

# 2025 Qualified Health Plan and Qualified Dental Plan Certification Requests

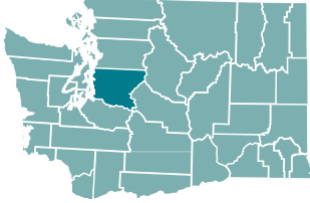
September 12, 2024



# RATING AREAS AND RATE INFORMATION

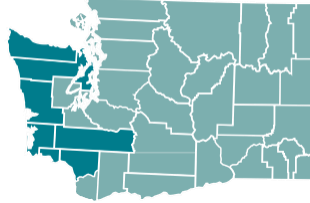
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## Area 1



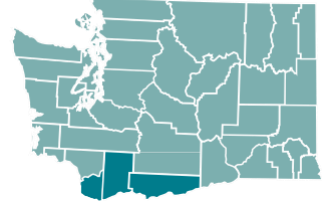
One County: King

## Area 2



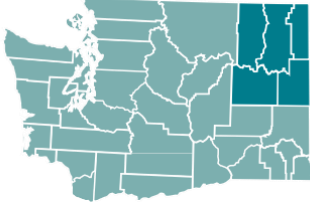
Eight Counties: Cowlitz, Clallam, Grays Harbor, Jefferson, Lewis, Kitsap, Pacific, Wahkiakum

## Area 3



Three Counties: Clark, Klickitat, Skamania

## Area 4



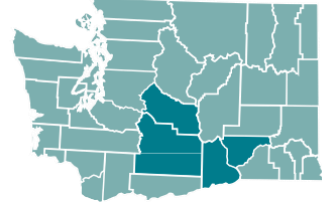
Five Counties: Ferry, Lincoln, Pend Oreille, Spokane, Stevens

## Area 5



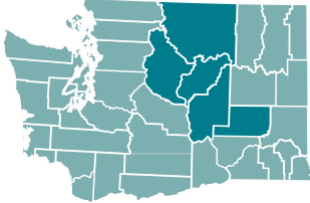
Three Counties: Mason, Pierce, Thurston

## Area 6



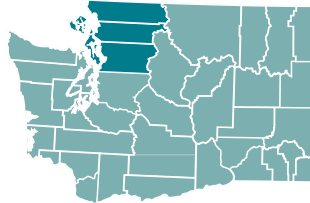
Four Counties: Benton, Franklin, Kittitas, Yakima

## Area 7



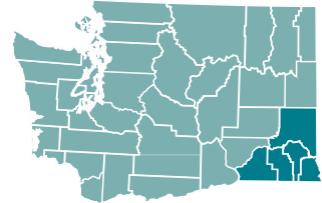
Five Counties: Adams, Chelan, Douglas, Grant, Okanogan

## Area 8



Five Counties: Island, San Juan, Skagit, Snohomish, Whatcom

## Area 9



Five Counties: Asotin, Columbia, Garfield, Walla Walla, Whitman

## RATE INFORMATION

All rates in this document are for a 40 year-old non-smoking individual

# BridgeSpan Health Company

## Metal Level : Bronze

**Plan Name :** BridgeSpan Cascade Bronze

Rate change from 2024 : 15%

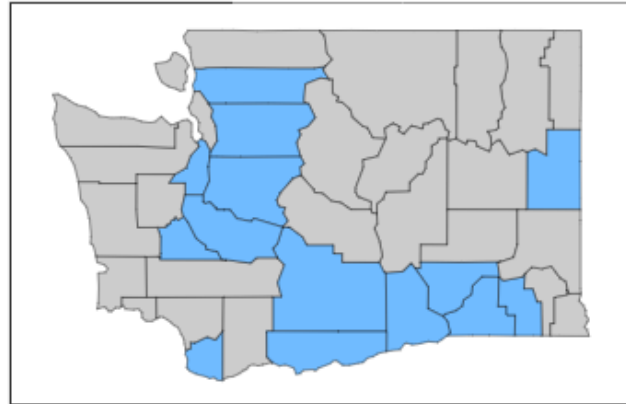
**Plan Type :** EPO

**Premium Range :**

Low : \$ 522 ( Rating Area 4 )

High : \$ 594 ( Rating Area 2 )

**Deductible :** \$6000



**OOPM :** \$9200

**Primary Care Visit :** \$50 copay

**Specialist Visit :** \$100 Copay after deductible

**Urgent Care :** \$100 copay

**Generic Drugs :** \$32 copay

**14 Counties:** Benton, Clark, Columbia, Franklin, King, Kitsap, Klickitat, Pierce, Skagit, Snohomish, Spokane, Thurston, Walla Walla, Yakima

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## Metal Level : Silver

**Plan Name :** BridgeSpan Cascade Silver

Rate change from 2024 : 11.7%

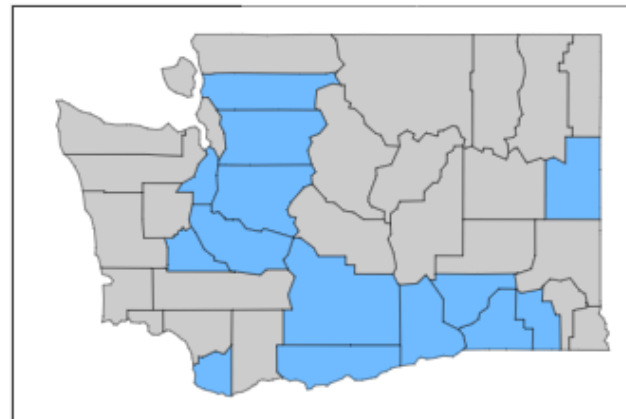
**Plan Type :** EPO

**Premium Range :**

Low : \$ 639 ( Rating Area 4 )

High : \$ 726 ( Rating Area 2 )

**Deductible :** \$2500



**OOPM :** \$9200

**Primary Care Visit :** \$30 copay

**Specialist Visit :** \$65 copay

**Urgent Care :** \$65 copay

**Generic Drugs :** \$25 copay

**14 Counties:** Benton, Clark, Columbia, Franklin, King, Kitsap, Klickitat, Pierce, Skagit, Snohomish, Spokane, Thurston, Walla Walla, Yakima

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# BridgeSpan Health Company

**Metal Level : Gold**

**Plan Name : BridgeSpan Cascade Gold**

Rate change from 2024 : 14.3%

**Plan Type : EPO**

**Premium Range :** Low : \$ 826 ( Rating Area 4 )  
High : \$ 939 ( Rating Area 2 )

**Deductible : \$600**

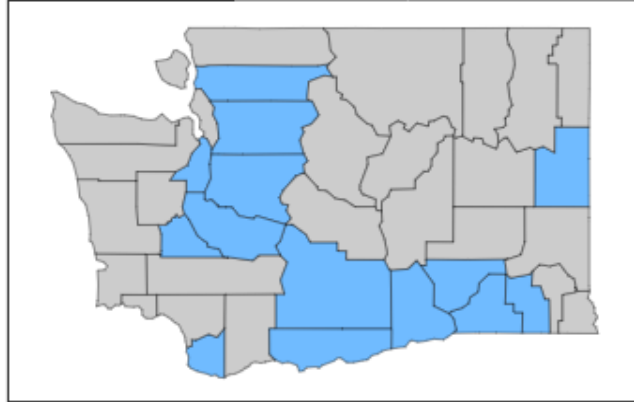
**OOPM : \$7000**

**Primary Care Visit : \$15 copay**

**Specialist Visit : \$40 copay**

**Urgent Care : \$35 copay**

**Generic Drugs : \$10 copay**



**14 Counties:** Benton, Clark, Columbia, Franklin, King, Kitsap, Klickitat, Pierce, Skagit, Snohomish, Spokane, Thurston, Walla Walla, Yakima

**Metal Level : Bronze**

**Plan Name : Bronze Essential 8500**

Rate change from 2024 : 17.2%

**Plan Type : EPO**

**Premium Range :** Low : \$ 501 ( Rating Area 4 )  
High : \$ 570 ( Rating Area 2 )

**Deductible : \$8500**

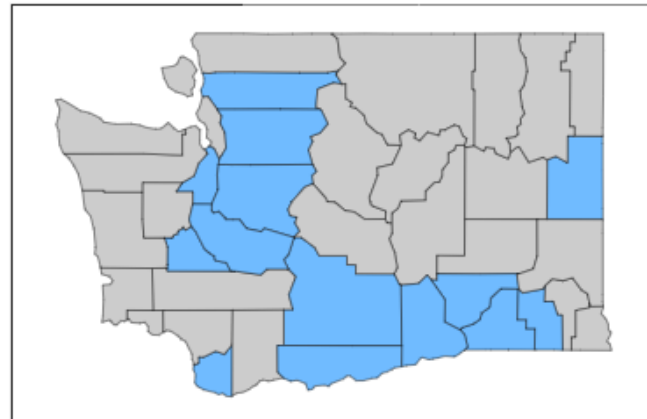
**OOPM : \$9200**

**Primary Care Visit : \$60 / 10% Coinsurance after deductible**

**Specialist Visit : \$60 / 10% Coinsurance after deductible**

**Urgent Care : \$60 / 10% Coinsurance after deductible**

**Generic Drugs : \$20 copay**



**14 Counties:** Benton, Clark, Columbia, Franklin, King, Kitsap, Klickitat, Pierce, Skagit, Snohomish, Spokane, Thurston, Walla Walla, Yakima

# Community Health Plan of Washington

## Metal Level : Bronze

**Plan Name : Community Health Plan of Washington Cascade Select Bronze**

Rate change from 2024 : 7.4%

Plan Type : EPO

Premium Range : Low : \$ 298 ( Rating Area 5 )  
High : \$ 343 ( Rating Area 2 )

Deductible : \$6000

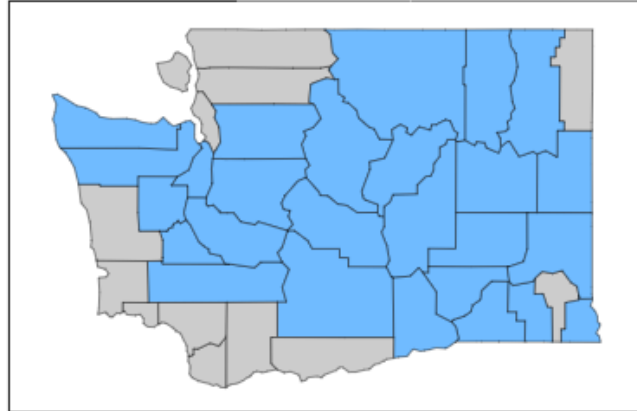
OOPM : \$9200

Primary Care Visit : \$50 copay

Specialist Visit : \$100 Copay after deductible

Urgent Care : \$100 copay

Generic Drugs : \$32 copay



**26 Counties:** Adams, Asotin, Benton, Chelan, Clallam, Columbia, Douglas, Ferry, Franklin, Grant, Jefferson, King, Kitsap, Kittitas, Lewis, Lincoln, Mason, Okanogan, Pierce, Snohomish, Spokane, Stevens, Thurston, Walla Walla, Whitman, Yakima

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## Metal Level : Silver

**Plan Name : Community Health Plan of Washington Cascade Select Silver**

Rate change from 2024 : 9.6%

Plan Type : EPO

Premium Range : Low : \$ 405 ( Rating Area 5 )  
High : \$ 465 ( Rating Area 2 )

Deductible : \$2500

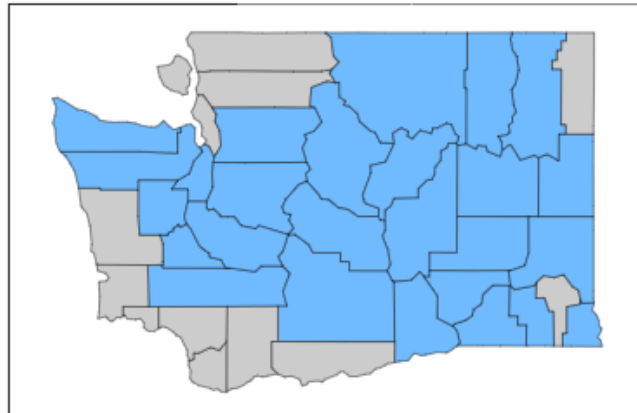
OOPM : \$9200

Primary Care Visit : \$30 copay

Specialist Visit : \$65 copay

Urgent Care : \$65 copay

Generic Drugs : \$25 copay



**26 Counties:** Adams, Asotin, Benton, Chelan, Clallam, Columbia, Douglas, Ferry, Franklin, Grant, Jefferson, King, Kitsap, Kittitas, Lewis, Lincoln, Mason, Okanogan, Pierce, Snohomish, Spokane, Stevens, Thurston, Walla Walla, Whitman, Yakima

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# Community Health Plan of Washington

**Metal Level : Gold**

**Plan Name : Community Health Plan of Washington Cascade Select Gold**

**Rate change from 2024 : 9.1%**

**Plan Type : EPO**

**Premium Range :** Low : \$ 436 ( Rating Area 5 )  
High : \$ 502 ( Rating Area 2 )

**Deductible : \$600**

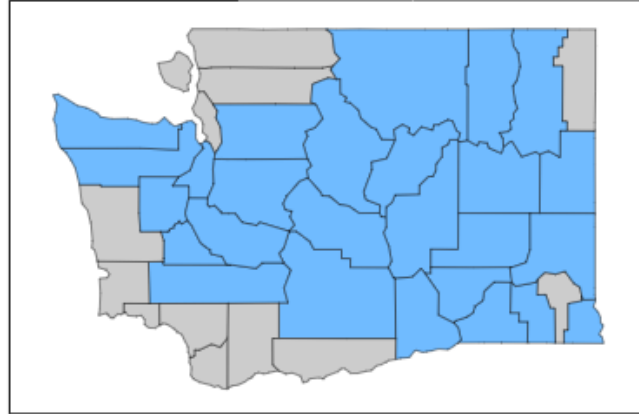
**OOPM : \$7000**

**Primary Care Visit : \$15 copay**

**Specialist Visit : \$40 copay**

**Urgent Care : \$35 copay**

**Generic Drugs : \$10 copay**



**26 Counties:** Adams, Asotin, Benton, Chelan, Clallam, Columbia, Douglas, Ferry, Franklin, Grant, Jefferson, King, Kitsap, Kittitas, Lewis, Lincoln, Mason, Okanogan, Pierce, Snohomish, Spokane, Stevens, Thurston, Walla Walla, Whitman, Yakima

# Coordinated Care Corporation

## Metal Level : Bronze

**Plan Name : Ambetter Cascade Bronze**

Rate change from 2024 : 11.4%

**Plan Type : HMO**

**Premium Range :** Low : \$ 306 ( Rating Area 9 )  
High : \$ 381 ( Rating Area 7 )

**Deductible : \$6000**

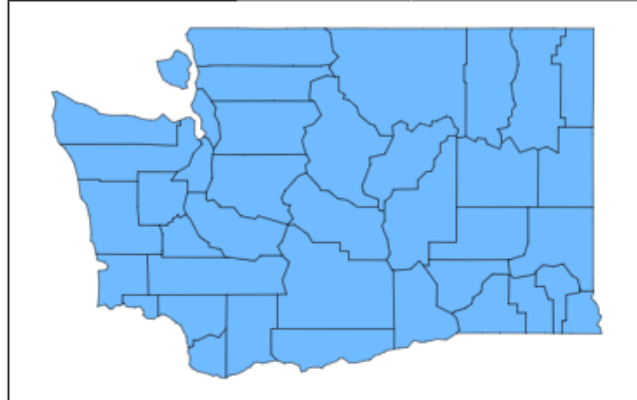
**OOPM : \$9200**

**Primary Care Visit : \$50 copay**

**Specialist Visit : \$100 Copay after deductible**

**Urgent Care : \$100 copay**

**Generic Drugs : \$32 copay**



**39 Counties:**

Adams, Asotin, Benton, Chelan, Clallam, Clark, Columbia, Cowlitz, Douglas, Ferry, Franklin, Garfield, Grant, Grays Harbor, Island, Jefferson, King, Kitsap, Kittitas, Klickitat, Lewis, Lincoln, Mason, Okanogan, Pacific, Pend Oreille, Pierce, San Juan, Skagit, Skamania, Snohomish, Spokane, Stevens, Thurston, Wahkiakum, Walla Walla, Whatcom, Whitman, Yakima

