

SEE IF YOU QUALIFY FOR FINANCIAL ASSISTANCE

You may be eligible for a tax credit (subsidy) to help lower your monthly premium. See if you qualify:

- Call your independent broker or contact us directly at **1-866-346-2081 (TTY: 711)**
- Visit ibx.com/calculator



Find your individual monthly premium:

1. If you do not use tobacco, refer to the set of plans under Non-tobacco. If you use tobacco, refer to the set of plans under Tobacco. Tobacco rates are applicable to applicants ages 21 and older.
2. Look at the first column to narrow down your plan type — Gold, Silver, Bronze, or Catastrophic.
3. Find the name of the plan you're interested in and scan the row to the right until you find the rate in the column for your age. If you want to see other plan rates you may be eligible for, look up or down within your age column to compare prices.

Find your family monthly premium:

1. Follow steps 1–3 above for each family member covered under your health plan.
2. Add the rates together for each person. If you are purchasing a health plan that includes more than three children younger than 21, only the rates for the oldest three children are included in your total.

	Age	Rate ¹
You	56	\$750
+ Spouse	54	\$686
+ Dependent 1	23	\$234
+ Dependent 2	20	\$227
+ Dependent 3	14	\$179
+ Dependent 4	12	\$179
+ Dependent 5	10	\$0 Included
= Total Family Rate		\$2,255

¹ The example shown is for illustrative purposes only.

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2. Look at the first column to narrow down your plan type — Gold, Silver, Bronze, or Catastrophic.
3. Find the name of the plan you're interested in and scan the row to the right until you find the rate in the column for your age. If you want to see other plan rates you may be eligible for, look up or down within your age column to compare prices.

Find your family monthly premium:

1. Follow steps 1–3 above for each family member covered under your health plan.
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MONTHLY PREMIUMS



The charts in this document show monthly premium rates for our health plans. Rates are based on age, tobacco use, and household size. For more information about our health plans, please refer to our 2021 brochure for individual and family health plans.

Non-Tobacco

	0-14	15	16	17	18	19	20	21	22	23	24	25
● Personal Choice EPO Gold	\$438.15	\$477.09	\$491.98	\$506.87	\$522.91	\$538.95	\$555.56	\$572.74	\$572.74	\$572.74	\$572.74	\$575.03
● Personal Choice PPO Gold	\$421.04	\$458.47	\$472.78	\$487.09	\$502.50	\$517.91	\$533.87	\$550.38	\$550.38	\$550.38	\$550.38	\$552.58
● Keystone HMO Gold	\$354.20	\$385.69	\$397.73	\$409.76	\$422.73	\$435.69	\$449.12	\$463.01	\$463.01	\$463.01	\$463.01	\$464.86
● Keystone HMO Gold Proactive	\$317.93	\$346.19	\$356.99	\$367.80	\$379.43	\$391.07	\$403.12	\$415.59	\$415.59	\$415.59	\$415.59	\$417.25
● Personal Choice PPO Silver	\$368.19	\$400.92	\$413.44	\$425.95	\$439.43	\$452.90	\$466.86	\$481.30	\$481.30	\$481.30	\$481.30	\$483.23
● Keystone HMO Silver Proactive	\$282.23	\$307.32	\$316.91	\$326.50	\$336.83	\$347.16	\$357.86	\$368.93	\$368.93	\$368.93	\$368.93	\$370.41
● Keystone HMO Silver*	\$272.03	\$296.21	\$305.45	\$314.70	\$324.65	\$334.61	\$344.92	\$355.59	\$355.59	\$355.59	\$355.59	\$357.01
● Keystone HMO Silver Proactive Lite†	\$267.72	\$291.52	\$300.62	\$309.71	\$319.51	\$329.31	\$339.46	\$349.96	\$349.96	\$349.96	\$349.96	\$351.36
● Keystone HMO Silver Proactive Select*	\$235.71	\$256.66	\$264.68	\$272.69	\$281.31	\$289.94	\$298.88	\$308.12	\$308.12	\$308.12	\$308.12	\$309.35
● Keystone HMO Silver Proactive Value*	\$206.67	\$225.04	\$232.07	\$239.09	\$246.66	\$254.22	\$262.06	\$270.16	\$270.16	\$270.16	\$270.16	\$271.24
● Personal Choice PPO Bronze	\$246.62	\$268.54	\$276.92	\$285.31	\$294.33	\$303.36	\$312.71	\$322.38	\$322.38	\$322.38	\$322.38	\$323.67
● Personal Choice EPO Bronze Reserve	\$226.94	\$247.11	\$254.82	\$262.54	\$270.84	\$279.15	\$287.75	\$296.65	\$296.65	\$296.65	\$296.65	\$297.84
● Personal Choice EPO Bronze Basic	\$207.91	\$226.39	\$233.46	\$240.53	\$248.14	\$255.74	\$263.63	\$271.78	\$271.78	\$271.78	\$271.78	\$272.87
● Keystone HMO Bronze*	\$167.79	\$182.70	\$188.40	\$194.11	\$200.25	\$206.39	\$212.75	\$219.33	\$219.33	\$219.33	\$219.33	\$220.21
● Personal Choice EPO Catastrophic‡	\$202.10	\$220.06	\$226.93	\$233.80	\$241.20	\$248.59	\$256.25	\$264.18	\$264.18	\$264.18	\$264.18	\$265.24

