Independence

Created on : 10/25/2024

Age-Band Rates

Rates effective from 01/01/2025 through 12/31/2025

Keystone HMO Gold Preferred $40/$80/$650 Region: 8

Keystone HMO Gold Preferred

Pediatric/Adult Vision SML HMO/POS Stnd Med $0

Age Bands (In Years)	Non-Tobacco User	Tobacco User	Age Bands (In Years)	Non-Tobacco User	Tobacco User
0	$349.51	$349.51	33	$547.33	$643.11
01	$349.51	$349.51	34	$554.64	$651.70
02	$349.51	$349.51	35	$558.30	$656.00
03	$349.51	$349.51	36	$561.95	$660.29
04	$349.51	$349.51	37	$565.61	$664.59
05	$349.51	$349.51	38	$569.26	$668.88
06	$349.51	$349.51	39	$576.57	$677.47
07	$349.51	$349.51	40	$583.88	$715.25
08	$349.51	$349.51	41	$594.84	$728.68
09	$349.51	$349.51	42	$605.35	$741.56
10	$349.51	$349.51	43	$619.97	$759.47
11	$349.51	$349.51	44	$638.25	$781.85
12	$349.51	$349.51	45	$659.72	$808.16
13	$349.51	$349.51	46	$685.31	$839.50
14	$349.51	$349.51	47	$714.09	$874.76
15	$380.57	$380.57	48	$746.98	$915.05
16	$392.45	$392.45	49	$779.42	$954.79
17	$404.33	$404.33	50	$815.97	$1,121.96
18	$417.12	$417.12	51	$852.06	$1,171.59
19	$429.91	$429.91	52	$891.81	$1,226.24
20	$443.16	$443.16	53	$932.01	$1,281.52
21	$456.87	$513.98	54	$975.42	$1,341.20
22	$456.87	$513.98	55	$1,018.82	$1,400.88
23	$456.87	$513.98	56	$1,065.88	$1,465.58
24	$456.87	$513.98	57	$1,113.39	$1,530.91
25	$458.70	$516.03	58	$1,164.10	$1,600.64
26	$467.83	$526.31	59	$1,189.23	$1,635.19
27	$478.80	$538.65	60	$1,239.95	$1,704.92
28	$496.62	$558.69	61	$1,283.80	$1,765.23
29	$511.24	$575.14	62	$1,312.59	$1,804.81
30	$518.55	$609.29	63	$1,348.68	$1,854.44
31	$529.51	$622.18	64+	$1,370.61	$1,884.59
32	$540.48	$635.06			