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## Metal Level : Silver

**Plan Name : Ambetter Cascade Silver**

Rate change from 2024 : 8.9%

**Plan Type : HMO**

**Premium Range :** Low : \$ 409 ( Rating Area 9 )  
High : \$ 509 ( Rating Area 7 )

**Deductible : \$2500**

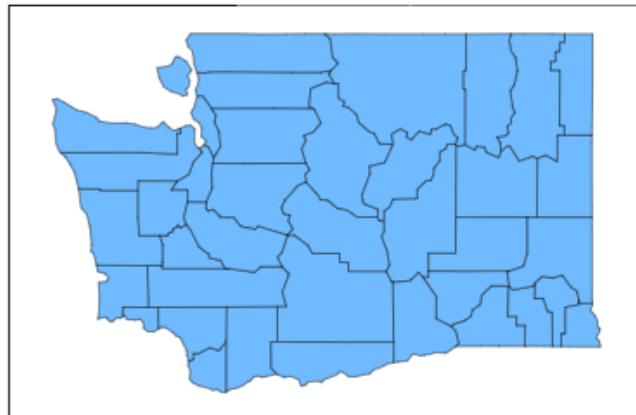
**OOPM : \$9200**

**Primary Care Visit : \$30 copay**

**Specialist Visit : \$65 copay**

**Urgent Care : \$65 copay**

**Generic Drugs : \$25 copay**



**39 Counties:**

Adams, Asotin, Benton, Chelan, Clallam, Clark, Columbia, Cowlitz, Douglas, Ferry, Franklin, Garfield, Grant, Grays Harbor, Island, Jefferson, King, Kitsap, Kittitas, Klickitat, Lewis, Lincoln, Mason, Okanogan, Pacific, Pend Oreille, Pierce, San Juan, Skagit, Skamania, Snohomish, Spokane, Stevens, Thurston, Wahkiakum, Walla Walla, Whatcom, Whitman, Yakima

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# Coordinated Care Corporation

## Metal Level : Gold

**Plan Name : Ambetter Cascade Gold**

Rate change from 2024 : 13.7%

**Plan Type : HMO**

**Premium Range :** Low : \$ 446 ( Rating Area 9 )  
High : \$ 555 ( Rating Area 7 )

**Deductible : \$600**

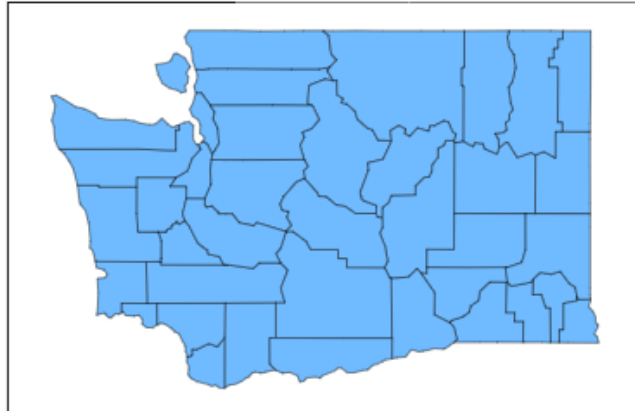
**OOPM : \$7000**

**Primary Care Visit : \$15 copay**

**Specialist Visit : \$40 copay**

**Urgent Care : \$35 copay**

**Generic Drugs : \$10 copay**



**39 Counties:** Adams, Asotin, Benton, Chelan, Clallam, Clark, Columbia, Cowlitz, Douglas, Ferry, Franklin, Garfield, Grant, Grays Harbor, Island, Jefferson, King, Kitsap, Kittitas, Klickitat, Lewis, Lincoln, Mason, Okanogan, Pacific, Pend Oreille, Pierce, San Juan, Skagit, Skamania, Snohomish, Spokane, Stevens, Thurston, Wahkiakum, Walla Walla, Whatcom, Whitman, Yakima

## Metal Level : Bronze

**Plan Name : Ambetter Cascade Select Bronze**

Rate change from 2024 : 6.8%

**Plan Type : HMO**

**Premium Range :** Low : \$ 279 ( Rating Area 9 )  
High : \$ 348 ( Rating Area 7 )

**Deductible : \$6000**

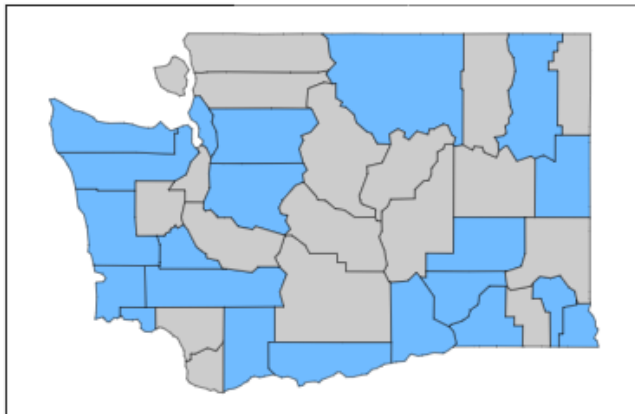
**OOPM : \$9200**

**Primary Care Visit : \$50 copay**

**Specialist Visit : \$100 Copay after deductible**

**Urgent Care : \$100 copay**

**Generic Drugs : \$32 copay**



**21 Counties:** Adams, Asotin, Benton, Clallam, Franklin, Garfield, Grays Harbor, Island, Jefferson, King, Klickitat, Lewis, Okanogan, Pacific, Skamania, Snohomish, Spokane, Stevens, Thurston, Wahkiakum, Walla Walla

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# Coordinated Care Corporation

**Metal Level : Silver**

**Plan Name : Ambetter Cascade Select Silver**

**Rate change from 2024 : 4.3%**

**Plan Type : HMO**

**Premium Range : Low : \$ 373 ( Rating Area 9 )  
High : \$ 465 ( Rating Area 7 )**

**Deductible : \$2500**

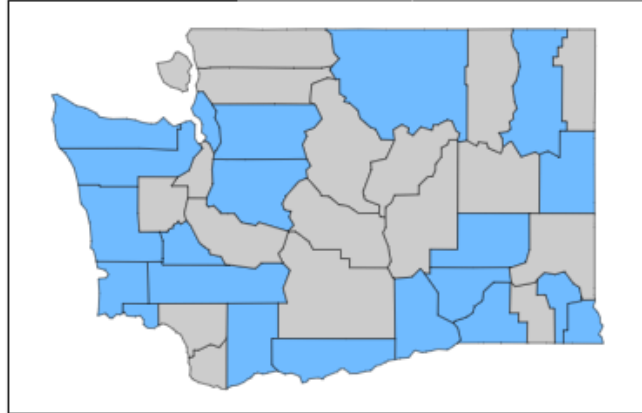
**OOPM : \$9200**

**Primary Care Visit : \$30 copay**

**Specialist Visit : \$65 copay**

**Urgent Care : \$65 copay**

**Generic Drugs : \$25 copay**



**21 Counties:** Adams, Asotin, Benton, Clallam, Franklin, Garfield, Grays Harbor, Island, Jefferson, King, Klickitat, Lewis, Okanogan, Pacific, Skamania, Snohomish, Spokane, Stevens, Thurston, Wahkiakum, Walla Walla

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**Metal Level : Gold**

**Plan Name : Ambetter Cascade Select Gold**

**Rate change from 2024 : 8.8%**

**Plan Type : HMO**

**Premium Range : Low : \$ 407 ( Rating Area 9 )  
High : \$ 507 ( Rating Area 7 )**

**Deductible : \$600**

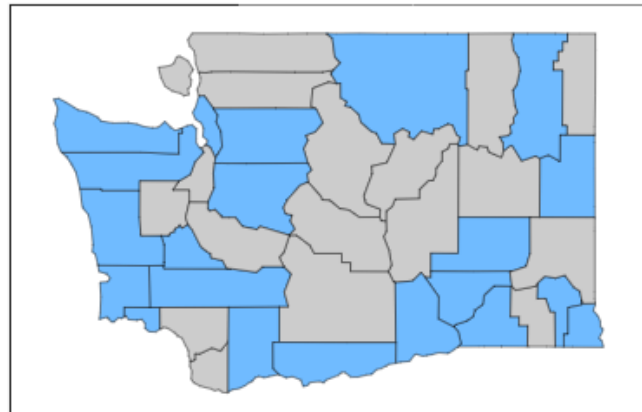
**OOPM : \$7000**

**Primary Care Visit : \$15 copay**

**Specialist Visit : \$40 copay**

**Urgent Care : \$35 copay**

**Generic Drugs : \$10 copay**



**21 Counties:** Adams, Asotin, Benton, Clallam, Franklin, Garfield, Grays Harbor, Island, Jefferson, King, Klickitat, Lewis, Okanogan, Pacific, Skamania, Snohomish, Spokane, Stevens, Thurston, Wahkiakum, Walla Walla

# Coordinated Care Corporation

**Metal Level : Bronze**

**Plan Name : Ambetter Essential Care 1**

**Rate change from 2024 : 10.7%**

**Plan Type : HMO**

**Premium Range :** Low : \$ 282 ( Rating Area 9 )  
High : \$ 351 ( Rating Area 7 )

**Deductible : \$9000**

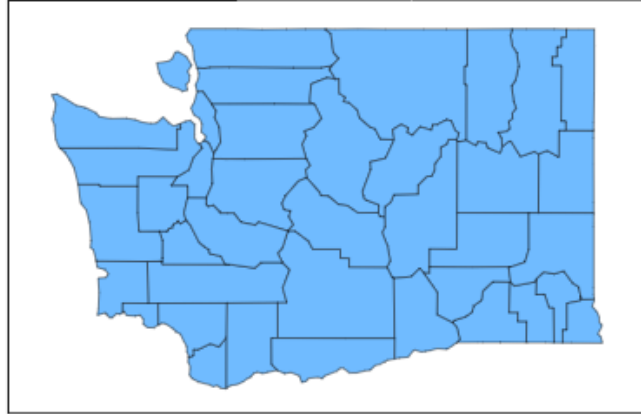
**OOPM : \$9000**

**Primary Care Visit : No Charge after deductible**

**Specialist Visit : No Charge after deductible**

**Urgent Care : \$60 copay**

**Generic Drugs : \$3 copay**



**39 Counties:** Adams, Asotin, Benton, Chelan, Clallam, Clark, Columbia, Cowlitz, Douglas, Ferry, Franklin, Garfield, Grant, Grays Harbor, Island, Jefferson, King, Kitsap, Kittitas, Klickitat, Lewis, Lincoln, Mason, Okanogan, Pacific, Pend Oreille, Pierce, San Juan, Skagit, Skamania, Snohomish, Spokane, Stevens, Thurston, Wahkiakum, Walla Walla, Whatcom, Whitman, Yakima

**Metal Level : Bronze**

**Plan Name : Ambetter Essential Care: \$0 Medical Deductible**

**Rate change from 2024 : 13.5%**

**Plan Type : HMO**

**Premium Range :** Low : \$ 359 ( Rating Area 9 )  
High : \$ 447 ( Rating Area 7 )

**Deductible : \$0 Medical/ \$3,800 Drug**

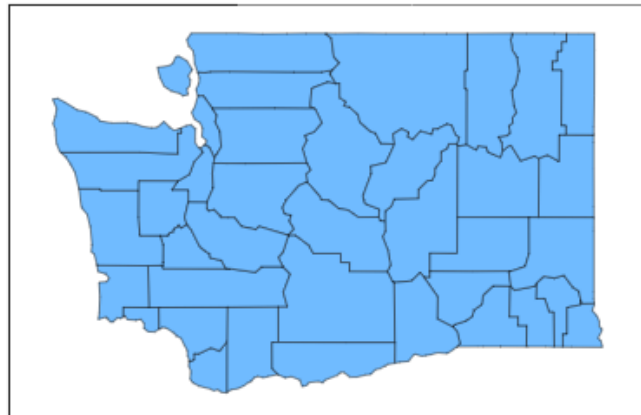
**OOPM : \$9200**

**Primary Care Visit : \$50 copay**

**Specialist Visit : \$115 copay**

**Urgent Care : \$60 copay**

**Generic Drugs : \$3 copay**



**39 Counties:** Adams, Asotin, Benton, Chelan, Clallam, Clark, Columbia, Cowlitz, Douglas, Ferry, Franklin, Garfield, Grant, Grays Harbor, Island, Jefferson, King, Kitsap, Kittitas, Klickitat, Lewis, Lincoln, Mason, Okanogan, Pacific, Pend Oreille, Pierce, San Juan, Skagit, Skamania, Snohomish, Spokane, Stevens, Thurston, Wahkiakum, Walla Walla, Whatcom, Whitman, Yakima

# Coordinated Care Corporation

**Metal Level : Silver**

**Plan Name : Ambetter Balanced Care 4**

**Rate change from 2024 : 7.8%**

**Plan Type : HMO**

**Premium Range :**  
**Low : \$ 387 ( Rating Area 9 )**  
**High : \$ 482 ( Rating Area 7 )**

**Deductible : \$8050**

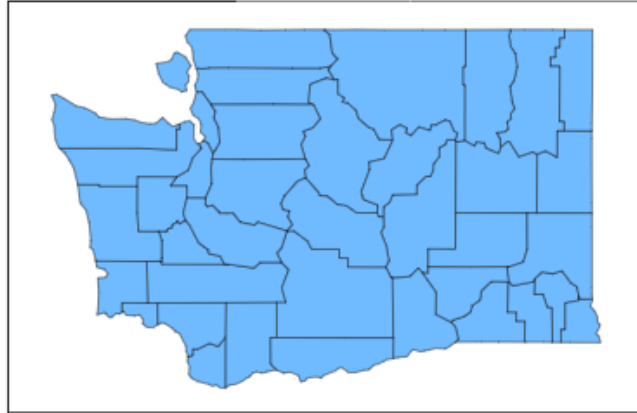
**OOPM : \$8050**

**Primary Care Visit : \$30 copay**

**Specialist Visit : \$60 copay**

**Urgent Care : \$60 copay**

**Generic Drugs : \$3 copay**



**39 Counties:** Adams, Asotin, Benton, Chelan, Clallam, Clark, Columbia, Cowlitz, Douglas, Ferry, Franklin, Garfield, Grant, Grays Harbor, Island, Jefferson, King, Kitsap, Kittitas, Klickitat, Lewis, Lincoln, Mason, Okanogan, Pacific, Pend Oreille, Pierce, San Juan, Skagit, Skamania, Snohomish, Spokane, Stevens, Thurston, Wahkiakum, Walla Walla, Whatcom, Whitman, Yakima

**Metal Level : Gold**

**Plan Name : Ambetter Secure Care 5**

**Rate change from 2024 : 14%**

**Plan Type : HMO**

**Premium Range :**  
**Low : \$ 420 ( Rating Area 9 )**  
**High : \$ 523 ( Rating Area 7 )**

**Deductible : \$1450**

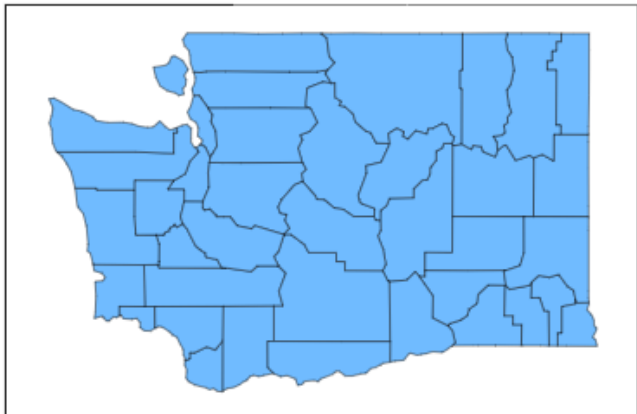
**OOPM : \$7500**

**Primary Care Visit : \$15 copay**

**Specialist Visit : \$35 copay**

**Urgent Care : \$35 copay**

**Generic Drugs : \$3 copay**



**39 Counties:** Adams, Asotin, Benton, Chelan, Clallam, Clark, Columbia, Cowlitz, Douglas, Ferry, Franklin, Garfield, Grant, Grays Harbor, Island, Jefferson, King, Kitsap, Kittitas, Klickitat, Lewis, Lincoln, Mason, Okanogan, Pacific, Pend Oreille, Pierce, San Juan, Skagit, Skamania, Snohomish, Spokane, Stevens, Thurston, Wahkiakum, Walla Walla, Whatcom, Whitman, Yakima

# Coordinated Care Corporation

**Metal Level : Gold**

**Plan Name : Ambetter Clear Gold**

**Rate change from 2024 : 15.2%**

**Plan Type : HMO**

**Premium Range :** Low : \$ 400 ( Rating Area 9 )  
High : \$ 499 ( Rating Area 7 )

**Deductible : \$900**

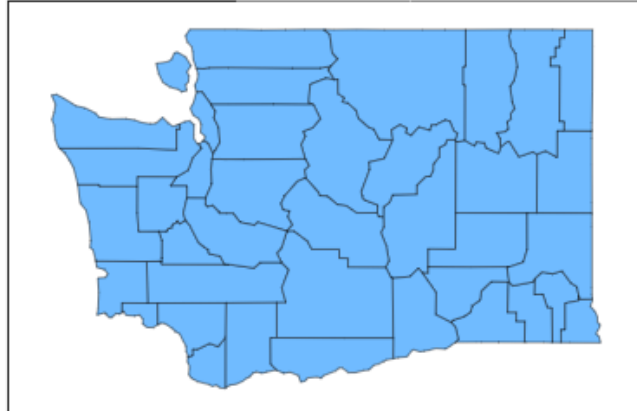
**OOPM : \$8400**

**Primary Care Visit : \$25 copay**

**Specialist Visit : \$60 copay**

**Urgent Care : \$60 copay**

**Generic Drugs : \$3 copay**



**39 Counties:**

Adams, Asotin, Benton, Chelan, Clallam, Clark, Columbia, Cowlitz, Douglas, Ferry, Franklin, Garfield, Grant, Grays Harbor, Island, Jefferson, King, Kitsap, Kittitas, Klickitat, Lewis, Lincoln, Mason, Okanogan, Pacific, Pend Oreille, Pierce, San Juan, Skagit, Skamania, Snohomish, Spokane, Stevens, Thurston, Wahkiakum, Walla Walla, Whatcom, Whitman, Yakima

