2024 Qualified Health and Dental Plans

January 1, 2024



SUMMARY OF EXCHANGE INDIVIDUAL MARKET

OVERVIEW

12 Issuers

82 Individual QHPs

<u>Gold</u>

12 Issuers

25 Plans

Silver

12 Issuers

24 Plans

Bronze

12 Issuers

32 Plans

Catastrophic

1 Issue

1 Plans

Cascade Care

11 Issuers

36 Plans

Cascade Care Select

3 Issuers

9 Plans

SUMMARY OF EXCHANGE DENTAL MARKET

Family Dental

6 Issuers 2 Low

9 Individual QDPs 7 High

Pediatric Dental

3 Issuers 0 Low 3 Individual QDPs 3 High

RATING AREAS AND RATE INFORMATION

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

High: \$ 504 (Rating Area 2)

Deductible: \$6000

OOPM: \$9200

Primary Care Visit: \$50 copay

Specialist Visit: \$100 Copay after deductible

copay

Urgent Care: \$100 copay

Generic Drugs: \$32 copay

Benton, Clark, Columbia, Franklin, King, Kitsap, Klickitat, Pierce, Skagit, Snohomish, Spokane, Thurston, Walla Walla, Yakima

14 Counties:

Metal Level : Silver

Plan Name: BridgeSpan Cascade Silver

High: \$ 636 (Rating Area 2)

Deductible: \$2500

OOPM: \$9200

Primary Care Visit: \$30 copay

Specialist Visit: \$65 copay

Urgent Care: \$65 copay

Generic Drugs: \$25 copay

Benton, Clark, Columbia, Franklin, King, Kitsap, Klickitat, Pierce, Skagit,

Snohomish, Spokane, Thurston, Walla Walla, Yakima

14 Counties:

BridgeSpan Health Company

Plan Name: BridgeSpan Cascade Gold

Low: \$ 702 (Rating Area 4)

Metal Level: Gold

High: \$804 (Rating Area 2)

OOPM: \$6100

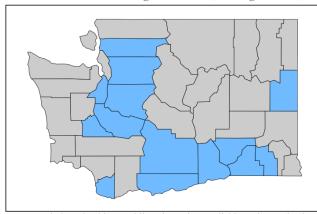
Deductible: \$600

Primary Care Visit: \$15 copay

Specialist Visit: \$40 copay

Urgent Care: \$35 copay

Generic Drugs: \$10 copay



Benton, Clark, Columbia, Franklin, King, Kitsap, Klickitat, Pierce, Skagit, Snohomish, Spokane, Thurston, Walla Walla, Yakima

14 Counties:

Plan Name: Bronze Essential 8500

Plan Type : EPO

Deductible: \$8500

OOPM: \$9450

Primary Care Visit: \$60 / 10% Coinsurance

after deductible

Specialist Visit: \$60 / 10% Coinsurance after

deductible

Urgent Care: \$60 / 10% Coinsurance after

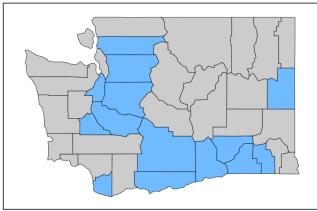
deductible

Generic Drugs: \$20 copay

Metal Level: Bronze

Premium Range: Low: \$416 (Rating Area 4)

High: \$ 476 (Rating Area 2)



Benton, Clark, Columbia, Franklin, King, Kitsap, Klickitat, Pierce, Skagit, Snohomish, Spokane, Thurston, Walla Walla, Yakima

14 Counties:

Community Health Plan of Washington

Metal Level: Bronze

Plan Name: Community Health Plan of Washington Cascade Select Bronze

Low: \$ 284 (Rating Area 5) Plan Type : EPO Premium Range:

High: \$ 319 (Rating Area 2) Deductible: \$6000

OOPM: \$9200

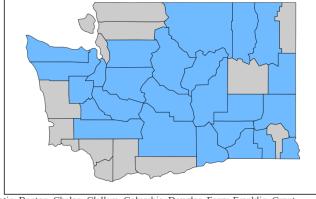
Primary Care Visit: \$50 copay

Specialist Visit: \$100 Copay after deductible

copay

Urgent Care: \$100 copay

Generic Drugs: \$32 copay



Adams, Asotin, Benton, Chelan, Clallam, Columbia, Douglas, Ferry, Franklin, Grant, 25 Counties: Jefferson, King, Kitsap, Kittitas, Lewis, Mason, Okanogan, Pierce, Snohomish, Spokane, Stevens, Thurston, Walla Walla, Whitman, Yakima

Metal Level: Silver

Plan Name: Community Health Plan of Washington Cascade Select Silver

Low: \$ 379 (**Rating Area** 5) Plan Type: EPO Premium Range: High: \$425 (Rating Area 2)

Deductible: \$2500

OOPM: \$9200

Primary Care Visit: \$30 copay

Specialist Visit: \$65 copay

Urgent Care: \$65 copay

Generic Drugs: \$25 copay

Adams, Asotin, Benton, Chelan, Clallam, Columbia, Douglas, Ferry, Franklin, Grant, 25 Counties: Jefferson, King, Kitsap, Kittitas, Lewis, Mason, Okanogan, Pierce, Snohomish, Spokane, Stevens, Thurston, Walla Walla, Whitman, Yakima

Community Health Plan of Washington

Metal Level: Gold

Plan Name: Community Health Plan of Washington Cascade Select Gold

Low: \$410 (Rating Area 5) Plan Type: EPO Premium Range:

High: \$ 460 (Rating Area 2) Deductible: \$600

OOPM: \$6100

Primary Care Visit: \$15 copay

Specialist Visit: \$40 copay

Urgent Care: \$35 copay

Generic Drugs: \$10 copay

Adams, Asotin, Benton, Chelan, Clallam, Columbia, Douglas, Ferry, Franklin, Grant, 25 Counties: Jefferson, King, Kitsap, Kittitas, Lewis, Mason, Okanogan, Pierce, Snohomish, Spokane, Stevens, Thurston, Walla Walla, Whitman, Yakima

Metal Level: Bronze

Metal Level: Silver

Plan Name: Ambetter Cascade Bronze

Low: \$ 274 (Rating Area 3) Plan Type: HMO **Premium Range:**

High: \$ 334 (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

33 Counties:

Harbor, Jefferson, King, Kitsap, Kittitas, Klickitat, Lewis, Lincoln, Mason, Okanogan, Pacific, Pend Oreille,

