

Age-Band Rates
Rates effective from 01/01/2023 through 12/31/2023

Keystone HMO Gold Proactive
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Pediatric/Adult Vision SML HMO/POS Stnd w/o Med Ded

Region: 8

Age Bands (In Years)	Non-Tobacco User	Tobacco User	Age Bands (In Years)	Non-Tobacco User	Tobacco User
0	\$300.55	\$300.55	33	\$470.66	\$553.02
01	\$300.55	\$300.55	34	\$476.94	\$560.41
02	\$300.55	\$300.55	35	\$480.09	\$564.10
03	\$300.55	\$300.55	36	\$483.23	\$567.80
04	\$300.55	\$300.55	37	\$486.37	\$571.49
05	\$300.55	\$300.55	38	\$489.52	\$575.18
06	\$300.55	\$300.55	39	\$495.80	\$582.57
07	\$300.55	\$300.55	40	\$502.09	\$615.06
08	\$300.55	\$300.55	41	\$511.52	\$626.61
09	\$300.55	\$300.55	42	\$520.55	\$637.68
10	\$300.55	\$300.55	43	\$533.12	\$653.08
11	\$300.55	\$300.55	44	\$548.84	\$672.33
12	\$300.55	\$300.55	45	\$567.30	\$694.95
13	\$300.55	\$300.55	46	\$589.31	\$721.90
14	\$300.55	\$300.55	47	\$614.06	\$752.22
15	\$327.26	\$327.26	48	\$642.34	\$786.87
16	\$337.48	\$337.48	49	\$670.24	\$821.04
17	\$347.69	\$347.69	50	\$701.67	\$964.79
18	\$358.69	\$358.69	51	\$732.70	\$1,007.47
19	\$369.69	\$369.69	52	\$766.88	\$1,054.46
20	\$381.08	\$381.08	53	\$801.45	\$1,102.00
21	\$392.87	\$441.98	54	\$838.78	\$1,153.32
22	\$392.87	\$441.98	55	\$876.10	\$1,204.64
23	\$392.87	\$441.98	56	\$916.57	\$1,260.28
24	\$392.87	\$441.98	57	\$957.42	\$1,316.46
25	\$394.44	\$443.75	58	\$1,001.03	\$1,376.42
26	\$402.30	\$452.59	59	\$1,022.64	\$1,406.13
27	\$411.73	\$463.19	60	\$1,066.25	\$1,466.09
28	\$427.05	\$480.43	61	\$1,103.96	\$1,517.95
29	\$439.62	\$494.57	62	\$1,128.72	\$1,551.98
30	\$445.91	\$523.94	63	\$1,159.75	\$1,594.66
31	\$455.34	\$535.02	64+	\$1,178.61	\$1,620.59
32	\$464.77	\$546.10			