net	Salud HMO y Mas	HMO D	273.11	297.38	306.67	315.95	325.94	335.94	346.29	357.00	357.00	357.00	357.00	358.43	365.57	374.14	388.06	399.49	405.20	413.77	422.33	427.69	433.40	436.26	439.11	441.97	444.83	450.54	456.25	464.82	473.03	484.45	498.73	515.51	535.50	557.99	583.70	609.05	637.61	665.81	696.87	728.29	762.20	796.12	832.89	870.02	909.64	929.28	968.90	1003.18	1025.67	1053.87	1071.00
Health Net	Full	HMO E	280.42	305.34	314.87	324.40	334.67	344.93	355.56	366.56	366.56	366.56	366.56	368.02	375.35	384.15	398.45	410.18	416.04	424.84	433.64	439.14	445.00	447.93	450.87	453.80	456.73	462.60	468.46	477.26	485.69	497.42	512.08	529.31	549.84	572.93	599.32	625.35	654.67	683.63	715.52	747.78	782.60	817.42	855.18	893.30	933.99	954.15	994.84	1030.03	1053.12	1082.08	1099.68
Kaiser Permanente	Full	HMO A	306.70	332.72	342.67	352.62	363.33	360.06	371.15	382.63	382.63	382.63	382.63	384.16	391.82	401.00	415.92	428.17	434.29	443.47	452.65	458.39	464.52	467.58	470.64	473.70	476.76	482.88	489.00	498.19	506.99	519.23	534.54	552.52	573.95	598.05	625.60	652.77	683.38	713.61	746.90	780.57	816.92	853.27	892.68	932.47	974.95	995.99	1038.46	1075.20	1099.30	1129.53	1147.89
Kaiser Permanente	Full	HMO B	303.63	329.37	339.22	349.06	359.66	356.27	367.25	378.61	378.61	378.61	378.61	380.13	387.70	396.79	411.55	423.67	429.73	438.81	447.90	453.58	459.64	462.66	465.69	468.72	471.75	477.81	483.87	492.95	501.66	513.78	528.92	546.72	567.92	591.77	619.03	645.91	676.20	706.11	739.05	772.37	808.34	844.31	883.30	922.68	964.71	985.53	1027.56	1063.90	1087.75	1117.66	1135.83
Oscar	Oscar EPO	EPO A	305.04	332.16	342.52	352.89	364.06	375.22	386.78	398.75	398.75	398.75	398.75	400.34	408.32	417.89	433.44	446.20	452.58	462.15	471.72	477.70	484.08	487.27	490.46	493.65	496.84	503.22	509.60	519.17	528.34	541.10	557.05	575.79	598.12	623.24	651.95	680.26	712.16	743.66	778.35	813.44	851.32	889.20	930.27	971.74	1016.01	1037.94	1082.20	1120.48	1145.60	1177.10	1196.24
Oscar	Oscar EPO	EPO B	299.67	326.31	336.49	346.68	357.65	368.62	379.98	391.73	391.73	391.73	391.73	393.30	401.13	410.53	425.81	438.34	444.61	454.01	463.42	469.29	475.56	478.69	481.83	484.96	488.09	494.36	500.63	510.03	519.04	531.58	547.25	565.66	587.59	612.27	640.48	668.29	699.63	730.57	764.65	799.13	836.34	873.56	913.90	954.64	998.12	1019.67	1063.15	1100.76	1125.44	1156.38	1175.19
Sharp Health Plan	Premier	HMO A	282.90	308.04	317.66	327.27	337.63	347.98	358.71	369.80	369.80	369.80	369.80	371.28	378.68	387.55	401.97	413.81	419.72	428.60	437.47	443.02	448.94	451.90	454.85	457.81	460.77	466.69	472.60	481.48	489.99	501.82	516.61	533.99	554.70	578.00	604.62	630.88	660.46	689.68	721.85	754.39	789.52	824.65	862.74	901.20	942.25	962.59	1003.64	1039.14	1062.44	1091.65	1109.40