# Kaiser Foundation Health Plan of the Northwest

## Metal Level : Bronze

**Plan Name :** KP Cascade Bronze

**Plan Type :** EPO

**Deductible :** \$6000

**OOPM :** \$9200

**Primary Care Visit :** \$50 copay

**Specialist Visit :** \$100 Copay after deductible

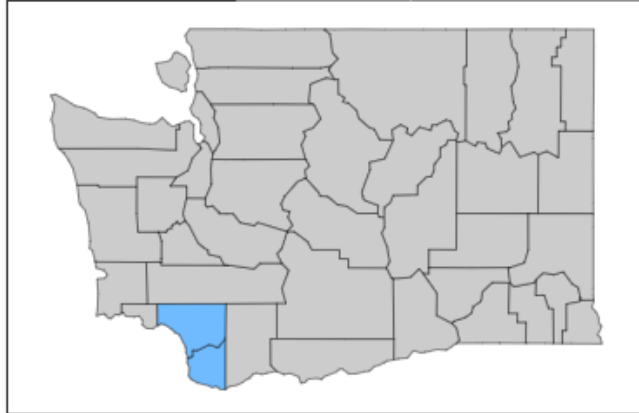
**Urgent Care :** \$100 copay

**Generic Drugs :** \$32 copay

**2 Counties:** Clark, Cowlitz

Rate change from 2024 : 11.9%

**Premium Range :**  
Low : \$ 434 ( Rating Area 3 )  
High : \$ 455 ( Rating Area 2 )



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## Metal Level : Silver

**Plan Name :** KP Cascade Silver

**Plan Type :** EPO

**Deductible :** \$2500

**OOPM :** \$9200

**Primary Care Visit :** \$30 copay

**Specialist Visit :** \$65 copay

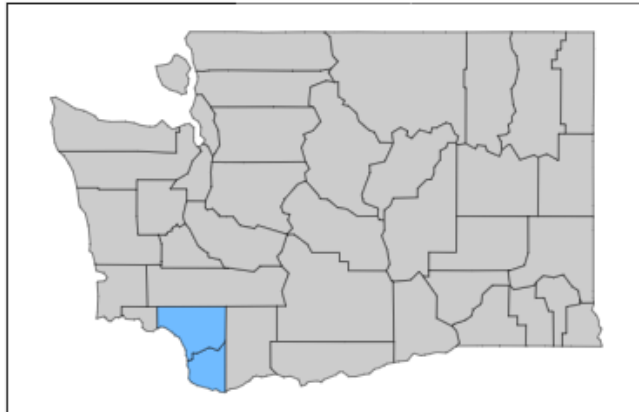
**Urgent Care :** \$65 copay

**Generic Drugs :** \$25 copay

**2 Counties:** Clark, Cowlitz

Rate change from 2024 : 7.7%

**Premium Range :**  
Low : \$ 604 ( Rating Area 3 )  
High : \$ 634 ( Rating Area 2 )



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# Kaiser Foundation Health Plan of the Northwest

## Metal Level : Gold

**Plan Name :** KP Cascade Gold

**Plan Type :** EPO

**Deductible :** \$600

**OOPM :** \$7000

**Primary Care Visit :** \$15 copay

**Specialist Visit :** \$40 copay

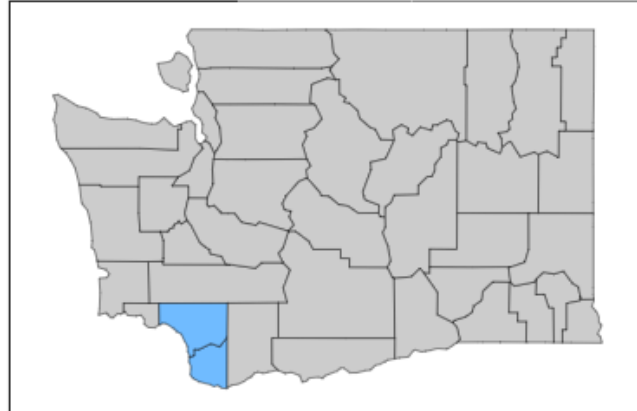
**Urgent Care :** \$35 copay

**Generic Drugs :** \$10 copay

**2 Counties:** Clark, Cowlitz

Rate change from 2024 : 6.4%

**Premium Range :**  
Low : \$ 636 ( Rating Area 3 )  
High : \$ 668 ( Rating Area 2 )



## Metal Level : Bronze

**Plan Name :** KP WA Bronze 9100

**Plan Type :** EPO

**Deductible :** \$9100

**OOPM :** \$9100

**Primary Care Visit :** \$75 copay

**Specialist Visit :** \$0 Copay after deductible

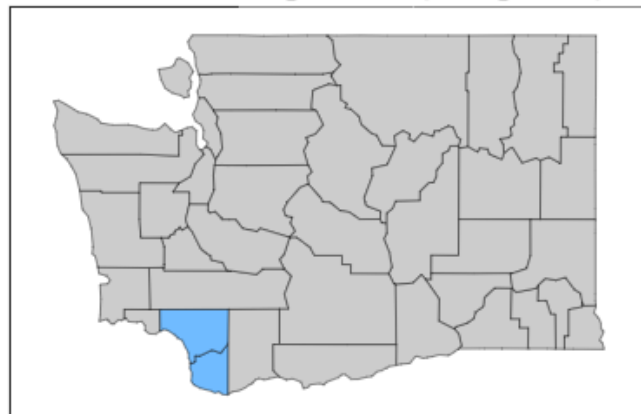
**Urgent Care :** \$0 Copay after deductible copay

**Generic Drugs :** \$30 copay

**2 Counties:** Clark, Cowlitz

Rate change from 2024 : 12.3%

**Premium Range :**  
Low : \$ 423 ( Rating Area 3 )  
High : \$ 444 ( Rating Area 2 )



# Kaiser Foundation Health Plan of the Northwest

## Metal Level : Bronze

**Plan Name : KP WA Bronze HSA 7100**

Rate change from 2024 : 11.8%

**Plan Type : EPO**

**Premium Range :** Low : \$ 436 ( Rating Area 3 )  
High : \$ 458 ( Rating Area 2 )

**Deductible : \$7100**

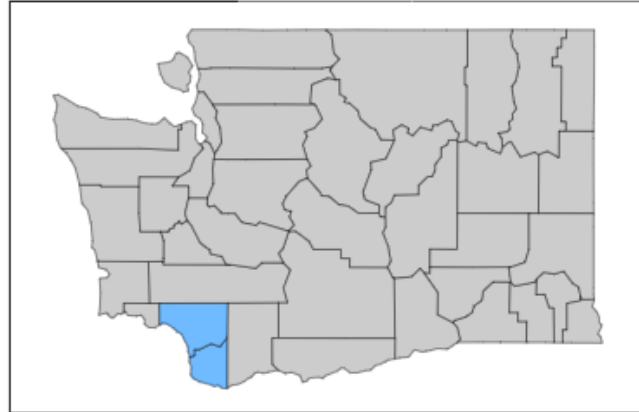
**OOPM : \$7100**

**Primary Care Visit : \$0 Copay after deductible copay**

**Specialist Visit : \$0 Copay after deductible**

**Urgent Care : \$0 Copay after deductible copay**

**Generic Drugs : \$0 Copay after deductible copay**



**2 Counties:** Clark, Cowlitz

## Metal Level : Silver

**Plan Name : KP WA Silver 750**

Rate change from 2024 : 8.1%

**Plan Type : EPO**

**Premium Range :** Low : \$ 591 ( Rating Area 3 )  
High : \$ 620 ( Rating Area 2 )

**Deductible : \$750**

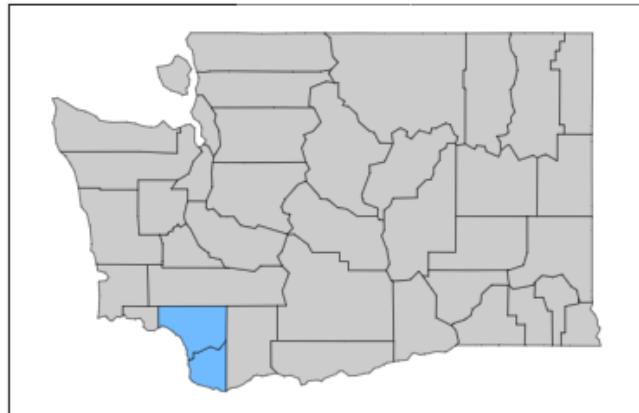
**OOPM : \$9200**

**Primary Care Visit : \$35 copay**

**Specialist Visit : \$60 copay**

**Urgent Care : \$60 copay**

**Generic Drugs : \$25 copay**



**2 Counties:** Clark, Cowlitz

# Kaiser Foundation Health Plan of the Northwest

**Metal Level : Gold**

**Plan Name : KP WA Gold 0**

**Rate change from 2024 : 7.3%**

**Plan Type : EPO**

**Premium Range :**  
Low : \$ 604 ( Rating Area 3 )  
High : \$ 635 ( Rating Area 2 )

**Deductible : \$0**

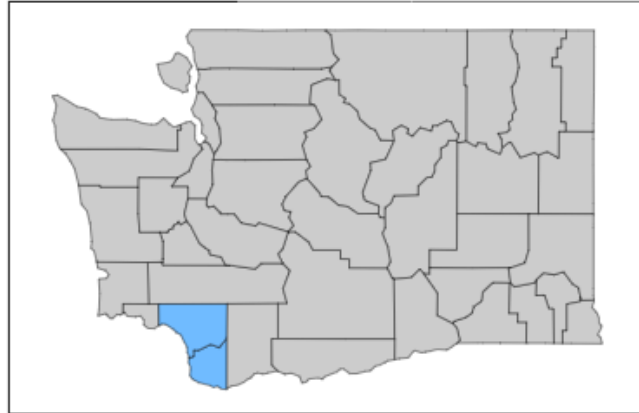
**OOPM : \$8200**

**Primary Care Visit : \$15 copay**

**Specialist Visit : \$50 copay**

**Urgent Care : \$40 copay**

**Generic Drugs : \$10 copay**



**2 Counties:** Clark, Cowlitz

**Metal Level : Gold**

**Plan Name : KP WA Gold 1750**

**Rate change from 2024 : 8.5%**

**Plan Type : EPO**

**Premium Range :**  
Low : \$ 560 ( Rating Area 3 )  
High : \$ 588 ( Rating Area 2 )

**Deductible : \$1,750 Medical/ \$0 Drug**

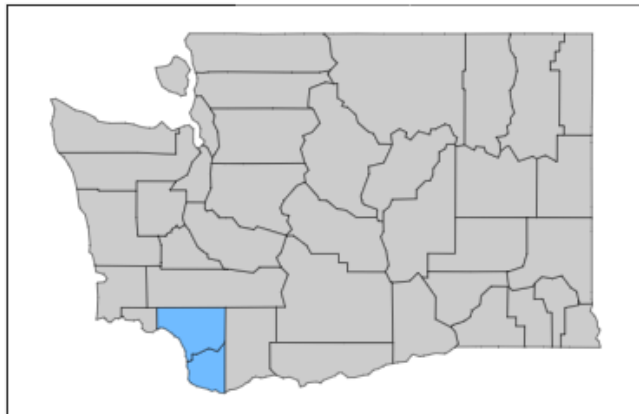
**OOPM : \$8500**

**Primary Care Visit : \$20 copay**

**Specialist Visit : \$50 copay**

**Urgent Care : \$40 copay**

**Generic Drugs : \$10 copay**



**2 Counties:** Clark, Cowlitz

# Kaiser Foundation Health Plan of Washington

## Metal Level : Bronze

**Plan Name : Kaiser Permanente Cascade Bronze**

Rate change from 2024 : 11.4%

**Plan Type : HMO**

**Premium Range :** Low : \$ 442 ( Rating Area 1 )  
High : \$ 497 ( Rating Area 9 )

**Deductible : \$6000**

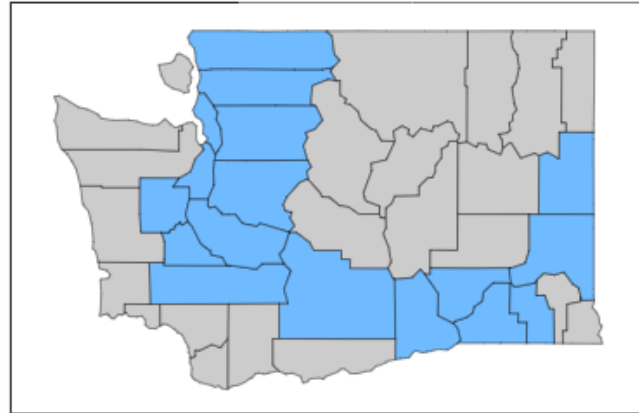
**OOPM : \$9200**

**Primary Care Visit : \$50 copay**

**Specialist Visit : \$100 Copay after deductible**

**Urgent Care : \$100 copay**

**Generic Drugs : \$32 copay**



**17 Counties:** Benton, Columbia, Franklin, Island, King, Kitsap, Lewis, Mason, Pierce, Skagit, Snohomish, Spokane, Thurston, Walla Walla, Whatcom, Whitman, Yakima

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## Metal Level : Silver

**Plan Name : Kaiser Permanente Cascade Silver**

Rate change from 2024 : 6.1%

**Plan Type : HMO**

**Premium Range :** Low : \$ 548 ( Rating Area 1 )  
High : \$ 616 ( Rating Area 9 )

**Deductible : \$2500**

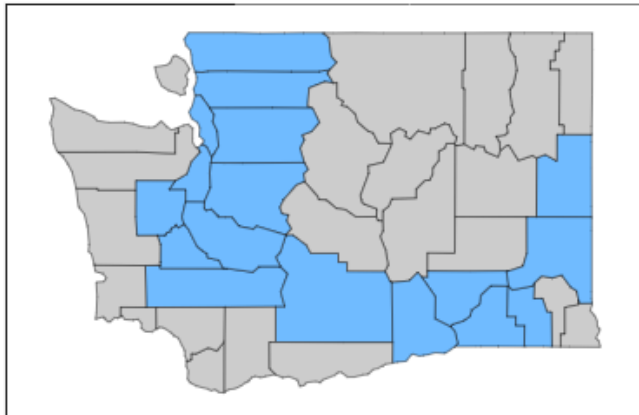
**OOPM : \$9200**

**Primary Care Visit : \$30 copay**

**Specialist Visit : \$65 copay**

**Urgent Care : \$65 copay**

**Generic Drugs : \$25 copay**



**17 Counties:** Benton, Columbia, Franklin, Island, King, Kitsap, Lewis, Mason, Pierce, Skagit, Snohomish, Spokane, Thurston, Walla Walla, Whatcom, Whitman, Yakima

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# Kaiser Foundation Health Plan of Washington

## Metal Level : Gold

**Plan Name : Kaiser Permanente Cascade Gold**

Rate change from 2024 : 7.4%

**Plan Type : HMO**

**Premium Range :**

**Low : \$ 583 ( Rating Area 1 )**

**High : \$ 656 ( Rating Area 9 )**

**Deductible : \$600**

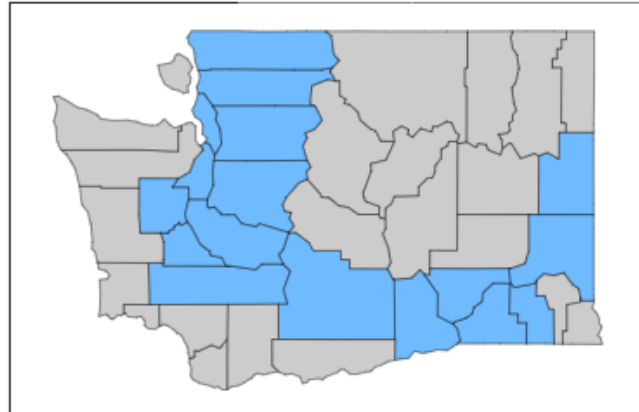
**OOPM : \$7000**

**Primary Care Visit : \$15 copay**

**Specialist Visit : \$40 copay**

**Urgent Care : \$35 copay**

**Generic Drugs : \$10 copay**



**17 Counties:** Benton, Columbia, Franklin, Island, King, Kitsap, Lewis, Mason, Pierce, Skagit, Snohomish, Spokane, Thurston, Walla Walla, Whatcom, Whitman, Yakima