Tobacco

	0-14	15	16	17	18	19	20	21	22	23	24	25
● Personal Choice EPO Gold	\$438.15	\$477.09	\$491.98	\$506.87	\$522.91	\$538.95	\$555.56	\$644.33	\$644.33	\$644.33	\$644.33	\$646.91
● Personal Choice PPO Gold	\$421.04	\$458.47	\$472.78	\$487.09	\$502.50	\$517.91	\$533.87	\$619.18	\$619.18	\$619.18	\$619.18	\$621.65
● Keystone HMO Gold	\$354.20	\$385.69	\$397.73	\$409.76	\$422.73	\$435.69	\$449.12	\$520.89	\$520.89	\$520.89	\$520.89	\$522.97
● Keystone HMO Gold Proactive	\$317.93	\$346.19	\$356.99	\$367.80	\$379.43	\$391.07	\$403.12	\$467.54	\$467.54	\$467.54	\$467.54	\$469.41
● Personal Choice PPO Silver	\$368.19	\$400.92	\$413.44	\$425.95	\$439.43	\$452.90	\$466.86	\$541.46	\$541.46	\$541.46	\$541.46	\$543.63
● Keystone HMO Silver Proactive	\$282.23	\$307.32	\$316.91	\$326.50	\$336.83	\$347.16	\$357.86	\$415.05	\$415.05	\$415.05	\$415.05	\$416.71
● Keystone HMO Silver*	\$272.03	\$296.21	\$305.45	\$314.70	\$324.65	\$334.61	\$344.92	\$400.04	\$400.04	\$400.04	\$400.04	\$401.64
● Keystone HMO Silver Proactive Lite†	\$267.72	\$291.52	\$300.62	\$309.71	\$319.51	\$329.31	\$339.46	\$393.71	\$393.71	\$393.71	\$393.71	\$395.28
● Keystone HMO Silver Proactive Select*	\$235.71	\$256.66	\$264.68	\$272.69	\$281.31	\$289.94	\$298.88	\$346.64	\$346.64	\$346.64	\$346.64	\$348.02
● Keystone HMO Silver Proactive Value*	\$206.67	\$225.04	\$232.07	\$239.09	\$246.66	\$254.22	\$262.06	\$303.93	\$303.93	\$303.93	\$303.93	\$305.15
● Personal Choice PPO Bronze	\$246.62	\$268.54	\$276.92	\$285.31	\$294.33	\$303.36	\$312.71	\$362.68	\$362.68	\$362.68	\$362.68	\$364.13
● Personal Choice EPO Bronze Reserve	\$226.94	\$247.11	\$254.82	\$262.54	\$270.84	\$279.15	\$287.75	\$333.73	\$333.73	\$333.73	\$333.73	\$335.07
● Personal Choice EPO Bronze Basic	\$207.91	\$226.39	\$233.46	\$240.53	\$248.14	\$255.74	\$263.63	\$305.75	\$305.75	\$305.75	\$305.75	\$306.98
● Keystone HMO Bronze*	\$167.79	\$182.70	\$188.40	\$194.11	\$200.25	\$206.39	\$212.75	\$246.75	\$246.75	\$246.75	\$246.75	\$247.73
● Personal Choice EPO Catastrophic‡	\$202.10	\$220.06	\$226.93	\$233.80	\$241.20	\$248.59	\$256.25	\$297.20	\$297.20	\$297.20	\$297.20	\$298.39

* This plan is not offered on the Pennsylvania Insurance Exchange (Pennie) and must be purchased through Independence Blue Cross directly.

† This plan is only available for purchase through Pennie.

‡ Catastrophic plan is only available to qualified individuals.

