

AmeriHealth Caritas VIP Next, Inc.
INDIVIDUAL

Rate Effective Date 01/01/2024

Rate Expiration Date 12/31/2024

Plan ID	Plan Name	Age	Individual Rate	Individual Tobacco Rate
72760DE0010001	AmeriHealth Caritas Next Bronze Classic + \$0 Virtual Care 24/7 + \$0 Preventive Care + No-Referrals	21	\$ 300.13	\$ 360.16
72760DE0010002	AmeriHealth Caritas Next Expanded Bronze Classic + \$0 Virtual Care 24/7 + \$0 Preventive Care + No-Referrals	21	\$ 338.52	\$ 406.22
72760DE0010003	AmeriHealth Caritas Next Silver Classic + \$0 Virtual Care 24/7 + \$0 Preventive Care + No-Referrals	21	\$ 413.52	\$ 496.22
72760DE0010004	AmeriHealth Caritas Next Gold Classic + \$0 Virtual Care 24/7 + \$0 Preventive Care + No-Referrals	21	\$ 411.62	\$ 493.95
72760DE0010006	AmeriHealth Caritas Next Expanded Bronze Premier + \$0 Virtual Care 24/7 + \$0 Preventive Care + No-Referrals Plan	21	\$ 346.03	\$ 415.24
72760DE0010007	AmeriHealth Caritas Next Silver Premier + \$0 Virtual Care 24/7 + \$0 Preventive Care + No-Referrals Plan	21	\$ 416.85	\$ 500.22
72760DE0010005	AmeriHealth Caritas Next Silver Classic Off-Exchange Only + \$0 Virtual Care 24/7 + \$0 Preventive Care + No-Referrals Plan	21	\$ 387.00	\$ 464.40