

**Age-Band Rates**

Rates effective from 01/01/2020 through 12/31/2020

Keystone HMO Bronze Essential \$7,000/\$50/\$100/\$700  
 Keystone HMO Bronze Essential  
 Pediatric/Adult Vision SML HMO/POS Stnd w/o Med Ded

Region: 8

\* The non-tobacco use rate applies to tobacco users enrolled in a smoking cessation program.

Age Bands (In Years)	Non-Tobacco User	Tobacco User	Age Bands (In Years)	Non-Tobacco User	Tobacco User
0	\$196.70	\$196.70	33	\$308.04	\$361.95
01	\$196.70	\$196.70	34	\$312.16	\$366.78
02	\$196.70	\$196.70	35	\$314.21	\$369.20
03	\$196.70	\$196.70	36	\$316.27	\$371.62
04	\$196.70	\$196.70	37	\$318.33	\$374.03
05	\$196.70	\$196.70	38	\$320.38	\$376.45
06	\$196.70	\$196.70	39	\$324.50	\$381.29
07	\$196.70	\$196.70	40	\$328.61	\$402.55
08	\$196.70	\$196.70	41	\$334.78	\$410.11
09	\$196.70	\$196.70	42	\$340.70	\$417.35
10	\$196.70	\$196.70	43	\$348.93	\$427.43
11	\$196.70	\$196.70	44	\$359.21	\$440.03
12	\$196.70	\$196.70	45	\$371.30	\$454.84
13	\$196.70	\$196.70	46	\$385.70	\$472.48
14	\$196.70	\$196.70	47	\$401.89	\$492.32
15	\$214.19	\$214.19	48	\$420.41	\$515.00
16	\$220.87	\$220.87	49	\$438.66	\$537.36
17	\$227.56	\$227.56	50	\$459.23	\$631.45
18	\$234.76	\$234.76	51	\$479.55	\$659.38
19	\$241.96	\$241.96	52	\$501.92	\$690.14

20	\$249.42	\$249.42	53	\$524.55	\$721.25
21	\$257.13	\$289.27	54	\$548.97	\$754.84
22	\$257.13	\$289.27	55	\$573.40	\$788.42
23	\$257.13	\$289.27	56	\$599.88	\$824.84
24	\$257.13	\$289.27	57	\$626.63	\$861.61
25	\$258.16	\$290.43	58	\$655.17	\$900.85
26	\$263.30	\$296.21	59	\$669.31	\$920.30
27	\$269.47	\$303.16	60	\$697.85	\$959.54
28	\$279.50	\$314.44	61	\$722.54	\$993.49
29	\$287.73	\$323.69	62	\$738.73	\$1,015.76
30	\$291.84	\$342.91	63	\$759.05	\$1,043.69
31	\$298.01	\$350.17	64+	\$771.39	\$1,060.66
32	\$304.18	\$357.42			