Monthly premiums *continued*

Non-Tobacco

	26	27	28	29	30	31	32	33	34	35	36	37	38
● Personal Choice EPO Gold	\$586.49	\$600.23	\$622.57	\$640.90	\$650.06	\$663.81	\$677.55	\$686.14	\$695.31	\$699.89	\$704.47	\$709.05	\$713.63
● Personal Choice PPO Gold	\$563.59	\$576.80	\$598.26	\$615.88	\$624.68	\$637.89	\$651.10	\$659.36	\$668.16	\$672.56	\$676.97	\$681.37	\$685.77
● Keystone HMO Gold	\$474.12	\$485.23	\$503.29	\$518.11	\$525.52	\$536.63	\$547.74	\$554.69	\$562.09	\$565.80	\$569.50	\$573.21	\$576.91
● Keystone HMO Gold Proactive	\$425.56	\$435.54	\$451.75	\$465.05	\$471.69	\$481.67	\$491.64	\$497.88	\$504.53	\$507.85	\$511.18	\$514.50	\$517.83
● Personal Choice PPO Silver	\$492.85	\$504.40	\$523.17	\$538.57	\$546.28	\$557.83	\$569.38	\$576.60	\$584.30	\$588.15	\$592.00	\$595.85	\$599.70
● Keystone HMO Silver Proactive	\$377.78	\$386.64	\$401.03	\$412.83	\$418.74	\$427.59	\$436.44	\$441.98	\$447.88	\$450.83	\$453.78	\$456.74	\$459.69
● Keystone HMO Silver*	\$364.12	\$372.66	\$386.53	\$397.91	\$403.59	\$412.13	\$420.66	\$426.00	\$431.69	\$434.53	\$437.38	\$440.22	\$443.07
● Keystone HMO Silver Proactive Lite†	\$358.36	\$366.76	\$380.41	\$391.61	\$397.20	\$405.60	\$414.00	\$419.25	\$424.85	\$427.65	\$430.45	\$433.25	\$436.05
● Keystone HMO Silver Proactive Select*	\$315.51	\$322.91	\$334.93	\$344.79	\$349.72	\$357.11	\$364.51	\$369.13	\$374.06	\$376.52	\$378.99	\$381.45	\$383.92
● Keystone HMO Silver Proactive Value*	\$276.64	\$283.13	\$293.66	\$302.31	\$306.63	\$313.12	\$319.60	\$323.65	\$327.97	\$330.14	\$332.30	\$334.46	\$336.62
● Personal Choice PPO Bronze	\$330.12	\$337.85	\$350.43	\$360.74	\$365.90	\$373.64	\$381.38	\$386.21	\$391.37	\$393.95	\$396.53	\$399.11	\$401.69
● Personal Choice EPO Bronze Reserve	\$303.77	\$310.89	\$322.46	\$331.95	\$336.70	\$343.82	\$350.94	\$355.39	\$360.13	\$362.51	\$364.88	\$367.25	\$369.63
● Personal Choice EPO Bronze Basic	\$278.30	\$284.83	\$295.42	\$304.12	\$308.47	\$314.99	\$321.52	\$325.59	\$329.94	\$332.12	\$334.29	\$336.46	\$338.64
● Keystone HMO Bronze*	\$224.59	\$229.86	\$238.41	\$245.43	\$248.94	\$254.20	\$259.47	\$262.76	\$266.27	\$268.02	\$269.78	\$271.53	\$273.29
● Personal Choice EPO Catastrophic‡	\$270.52	\$276.86	\$287.16	\$295.62	\$299.84	\$306.18	\$312.52	\$316.49	\$320.71	\$322.83	\$324.94	\$327.05	\$329.17