## Metal Level : Bronze

**Plan Name : Bronze HSA**

Rate change from 2024 : 12%

**Plan Type : HMO**

**Premium Range :**

**Low : \$ 446 ( Rating Area 1 )**

**High : \$ 501 ( Rating Area 9 )**

**Deductible : \$5500**

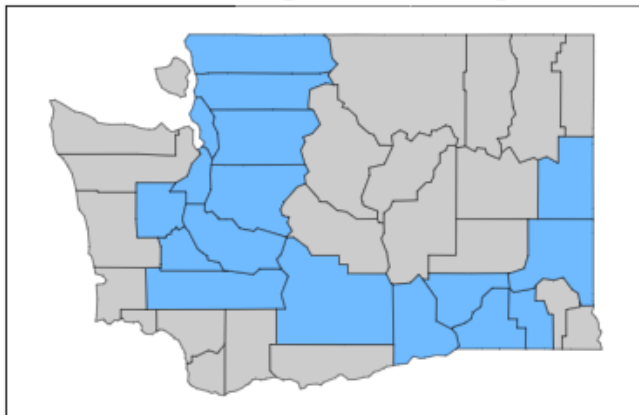
**OOPM : \$7000**

**Primary Care Visit : 40% Coinsurance after deductible**

**Specialist Visit : 40% Coinsurance after deductible**

**Urgent Care : 40% Coinsurance after deductible**

**Generic Drugs : 40% Coinsurance after deductible**



**17 Counties:** Benton, Columbia, Franklin, Island, King, Kitsap, Lewis, Mason, Pierce, Skagit, Snohomish, Spokane, Thurston, Walla Walla, Whatcom, Whitman, Yakima

# Kaiser Foundation Health Plan of Washington

## Metal Level : Bronze

**Plan Name : VisitsPlus Bronze**

Rate change from 2024 : 3%

**Plan Type : HMO**

**Premium Range :** Low : \$ 405 ( Rating Area 1 )  
High : \$ 455 ( Rating Area 9 )

**Deductible : \$6000**

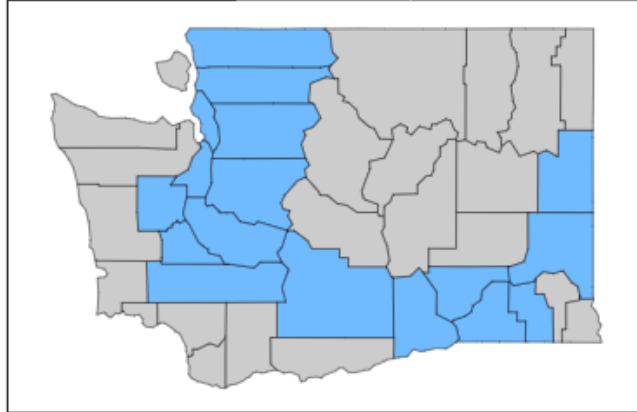
**OOPM : \$9200**

**Primary Care Visit : \$50 copay**

**Specialist Visit : \$85 copay**

**Urgent Care : \$85 copay**

**Generic Drugs : \$30 copay**



**17 Counties:** Benton, Columbia, Franklin, Island, King, Kitsap, Lewis, Mason, Pierce, Skagit, Snohomish, Spokane, Thurston, Walla Walla, Whatcom, Whitman, Yakima

## Metal Level : Silver

**Plan Name : VisitsPlus Silver**

Rate change from 2024 : 2.6%

**Plan Type : HMO**

**Premium Range :** Low : \$ 524 ( Rating Area 1 )  
High : \$ 589 ( Rating Area 9 )

**Deductible : \$2500**

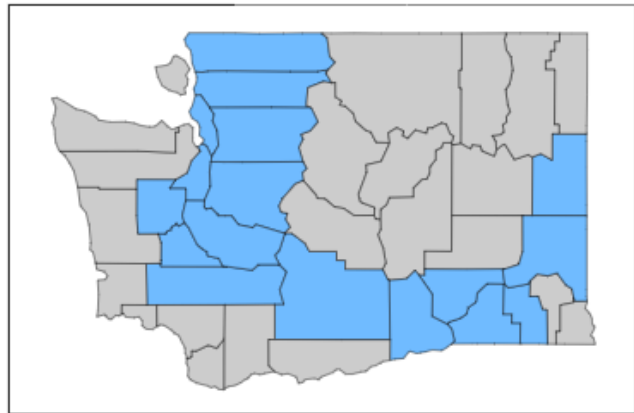
**OOPM : \$9200**

**Primary Care Visit : \$15 copay**

**Specialist Visit : \$60 copay**

**Urgent Care : \$60 copay**

**Generic Drugs : \$10 copay**



**17 Counties:** Benton, Columbia, Franklin, Island, King, Kitsap, Lewis, Mason, Pierce, Skagit, Snohomish, Spokane, Thurston, Walla Walla, Whatcom, Whitman, Yakima

# Kaiser Foundation Health Plan of Washington

## Metal Level : Gold

**Plan Name : VisitsPlus Gold**

**Plan Type : HMO**

**Deductible : \$1000**

**OOPM : \$7500**

**Primary Care Visit : \$10 copay**

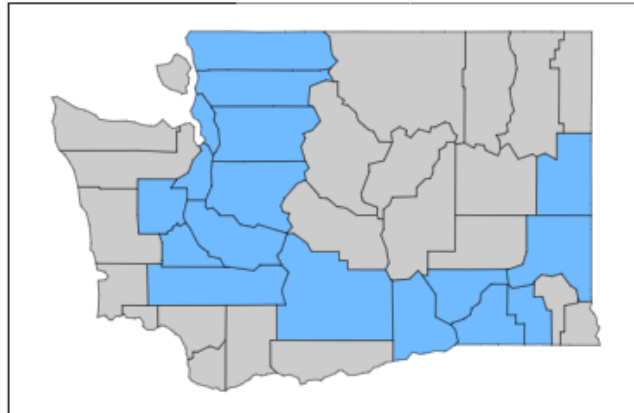
**Specialist Visit : \$45 copay**

**Urgent Care : \$45 copay**

**Generic Drugs : \$10 copay**

**Rate change from 2024 : 5.6%**

**Premium Range : Low : \$ 544 ( Rating Area 1 )  
High : \$ 611 ( Rating Area 9 )**



**17 Counties:** Benton, Columbia, Franklin, Island, King, Kitsap, Lewis, Mason, Pierce, Skagit, Snohomish, Spokane, Thurston, Walla Walla, Whatcom, Whitman, Yakima

## Metal Level : Catastrophic

**Plan Name : Basics Plus Catastrophic**

**Plan Type : HMO**

**Deductible : \$9200**

**OOPM : \$9200**

**Primary Care Visit : No Charge after deductible**

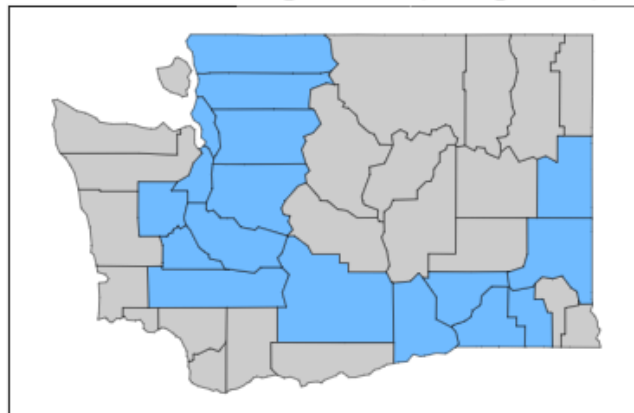
**Specialist Visit : No Charge after deductible**

**Urgent Care : No Charge after deductible**

**Generic Drugs : No Charge after deductible**

**Rate change from 2024 : -5.4%**

**Premium Range : Low : \$ 293 ( Rating Area 1 )  
High : \$ 329 ( Rating Area 9 )**



**17 Counties:** Benton, Columbia, Franklin, Island, King, Kitsap, Lewis, Mason, Pierce, Skagit, Snohomish, Spokane, Thurston, Walla Walla, Whatcom, Whitman, Yakima

# LifeWise Health Plan of Washington

## Metal Level : Bronze

**Plan Name : LifeWise Cascade Bronze**

Rate change from 2024 : 8.5%

**Plan Type : EPO**

**Premium Range :** Low : \$ 422 ( Rating Area 4 )  
High : \$ 490 ( Rating Area 2 )

**Deductible : \$6000**

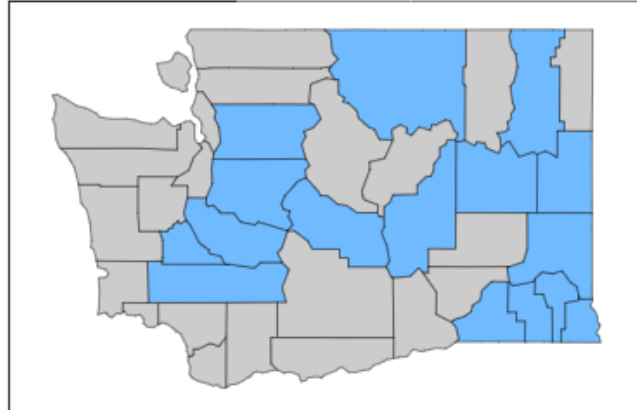
**OOPM : \$9200**

**Primary Care Visit : \$50 copay**

**Specialist Visit : \$100 Copay after deductible**

**Urgent Care : \$100 copay**

**Generic Drugs : \$32 copay**



**16 Counties:** Asotin, Columbia, Garfield, Grant, King, Kittitas, Lewis, Lincoln, Okanogan, Pierce, Snohomish, Spokane, Stevens, Thurston, Walla Walla, Whitman

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## Metal Level : Silver

**Plan Name : LifeWise Cascade Silver**

Rate change from 2024 : 8.7%

**Plan Type : EPO**

**Premium Range :** Low : \$ 594 ( Rating Area 4 )  
High : \$ 690 ( Rating Area 2 )

**Deductible : \$2500**

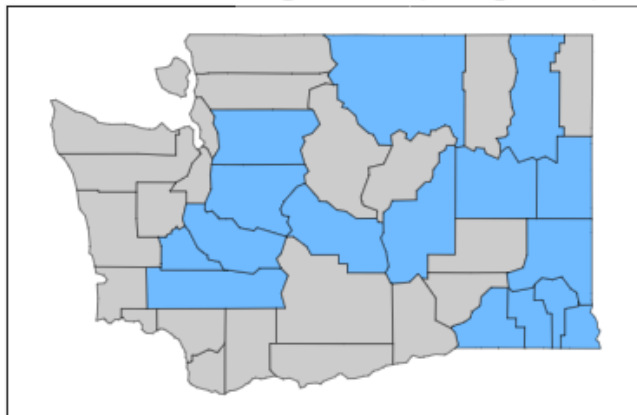
**OOPM : \$9200**

**Primary Care Visit : \$30 copay**

**Specialist Visit : \$65 copay**

**Urgent Care : \$65 copay**

**Generic Drugs : \$25 copay**



**16 Counties:** Asotin, Columbia, Garfield, Grant, King, Kittitas, Lewis, Lincoln, Okanogan, Pierce, Snohomish, Spokane, Stevens, Thurston, Walla Walla, Whitman

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# LifeWise Health Plan of Washington

## Metal Level : Gold

**Plan Name : LifeWise Cascade Gold**

Rate change from 2024 : 7.2%

**Plan Type : EPO**

**Premium Range :** Low : \$ 715 ( Rating Area 4 )  
High : \$ 829 ( Rating Area 2 )

**Deductible : \$600**

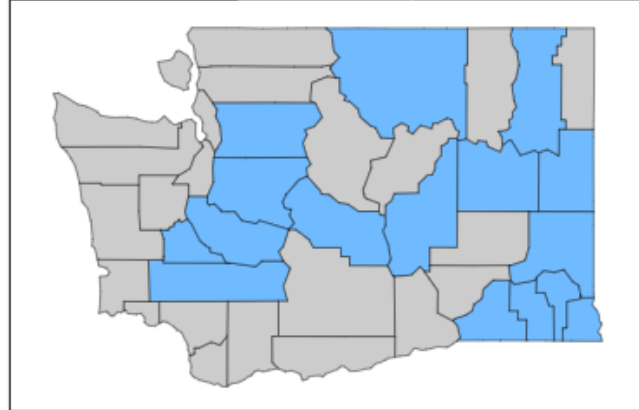
**OOPM : \$7000**

**Primary Care Visit : \$15 copay**

**Specialist Visit : \$40 copay**

**Urgent Care : \$35 copay**

**Generic Drugs : \$10 copay**



**16 Counties:** Asotin, Columbia, Garfield, Grant, King, Kittitas, Lewis, Lincoln, Okanogan, Pierce, Snohomish, Spokane, Stevens, Thurston, Walla Walla, Whitman

## Metal Level : Bronze

**Plan Name : LifeWise Cascade Select Bronze**

Rate change from 2024 : 7.7%

**Plan Type : EPO**

**Premium Range :** Low : \$ 348 ( Rating Area 4 )  
High : \$ 409 ( Rating Area 3 )

**Deductible : \$6000**

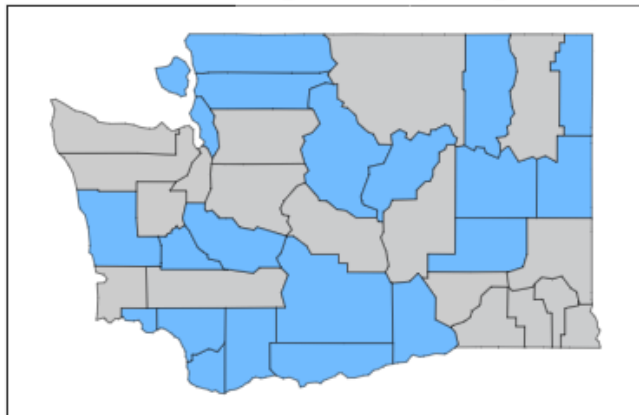
**OOPM : \$9200**

**Primary Care Visit : \$50 copay**

**Specialist Visit : \$100 Copay after deductible**

**Urgent Care : \$100 copay**

**Generic Drugs : \$32 copay**



**21 Counties:** Adams, Benton, Chelan, Clark, Cowlitz, Douglas, Ferry, Grays Harbor, Island, Klickitat, Lincoln, Pend Oreille, Pierce, San Juan, Skagit, Skamania, Spokane, Thurston, Wahkiakum, Whatcom, Yakima

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# LifeWise Health Plan of Washington

## Metal Level : Silver

**Plan Name : LifeWise Cascade Select Silver**

Rate change from 2024 : 7.8%

**Plan Type : EPO**

**Premium Range :**  
Low : \$ 486 ( Rating Area 4 )  
High : \$ 570 ( Rating Area 3 )

**Deductible : \$2500**

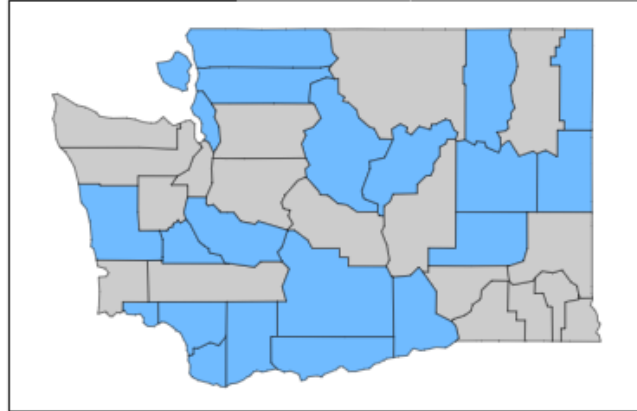
**OOPM : \$9200**

**Primary Care Visit : \$30 copay**

**Specialist Visit : \$65 copay**

**Urgent Care : \$65 copay**

**Generic Drugs : \$25 copay**



**21 Counties:** Adams, Benton, Chelan, Clark, Cowlitz, Douglas, Ferry, Grays Harbor, Island, Klickitat, Lincoln, Pend Oreille, Pierce, San Juan, Skagit, Skamania, Spokane, Thurston, Wahkiakum, Whatcom, Yakima

