

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

HIOS Issuer ID 76168
 Rate Effective Date 1/1/2020
 Rate Expiration Date 3/31/2020

Plan ID	Plan Description	Age	Individual Rate
76168DE0490001	Shared Cost EPO \$500/100	21	548.09
76168DE0490002	Shared Cost EPO \$250/100	21	553.68
76168DE0490003	Shared Cost EPO \$0/150	21	564.34
76168DE0490005	Shared Cost EPO \$1200/100	21	481.75
76168DE0490007	Shared Cost EPO \$1000/80	21	464.09
76168DE0490008	Shared Cost EPO \$0/70	21	471.38
76168DE0490009	Shared Cost EPO \$0/500	21	501.14
76168DE0490010	Shared Cost EPO \$0/250	21	497.10
76168DE0490013	Shared Cost EPO \$1500/100	21	476.62
76168DE0490014	Shared Cost EPO \$750/100	21	487.93
76168DE0490015	Shared Cost EPO \$2000/100	21	460.64
76168DE0500001	Shared Cost EPO Basic \$1000/75	21	457.83
76168DE0500002	Shared Cost EPO Basic \$2000/75	21	403.60
76168DE0500004	Shared Cost EPO Basic \$6600/75	21	346.24
76168DE0510001	Shared Cost EPO HSA 1800/100C	21	346.24
76168DE0510002	Health Savings EPO HSA \$1600/100 C	21	519.56
76168DE0510010	Health Savings EPO HSA \$1400/100 C	21	527.45
76168DE0510011	Health Savings EPO HSA \$2000/10	21	470.94
76168DE0510012	Health Savings EPO HSA \$2250/100	21	470.94
76168DE0530001	Shared Cost PPO \$0/90	21	553.85
76168DE0530002	Shared Cost PPO \$1000/100	21	482.39
76168DE0530003	Shared Cost PPO \$300/100	21	493.18
76168DE0530004	Shared Cost PPO \$1500/80	21	460.02
76168DE0530007	Shared Cost PPO \$1400/50	21	399.32
76168DE0530008	Shared Cost PPO \$2500/100	21	454.26

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Plan ID	Plan Description	Age	Individual Rate
76168DE0530009	Shared Cost PPO \$2600/70	21	398.24
76168DE0530010	Shared Cost PPO \$2750/100	21	450.75
76168DE0530011	Shared Cost PPO \$3000/90	21	443.13
76168DE0530012	Shared Cost PPO \$2850/100	21	451.26
76168DE0530013	Shared Cost PPO \$1400/100	21	466.94
76168DE0540002	Health Savings PPO HSA \$1500/90	21	467.11
76168DE0600001	Health Savings Embedded PPO HSA \$3400/100C	21	440.34
76168DE0600002	Health Savings Embedded PPO HSA \$4000/100	21	405.34
76168DE0610001	Health Savings Embedded PPO HSA Copay \$2800	21	415.36
76168DE0610002	Health Savings Embedded EPO HSA \$5250/75	21	357.80
76168DE0610003	Health Savings Embedded EPO HSA \$6400/100	21	357.31
76168DE0620001	HDHP Blue EPO \$6850	21	351.15
76168DE0660001	HDHP Blue PPO \$5000/60	21	351.62