Tobacco

	26	27	28	29	30	31	32	33	34	35	36	37	38
● Personal Choice EPO Gold	\$659.80	\$675.26	\$700.39	\$721.01	\$763.82	\$779.97	\$796.12	\$806.22	\$816.98	\$822.37	\$827.75	\$833.14	\$838.52
● Personal Choice PPO Gold	\$634.04	\$648.90	\$673.05	\$692.86	\$734.00	\$749.52	\$765.04	\$774.74	\$785.09	\$790.26	\$795.44	\$800.61	\$805.78
● Keystone HMO Gold	\$533.39	\$545.89	\$566.20	\$582.87	\$617.48	\$630.54	\$643.60	\$651.76	\$660.46	\$664.81	\$669.17	\$673.52	\$677.87
● Keystone HMO Gold Proactive	\$478.76	\$489.98	\$508.21	\$523.18	\$554.24	\$565.96	\$577.68	\$585.01	\$592.82	\$596.72	\$600.63	\$604.54	\$608.44
● Personal Choice PPO Silver	\$554.46	\$567.45	\$588.57	\$605.90	\$641.87	\$655.45	\$669.02	\$677.50	\$686.55	\$691.07	\$695.60	\$700.12	\$704.65
● Keystone HMO Silver Proactive	\$425.01	\$434.97	\$451.16	\$464.44	\$492.01	\$502.42	\$512.82	\$519.32	\$526.26	\$529.73	\$533.20	\$536.66	\$540.13
● Keystone HMO Silver*	\$409.64	\$419.24	\$434.84	\$447.64	\$474.22	\$484.25	\$494.28	\$500.55	\$507.23	\$510.57	\$513.92	\$517.26	\$520.60
● Keystone HMO Silver Proactive Lite†	\$403.15	\$412.60	\$427.96	\$440.56	\$466.72	\$476.58	\$486.45	\$492.62	\$499.20	\$502.49	\$505.78	\$509.07	\$512.36
● Keystone HMO Silver Proactive Select*	\$354.95	\$363.27	\$376.79	\$387.88	\$410.92	\$419.61	\$428.29	\$433.73	\$439.52	\$442.41	\$445.31	\$448.21	\$451.10
● Keystone HMO Silver Proactive Value*	\$311.22	\$318.52	\$330.37	\$340.10	\$360.29	\$367.91	\$375.53	\$380.29	\$385.37	\$387.91	\$390.45	\$392.99	\$395.53
● Personal Choice PPO Bronze	\$371.38	\$380.09	\$394.23	\$405.84	\$429.93	\$439.03	\$448.12	\$453.80	\$459.86	\$462.89	\$465.92	\$468.95	\$471.98
● Personal Choice EPO Bronze Reserve	\$341.74	\$349.75	\$362.77	\$373.45	\$395.62	\$403.99	\$412.35	\$417.58	\$423.16	\$425.94	\$428.73	\$431.52	\$434.31
● Personal Choice EPO Bronze Basic	\$313.09	\$320.43	\$332.35	\$342.14	\$362.45	\$370.12	\$377.78	\$382.57	\$387.68	\$390.24	\$392.79	\$395.34	\$397.90
● Keystone HMO Bronze*	\$252.67	\$258.59	\$268.21	\$276.11	\$292.50	\$298.69	\$304.87	\$308.74	\$312.86	\$314.92	\$316.99	\$319.05	\$321.11
● Personal Choice EPO Catastrophic‡	\$304.34	\$311.47	\$323.06	\$332.57	\$352.32	\$359.77	\$367.22	\$371.87	\$376.84	\$379.32	\$381.81	\$384.29	\$386.77

Non-Tobacco

	39	40	41	42	43	44	45	46	47	48	49	50	51
● Personal Choice EPO Gold	\$722.80	\$731.96	\$745.71	\$758.88	\$777.21	\$800.12	\$827.04	\$859.11	\$895.19	\$936.43	\$977.09	\$1,022.91	\$1,068.16
● Personal Choice PPO Gold	\$694.58	\$703.39	\$716.59	\$729.25	\$746.87	\$768.88	\$794.75	\$825.57	\$860.24	\$899.87	\$938.95	\$982.98	\$1,026.46
● Keystone HMO Gold	\$584.32	\$591.73	\$602.84	\$613.49	\$628.30	\$646.82	\$668.59	\$694.52	\$723.68	\$757.02	\$789.90	\$826.94	\$863.51
● Keystone HMO Gold Proactive	\$524.47	\$531.12	\$541.10	\$550.66	\$563.96	\$580.58	\$600.11	\$623.39	\$649.57	\$679.49	\$709.00	\$742.24	\$775.08
● Personal Choice PPO Silver	\$607.40	\$615.10	\$626.65	\$637.72	\$653.12	\$672.38	\$695.00	\$721.95	\$752.27	\$786.93	\$821.10	\$859.60	\$897.62
● Keystone HMO Silver Proactive	\$465.59	\$471.49	\$480.35	\$488.83	\$500.64	\$515.40	\$532.73	\$553.40	\$576.64	\$603.20	\$629.39	\$658.91	\$688.05
● Keystone HMO Silver*	\$448.75	\$454.44	\$462.98	\$471.16	\$482.54	\$496.76	\$513.47	\$533.39	\$555.79	\$581.39	\$606.64	\$635.08	\$663.18
● Keystone HMO Silver Proactive Lite†	\$441.65	\$447.25	\$455.65	\$463.70	\$474.90	\$488.89	\$505.34	\$524.94	\$546.99	\$572.18	\$597.03	\$625.03	\$652.68
● Keystone HMO Silver Proactive Select*	\$388.85	\$393.78	\$401.17	\$408.26	\$418.12	\$430.44	\$444.93	\$462.18	\$481.59	\$503.78	\$525.65	\$550.30	\$574.64
● Keystone HMO Silver Proactive Value*	\$340.94	\$345.26	\$351.75	\$357.96	\$366.61	\$377.41	\$390.11	\$405.24	\$422.26	\$441.71	\$460.89	\$482.51	\$503.85
● Personal Choice PPO Bronze	\$406.84	\$412.00	\$419.74	\$427.15	\$437.47	\$450.36	\$465.52	\$483.57	\$503.88	\$527.09	\$549.98	\$575.77	\$601.24
● Personal Choice EPO Bronze Reserve	\$374.37	\$379.12	\$386.24	\$393.06	\$402.55	\$414.42	\$428.36	\$444.98	\$463.66	\$485.02	\$506.08	\$529.82	\$553.25
● Personal Choice EPO Bronze Basic	\$342.99	\$347.33	\$353.86	\$360.11	\$368.81	\$379.68	\$392.45	\$407.67	\$424.79	\$444.36	\$463.66	\$485.40	\$506.87
● Keystone HMO Bronze*	\$276.79	\$280.30	\$285.57	\$290.61	\$297.63	\$306.40	\$316.71	\$329.00	\$342.81	\$358.60	\$374.18	\$391.72	\$409.05
● Personal Choice EPO Catastrophic‡	\$333.40	\$337.62	\$343.96	\$350.04	\$358.49	\$369.06	\$381.48	\$396.27	\$412.91	\$431.93	\$450.69	\$471.83	\$492.70