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## Metal Level : Gold

**Plan Name : LifeWise Cascade Select Gold**

Rate change from 2024 : 6.4%

**Plan Type : EPO**

**Premium Range :**  
Low : \$ 582 ( Rating Area 4 )  
High : \$ 684 ( Rating Area 3 )

**Deductible : \$600**

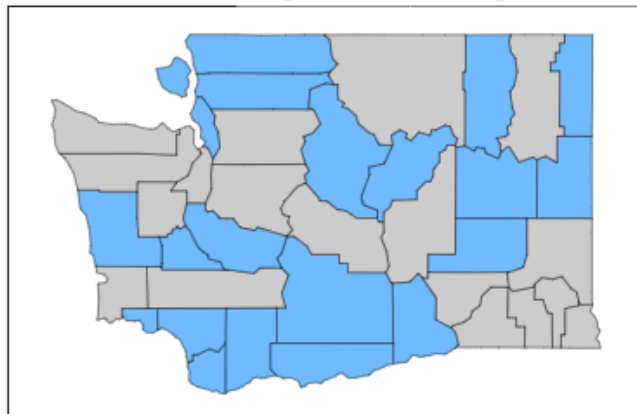
**OOPM : \$7000**

**Primary Care Visit : \$15 copay**

**Specialist Visit : \$40 copay**

**Urgent Care : \$35 copay**

**Generic Drugs : \$10 copay**



**21 Counties:** Adams, Benton, Chelan, Clark, Cowlitz, Douglas, Ferry, Grays Harbor, Island, Klickitat, Lincoln, Pend Oreille, Pierce, San Juan, Skagit, Skamania, Spokane, Thurston, Wahkiakum, Whatcom, Yakima

# LifeWise Health Plan of Washington

## Metal Level : Bronze

**Plan Name : LifeWise Essential Bronze**

Rate change from 2024 : 7.4%

**Plan Type : EPO**

**Premium Range :** Low : \$ 408 ( Rating Area 4 )  
High : \$ 478 ( Rating Area 3 )

**Deductible : \$6500**

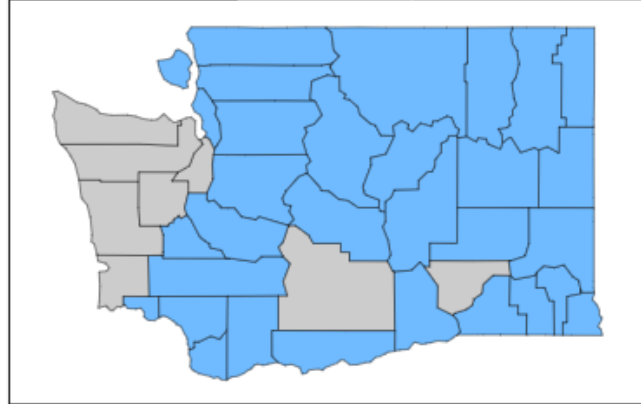
**OOPM : \$9200**

**Primary Care Visit : \$50 copay**

**Specialist Visit : \$110 Copay after deductible**

**Urgent Care : \$110 Copay after deductible**

**Generic Drugs : \$35 copay**



**31 Counties:** Adams, Asotin, Benton, Chelan, Clark, Columbia, Cowlitz, Douglas, Ferry, Garfield, Grant, Island, King, Kittitas, Klickitat, Lewis, Lincoln, Okanogan, Pend Oreille, Pierce, San Juan, Skagit, Skamania, Snohomish, Spokane, Stevens, Thurston, Wahkiakum, Walla Walla, Whatcom, Whitman

## Metal Level : Silver

**Plan Name : LifeWise Essential Silver Low Deductible**

Rate change from 2024 : 10.1%

**Plan Type : EPO**

**Premium Range :** Low : \$ 585 ( Rating Area 4 )  
High : \$ 687 ( Rating Area 3 )

**Deductible : \$2850**

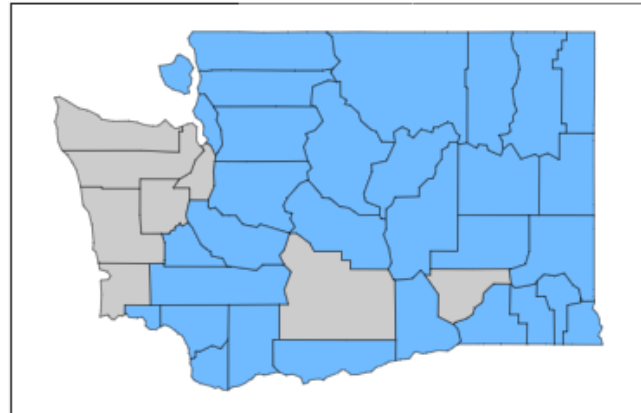
**OOPM : \$8400**

**Primary Care Visit : \$25 copay**

**Specialist Visit : \$55 copay**

**Urgent Care : \$55 copay**

**Generic Drugs : \$20 copay**



**31 Counties:** Adams, Asotin, Benton, Chelan, Clark, Columbia, Cowlitz, Douglas, Ferry, Garfield, Grant, Island, King, Kittitas, Klickitat, Lewis, Lincoln, Okanogan, Pend Oreille, Pierce, San Juan, Skagit, Skamania, Snohomish, Spokane, Stevens, Thurston, Wahkiakum, Walla Walla, Whatcom, Whitman

# LifeWise Health Plan of Washington

**Metal Level : Gold**

**Plan Name : LifeWise Essential Gold**

**Rate change from 2024 : 9.4%**

**Plan Type : EPO**

**Premium Range :**      **Low : \$ 634 ( Rating Area 4 )**  
   **High : \$ 744 ( Rating Area 3 )**

**Deductible : \$800**

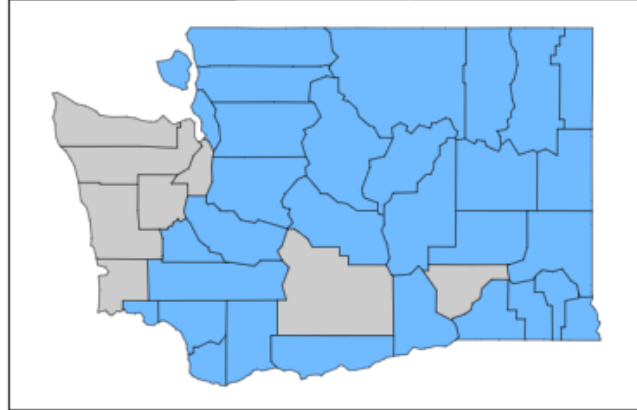
**OOPM : \$7600**

**Primary Care Visit : \$30 copay**

**Specialist Visit : \$60 copay**

**Urgent Care : \$60 copay**

**Generic Drugs : \$10 copay**



**31 Counties:** Adams, Asotin, Benton, Chelan, Clark, Columbia, Cowlitz, Douglas, Ferry, Garfield, Grant, Island, King, Kittitas, Klickitat, Lewis, Lincoln, Okanogan, Pend Oreille, Pierce, San Juan, Skagit, Skamania, Snohomish, Spokane, Stevens, Thurston, Wahkiakum, Walla Walla, Whatcom, Whitman

# Molina Healthcare of Washington

## Metal Level : Bronze

**Plan Name : Molina Cascade Bronze**

Rate change from 2024 : 5.4%

**Plan Type : HMO**

**Premium Range :**  
Low : \$ 373 ( Rating Area 4 )  
High : \$ 425 ( Rating Area 3 )

**Deductible : \$6000**

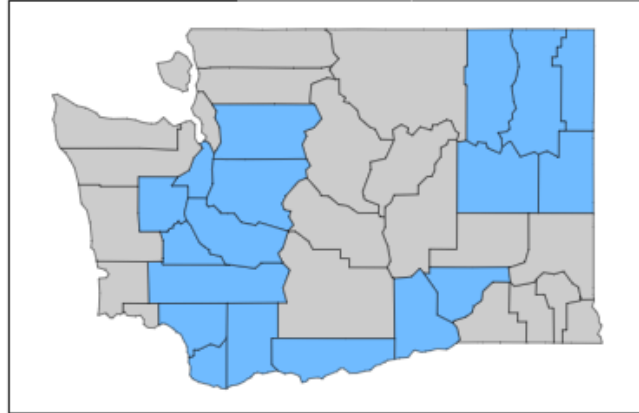
**OOPM : \$9200**

**Primary Care Visit : \$50 copay**

**Specialist Visit : \$100 Copay after deductible**

**Urgent Care : \$100 copay**

**Generic Drugs : \$32 copay**



**18 Counties:** Benton, Clark, Cowlitz, Ferry, Franklin, King, Kitsap, Klickitat, Lewis, Lincoln, Mason, Pend Oreille, Pierce, Skamania, Snohomish, Spokane, Stevens, Thurston

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## Metal Level : Silver

**Plan Name : Molina Cascade Silver**

Rate change from 2024 : 5.4%

**Plan Type : HMO**

**Premium Range :**  
Low : \$ 488 ( Rating Area 4 )  
High : \$ 556 ( Rating Area 3 )

**Deductible : \$2500**

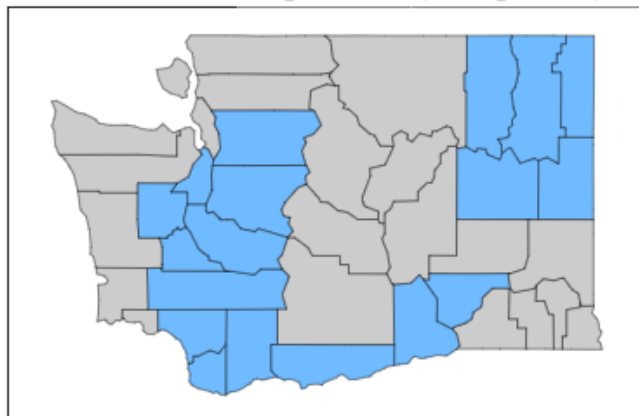
**OOPM : \$9200**

**Primary Care Visit : \$30 copay**

**Specialist Visit : \$65 copay**

**Urgent Care : \$65 copay**

**Generic Drugs : \$25 copay**



**18 Counties:** Benton, Clark, Cowlitz, Ferry, Franklin, King, Kitsap, Klickitat, Lewis, Lincoln, Mason, Pend Oreille, Pierce, Skamania, Snohomish, Spokane, Stevens, Thurston

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# Molina Healthcare of Washington

## Metal Level : Gold

**Plan Name : Molina Cascade Gold**

Rate change from 2024 : 4.9%

**Plan Type : HMO**

**Premium Range :**  
Low : \$ 518 ( Rating Area 4 )  
High : \$ 590 ( Rating Area 3 )

**Deductible : \$600**

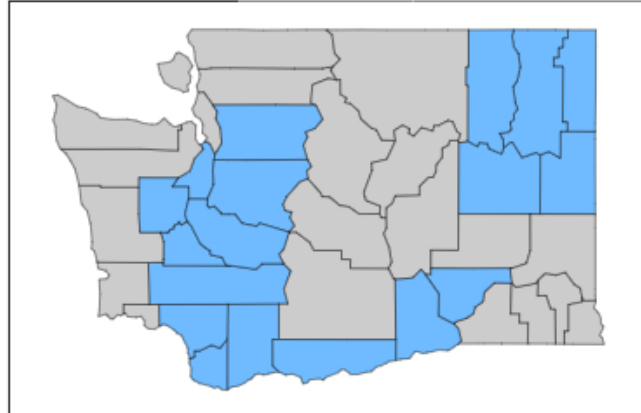
**OOPM : \$7000**

**Primary Care Visit : \$15 copay**

**Specialist Visit : \$40 copay**

**Urgent Care : \$35 copay**

**Generic Drugs : \$10 copay**



**18 Counties:** Benton, Clark, Cowlitz, Ferry, Franklin, King, Kitsap, Klickitat, Lewis, Lincoln, Mason, Pend Oreille, Pierce, Skamania, Snohomish, Spokane, Stevens, Thurston

## Metal Level : Silver

**Plan Name : Constant Care Silver 1**

Rate change from 2024 : 7.4%

**Plan Type : HMO**

**Premium Range :**  
Low : \$ 474 ( Rating Area 4 )  
High : \$ 540 ( Rating Area 3 )

**Deductible : \$0 Medical/ \$900 Drug**

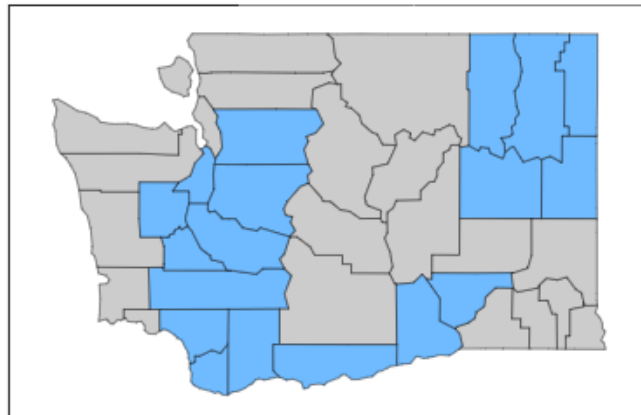
**OOPM : \$7930**

**Primary Care Visit : \$30 copay**

**Specialist Visit : \$60 copay**

**Urgent Care : \$30 copay**

**Generic Drugs : \$27 copay**



**18 Counties:** Benton, Clark, Cowlitz, Ferry, Franklin, King, Kitsap, Klickitat, Lewis, Lincoln, Mason, Pend Oreille, Pierce, Skamania, Snohomish, Spokane, Stevens, Thurston