Sharp Health Plan	Performance	HMO B	304.75	331.84	342.20	352.56	363.71	374.87	386.42	398.37	398.37	398.37	398.37	399.96	407.93	417.49	433.03	445.78	452.15	461.71	471.27	477.25	483.62	486.81	490.00	493.18	496.37	502.74	509.12	518.68	527.84	540.59	556.52	575.25	597.56	622.65	651.33	679.62	711.49	742.96	777.62	812.67	850.52	888.37	929.40	970.83	1015.05	1036.96	1081.18	1119.42	1144.52	1175.99	1195.11
Sharp Health Plan	Premier	HMO C	278.90	303.70	313.17	322.65	332.86	343.07	353.64	364.58	364.58	364.58	364.58	366.04	373.33	382.08	396.30	407.97	413.80	422.55	431.30	436.77	442.60	445.52	448.43	451.35	454.27	460.10	465.93	474.68	483.07	494.74	509.32	526.45	546.87	569.84	596.09	621.97	651.14	679.94	711.66	743.74	778.38	813.01	850.57	888.48	928.95	949.00	989.47	1024.47	1047.44	1076.24	1093.74
UnitedHealthcare	SignatureValue	HMO A	349.19	380.23	392.10	403.97	416.75	429.53	442.77	456.46	456.46	456.46	456.46	458.29	467.42	478.37	496.17	510.78	518.08	529.04	539.99	546.84	554.14	557.79	561.45	565.10	568.75	576.05	583.36	594.31	604.81	619.42	637.67	659.13	684.69	713.45	746.31	778.72	815.24	851.30	891.01	931.18	974.54	1017.91	1064.92	1112.39	1163.06	1188.17	1238.83	1282.65	1311.41	1347.47	1369.38
UnitedHealthcare	Focus	HMO B	329.52	358.81	370.01	381.20	393.27	405.33	417.82	430.74	430.74	430.74	430.74	432.46	441.08	451.42	468.21	482.00	488.89	499.23	509.57	516.03	522.92	526.36	529.81	533.26	536.70	543.59	550.49	560.82	570.73	584.51	601.74	621.99	646.11	673.25	704.26	734.84	769.30	803.33	840.80	878.71	919.63	960.55	1004.92	1049.71	1097.53	1121.22	1169.03	1210.38	1237.52	1271.54	1292.22
UnitedHealthcare	Alliance	HMO C	311.35	339.02	349.60	360.19	371.58	382.98	394.78	406.99	406.99	406.99	406.99	408.62	416.76	426.53	442.40	455.42	461.93	471.70	481.47	487.57	494.09	497.34	500.60	503.85	507.11	513.62	520.13	529.90	539.26	552.29	568.57	587.69	610.49	636.13	665.43	694.32	726.88	759.04	794.44	830.26	868.92	907.59	949.51	991.83	1037.01	1059.39	1104.57	1143.64	1169.28	1201.43	1220.97
Western Health	Full	HMO A	290.72	316.56	326.44	336.32	346.96	357.60	368.62	380.02	380.02	380.02	380.02	381.54	389.14	398.26	413.08	425.24	431.32	440.44	449.56	455.26	461.35	464.39	467.43	470.47	473.51	479.59	485.67	494.79	503.53	515.69	530.89	548.75	570.03	593.97	621.33	648.32	678.72	708.74	741.80	775.24	811.34	847.45	886.59	926.11	968.29	989.19	1031.38	1067.86	1091.80	1121.82	1140.06
Western Health	Full	HMO B	298.09	324.59	334.72	344.85	355.77	366.68	377.98	389.67	389.67	389.67	389.67	391.23	399.02	408.37	423.57	436.04	442.27	451.62	460.98	466.82	473.06	476.17	479.29	482.41	485.52	491.76	497.99	507.35	516.31	528.78	544.36	562.68	584.50	609.05	637.10	664.77	695.94	726.73	760.63	794.92	831.94	868.96	909.09	949.62	992.87	1014.30	1057.56	1094.96	1119.51	1150.30	1169.00

Health Care Service Plan rates will vary by county

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