Adams, Asotin, Benton, Chelan, Clallam, Columbia, Douglas, Ferry, Franklin, Garfield, Grant, Grays Pierce, Skamania, Snohomish, Spokane, Stevens, Thurston, Wahkiakum, Walla Walla, Whitman, Yakima

Plan Name: Ambetter Cascade Silver

Low: \$ 375 (Rating Area 3) Plan Type: HMO Premium Range:

High: \$457 (Rating Area 7)

Deductible: \$2500

Primary Care Visit: \$30 copay

Specialist Visit: \$65 copay

Urgent Care: \$65 copay

OOPM: \$9200

Generic Drugs: \$25 copay

Adams, Asotin, Benton, Chelan, Clallam, Columbia, Douglas, Ferry, Franklin, Garfield, Grant, Grays 33 Counties: Harbor, Jefferson, King, Kitsap, Kittitas, Klickitat, Lewis, Lincoln, Mason, Okanogan, Pacific, Pend Oreille, Pierce, Skamania, Snohomish, Spokane, Stevens, Thurston, Wahkiakum, Walla Walla, Whitman, Yakima

Metal Level : Gold

Plan Name: Ambetter Cascade Gold

High: \$ 477 (Rating Area 7)

Deductible: \$600

OOPM: \$6100

Primary Care Visit: \$15 copay

Specialist Visit: \$40 copay

Urgent Care: \$35 copay

Generic Drugs: \$10 copay

33 Counties:

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

Metal Level : Bronze

Plan Name: Ambetter Cascade Select Bronze

Plan Type: HMO

Premium Range:

Low: \$ 260 (Rating Area 3)

High: \$ 317 (Rating Area 7)

Deductible: \$6000

OOPM: \$9200

Primary Care Visit: \$50 copay

Specialist Visit: \$100 Copay after deductible

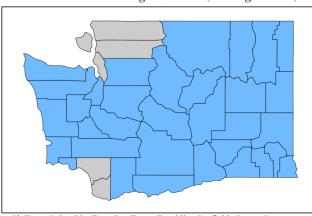
copay

Urgent Care: \$100 copay

Generic Drugs: \$32 copay

Adams, Asotin, Benton, Clallam, Franklin, Garfield, Jefferson, King, Klickitat, Lewis, Okanogan, Pacific, Skamania, Snohomish, Spokane, Stevens, Thurston, Wahkiakum, Walla Walla

19 Counties:



Metal Level : Silver

Plan Name: Ambetter Cascade Select Silver

Plan Type: HMO

Premium Range:

Low: \$ 356 (Rating Area 3)

High: \$ 434 (Rating Area 7)

Deductible: \$2500

OOPM: \$9200

Primary Care Visit: \$30 copay

Specialist Visit: \$65 copay

Urgent Care: \$65 copay

Generic Drugs: \$25 copay

Adams, Asotin, Benton, Clallam, Franklin, Garfield, Jefferson, King, Klickitat, Lewis, Okanogan, Pacific, Skamania, Snohomish, Spokane,

Stevens, Thurston, Wahkiakum, Walla Walla

Plan Name: Ambetter Cascade Select Gold

Premium Range: Low: \$ 371 (Rating Area 3)

High: \$453 (Rating Area 7)

Metal Level: Gold

Deductible: \$600

Plan Type: HMO

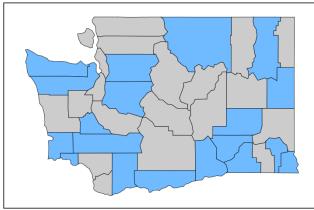
OOPM: \$6100

Primary Care Visit: \$15 copay

Specialist Visit: \$40 copay

Urgent Care: \$35 copay

Generic Drugs: \$10 copay



Adams, Asotin, Benton, Clallam, Franklin, Garfield, Jefferson, King, Klickitat, Lewis, Okanogan, Pacific, Skamania, Snohomish, Spokane, Stevens, Thurston, Wahkiakum, Walla Walla

19 Counties:

Metal Level: Bronze

Plan Name: Ambetter Essential Care 1

Plan Type : HMO

Deductible: \$9000

OOPM: \$9000

Primary Care Visit: No Charge after deductible

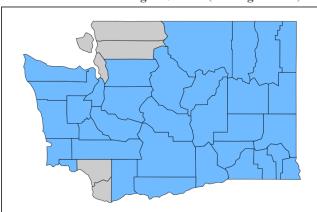
Specialist Visit: No Charge after deductible

Urgent Care: \$60 copay

Generic Drugs: \$3 copay

Low: \$ 254 (Rating Area 3)

Premium Range:
High: \$310 (Rating Area 7)



Adams, Asotin, Benton, Chelan, Clallam, Columbia, Douglas, Ferry, Franklin, Garfield, Grant, Grays

33 Counties: Harbor, Jefferson, King, Kitsap, Kittias, Klickitat, Lewis, Lincoln, Mason, Okanogan, Pacific, Pend Oreille, Pierce, Skamania, Snohomish, Spokane, Stevens, Thurston, Wahkiakum, Walla Walla, Whitman, Yakima

Metal Level: Bronze

Metal Level: Silver

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

Low: \$316 (Rating Area 3) Plan Type: HMO Premium Range:

High: \$ 385 (Rating Area 7) Deductible: \$0 Medical/\$3,800 Drug

OOPM: \$9250

Primary Care Visit: \$45 copay

Specialist Visit: \$115 copay

Urgent Care: \$60 copay

Generic Drugs: \$3 copay

Adams, Asotin, Benton, Chelan, Clallam, Columbia, Douglas, Ferry, Franklin, Garfield, Grant, Grays

33 Counties: Harbor, Jefferson, King, Kitsap, Kittitas, Klickitat, Lewis, Lincoln, Mason, Okanogan, Pacific, Pend Oreille, Pierce, Skamania, Snohomish, Spokane, Stevens, Thurston, Wahkiakum, Walla Walla, Whitman, Yakima

Plan Name: Ambetter Balanced Care 4

Low: \$ 356 (Rating Area 3) Plan Type: HMO

Premium Range: High: \$435 (Rating Area 7)

