

**HIGHMARK BLUE CROSS BLUE SHIELD DELAWARE
SMALL GROUP**

HIOS Issuer ID 76168
 Rate Effective Date 1/1/2019
 Rate Expiration Date 3/31/2019

Plan ID	Plan Description	Age	Individual Rate
76168DE0490001	Shared Cost EPO \$500/100	21	513.67
76168DE0490002	Shared Cost EPO \$250/100	21	518.87
76168DE0490003	Shared Cost EPO \$0/150	21	528.33
76168DE0490005	Shared Cost EPO \$1200/100	21	452.12
76168DE0490007	Shared Cost EPO \$1000/80	21	437.21
76168DE0490008	Shared Cost EPO \$0/70	21	444.60
76168DE0490009	Shared Cost EPO \$0/500	21	469.31
76168DE0490010	Shared Cost EPO \$0/250	21	466.02
76168DE0490013	Shared Cost EPO \$1500/100	21	447.09
76168DE0490014	Shared Cost EPO \$750/100	21	457.83
76168DE0490015	Shared Cost EPO \$2000/100	21	429.88
76168DE0500001	Shared Cost EPO Basic \$1000/75	21	427.92
76168DE0500002	Shared Cost EPO Basic \$2000/75	21	376.63
76168DE0500004	Shared Cost EPO Basic \$6600/75	21	321.82
76168DE0510001	Shared Cost EPO HSA \$1800/100C	21	478.90
76168DE0510002	Health Savings EPO HSA \$1600/100 C	21	486.29
76168DE0510010	Health Savings EPO HSA \$1350/100 C	21	496.03
76168DE0510011	Health Savings EPO HSA \$2000/10	21	443.10
76168DE0510012	Health Savings EPO HSA \$2250/100	21	435.20
76168DE0530001	Shared Cost PPO \$0/90	21	518.61
76168DE0530002	Shared Cost PPO \$1000/100	21	452.28
76168DE0530003	Shared Cost PPO \$300/100	21	461.84
76168DE0530004	Shared Cost PPO \$1500/80	21	429.62
76168DE0530007	Shared Cost PPO \$1400/50	21	373.88
76168DE0530008	Shared Cost PPO \$2500/100	21	421.52

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Plan ID	Plan Description	Age	Individual Rate
76168DE0530009	Shared Cost PPO \$2600/70	21	372.90
76168DE0530010	Shared Cost PPO \$2750/100	21	418.17
76168DE0530011	Shared Cost PPO \$3000/90	21	416.22
76168DE0530012	Shared Cost PPO \$2850/100	21	418.66
76168DE0530013	Shared Cost PPO \$1400/100	21	432.65
76168DE0540002	Health Savings PPO HSA \$1500/90	21	440.21
76168DE0600001	Health Savings Embedded PPO HSA \$3400/100C	21	409.08
76168DE0600002	Health Savings Embedded PPO HSA \$4000/100	21	377.40
76168DE0610001	Health Savings Embedded PPO HSA Copay \$2750	21	385.42
76168DE0610002	Health Savings Embedded EPO HSA \$5250/75	21	328.66
76168DE0610003	Health Savings Embedded EPO HSA \$6400/100	21	328.17
76168DE0620001	HDHP Blue EPO \$6850/100	21	321.97
76168DE0660001	HDHP Blue PPO \$5000/60	21	326.00