

Blue Individual Product Rates

Please note, if you or a family member uses a tobacco product, the policy will be subject to a 25% surcharge.

EPO \$30 \$1,200/\$2,400				
Individual Deductible: \$1,200 Individual Coinsurance Max: \$1,000 Out-of-Pocket Max (excluding copays): \$2,200/\$4,400		Family Deductible: \$2,400 Family Coinsurance Max: \$2,000		
	Individual	Individual & Child(ren)	Individual & Spouse	Family
Age 19	\$140	\$317	\$280	\$457
20-24	\$149	\$327	\$299	\$477
25-29	\$164	\$378	\$327	\$541
30-34	\$183	\$443	\$365	\$625
35-39	\$201	\$480	\$404	\$682
40-44	\$237	\$518	\$475	\$755
45-49	\$299	\$552	\$598	\$852
50-54	\$373	\$589	\$745	\$962
55-59	\$470	\$668	\$940	\$1,138
60-64	\$586	\$759	\$1,172	\$1,344

PPO HSA \$1,800/\$3,600*				
Individual Deductible: \$1,800 Individual Coinsurance Max: N/A Out-of-Pocket Max (in-network): \$1,800/\$3,600		Family Deductible: \$3,600 Family Coinsurance Max: N/A		
	Individual	Individual & Child(ren)	Individual & Spouse	Family
Age 19	\$110	\$248	\$220	\$358
20-24	\$117	\$257	\$234	\$374
25-29	\$128	\$296	\$257	\$425
30-34	\$143	\$347	\$287	\$490
35-39	\$158	\$376	\$316	\$535
40-44	\$186	\$406	\$372	\$592
45-49	\$234	\$433	\$469	\$667
50-54	\$292	\$462	\$584	\$754
55-59	\$368	\$524	\$737	\$893
60-64	\$460	\$594	\$919	\$1,054

EPO HSA \$2,000/\$6,000*				
Individual Deductible: \$2,000 Individual Coinsurance Max: \$3,950 Out-of-Pocket Max: \$5,950/\$11,900		Family Deductible: \$6,000 Family Coinsurance Max: \$5,900		
	Individual	Individual & Child(ren)	Individual & Spouse	Family
Age 19	\$96	\$217	\$192	\$313
20-24	\$103	\$225	\$205	\$327
25-29	\$112	\$259	\$225	\$372
30-34	\$125	\$304	\$251	\$429
35-39	\$138	\$330	\$277	\$468
40-44	\$163	\$356	\$326	\$518
45-49	\$205	\$379	\$410	\$584
50-54	\$256	\$405	\$511	\$660
55-59	\$322	\$459	\$645	\$781
60-64	\$402	\$520	\$804	\$922

EPO \$40 \$2,400/\$4,800				
Individual Deductible: \$2,400 Individual Coinsurance Max: \$2,000 Out-of-Pocket Max (excluding copays): \$4,400/\$8,800		Family Deductible: \$4,800 Family Coinsurance Max: \$4,000		
	Individual	Individual & Child(ren)	Individual & Spouse	Family
Age 19	\$125	\$282	\$249	\$406
20-24	\$133	\$291	\$266	\$424
25-29	\$146	\$336	\$291	\$482
30-34	\$162	\$394	\$325	\$556
35-39	\$179	\$427	\$359	\$606
40-44	\$211	\$461	\$422	\$672
45-49	\$266	\$491	\$532	\$758
50-54	\$332	\$524	\$663	\$856
55-59	\$418	\$594	\$836	\$1,013
60-64	\$522	\$675	\$1,042	\$1,196

PPO HSA \$3,000/\$6,000*				
Individual Deductible: \$3,000 Individual Coinsurance Max: N/A Out-of-Pocket Max (in-network): \$3,000/\$6,000		Family Deductible: \$6,000 Family Coinsurance Max: N/A		
	Individual	Individual & Child(ren)	Individual & Spouse	Family
Age 19	\$100	\$225	\$199	\$325
20-24	\$106	\$233	\$213	\$340
25-29	\$117	\$269	\$233	\$385
30-34	\$130	\$315	\$260	\$445
35-39	\$144	\$342	\$287	\$485
40-44	\$169	\$369	\$338	\$538
45-49	\$213	\$393	\$426	\$606
50-54	\$265	\$420	\$530	\$685
55-59	\$334	\$476	\$669	\$810
60-64	\$417	\$540	\$834	\$957

EPO HSA \$3,000/\$9,000*				
Individual Deductible: \$3,000 Individual Coinsurance Max: \$2,950 Out-of-Pocket Max: \$5,950/\$11,900		Family Deductible: \$9,000 Family Coinsurance Max: \$2,900		
	Individual	Individual & Child(ren)	Individual & Spouse	Family
Age 19	\$90	\$204	\$180	\$294
20-24	\$96	\$211	\$192	\$307
25-29	\$105	\$243	\$211	\$348
30-34	\$118	\$285	\$235	\$402
35-39	\$130	\$309	\$259	\$439
40-44	\$153	\$333	\$305	\$486
45-49	\$192	\$355	\$385	\$547
50-54	\$240	\$379	\$479	\$619
55-59	\$302	\$430	\$604	\$732
60-64	\$377	\$488	\$754	\$865

Monthly premium rates are effective for customers enrolling between October 1, 2013 – December 31, 2013 and customers renewing on October 1, 2013. Subject to review by the Delaware Department of Insurance. Rates are based on the age of the contract holder at the time of initial enrollment, and are adjusted at renewal when the contract holder ages into a new age band. Please note, plans require medical underwriting and are not guaranteed issue plans. * Coverage selected for more than one person is Family coverage. One or more family members must satisfy the entire family deductible in any combination before benefits will begin to be paid for any family members.

Highmark Blue Cross Blue Shield Delaware is an independent licensee of the Blue Cross and Blue Shield Association.