OOPM: \$8150

Deductible: \$8150

Primary Care Visit: \$30 copay

Specialist Visit: \$60 copay

Urgent Care: \$60 copay

Generic Drugs: \$3 copay

Adams, Asotin, Benton, Chelan, Clallam, Columbia, Douglas, Ferry, Franklin, Garfield, Grant, Grays Harbor, Jefferson, King, Kitsap, Kittitas, Klickitat, Lewis, Lincoln, Mason, Okanogan, Pacific, Pend Oreille, 33 Counties: Pierce, Skamania, Snohomish, Spokane, Stevens, Thurston, Wahkiakum, Walla Walla, Whitman, Yakima

Plan Name: Ambetter Clear Gold

Low: \$ 347 Plan Type: HMO (Rating Area 3) Premium Range:

High: \$ 424 (Rating Area 7) Deductible: \$900

Metal Level: Gold

OOPM: \$8700

Primary Care Visit: \$25 copay

Specialist Visit: \$60 copay

Urgent Care: \$60 copay

Generic Drugs: \$3 copay

Adams, Asotin, Benton, Chelan, Clallam, Columbia, Douglas, Ferry, Franklin, Garfield, Grant, Grays 33 Counties: Harbor, Jefferson, King, Kitsap, Kittitas, Klickitat, Lewis, Lincoln, Mason, Okanogan, Pacific, Pend Oreille, Pierce, Skamania, Snohomish, Spokane, Stevens, Thurston, Wahkiakum, Walla Walla, Whitman, Yakima

Metal Level: Gold

Plan Name: Ambetter Secure Care 5

Low: \$ 368 (Rating Area 3) Plan Type: HMO **Premium Range:**

High: \$ 449 (Rating Area 7) Deductible: \$1450

OOPM: \$7500

Primary Care Visit: \$15 copay

Specialist Visit: \$35 copay

Urgent Care: \$35 copay

Generic Drugs: \$3 copay

Adams, Asotin, Benton, Chelan, Clallam, Columbia, Douglas, Ferry, Franklin, Garfield, Grant, Grays

33 Counties: Harbor, Jefferson, King, Kitsap, Kittias, Klickitat, Lewis, Lincoln, Mason, Okanogan, Pacific, Pend Oreille, Pierce, Skamania, Snohomish, Spokane, Stevens, Thurston, Wahkiakum, Walla Walla, Whitman, Yakima

Plan Name: KP Cascade Bronze

Plan Type: EPO

Deductible: \$6000

OOPM: \$9200

Primary Care Visit: \$50 copay

Specialist Visit: \$100 Copay after deductible

copay

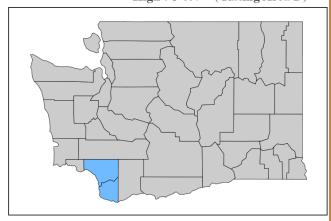
Urgent Care: \$100 copay

Generic Drugs: \$32 copay

Metal Level : Bronze

Low: \$388 (Rating Area 3)

Premium Range:
High: \$ 407 (Rating Area 2)



2 Counties: Clark, Cowlitz

Plan Name: KP Cascade Silver

Plan Type: EPO

Deductible: \$2500

OOPM: \$9200

Primary Care Visit: \$30 copay

Specialist Visit: \$65 copay

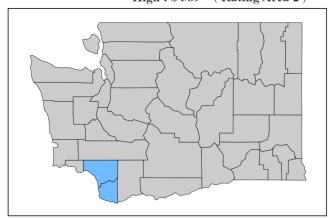
Urgent Care: \$65 copay

Generic Drugs: \$25 copay

Metal Level : Silver

Premium Range: Low: \$ 561 (Rating Area 3)

High: \$ 589 (Rating Area 2)



2 Counties: Clark, Cowlitz

Plan Name: KP Cascade Gold

Plan Type: EPO Premium Range:

Deductible: \$600

OOPM: \$6100

Primary Care Visit: \$15 copay

Specialist Visit: \$40 copay

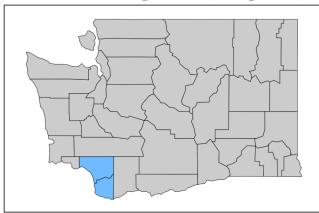
Urgent Care: \$35 copay

Generic Drugs: \$10 copay

Metal Level: Gold

Low: \$ 598 (Rating Area 3)

> High: \$ 627 (Rating Area 2)



Clark, Cowlitz 2 Counties:

Metal Level: Bronze

Plan Name: KP WA Bronze 7100/0% HSA

Plan Type: EPO

Deductible: \$7100

OOPM: \$7100

Primary Care Visit: \$0 Copay after deductible

copay

Specialist Visit: \$0 Copay after deductible

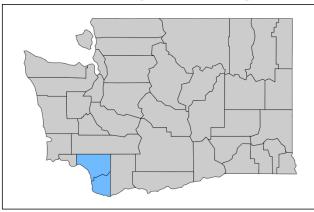
copay

Urgent Care: \$0 Copay after deductible copay

Generic Drugs: \$0 Copay after deductible copay

Low: \$ 390 (Rating Area 3) Premium Range:

High: \$410 (Rating Area 2)



2 Counties:

Clark, Cowlitz

Plan Name: KP WA Bronze 9100/75

Deductible: \$9100

OOPM: \$9100

Primary Care Visit: \$75 copay

Specialist Visit: \$0 Copay after deductible

copay

Urgent Care: \$0 Copay after deductible copay

Generic Drugs: \$30 copay

2 Counties: Clark, Cowlitz

Metal Level: Bronze

High: \$395 (Rating Area 2)

Plan Name: KP WA Silver 750/35

Plan Type : EPO

Deductible: \$750

OOPM: \$9300

Primary Care Visit: \$35 copay

Specialist Visit: \$60 copay

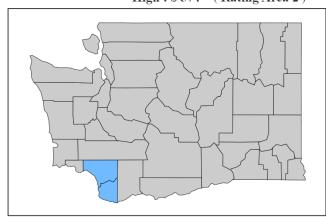
Urgent Care: \$60 copay

Generic Drugs: \$25 copay

Metal Level : Silver

Premium Range : Low: \$ 547 (Rating Area 3)

High: \$574 (Rating Area 2)



2 Counties: Clark, Cowlitz

Plan Name: KP WA Gold 0/15

Plan Type : EPO Premium Range :

Deductible: \$0

OOPM: \$8200

Primary Care Visit: \$15 copay

Specialist Visit: \$50 copay

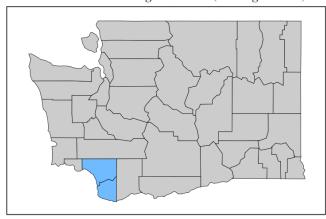
Urgent Care: \$40 copay

Generic Drugs: \$10 copay

Metal Level : Gold

Low: \$ 563 (Rating Area 3)