# Premera Blue Cross

## Metal Level : Bronze

**Plan Name : Premera Blue Cross Cascade Bronze**

Rate change from 2024 : 16.9%

**Plan Type : EPO**

**Premium Range :** Low : \$ 580 ( Rating Area 4 )  
High : \$ 667 ( Rating Area 2 )

**Deductible : \$6000**

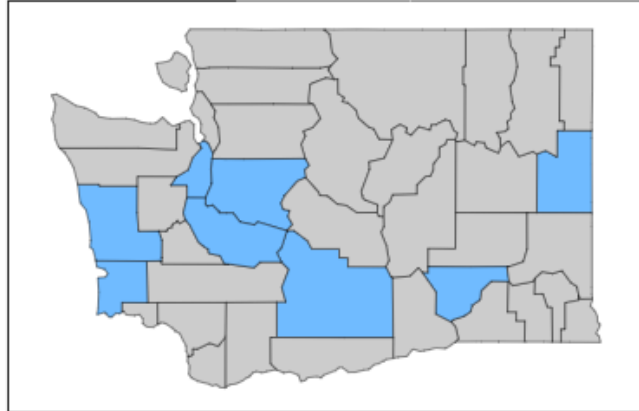
**OOPM : \$9200**

**Primary Care Visit : \$50 copay**

**Specialist Visit : \$100 Copay after deductible**

**Urgent Care : \$100 copay**

**Generic Drugs : \$32 copay**



**8 Counties:** Franklin, Grays Harbor, King, Kitsap, Pacific, Pierce, Spokane, Yakima

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## Metal Level : Silver

**Plan Name : Premera Blue Cross Cascade Silver**

Rate change from 2024 : 15.8%

**Plan Type : EPO**

**Premium Range :** Low : \$ 793 ( Rating Area 4 )  
High : \$ 912 ( Rating Area 2 )

**Deductible : \$2500**

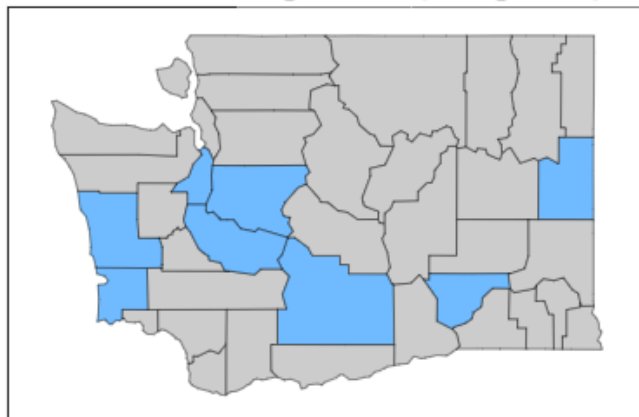
**OOPM : \$9200**

**Primary Care Visit : \$30 copay**

**Specialist Visit : \$65 copay**

**Urgent Care : \$65 copay**

**Generic Drugs : \$25 copay**



**8 Counties:** Franklin, Grays Harbor, King, Kitsap, Pacific, Pierce, Spokane, Yakima

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# Premera Blue Cross

**Metal Level : Gold**

**Plan Name : Premera Blue Cross Cascade Gold**

**Rate change from 2024 : 14.9%**

**Plan Type : EPO**

**Premium Range :** Low : \$ 1000 ( Rating Area 4 )  
High : \$ 1150 ( Rating Area 2 )

**Deductible : \$600**

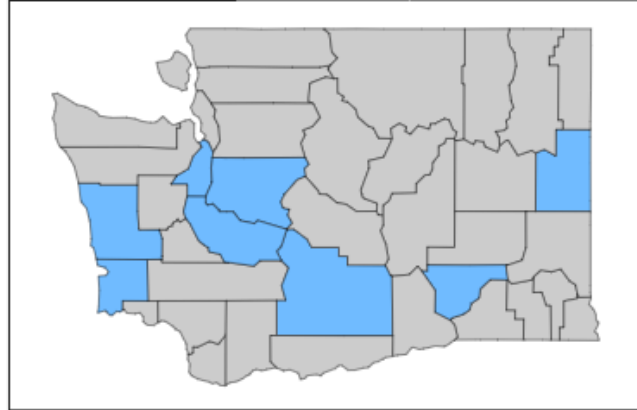
**OOPM : \$7000**

**Primary Care Visit : \$15 copay**

**Specialist Visit : \$40 copay**

**Urgent Care : \$35 copay**

**Generic Drugs : \$10 copay**



**8 Counties:** Franklin, Grays Harbor, King, Kitsap, Pacific, Pierce, Spokane, Yakima

**Metal Level : Bronze**

**Plan Name : Premera Blue Cross Preferred Bronze EPO 6650**

**Rate change from 2024 : 13.6%**

**Plan Type : EPO**

**Premium Range :** Low : \$ 564 ( Rating Area 4 )  
High : \$ 649 ( Rating Area 2 )

**Deductible : \$6650**

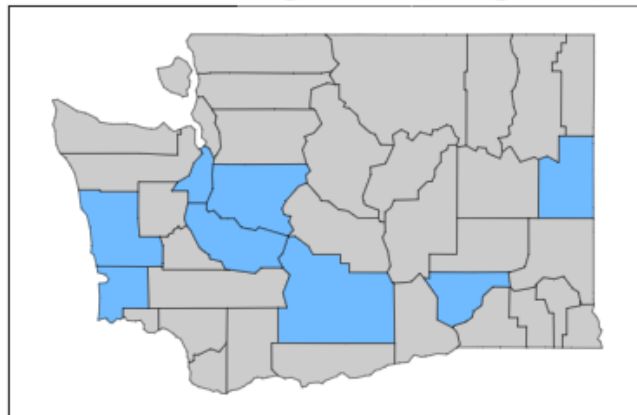
**OOPM : \$8700**

**Primary Care Visit : \$50 copay**

**Specialist Visit : \$100 Copay after deductible**

**Urgent Care : \$100 Copay after deductible**

**Generic Drugs : \$35 copay**



**8 Counties:** Franklin, Grays Harbor, King, Kitsap, Pacific, Pierce, Spokane, Yakima

# Premera Blue Cross

**Metal Level : Bronze**

**Plan Name : Premera Blue Cross Preferred Bronze HSA EPO 6800**

Rate change from 2024 : 0%

**Plan Type : EPO**

**Premium Range :** Low : \$ 563 ( Rating Area 4 )  
High : \$ 648 ( Rating Area 2 )

**Deductible : \$6800**

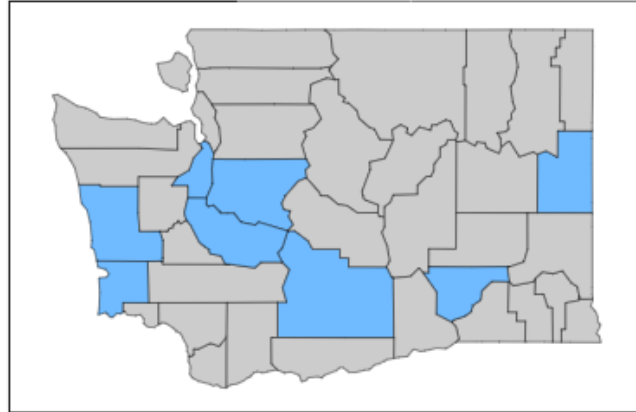
**OOPM : \$8000**

**Primary Care Visit : 40% Coinsurance after deductible**

**Specialist Visit : 40% Coinsurance after deductible**

**Urgent Care : 40% Coinsurance after deductible**

**Generic Drugs : 40% Coinsurance after deductible**



**8 Counties:** Franklin, Grays Harbor, King, Kitsap, Pacific, Pierce, Spokane, Yakima

**Metal Level : Silver**

**Plan Name : Premera Blue Cross Preferred Silver EPO 4500**

Rate change from 2024 : 13.4%

**Plan Type : EPO**

**Premium Range :** Low : \$ 769 ( Rating Area 4 )  
High : \$ 884 ( Rating Area 2 )

**Deductible : \$4500**

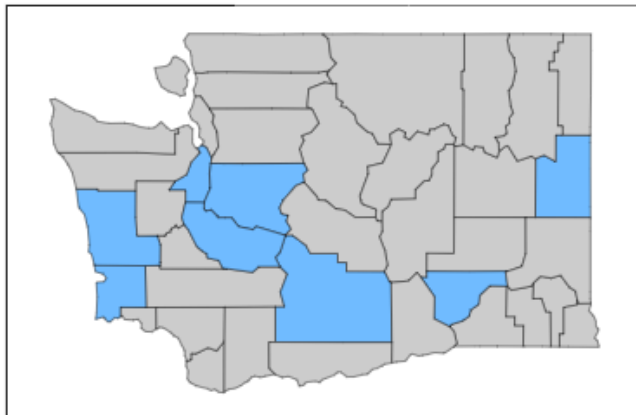
**OOPM : \$7300**

**Primary Care Visit : \$25 copay**

**Specialist Visit : \$60 copay**

**Urgent Care : \$60 copay**

**Generic Drugs : \$20 copay**



**8 Counties:** Franklin, Grays Harbor, King, Kitsap, Pacific, Pierce, Spokane, Yakima

# Premera Blue Cross

**Metal Level : Gold**

**Plan Name : Premera Blue Cross Preferred Gold EPO 1500**

**Rate change from 2024 : 16.7%**

**Plan Type : EPO**

**Premium Range :**     **Low : \$ 884 ( Rating Area 4 )**  
   **High : \$ 1017 ( Rating Area 2 )**

**Deductible : \$1500**

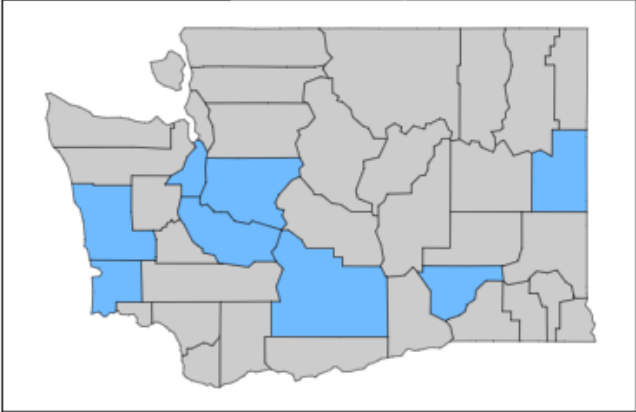
**OOPM : \$6800**

**Primary Care Visit : \$15 copay**

**Specialist Visit : \$45 copay**

**Urgent Care : \$45 copay**

**Generic Drugs : \$10 copay**



**8 Counties:**     Franklin, Grays Harbor, King, Kitsap, Pacific, Pierce, Spokane, Yakima

# Regence BlueShield

## Metal Level : Bronze

**Plan Name : Regence Cascade Bronze**

Rate change from 2024 : 24.2%

**Plan Type : EPO**

**Premium Range :** Low : \$ 501 ( Rating Area 1 )  
High : \$ 569 ( Rating Area 2 )

**Deductible : \$6000**

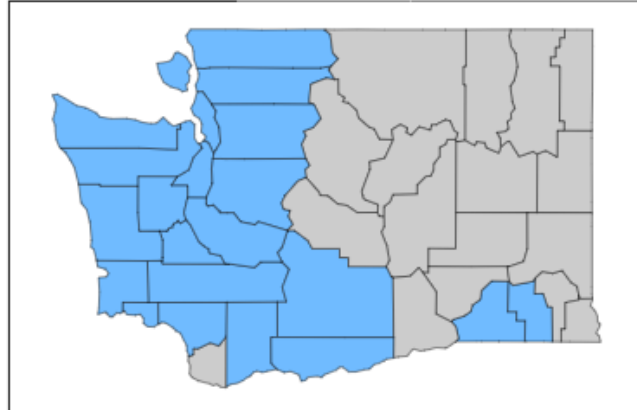
**OOPM : \$9200**

**Primary Care Visit : \$50 copay**

**Specialist Visit : \$100 Copay after deductible**

**Urgent Care : \$100 copay**

**Generic Drugs : \$32 copay**



**22 Counties:** Clallam, Columbia, Cowlitz, Grays Harbor, Island, Jefferson, King, Kitsap, Klickitat, Lewis, Mason, Pacific, Pierce, San Juan, Skagit, Skamania, Snohomish, Thurston, Wahkiakum, Walla Walla, Whatcom, Yakima

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## Metal Level : Silver

**Plan Name : Regence Cascade Silver**

Rate change from 2024 : 19.8%

**Plan Type : EPO**

**Premium Range :** Low : \$ 609 ( Rating Area 1 )  
High : \$ 692 ( Rating Area 2 )

**Deductible : \$2500**

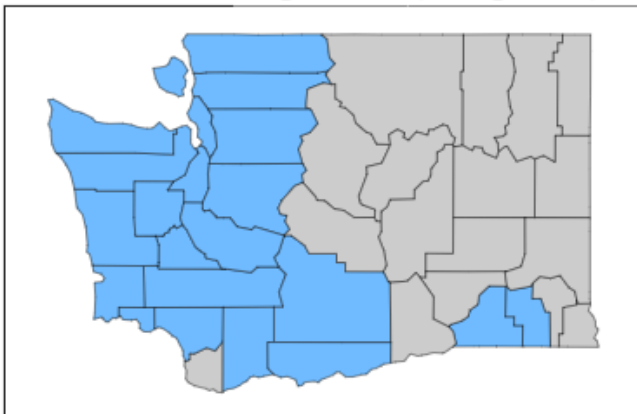
**OOPM : \$9200**

**Primary Care Visit : \$30 copay**

**Specialist Visit : \$65 copay**

**Urgent Care : \$65 copay**

**Generic Drugs : \$25 copay**



**22 Counties:** Clallam, Columbia, Cowlitz, Grays Harbor, Island, Jefferson, King, Kitsap, Klickitat, Lewis, Mason, Pacific, Pierce, San Juan, Skagit, Skamania, Snohomish, Thurston, Wahkiakum, Walla Walla, Whatcom, Yakima

\*

# Regence BlueShield

## Metal Level : Gold

**Plan Name : Regence Cascade Gold**

Rate change from 2024 : 22.8%

**Plan Type : EPO**

**Premium Range :** Low : \$ 793 ( Rating Area 1 )  
High : \$ 900 ( Rating Area 2 )

**Deductible : \$600**

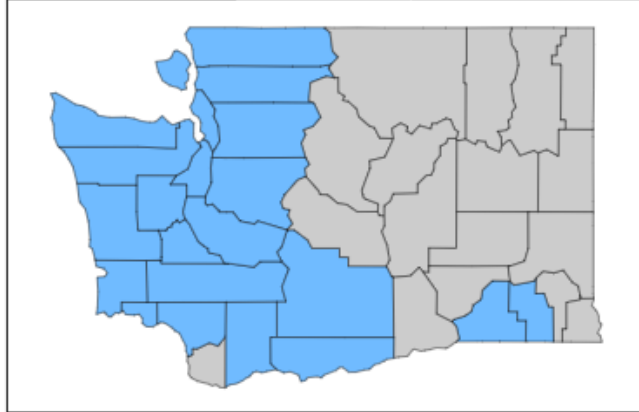
**OOPM : \$7000**

**Primary Care Visit : \$15 copay**

**Specialist Visit : \$40 copay**

**Urgent Care : \$35 copay**

**Generic Drugs : \$10 copay**



**22 Counties:** Clallam, Columbia, Cowlitz, Grays Harbor, Island, Jefferson, King, Kitsap, Klickitat, Lewis, Mason, Pacific, Pierce, San Juan, Skagit, Skamania, Snohomish, Thurston, Wahkiakum, Walla Walla, Whatcom, Yakima

## Metal Level : Bronze

**Plan Name : Bronze Essential 8500**

Rate change from 2024 : 26%

**Plan Type : EPO**

**Premium Range :** Low : \$ 481 ( Rating Area 1 )  
High : \$ 546 ( Rating Area 2 )

**Deductible : \$8500**

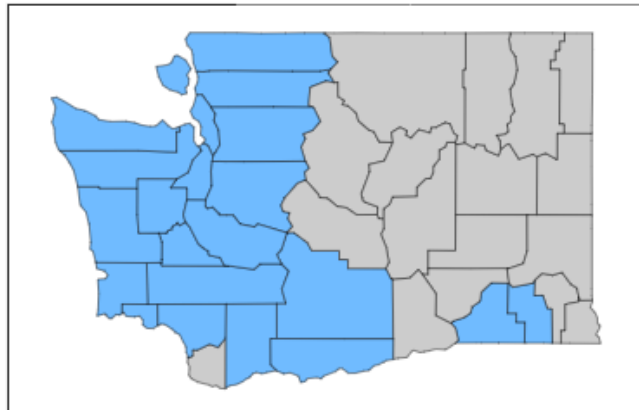
**OOPM : \$9200**

**Primary Care Visit : \$60 / 10% Coinsurance  
after deductible**

**Specialist Visit : \$60 / 10% Coinsurance after  
deductible**

**Urgent Care : \$60 / 10% Coinsurance after  
deductible**

**Generic Drugs : \$20 copay**



**22 Counties:** Clallam, Columbia, Cowlitz, Grays Harbor, Island, Jefferson, King, Kitsap, Klickitat, Lewis, Mason, Pacific, Pierce, San Juan, Skagit, Skamania, Snohomish, Thurston, Wahkiakum, Walla Walla, Whatcom, Yakima

# Regence BlueShield

## Metal Level : Bronze

**Plan Name : Bronze HSA 7000**

Rate change from 2024 : New Plan

**Plan Type : EPO**

**Premium Range :** Low : \$ 499 ( Rating Area 1 )  
High : \$ 566 ( Rating Area 2 )

**Deductible : \$7000**

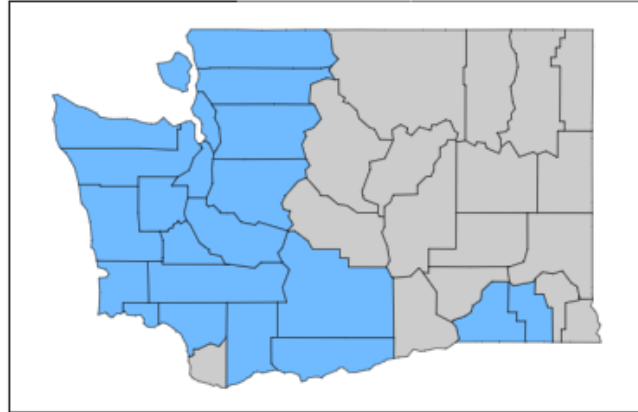
**OOPM : \$8050**

**Primary Care Visit : 50% Coinsurance after deductible**

**Specialist Visit : 50% Coinsurance after deductible**

**Urgent Care : 50% Coinsurance after deductible**

**Generic Drugs : 20% Coinsurance after deductible**



**22 Counties:** Clallam, Columbia, Cowlitz, Grays Harbor, Island, Jefferson, King, Kitsap, Klickitat, Lewis, Mason, Pacific, Pierce, San Juan, Skagit, Skamania, Snohomish, Thurston, Wahkiakum, Walla Walla, Whatcom, Yakima

## Metal Level : Gold

**Plan Name : Gold 2300**

Rate change from 2024 : 25.1%

**Plan Type : EPO**

**Premium Range :** Low : \$ 688 ( Rating Area 1 )  
High : \$ 781 ( Rating Area 2 )

**Deductible : \$2300**

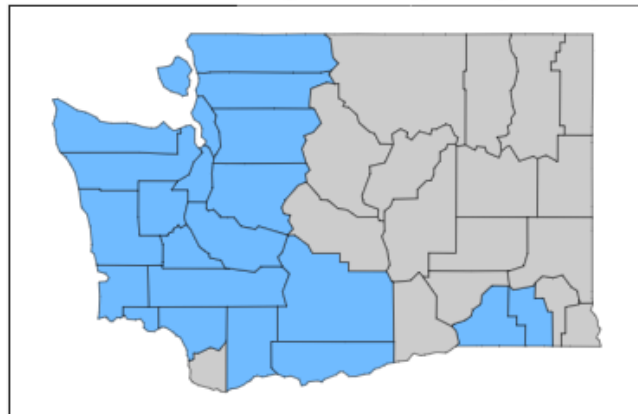
**OOPM : \$9200**

**Primary Care Visit : \$10 copay**

**Specialist Visit : \$60 copay**

**Urgent Care : \$60 copay**

**Generic Drugs : \$5 copay**



**22 Counties:** Clallam, Columbia, Cowlitz, Grays Harbor, Island, Jefferson, King, Kitsap, Klickitat, Lewis, Mason, Pacific, Pierce, San Juan, Skagit, Skamania, Snohomish, Thurston, Wahkiakum, Walla Walla, Whatcom, Yakima