Tobacco

	39	40	41	42	43	44	45	46	47	48	49	50	51
● Personal Choice EPO Gold	\$849.29	\$896.65	\$913.49	\$929.63	\$952.08	\$980.14	\$1,013.12	\$1,052.41	\$1,096.61	\$1,147.13	\$1,196.94	\$1,406.51	\$1,468.72
● Personal Choice PPO Gold	\$816.13	\$861.65	\$877.83	\$893.34	\$914.91	\$941.88	\$973.57	\$1,011.32	\$1,053.80	\$1,102.34	\$1,150.21	\$1,351.60	\$1,411.38
● Keystone HMO Gold	\$686.57	\$724.87	\$738.48	\$751.52	\$769.67	\$792.36	\$819.02	\$850.78	\$886.51	\$927.35	\$967.62	\$1,137.04	\$1,187.33
● Keystone HMO Gold Proactive	\$616.26	\$650.63	\$662.85	\$674.55	\$690.85	\$711.21	\$735.14	\$763.65	\$795.72	\$832.37	\$868.52	\$1,020.59	\$1,065.73
● Personal Choice PPO Silver	\$713.70	\$753.50	\$767.65	\$781.21	\$800.08	\$823.66	\$851.37	\$884.39	\$921.53	\$963.98	\$1,005.84	\$1,181.95	\$1,234.23
● Keystone HMO Silver Proactive	\$547.07	\$577.58	\$588.42	\$598.82	\$613.28	\$631.36	\$652.60	\$677.91	\$706.38	\$738.92	\$771.01	\$906.00	\$946.07
● Keystone HMO Silver*	\$527.29	\$556.69	\$567.15	\$577.17	\$591.11	\$608.53	\$629.00	\$653.40	\$680.84	\$712.20	\$743.13	\$873.24	\$911.87
● Keystone HMO Silver Proactive Lite†	\$518.94	\$547.88	\$558.17	\$568.03	\$581.75	\$598.90	\$619.04	\$643.05	\$670.06	\$700.93	\$731.36	\$859.41	\$897.43
● Keystone HMO Silver Proactive Select*	\$456.90	\$482.38	\$491.44	\$500.12	\$512.20	\$527.29	\$545.03	\$566.17	\$589.95	\$617.13	\$643.92	\$756.67	\$790.14
● Keystone HMO Silver Proactive Value*	\$400.61	\$422.95	\$430.89	\$438.50	\$449.09	\$462.33	\$477.89	\$496.42	\$517.27	\$541.10	\$564.59	\$663.45	\$692.79
● Personal Choice PPO Bronze	\$478.04	\$504.70	\$514.18	\$523.26	\$535.90	\$551.70	\$570.26	\$592.37	\$617.25	\$645.69	\$673.73	\$791.68	\$826.70
● Personal Choice EPO Bronze Reserve	\$439.89	\$464.42	\$473.14	\$481.50	\$493.13	\$507.66	\$524.74	\$545.09	\$567.99	\$594.15	\$619.95	\$728.50	\$760.72
● Personal Choice EPO Bronze Basic	\$403.01	\$425.49	\$433.48	\$441.13	\$451.79	\$465.10	\$480.75	\$499.40	\$520.37	\$544.34	\$567.98	\$667.42	\$696.95
● Keystone HMO Bronze*	\$325.23	\$343.37	\$349.82	\$356.00	\$364.60	\$375.34	\$387.97	\$403.02	\$419.95	\$439.29	\$458.37	\$538.62	\$562.44
● Personal Choice EPO Catastrophic‡	\$391.74	\$413.59	\$421.35	\$428.80	\$439.15	\$452.10	\$467.31	\$485.43	\$505.82	\$529.12	\$552.10	\$648.76	\$677.46