High: \$ 591 (Rating Area 2)



2 Counties: Clark, Cowlitz

Plan Name: KP WA Gold 1750/20

Plan Type : EPO

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

OOPM: \$8500

Primary Care Visit: \$20 copay

Specialist Visit: \$50 copay

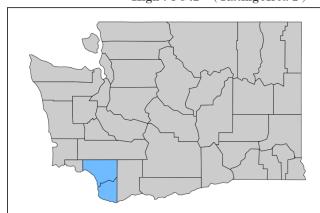
Urgent Care: \$40 copay

Generic Drugs: \$10 copay

Metal Level: Gold

Premium Range: Low: \$517 (Rating Area 3)

High: \$ 542 (Rating Area 2)



2 Counties: Clark, Cowlitz

Metal Level: Bronze

Plan Name: Kaiser Permanente Cascade Bronze

Plan Type : HMO Low: \$ 384 (Rating Area 1) Premium Range:

High: \$ 442 (Rating Area 2) Deductible: \$6000

Specialist Visit: \$100 Copay after deductible

copay

Urgent Care: \$100 copay

Primary Care Visit: \$50 copay

OOPM: \$9200

Generic Drugs: \$32 copay

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

Plan Name: Kaiser Permanente Cascade Silver

Plan Type: HMO

Deductible: \$2500

OOPM: \$9200

Primary Care Visit: \$30 copay

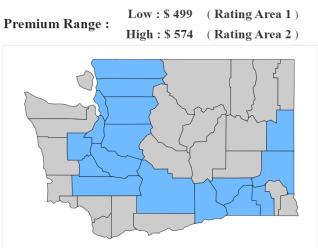
Specialist Visit: \$65 copay

Urgent Care: \$65 copay

Generic Drugs: \$25 copay

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

17 Counties:



Metal Level: Silver

Plan Name: Kaiser Permanente Cascade Gold

Plan Type: HMO

Premium Range:

Low: \$ 525 (Rating Area 1)

High: \$ 603 (Rating Area 2)

Deductible: \$600

OOPM: \$6100

Primary Care Visit: \$15 copay

Specialist Visit: \$40 copay

Urgent Care: \$35 copay

Generic Drugs: \$10 copay

Plan Name: Flex Bronze

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

Yakima

Metal Level : Bronze

Metal Level: Gold

Plan Type: HMO Low: \$ 379 (Rating Area 1)

Premium Range:

High: \$ 436 (Rating Area 2)

Deductible: \$6000

OOPM: \$9200

Primary Care Visit: \$40 / 20% Coinsurance after deductible

Specialist Visit: 20% Coinsurance after

deductible

Urgent Care: 20% Coinsurance after deductible

Generic Drugs: \$25 copay

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

Plan Name: Flex Silver

Plan Type : HMO

Deductible: \$2020

OOPM: \$9200

Primary Care Visit: \$40 Copay after deductible

copay

Specialist Visit: \$85 Copay after deductible

copay

Urgent Care: \$85 Copay after deductible copay

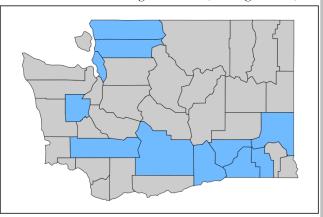
Generic Drugs: \$10 copay

Metal Level : Silver

Low: \$545 (Rating Area 5)

Premium Range:

High: \$551 (Rating Area 2)



Benton, Columbia, Franklin, Island, Lewis, Mason, Skagit, Walla Walla, Whatcom, Whitman, Yakima

11 Counties:

Plan Name: Flex Gold

Plan Type: HMO

Deductible: \$1150

OOPM: \$7900

Primary Care Visit: \$20 Copay after deductible

copay

Specialist Visit: \$45 Copay after deductible

copay

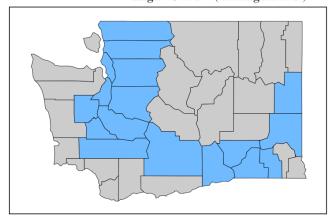
Urgent Care: \$45 Copay after deductible copay

Generic Drugs: \$10 copay

Metal Level : Gold

Premium Range : Low : \$ 497 (Rating Area 1)

High: \$ 572 (Rating Area 2)



17 Counties: Benton, Columbia

Benton, Columbia, Franklin, Island, King, Kitsap, Lewis, Mason, Pierce, Skagit, Snohomish, Spokane, Thurston, Walla Walla, Whatcom, Whitman,

Plan Name: Bronze HSA

Plan Type : HMO

Deductible: \$6050

OOPM: \$7250

Primary Care Visit: 40% Coinsurance after

deductible

Specialist Visit: 40% Coinsurance after

deductible

Urgent Care: 40% Coinsurance after deductible

Generic Drugs: 40% Coinsurance after

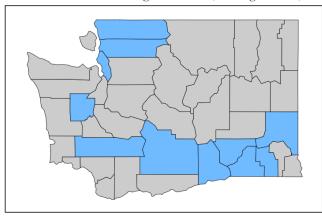
deductible

11 Counties:

Metal Level: Bronze

Premium Range : Low: \$ 424 (Rating Area 5)

High: \$429 (Rating Area 2)



Benton, Columbia, Franklin, Island, Lewis, Mason, Skagit, Walla Walla, Whatcom, Whitman, Yakima

Plan Name: Virtual Plus Bronze

Plan Type : HMO

Deductible: \$9450

OOPM: \$9450

Primary Care Visit: \$34.46 copay

Specialist Visit: \$75.80 copay

Urgent Care: \$110 copay

Generic Drugs: \$35 copay

Metal Level: Bronze

Premium Range: Low: \$ 362 (Rating Area 1)

High: \$417 (Rating Area 2)



6 Counties: King, Kitsap, Pierce, Snohomish, Spokane, Thurston

Plan Name: Virtual Plus Silver

Plan Type: HMO

Deductible: \$3000

OOPM: \$9175

Primary Care Visit: \$13.78 copay

Specialist Visit: \$34.46 copay

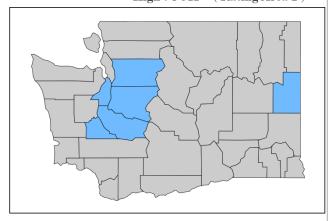
Urgent Care: \$50 copay

Generic Drugs: \$25 copay

Metal Level : Silver

Premium Range: Low: \$445 (Rating Area 1)