# Regence BlueCross BlueShield of Oregon

**Metal Level : Bronze**

**Plan Name : Regence Cascade Bronze Individual and Family Network**

Rate change from 2024 : 22.8%

Plan Type : EPO

Premium Range : Low : \$ 512 ( Rating Area 3 )  
High : \$ 512 ( Rating Area 3 )

Deductible : \$6000

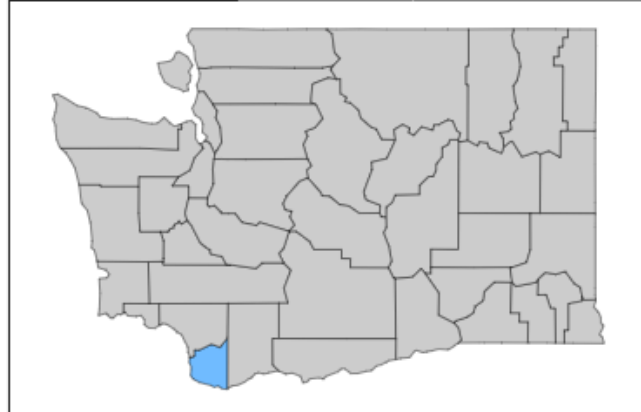
OOPM : \$9200

Primary Care Visit : \$50 copay

Specialist Visit : \$100 Copay after deductible

Urgent Care : \$100 copay

Generic Drugs : \$32 copay



**1 Counties:** Clark

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**Metal Level : Silver**

**Plan Name : Regence Cascade Silver Individual and Family Network**

Rate change from 2024 : 22.4%

Plan Type : EPO

Premium Range : Low : \$ 644 ( Rating Area 3 )  
High : \$ 644 ( Rating Area 3 )

Deductible : \$2500

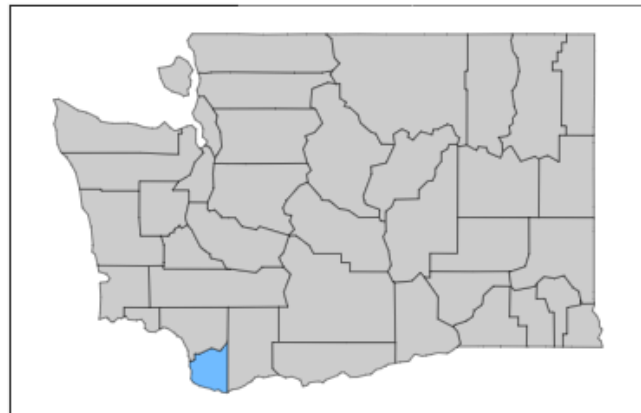
OOPM : \$9200

Primary Care Visit : \$30 copay

Specialist Visit : \$65 copay

Urgent Care : \$65 copay

Generic Drugs : \$25 copay



**1 Counties:** Clark

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# Regence BlueCross BlueShield of Oregon

**Metal Level : Gold**

**Plan Name : Regence Cascade Gold Individual and Family Network**

Rate change from 2024 : 21.7%

Plan Type : EPO

Premium Range : Low : \$ 810 ( Rating Area 3 )  
High : \$ 810 ( Rating Area 3 )

Deductible : \$600

OOPM : \$7000

Primary Care Visit : \$15 copay

Specialist Visit : \$40 copay

Urgent Care : \$35 copay

Generic Drugs : \$10 copay



**1 Counties:** Clark

**Metal Level : Bronze**

**Plan Name : Regence Cascade Bronze Legacy Network**

Rate change from 2024 : 13.4%

Plan Type : EPO

Premium Range : Low : \$ 428 ( Rating Area 3 )  
High : \$ 428 ( Rating Area 3 )

Deductible : \$6000

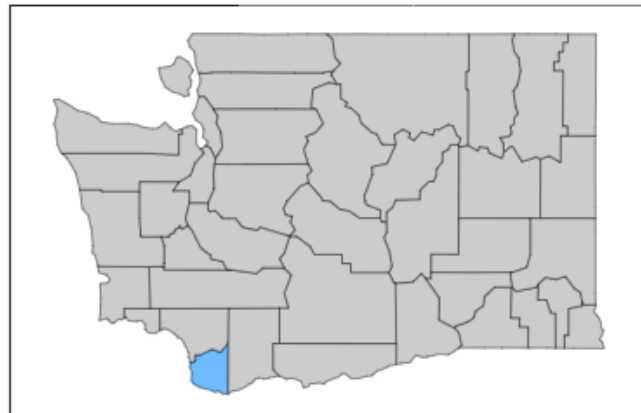
OOPM : \$9200

Primary Care Visit : \$50 copay

Specialist Visit : \$100 Copay after deductible

Urgent Care : \$100 copay

Generic Drugs : \$32 copay



**1 Counties:** Clark

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# Regence BlueCross BlueShield of Oregon

**Metal Level : Silver**

**Plan Name : Regence Cascade Silver Legacy Network**

Rate change from 2024 : 13%

**Plan Type : EPO**

**Premium Range :** Low : \$ 539 ( Rating Area 3 )  
High : \$ 539 ( Rating Area 3 )

**Deductible : \$2500**

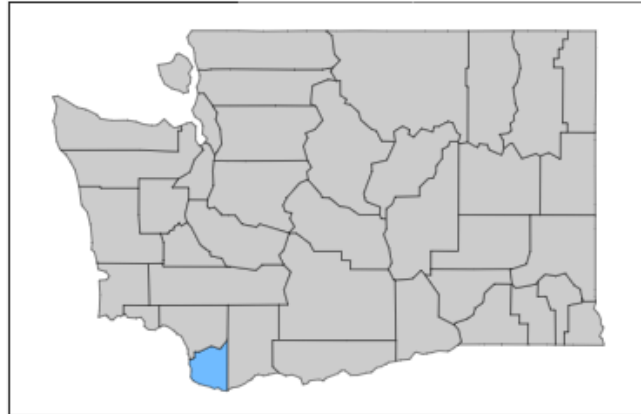
**OOPM : \$9200**

**Primary Care Visit : \$30 copay**

**Specialist Visit : \$65 copay**

**Urgent Care : \$65 copay**

**Generic Drugs : \$25 copay**



**1 Counties:** Clark

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**Metal Level : Gold**

**Plan Name : Regence Cascade Gold Legacy Network**

Rate change from 2024 : 12.3%

**Plan Type : EPO**

**Premium Range :** Low : \$ 678 ( Rating Area 3 )  
High : \$ 678 ( Rating Area 3 )

**Deductible : \$600**

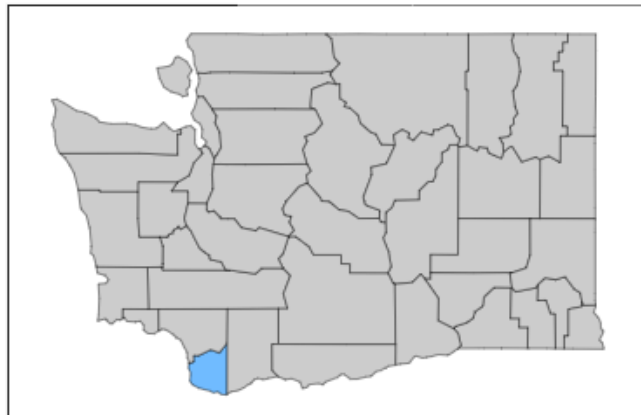
**OOPM : \$7000**

**Primary Care Visit : \$15 copay**

**Specialist Visit : \$40 copay**

**Urgent Care : \$35 copay**

**Generic Drugs : \$10 copay**



**1 Counties:** Clark

# Regence BlueCross BlueShield of Oregon

**Metal Level : Bronze**

**Plan Name : Bronze HSA 7000 Individual and Family Network**

**Rate change from 2024 : New Plan**

**Plan Type : EPO**

**Premium Range :** Low : \$ 510 ( Rating Area 3 )  
High : \$ 510 ( Rating Area 3 )

**Deductible : \$7000**

**OOPM : \$8050**

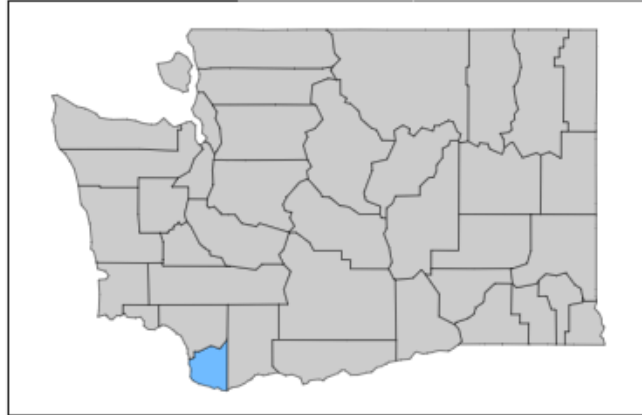
**Primary Care Visit : 50% Coinsurance after deductible**

**Specialist Visit : 50% Coinsurance after deductible**

**Urgent Care : 50% Coinsurance after deductible**

**Generic Drugs : 20% Coinsurance after deductible**

**1 Counties:** Clark



**Metal Level : Bronze**

**Plan Name : Bronze Essential 8500 Legacy Network**

**Rate change from 2024 : 14.8%**

**Plan Type : EPO**

**Premium Range :** Low : \$ 411 ( Rating Area 3 )  
High : \$ 411 ( Rating Area 3 )

**Deductible : \$8500**

**OOPM : \$9200**

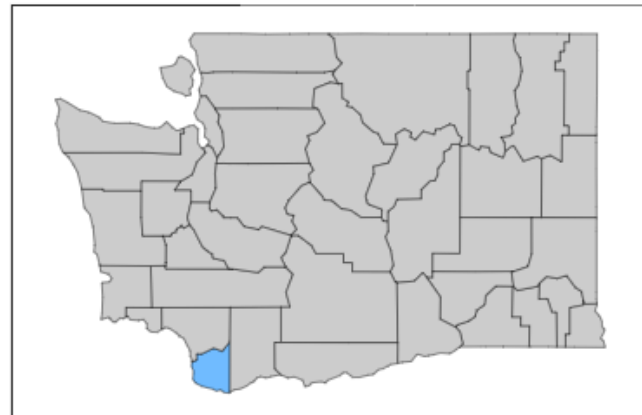
**Primary Care Visit : \$60 / 10% Coinsurance after deductible**

**Specialist Visit : \$60 / 10% Coinsurance after deductible**

**Urgent Care : \$60 / 10% Coinsurance after deductible**

**Generic Drugs : \$20 copay**

**1 Counties:** Clark



# United Healthcare of Oregon, Inc.

## Metal Level : Bronze

**Plan Name : UnitedHealthcare of Oregon, Inc. Cascade Bronze**

Rate change from 2024 : 25.6%

**Plan Type : EPO**

**Premium Range :** Low : \$ 439 ( Rating Area 9 )  
High : \$ 504 ( Rating Area 2 )

**Deductible : \$6000**

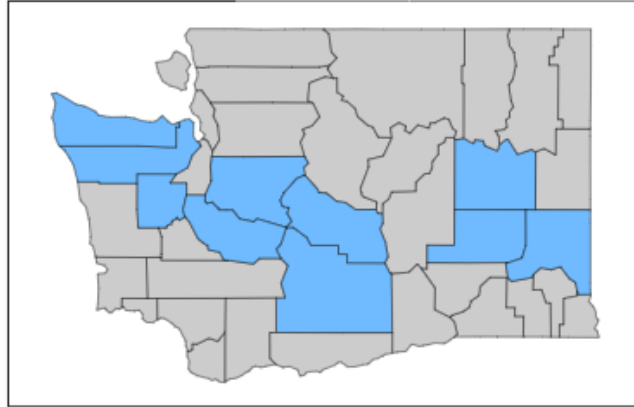
**OOPM : \$9200**

**Primary Care Visit : \$50 copay**

**Specialist Visit : \$100 Copay after deductible**

**Urgent Care : \$100 copay**

**Generic Drugs : \$32 copay**



**10 Counties:** Adams, Clallam, Jefferson, King, Kittitas, Lincoln, Mason, Pierce, Whitman, Yakima

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## Metal Level : Silver

**Plan Name : UnitedHealthcare of Oregon, Inc. Cascade Silver**

Rate change from 2024 : 22.7%

**Plan Type : EPO**

**Premium Range :** Low : \$ 541 ( Rating Area 9 )  
High : \$ 621 ( Rating Area 2 )

**Deductible : \$2500**

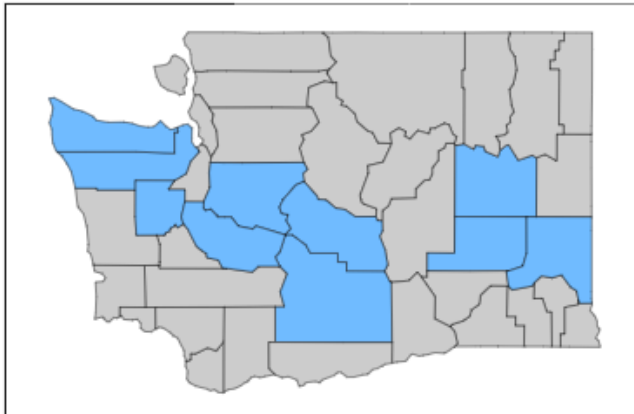
**OOPM : \$9200**

**Primary Care Visit : \$30 copay**

**Specialist Visit : \$65 copay**

**Urgent Care : \$65 copay**

**Generic Drugs : \$25 copay**



**10 Counties:** Adams, Clallam, Jefferson, King, Kittitas, Lincoln, Mason, Pierce, Whitman, Yakima

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# United Healthcare of Oregon, Inc.