Non-Tobacco

	52	53	54	55	56	57	58	59	60	61	62	63	64+
● Personal Choice EPO Gold	\$1,117.99	\$1,168.39	\$1,222.80	\$1,277.21	\$1,336.20	\$1,395.77	\$1,459.34	\$1,490.84	\$1,554.42	\$1,609.40	\$1,645.48	\$1,690.73	\$1,718.22
● Personal Choice PPO Gold	\$1,074.34	\$1,122.78	\$1,175.06	\$1,227.35	\$1,284.04	\$1,341.28	\$1,402.37	\$1,432.64	\$1,493.73	\$1,546.57	\$1,581.24	\$1,624.72	\$1,651.14
● Keystone HMO Gold	\$903.80	\$944.54	\$988.53	\$1,032.51	\$1,080.20	\$1,128.36	\$1,179.75	\$1,205.22	\$1,256.61	\$1,301.06	\$1,330.23	\$1,366.81	\$1,389.03
● Keystone HMO Gold Proactive	\$811.23	\$847.80	\$887.28	\$926.77	\$969.57	\$1,012.79	\$1,058.92	\$1,081.78	\$1,127.91	\$1,167.81	\$1,193.99	\$1,226.82	\$1,246.77
● Personal Choice PPO Silver	\$939.50	\$981.85	\$1,027.58	\$1,073.30	\$1,122.87	\$1,172.93	\$1,226.35	\$1,252.82	\$1,306.25	\$1,352.45	\$1,382.77	\$1,420.80	\$1,443.90
● Keystone HMO Silver Proactive	\$720.15	\$752.62	\$787.67	\$822.71	\$860.71	\$899.08	\$940.03	\$960.32	\$1,001.28	\$1,036.69	\$1,059.94	\$1,089.08	\$1,106.79
● Keystone HMO Silver*	\$694.11	\$725.40	\$759.18	\$792.97	\$829.59	\$866.57	\$906.04	\$925.60	\$965.07	\$999.21	\$1,021.61	\$1,049.70	\$1,066.77
● Keystone HMO Silver Proactive Lite†	\$683.12	\$713.92	\$747.16	\$780.41	\$816.46	\$852.85	\$891.70	\$910.95	\$949.79	\$983.39	\$1,005.44	\$1,033.08	\$1,049.88
● Keystone HMO Silver Proactive Select*	\$601.45	\$628.56	\$657.84	\$687.11	\$718.84	\$750.89	\$785.09	\$802.04	\$836.24	\$865.82	\$885.23	\$909.57	\$924.36
● Keystone HMO Silver Proactive Value*	\$527.35	\$551.13	\$576.79	\$602.46	\$630.28	\$658.38	\$688.37	\$703.23	\$733.21	\$759.15	\$776.17	\$797.51	\$810.48
● Personal Choice PPO Bronze	\$629.29	\$657.66	\$688.28	\$718.91	\$752.11	\$785.64	\$821.42	\$839.16	\$874.94	\$905.89	\$926.20	\$951.67	\$967.14
● Personal Choice EPO Bronze Reserve	\$579.06	\$605.17	\$633.35	\$661.53	\$692.08	\$722.94	\$755.86	\$772.18	\$805.11	\$833.59	\$852.28	\$875.71	\$889.95
● Personal Choice EPO Bronze Basic	\$530.51	\$554.43	\$580.25	\$606.07	\$634.06	\$662.33	\$692.50	\$707.44	\$737.61	\$763.70	\$780.82	\$802.29	\$815.34
● Keystone HMO Bronze*	\$428.13	\$447.43	\$468.27	\$489.11	\$511.70	\$534.51	\$558.85	\$570.92	\$595.26	\$616.32	\$630.14	\$647.46	\$657.99
● Personal Choice EPO Catastrophic‡	\$515.68	\$538.93	\$564.02	\$589.12	\$616.33	\$643.81	\$673.13	\$687.66	\$716.98	\$742.35	\$758.99	\$779.86	\$792.54