High: \$511 (Rating Area 2)



King, Kitsap, Pierce, Snohomish, Spokane, Thurston

6 Counties:

Metal Level: Catastrophic

Plan Name: Basics Plus Catastrophic

Plan Type : HMO

Deductible: \$9450

OOPM: \$9450

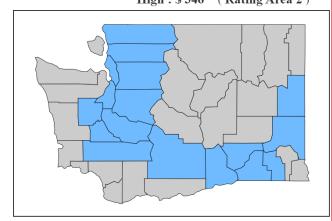
Primary Care Visit: No Charge after deductible

Specialist Visit: No Charge after deductible

Urgent Care: No Charge after deductible

Generic Drugs: No Charge after deductible

Premium Range: Low: \$301 (Rating Area 1)
High: \$346 (Rating Area 2)



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: LifeWise Cascade Bronze

Plan Type: EPO

Deductible: \$6000

OOPM: \$9200

Primary Care Visit: \$50 copay

Specialist Visit: \$100 Copay after deductible

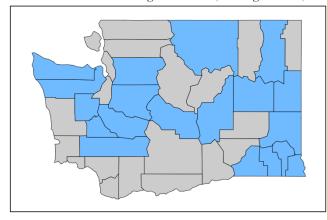
copay

Urgent Care: \$100 copay

Generic Drugs: \$32 copay

Low: \$382 (Rating Area 1) Premium Range:

High: \$ 447 (Rating Area 2)



19 Counties: Asotin, Clallam, Columbia, Garfield, Grant, Jefferson, King, Kittitas, Lewis, Lincoln, Mason, Okanogan, Pierce, Snohomish, Spokane, Stevens, Thurston, Walla Walla, Whitman

Plan Name: LifeWise Cascade Silver

Plan Type: EPO

Deductible: \$2500

OOPM: \$9200

Primary Care Visit: \$30 copay

Specialist Visit: \$65 copay

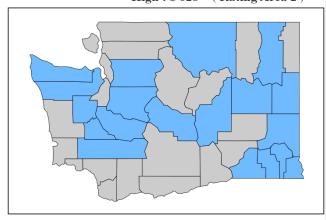
Urgent Care: \$65 copay

Generic Drugs: \$25 copay

Metal Level : Silver

Low: \$ 537 (Rating Area 1) Premium Range:

High: \$ 628 (Rating Area 2)



Asotin, Clallam, Columbia, Garfield, Grant, Jefferson, King, Kittitas, Lewis, Lincoln, Mason, Okanogan, Pierce, Snohomish, Spokane, Stevens, Thurston, Walla Walla, Whitman

Metal Level: Gold

Plan Name: LifeWise Cascade Gold

Plan Type: EPO

Deductible: \$600

OOPM: \$6100

Primary Care Visit: \$15 copay

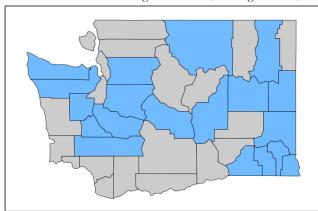
Specialist Visit: \$40 copay

Urgent Care: \$35 copay

Generic Drugs: \$10 copay

Low: \$ 655 (Rating Area 1) Premium Range:

High: \$ 766 (Rating Area 2)



19 Counties:

Asotin, Clallam, Columbia, Garfield, Grant, Jefferson, King, Kittitas, Lewis, Lincoln, Mason, Okanogan, Pierce, Snohomish, Spokane, Stevens, Thurston, Walla Walla, Whitman

Metal Level: Bronze

Plan Name: LifeWise Cascade Select Bronze

Plan Type: EPO

Deductible: \$6000

OOPM: \$9200

Primary Care Visit: \$50 copay

Specialist Visit: \$100 Copay after deductible

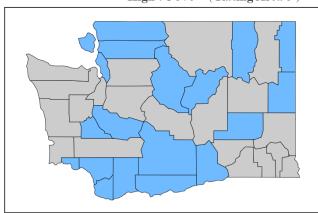
copay

Urgent Care: \$100 copay

Generic Drugs: \$32 copay

Low: \$319 (Rating Area 4)

Premium Range: High: \$ 376 (Rating Area 3)



19 Counties:

Adams, Benton, Chelan, Clark, Cowlitz, Douglas, Ferry, Island, Klickitat, Pend Oreille, Pierce, San Juan, Skagit, Skamania, Spokane, Thurston,

Wahkiakum, Whatcom, Yakima

Plan Name: LifeWise Cascade Select Silver

Plan Type: EPO

Premium Range:

Low: \$ 445 (Rating Area 4)

High: \$ 524 (Rating Area 3)

Deductible: \$2500

OOPM: \$9200

Primary Care Visit: \$30 copay

Specialist Visit: \$65 copay

Urgent Care: \$65 copay

Generic Drugs: \$25 copay

19 Counties: Adams, Benton, Chelan, Clark, Cowlitz, Douglas, Ferry, Island, Klickitat, Pend Oreille, Pierce, San Juan, Skagit, Skamania, Spokane, Thurston,

Metal Level: Silver

Pend Oreille, Pierce, San Juan, Skagit, S Wahkiakum, Whatcom, Yakima

Plan Name: LifeWise Cascade Select Gold

Deductible: \$600

OOPM: \$6100

Primary Care Visit: \$15 copay

Specialist Visit: \$40 copay

Urgent Care: \$35 copay

Generic Drugs: \$10 copay

High: \$ 636

(Rating Area 3)

Metal Level : Gold

19 Counties: Adams, Benton, Chelan, Clark, Cowlitz, Douglas, Ferry, Island, Klickitat, Pend Oreille, Pierce, San Juan, Skagit, Skamania, Spokane, Thurston,

Wahkiakum, Whatcom, Yakima

Plan Name: LifeWise Essential Bronze

Plan Type: EPO

Premium Range:

Low: \$ 373 (Rating Area 1)

High: \$ 441 (Rating Area 3)

Deductible: \$6500

OOPM: \$8900

Specialist Visit: \$110 Copay after deductible

copay

Urgent Care: 35% Coinsurance after deductible

Generic Drugs: \$35 copay

Primary Care Visit: \$50 copay

34 Counties: Adams, Asotin, Benton, Chelan, Clallam, Clark, Columbia, Cowlitz, Douglas, Ferry, Garfield, Grant, Island, Jefferson, King, Kittitas, Klickitat, Lewis, Lincoln, Mason, Okanogan, Pend Oreille, Pierce, San Juan, Skagit,

