

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

HIOS Issuer ID 76168
Rate Effective Date 1/1/2022
Rate Expiration Date 3/31/2022

Plan ID	Plan Description	Age	Individual Rate
76168DE0490001	Shared Cost EPO 500 100	21	532.36
76168DE0490002	Shared Cost EPO 250 100	21	537.18
76168DE0490003	Shared Cost EPO 0 150	21	545.71
76168DE0490005	Shared Cost EPO 1200 100	21	474.64
76168DE0490007	Shared Cost EPO 1000 80	21	458.48
76168DE0490009	Shared Cost EPO 0 500	21	491.19
76168DE0490010	Shared Cost EPO 0 250	21	483.80
76168DE0490013	Shared Cost EPO 1500 100	21	470.62
76168DE0490014	Shared Cost EPO 750 100	21	480.34
76168DE0490015	Shared Cost EPO 2000 100	21	457.90
76168DE0490016	Shared Cost EPO 2500 1x 100	21	457.72
76168DE0490017	Shared Cost EPO 4000 100	21	404.57
76168DE0490018	Shared Cost EPO 5200 100	21	402.06
76168DE0490019	Shared Cost PPO 5500 70	21	399.02
76168DE0500002	Shared Cost EPO Basic 2000 75	21	410.88
76168DE0530001	Shared Cost PPO 0 90	21	536.96
76168DE0530002	Shared Cost PPO 1000 100	21	475.12
76168DE0530003	Shared Cost PPO 300 100	21	484.20
76168DE0530004	Shared Cost PPO 1500 80	21	452.67
76168DE0530007	Shared Cost PPO 1400 50	21	401.83
76168DE0530008	Shared Cost PPO 2500 100	21	452.04
76168DE0530009	Shared Cost PPO 2600 70	21	402.42
76168DE0530010	Shared Cost PPO 2750 100	21	449.14
76168DE0530011	Shared Cost PPO 3000 90	21	442.72
76168DE0530012	Shared Cost PPO 2850 100	21	449.89
76168DE0530013	Shared Cost PPO 1400 100	21	462.32
76168DE0530014	Health Savings PPO HSA 7400 70	21	361.69

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Plan ID	Plan Description	Age	Individual Rate
76168DE0540002	Health Savings PPO HSA 1500	21	466.57
76168DE0540004	Health Savings PPO HSA 2500 100	21	464.38
76168DE0600001	Health Savings Embedded PPO HSA 3850 100 C	21	436.77
76168DE0600002	Health Savings Embedded PPO HSA 4250 100	21	411.28
76168DE0600003	Health Savings Embedded PPO HSA 2800	21	419.81
76168DE0600004	Health Savings Embedded PPO HSA 6850 100	21	364.88