Tobacco

	52	53	54	55	56	57	58	59	60	61	62	63	64+
● Personal Choice EPO Gold	\$1,537.23	\$1,606.54	\$1,681.35	\$1,756.16	\$1,837.28	\$1,919.18	\$2,006.59	\$2,049.91	\$2,137.32	\$2,212.92	\$2,262.54	\$2,324.75	\$2,362.55
● Personal Choice PPO Gold	\$1,477.22	\$1,543.82	\$1,615.71	\$1,687.60	\$1,765.55	\$1,844.25	\$1,928.26	\$1,969.88	\$2,053.88	\$2,126.53	\$2,174.21	\$2,233.99	\$2,270.32
● Keystone HMO Gold	\$1,242.72	\$1,298.74	\$1,359.22	\$1,419.70	\$1,485.28	\$1,551.49	\$1,622.16	\$1,657.17	\$1,727.84	\$1,788.95	\$1,829.06	\$1,879.36	\$1,909.92
● Keystone HMO Gold Proactive	\$1,115.44	\$1,165.73	\$1,220.02	\$1,274.30	\$1,333.16	\$1,392.59	\$1,456.02	\$1,487.45	\$1,550.88	\$1,605.74	\$1,641.74	\$1,686.88	\$1,714.31
● Personal Choice PPO Silver	\$1,291.81	\$1,350.05	\$1,412.92	\$1,475.79	\$1,543.95	\$1,612.78	\$1,686.23	\$1,722.63	\$1,796.09	\$1,859.62	\$1,901.32	\$1,953.60	\$1,985.36
● Keystone HMO Silver Proactive	\$990.21	\$1,034.85	\$1,083.04	\$1,131.23	\$1,183.48	\$1,236.24	\$1,292.55	\$1,320.45	\$1,376.75	\$1,425.45	\$1,457.41	\$1,497.49	\$1,521.84
● Keystone HMO Silver*	\$954.40	\$997.43	\$1,043.88	\$1,090.33	\$1,140.69	\$1,191.54	\$1,245.81	\$1,272.70	\$1,326.97	\$1,373.91	\$1,404.71	\$1,443.34	\$1,466.81
● Keystone HMO Silver Proactive Lite†	\$939.29	\$981.64	\$1,027.35	\$1,073.06	\$1,122.63	\$1,172.67	\$1,226.08	\$1,252.55	\$1,305.96	\$1,352.16	\$1,382.47	\$1,420.49	\$1,443.59
● Keystone HMO Silver Proactive Select*	\$826.99	\$864.28	\$904.52	\$944.77	\$988.41	\$1,032.47	\$1,079.50	\$1,102.80	\$1,149.83	\$1,190.50	\$1,217.19	\$1,250.66	\$1,271.00
● Keystone HMO Silver Proactive Value*	\$725.11	\$757.80	\$793.09	\$828.38	\$866.64	\$905.27	\$946.51	\$966.94	\$1,008.17	\$1,043.83	\$1,067.23	\$1,096.58	\$1,114.41
● Personal Choice PPO Bronze	\$865.27	\$904.28	\$946.39	\$988.50	\$1,034.15	\$1,080.26	\$1,129.46	\$1,153.84	\$1,203.04	\$1,245.60	\$1,273.52	\$1,308.54	\$1,329.82
● Personal Choice EPO Bronze Reserve	\$796.21	\$832.10	\$870.85	\$909.60	\$951.62	\$994.04	\$1,039.31	\$1,061.75	\$1,107.02	\$1,146.18	\$1,171.88	\$1,204.10	\$1,223.68
● Personal Choice EPO Bronze Basic	\$729.46	\$762.34	\$797.84	\$833.35	\$871.84	\$910.70	\$952.18	\$972.73	\$1,014.22	\$1,050.09	\$1,073.63	\$1,103.16	\$1,121.09
● Keystone HMO Bronze*	\$588.68	\$615.22	\$643.87	\$672.52	\$703.58	\$734.95	\$768.42	\$785.01	\$818.48	\$847.44	\$866.44	\$890.26	\$904.74
● Personal Choice EPO Catastrophic‡	\$709.06	\$741.02	\$775.53	\$810.04	\$847.46	\$885.23	\$925.55	\$945.53	\$985.85	\$1,020.73	\$1,043.61	\$1,072.31	\$1,089.74

* This plan is not offered on the Pennsylvania Insurance Exchange (Pennie) and must be purchased through Independence Blue Cross directly.

† This plan is only available for purchase through Pennie.

‡ Catastrophic plan is only available to qualified individuals.



Independence Blue Cross offers products through its subsidiaries Independence Hospital Indemnity Plan, Keystone Health Plan East, and QCC Insurance Company, and with Highmark Blue Shield – independent licensees of the Blue Cross and Blue Shield Association.