Skamania, Snohomish, Spokane, Stevens, Thurston, Wahkiakum, Walla Walla, Whatcom, Whitman

Metal Level: Bronze

Plan Name: LifeWise Essential Bronze HSA

Plan Type : EPO

Premium Range : Low : \$ 384 (Rating Area 1)

High: \$ 454 (Rating Area 3)

Deductible: \$6400

OOPM: \$7400

Primary Care Visit: 40% Coinsurance after

deductible

Specialist Visit: 40% Coinsurance after

deductible

Urgent Care: 40% Coinsurance after deductible

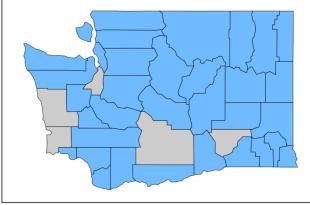
Generic Drugs: 40% Coinsurance after

deductible

34 Counties: Adams, Asotin, Benton, Chelan, Clallam, Clark, Columbia, Cowlitz, Douglas, Ferry, Garfield, Grant, Island, Lafferson, King Kittitas, Klickitat, Lawis, Lincoln, Mason, Okanggan, Pand Orailla, Piarra, San Juan, Skarit

Jefferson, King, Kittitas, Klickitat, Lewis, Lincoln, Mason, Okanogan, Pend Oreille, Pierce, San Juan, Skagit,

Skamania, Snohomish, Spokane, Stevens, Thurston, Wahkiakum, Walla Walla, Whatcom, Whitman



Metal Level: Bronze

Metal Level : Silver

(Rating Area 1)

(Rating Area 1)

(Rating Area 3)

Plan Name: LifeWise Essential Silver Low Deductible

High: \$ 618 (Rating Area 3)

Deductible: \$2945

OOPM: \$8340

Primary Care Visit: \$30 copay

Specialist Visit: \$60 copay

Urgent Care: \$60 copay

Generic Drugs: \$20 copay

34 Counties: Adams, Asotin, Benton, Chelan, Clallam, Clark, Columbia, Cowlitz, Douglas, Ferry, Garfield, Grant, Island, Jefferson, King, Kittitas, Klickitat, Lewis, Lincoln, Mason, Okanogan, Pend Oreille, Pierce, San Juan, Skagit,

Premium Range:

Skamania, Snohomish, Spokane, Stevens, Thurston, Wahkiakum, Walla Walla, Whatcom, Whitman

Plan Name: LifeWise Essential Gold

Plan Type : EPO

Deductible: \$1000

OOPM: \$7300

Primary Care Visit: \$30 copay

Specialist Visit: \$65 copay

Urgent Care: \$55 copay

Generic Drugs: \$10 copay

Metal Level: Gold

Low: \$ 569

High: \$ 674

34 Counties: Adams, Asotin, Benton, Chelan, Clallam, Clark, Columbia, Cowlitz, Douglas, Ferry, Garfield, Grant, Island, Jefferson, King, Kittitas, Klickitat, Lewis, Lincoln, Mason, Okanogan, Pend Oreille, Pierce, San Juan, Skagit,

Skamania, Snohomish, Spokane, Stevens, Thurston, Wahkiakum, Walla Walla, Whatcom, Whitman

Molina Healthcare of Washington, Inc.

Plan Name: Molina Cascade Bronze

Plan Type: HMO Premium Range:

Deductible: \$6000

OOPM: \$9200

Primary Care Visit: \$50 copay

Specialist Visit: \$100 Copay after deductible

copay

Urgent Care: \$100 copay

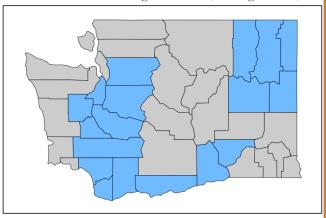
Generic Drugs: \$32 copay

18 Counties:

Metal Level : Bronze

Low: \$356 (Rating Area 6)

High: \$402 (Rating Area 3)



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

Plan Name: Molina Cascade Silver

Plan Type: HMO

Deductible: \$2500

OOPM: \$9200

Primary Care Visit: \$30 copay

Specialist Visit: \$65 copay

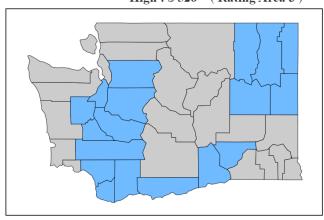
Urgent Care: \$65 copay

Generic Drugs: \$25 copay

Metal Level : Silver

Premium Range : Low: \$ 465 (Rating Area 6)

High: \$ 526 (Rating Area 3)



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

Stevens, Thurston

Molina Healthcare of Washington, Inc.

Plan Name: Molina Cascade Gold

Plan Type: HMO

Deductible: \$600

OOPM: \$6100

Primary Care Visit: \$15 copay

Specialist Visit: \$40 copay

Urgent Care: \$35 copay

Generic Drugs: \$10 copay

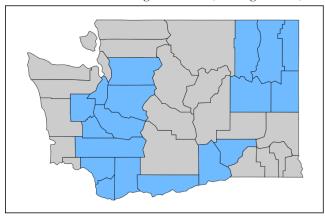
18 Counties:

18 Counties:

Metal Level: Gold

Premium Range: Low: \$495 (Rating Area 6)

High: \$ 560 (Rating Area 3)



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

Plan Name: Constant Care Silver 1

Plan Type: HMO

Deductible: \$0 Medical/\$900 Drug

OOPM: \$7725

Primary Care Visit: \$30 copay

Specialist Visit: \$60 copay

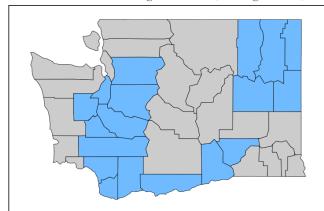
Urgent Care: \$30 copay

Generic Drugs: \$28 copay

Metal Level : Silver

Premium Range: Low: \$ 443 (Rating Area 6)

High: \$500 (Rating Area 3)