**Metal Level : Gold**

**Plan Name : UnitedHealthcare of Oregon, Inc. Cascade Gold**

**Rate change from 2024 : 19.8%**

**Plan Type : EPO**

**Premium Range :** Low : \$ 639 ( Rating Area 9 )  
High : \$ 734 ( Rating Area 2 )

**Deductible : \$600**

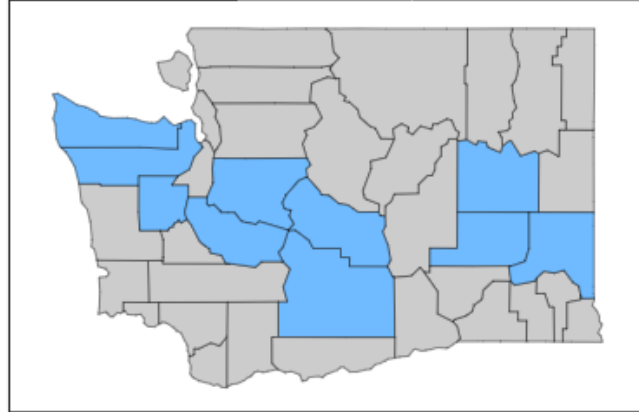
**OOPM : \$7000**

**Primary Care Visit : \$15 copay**

**Specialist Visit : \$40 copay**

**Urgent Care : \$35 copay**

**Generic Drugs : \$10 copay**



**10 Counties:** Adams, Clallam, Jefferson, King, Kittitas, Lincoln, Mason, Pierce, Whitman, Yakima

**Metal Level : Bronze**

**Plan Name : UHC Bronze Value HSA**

**Rate change from 2024 : 25.5%**

**Plan Type : EPO**

**Premium Range :** Low : \$ 436 ( Rating Area 9 )  
High : \$ 501 ( Rating Area 2 )

**Deductible : \$6300**

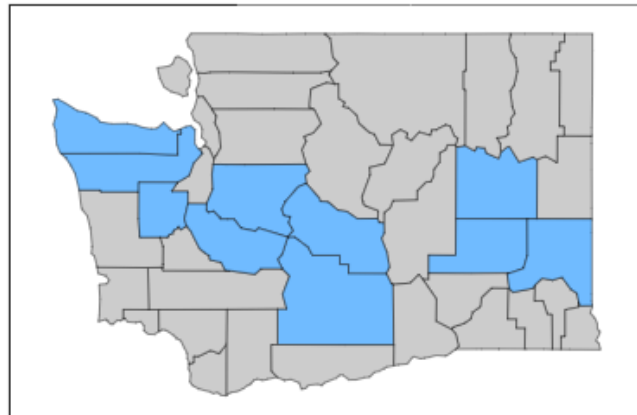
**OOPM : \$8050**

**Primary Care Visit : \$50 Copay after deductible**

**Specialist Visit : \$100 Copay after deductible**

**Urgent Care : \$75 Copay after deductible**

**Generic Drugs : \$30 Copay after deductible**



**10 Counties:** Adams, Clallam, Jefferson, King, Kittitas, Lincoln, Mason, Pierce, Whitman, Yakima

# United Healthcare of Oregon, Inc.

## Metal Level : Silver

**Plan Name : UHC Silver Copay Focus**

Rate change from 2024 : 24.5%

**Plan Type : EPO**

**Premium Range :**

**Low : \$ 547 ( Rating Area 9 )**

**High : \$ 629 ( Rating Area 2 )**

**Deductible : \$0 Medical/ \$1,500 Drug**

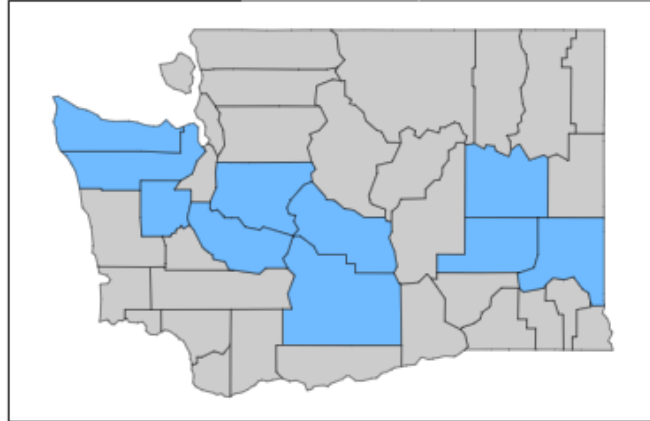
**OOPM : \$7850**

**Primary Care Visit : \$20 copay**

**Specialist Visit : \$50 copay**

**Urgent Care : \$75 copay**

**Generic Drugs : \$25 copay**



**10 Counties:** Adams, Clallam, Jefferson, King, Kittitas, Lincoln, Mason, Pierce, Whitman, Yakima

## Metal Level : Gold

**Plan Name : UHC Gold Advantage**

Rate change from 2024 : 24.9%

**Plan Type : EPO**

**Premium Range :**

**Low : \$ 627 ( Rating Area 9 )**

**High : \$ 720 ( Rating Area 2 )**

**Deductible : \$500**

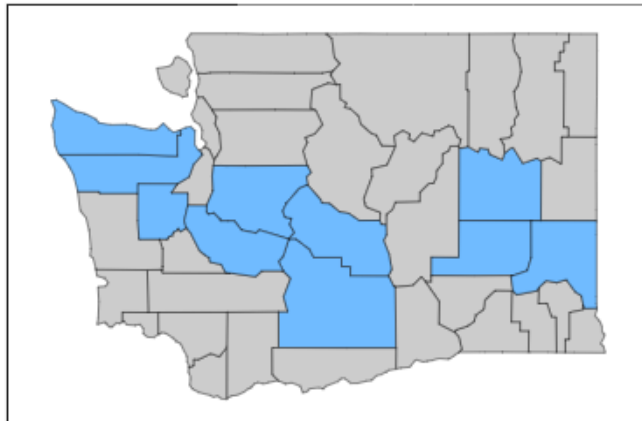
**OOPM : \$7500**

**Primary Care Visit : \$10 copay**

**Specialist Visit : \$40 copay**

**Urgent Care : \$50 copay**

**Generic Drugs : \$3 copay**



**10 Counties:** Adams, Clallam, Jefferson, King, Kittitas, Lincoln, Mason, Pierce, Whitman, Yakima

# Companion Life Dental

**Plan Name : WA Individual Advantage PPO**

**Level Coverage : High**

**Rate change from 2024 : 7%**

**Plan Type : PPO**

**Offering: Adult and Child**

**Deductible: \$85 per person | \$255 per group**

**MOOP : \$425 per person | \$850 per group**

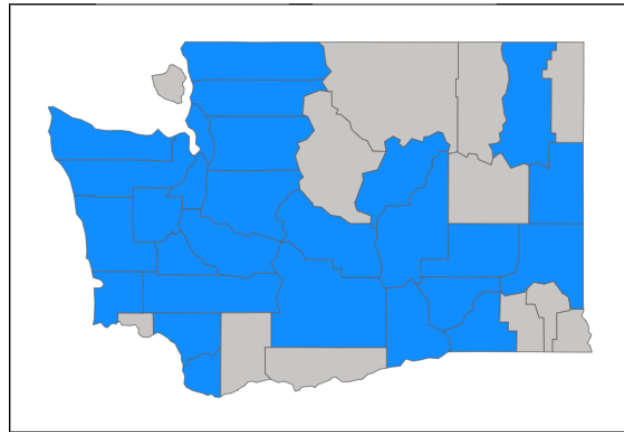
**Child Basic Dental Care : 20% Coinsurance**

**Adult Basic Dental Care : 20% Coinsurance**

**Monthly Premium**

**Adult : \$17**

**Child : \$33**



**27 Counties:**

Adams, Benton, Clallam, Clark, Cowlitz, Douglas, Franklin, Grant, Grays Harbor, Island, Jefferson, King, Kitsap, Kittitas, Lewis, Mason, Pacific, Pierce, Skagit, Snohomish, Spokane, Stevens, Thurston, Walla Walla, Whatcom, Whitman, Yakima

**Plan Name : WA Individual Premier PPO**

**Level Coverage : High**

**Rate change from 2024 : 7%**

**Plan Type : PPO**

**Offering: Adult and Child**

**Deductible: \$75 per person | \$225 per group**

**MOOP : \$425 per person | \$850 per group**

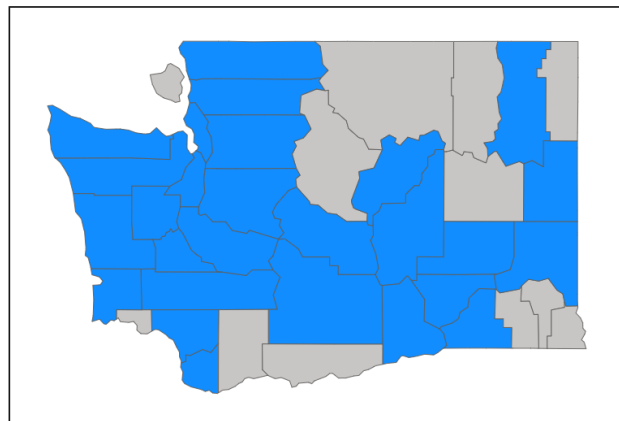
**Child Basic Dental Care : 50% Coinsurance**

**Adult Basic Dental Care : 50% Coinsurance**

**Monthly Premium**

**Adult : \$43**

**Child : \$58**



**27 Counties:**

Adams, Benton, Clallam, Clark, Cowlitz, Douglas, Franklin, Grant, Grays Harbor, Island, Jefferson, King, Kitsap, Kittitas, Lewis, Mason, Pacific, Pierce, Skagit, Snohomish, Spokane, Stevens, Thurston, Walla Walla, Whatcom, Whitman, Yakima

# Delta Dental

**Plan Name : Delta Dental Individual and Family - Washington Family Plan**

**Level Coverage : High**

**Rate change from 2024 : 5%**

**Plan Type : PPO**

**Offering: Adult and Child**

**Deductible: \$85 (Individual)**

**MOOP : \$350 per person | \$700 per group**

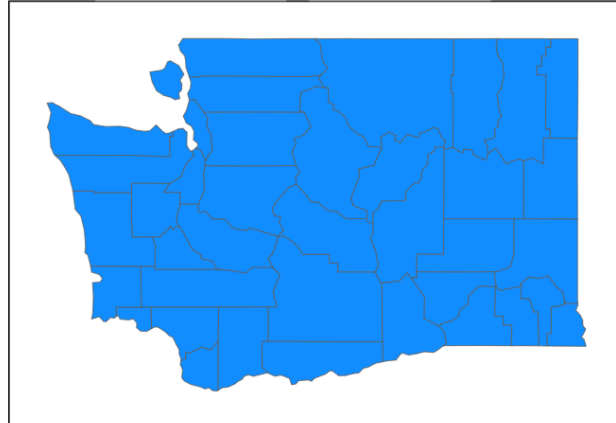
**Child Basic Dental Care : 30% Coinsurance**

**Adult Basic Dental Care : 50% Coinsurance**

**39 Counties: All Counties**

**Monthly Premium**

**Adult : \$38      Child : \$52**



**Plan Name : Delta Dental Individual - Washington Kids Plan**

**Level Coverage : High**

**Rate change from 2024 : 3.1%**

**Plan Type : PPO**

**Offering: Adult and Child**

**Deductible: \$85 (Individual)**

**MOOP : \$350 per person | \$700 per group**

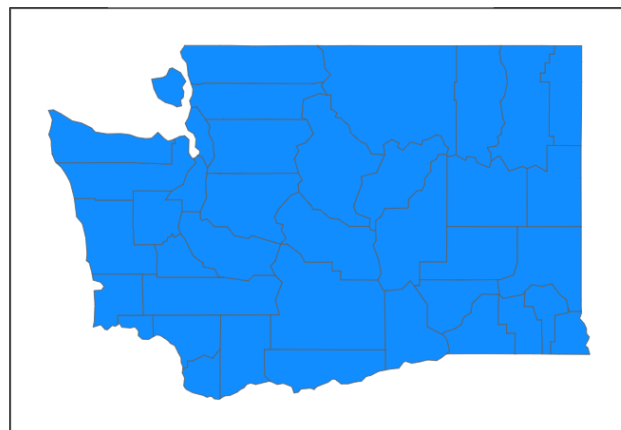
**Child Basic Dental Care : 30% Coinsurance**

**Child Major Dental Care : 50% Coinsurance**

**39 Counties: All Counties**

**Monthly Premium**

**Child : \$51**



# Dentegra Insurance Company

**Plan Name : Dentegra Dental PPO Family Basic Plan**

**Plan Type : PPO**

**Rate change from 2024 : -5%**

**Offering: Adult and Child**

**Deductible: \$75 for Child | \$50 for Adult**

**Annual Benefit Limit: \$1000 for Adult**

**MOOP : \$425 for 1 child | \$850 for 2+ children**

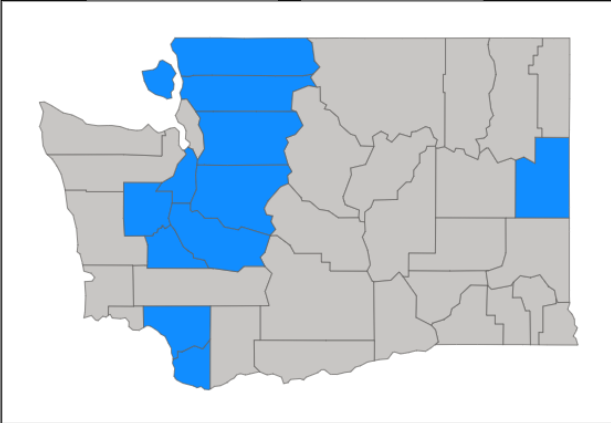
**Child Basic Dental Care : 50% Coinsurance**

**Adult Basic Dental Care : 50% Coinsurance**

**Monthly Premium**

**Adult : \$18**

**Child : \$22**



**12 Counties:** Clark, Cowlitz, King, Kitsap, Mason, Pierce, San Juan, Skagit, Snohomish, Spokane, Thurston, Whatcom

# Kaiser Foundation Health Plan of the Northwest

**Plan Name : KP WA Family Dental - \$1000/\$50 Ded**

**Plan Type : EPO**

**Rate change from 2024 : 2%**

**Offering: Adult and Child**

**Deductible: \$50 for Child | \$50 for Adult**

**Annual Benefit Limit: \$1000 for Adult**

**MOOP : \$425 for 1 child | \$850 for 2+ children**

**Child Basic Dental Care : 20% Coinsurance**

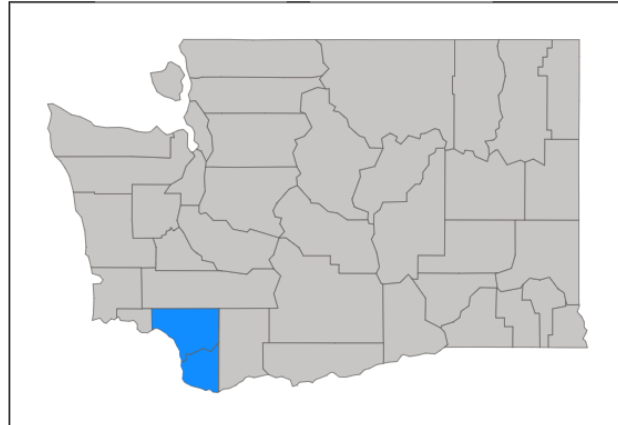
**Adult Basic Dental Care : 20% Coinsurance**

**2 Counties: Clark, Cowlitz**

**Monthly Premium**

**Adult : \$42**

**Child : \$42**



**Plan Name : KP WA Family Dental - \$2000/\$100 Ded**

**Plan Type : EPO**

**Rate change from 2024 : 2%**

**Offering: Adult and Child**

**Deductible: \$100 for Child | \$100 for Adult**

**Annual Benefit Limit: \$2000 for Adult**

**MOOP : \$425 for 1 child | \$850 for 2+ children**

**Child Basic Dental Care : 50% Coinsurance**

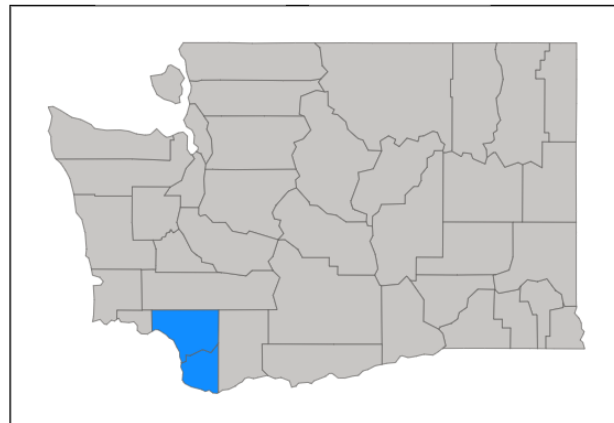
**Adult Basic Dental Care : 50% Coinsurance**

**2 Counties: Clark, Cowlitz**

**Monthly Premium**

**Adult : \$40**

**Child : \$33**



# LifeWise Health Plan of Washington

**Plan Name : LifeWise Family Dental Plan**

**Plan Type : PPO**

**Rate change from 2024 : 2%**

**Offering: Adult and Child**

**Deductible: \$65 for Child | \$0 for Adult**

**Annual Benefit Limit: \$1000 for Adult**

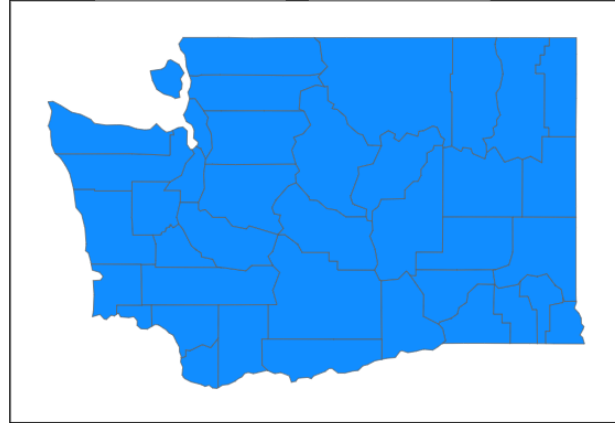
**MOOP : \$425 for 1 child | \$850 for 2+ children**

**Child Basic Dental Care : 20% Coinsurance**

**Adult Basic Dental Care : 40% Coinsurance**

**39 Counties: All Counties**

**Monthly Premium**  
**Adult : \$34      Child : \$38**



**Plan Name : LifeWise Individual Pediatric Dental Plan**

**Plan Type : PPO**

**Rate change from 2024 : 15%**

**Offering: Child Only**

**Deductible: \$65 for Child**

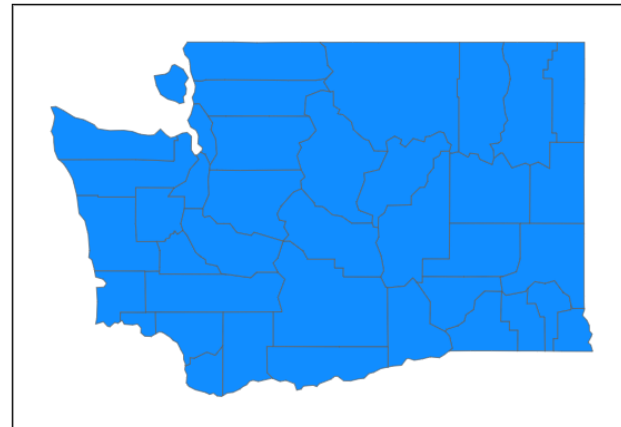
**MOOP : \$425 for 1 child | \$850 for 2+ children**

**Child Basic Dental Care : 20% Coinsurance**

**Child Major Dental Care : 50% Coinsurance**

**39 Counties: All Counties**

**Monthly Premium**  
**Child : \$37**



\*All Cascade and Cascade Select Bronze and Silver plans are eligible for two primary visits at \$1 copay, after which stated cost-sharing applies.