Language Assistance Services

Spanish: ATENCIÓN: Si habla español, cuenta con servicios de asistencia en idiomas disponibles de forma gratuita para usted. Llame al 1-800-275-2583 (TTY: 711).

Chinese: 注意: 如果您讲中文, 您可以得到免费的语言协助服务。致电 1-800-275-2583。

Korean: 안내사항: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-800-275-2583 번으로 전화하십시오.

Portuguese: ATENÇÃO: se você fala português, encontram-se disponíveis serviços gratuitos de assistência ao idioma. Ligue para 1-800-275-2583.

Gujarati: સૂચના: જો તમે ગુજરાતી બોલતા હો, તો નિ:શુલ્ક ભાષા સહાય સેવાઓ તમારા માટે ઉપલબ્ધ છે. 1-800-275-2583 કોલ કરો.

Vietnamese: LƯU Ý: Nếu bạn nói tiếng Việt, chúng tôi sẽ cung cấp dịch vụ hỗ trợ ngôn ngữ miễn phí cho bạn. Hãy gọi 1-800-275-2583.

Russian: ВНИМАНИЕ: Если вы говорите по-русски, то можете бесплатно воспользоваться услугами перевода. Тел.: 1-800-275-2583.

Polish: UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer 1-800-275-2583.

Italian: ATTENZIONE: Se lei parla italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 1-800-275-2583.

Arabic: ملحوظة: إذا كنت تتحدث اللغة العربية، فإن خدمات المساعدة اللغوية متاحة لك بالمجان. اتصل برقم 1-800-275-2583.

French Creole: ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Rele 1-800-275-2583.

Tagalog: PAUNAWA: Kung nagsasalita ka ng Tagalog, magagamit mo ang mga serbisyo na tulong sa wika nang walang bayad. Tumawag sa 1-800-275-2583.

French: ATTENTION: Si vous parlez français, des services d'aide linguistique-vous sont proposés gratuitement. Appelez le 1-800-275-2583.

Pennsylvania Dutch: BASS UFF: Wann du Pennsylvania Deitsch schwetzsch, kannscht du Hilf griege in dei eegni Schprooch unni as es dich ennich eppes koschte zellt. Ruf die Nummer 1-800-275-2583.

Hindi: ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। कॉल करें 1-800-275-2583।

German: ACHTUNG: Wenn Sie Deutsch sprechen, können Sie kostenlos sprachliche Unterstützung anfordern. Wählen Sie 1-800-275-2583.

Japanese: 備考: 母国語が日本語の方は、言語アシスタンスサービス(無料)をご利用いただけます。1-800-275-2583へお電話ください。

Persian (Farsi):

توجه: اگر فارسی صحبت می کنید، خدمات ترجمه به صورت رایگان برای شما فراهم می باشد. با شماره 1-800-275-2583 تماس بگیرید.

Navajo: Díí baa akó nínizín: Díí saad bee yánílti'go Diné Bizaad, saad bee áká'ánída'áwo'déé', t'áá jiik'eh. Hódíílnih kojí' 1-800-275-2583.

Urdu:

توجه درکار ہے: اگر آپ اردو زبان بولتے ہیں، تو آپ کے لئے مفت میں زبان معاون خدمات دستیاب ہیں۔ کال کریں 1-800-275-2583.

Mon-Khmer, Cambodian: សូមមេត្តាចាប់អារម្មណ៍:

ប្រសិនបើអ្នកនិយាយភាសាមន-ខ្មែរ ឬភាសាខ្មែរ នោះ ជំនួយផ្នែកភាសានឹងមានផ្តល់ជូនដល់លោកអ្នកដោយឥតគិតថ្លៃ។ ទូរសព្ទទៅលេខ 1-800-275-2583។

Discrimination is Against the Law

This Plan complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. This Plan does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

This Plan provides:

- Free aids and services to people with disabilities to communicate effectively with us, such as: qualified sign language interpreters, and written information in other formats (large print, audio, accessible electronic formats, other formats).
- Free language services to people whose primary language is not English, such as: qualified interpreters and information written in other languages.

If you need these services, contact our Civil Rights Coordinator. If you believe that This Plan has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with our Civil Rights Coordinator. You can file a grievance in the following ways: In person or by mail: ATTN: Civil Rights Coordinator, 1901 Market Street, Philadelphia, PA 19103, By phone: 1-888-377-3933 (TTY: 711) By fax: 215-761-0245, By email: civilrightscordinator@1901market.com. If you need help filing a grievance, our Civil Rights Coordinator is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf> or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue SW., Room 509F, HHH Building, Washington, DC 20201, 1-800-368-1019, 800-537-7697 (TDD). Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.