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

Metal Level: Bronze

Plan Name: Premera Blue Cross Cascade Bronze

Plan Type : EPO

Deductible: \$6000

OOPM: \$9200

Primary Care Visit: \$50 copay

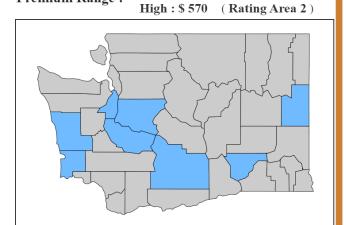
Specialist Visit: \$100 Copay after deductible

copay

Urgent Care: \$100 copay

Generic Drugs: \$32 copay

Premium Range : Low: \$ 496 (Rating Area 4)



Franklin, Grays Harbor, King, Kitsap, Pacific, Pierce, Spokane, Yakima

8 Counties:

Plan Name: Premera Blue Cross Cascade Silver

Plan Type : EPO

Deductible: \$2500

OOPM: \$9200

Primary Care Visit: \$30 copay

Specialist Visit: \$65 copay

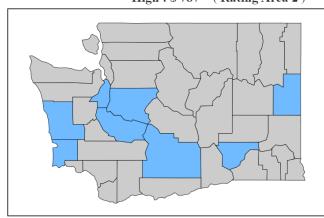
Urgent Care: \$65 copay

Generic Drugs: \$25 copay

Metal Level : Silver

Premium Range: Low: \$ 684 (Rating Area 4)

High: \$ 787 (Rating Area 2)



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

Plan Name: Premera Blue Cross Cascade Gold

Plan Type : EPO

Deductible: \$600

OOPM: \$6100

Primary Care Visit: \$15 copay

Specialist Visit: \$40 copay

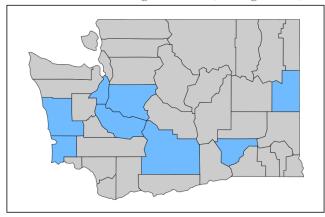
Urgent Care: \$35 copay

Generic Drugs: \$10 copay

Metal Level : Gold

Premium Range: Low: \$870 (Rating Area 4)

High: \$ 1000 (Rating Area 2)



Franklin, Grays Harbor, King, Kitsap, Pacific, Pierce, Spokane, Yakima

8 Counties:

Metal Level: Bronze

Low: \$497 (Rating Area 4)

Plan Name: Premera Blue Cross Preferred Bronze EPO 6650

Plan Type : EPO

Deductible: \$6650

OOPM: \$8475

Primary Care Visit: \$50 copay

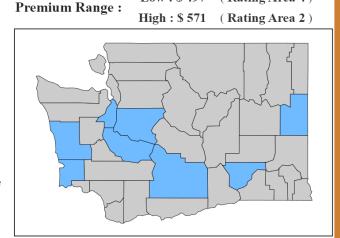
Specialist Visit: \$100 Copay after deductible

copay

Urgent Care: 40% Coinsurance after deductible

Generic Drugs: \$35 copay

8 Counties:



Franklin, Grays Harbor, King, Kitsap, Pacific, Pierce, Spokane, Yakima

Metal Level: Bronze

Plan Name: Premera Blue Cross Preferred Bronze HSA EPO 6400

Plan Type: EPO

Deductible: \$6400

OOPM: \$7200

Primary Care Visit: 40% Coinsurance after

deductible

Specialist Visit: 40% Coinsurance after

deductible

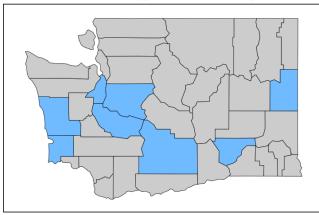
Urgent Care: 40% Coinsurance after deductible

Generic Drugs: 40% Coinsurance after

deductible

8 Counties:

Premium Range: Low: \$ 506 (Rating Area 4)
High: \$ 581 (Rating Area 2)



Franklin, Grays Harbor, King, Kitsap, Pacific, Pierce, Spokane, Yakima

Metal Level : Silver

Plan Name: Premera Blue Cross Preferred Silver EPO 4500

Plan Type: EPO

Deductible: \$4500

OOPM: \$6950

Primary Care Visit: \$25 copay

Specialist Visit: \$65 copay

Urgent Care: \$65 copay

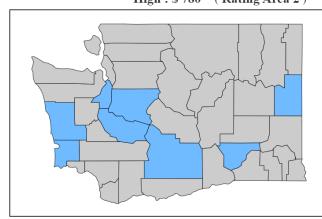
Generic Drugs: \$25 copay

Low · \$ 6

Low: \$ 678 (Rating Area 4)

Premium Range:

High: \$ 780 (Rating Area 2)



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

Metal Level : Gold

Plan Name: Premera Blue Cross Preferred Gold EPO 1500

Plan Type: EPO

Deductible: \$1500

OOPM: \$6800

Primary Care Visit: \$15 copay

Specialist Visit: \$45 copay

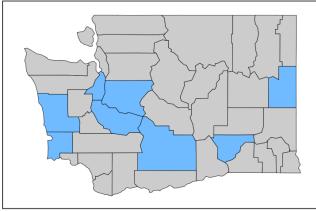
Urgent Care: \$45 copay

Generic Drugs: \$10 copay

Premium Range: Low: \$ 758

High: \$871 (Rating Area 2)

(Rating Area 4)



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

Regence BlueShield

Plan Name: Regence Cascade Bronze

Plan Type: EPO

Deductible: \$6000

OOPM: \$9200

Primary Care Visit: \$50 copay

Specialist Visit: \$100 Copay after deductible

copay

Urgent Care: \$100 copay

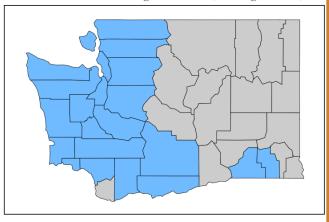
Generic Drugs: \$32 copay

22 Counties:

Metal Level : Bronze

Low: \$407 (Rating Area 1)

Premium Range:
High: \$ 452 (Rating Area 2)



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

Plan Name: Regence Cascade Silver

Plan Type: EPO

Deductible: \$2500

OOPM: \$9200

Primary Care Visit: \$30 copay

Specialist Visit: \$65 copay

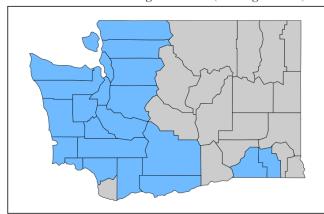
Urgent Care: \$65 copay

Generic Drugs: \$25 copay

Metal Level: Silver

Premium Range: Low: \$513 (Rating Area 1)

High: \$ 570 (Rating Area 2)



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

Plan Name: Regence Cascade Gold

Deductible: \$600

OOPM: \$6100

Primary Care Visit: \$15 copay

Specialist Visit: \$40 copay

Urgent Care: \$35 copay

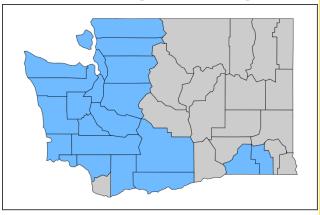
Generic Drugs: \$10 copay

22 Counties:

Metal Level : Gold

Low: \$ 649 (Rating Area 1)

High: \$ 721 (Rating Area 2)



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

Plan Name: Bronze Essential 8500

Plan Type : EPO

Deductible: \$8500

OOPM: \$9450

Primary Care Visit: \$60 / 10% Coinsurance

after deductible

Specialist Visit: \$60 / 10% Coinsurance after

deductible

Urgent Care: \$60 / 10% Coinsurance after

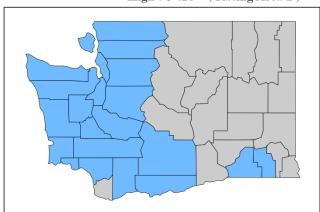
deductible

Generic Drugs: \$20 copay

Low: \$ 385 (Rating Area 1)

Premium Range:
High: \$ 428 (Rating Area 2)

Metal Level: Bronze



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

Plan Name: Gold 2500

Plan Type: EPO

Deductible: \$2500

OOPM: \$9450

Primary Care Visit: \$10 copay

Specialist Visit: \$60 copay

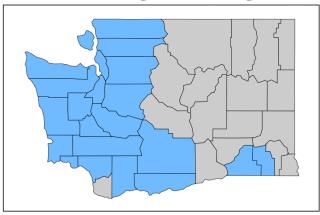
Urgent Care: \$60 copay

Generic Drugs: \$5 copay

Metal Level : Gold

Premium Range: Low: \$554 (Rating Area 1)

High: \$ 616 (Rating Area 2)



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: Regence Cascade Bronze Legacy Network

Plan Type : EPO Low: \$ 378 (Rating Area 3) Premium Range:

High: \$ 378 (Rating Area 3) Deductible: \$6000

OOPM: \$9200

Primary Care Visit: \$50 copay

Specialist Visit: \$100 Copay after deductible

copay

Urgent Care: \$100 copay

Generic Drugs: \$32 copay

Clark 1 Counties:

Metal Level: Silver

Plan Name: Regence Cascade Silver Legacy Network

Low: \$ 477 (Rating Area 3) Plan Type: EPO Premium Range:

OOPM: \$9200

Deductible: \$2500

Primary Care Visit: \$30 copay

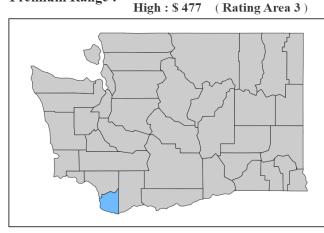
Specialist Visit: \$65 copay

Urgent Care: \$65 copay

Generic Drugs: \$25 copay

1 Counties:

Clark



Metal Level : Gold

Plan Name: Regence Cascade Gold Legacy Network

High: \$ 603 (Rating Area 3)

Deductible: \$600

reductible: 5000

Primary Care Visit: \$15 copay

Specialist Visit: \$40 copay

Urgent Care: \$35 copay

OOPM: \$6100

Generic Drugs: \$10 copay

1 Counties: Clark

Metal Level: Bronze

Plan Name: Regence Cascade Bronze Individual and Family Network

Plan Type: EPO Low: \$417 (Rating Area 3)

Premium Range: High: \$417 (Rating Area 3)

Deductible: \$6000

OOPM: \$9200

Primary Care Visit: \$50 copay

Specialist Visit: \$100 Copay after deductible

copay

Urgent Care: \$100 copay

Generic Drugs: \$32 copay

Clark

Metal Level: Silver

Plan Name: Regence Cascade Silver Individual and Family Network

Plan Type: EPO

Deductible: \$2500

OOPM: \$9200

Primary Care Visit: \$30 copay

Specialist Visit: \$65 copay

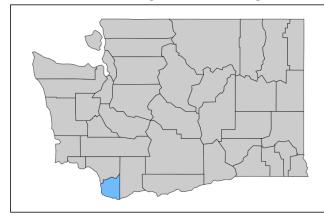
Urgent Care: \$65 copay

Generic Drugs: \$25 copay

Premium Range:

Low: \$ 526 (Rating Area 3)

High: \$ 526 (Rating Area 3)



1 Counties:

Clark

Metal Level : Gold

Plan Name: Regence Cascade Gold Individual and Family Network

Plan Type: EPO

Deductible: \$600

OOPM: \$6100

Primary Care Visit: \$15 copay

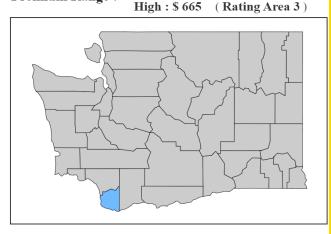
Specialist Visit: \$40 copay

Urgent Care: \$35 copay

Generic Drugs: \$10 copay

Low: \$ 665 (Rating Area 3) Premium Range:

High: \$ 665



Clark 1 Counties:

Metal Level: Bronze

Plan Name: Bronze Essential 8500 Legacy

Plan Type: EPO

Premium Range:

Low: \$ 358 (Rating Area 3)

High: \$ 358 (Rating Area 3)

Deductible: \$8500

Primary Care Visit: \$60 / 10% Coinsurance

after deductible

Specialist Visit : \$60 / 10% Coinsurance after

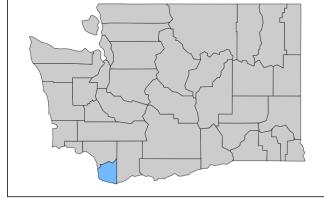
deductible

Urgent Care: \$60 / 10% Coinsurance after

deductible

Generic Drugs: \$20 copay

OOPM: \$9450



1 Counties: Clark

United Healthcare of Oregon, Inc.

Metal Level : Bronze

Plan Name: UnitedHealthcare of Oregon, Inc. Cascade Bronze

Plan Type : EPO

Premium Range : Low : \$ 354 (Rating Area 7)

High: \$ 407 (Rating Area 2)

Deductible: \$6000

OOPM: \$9200

Primary Care Visit: \$50 copay

Specialist Visit: \$100 Copay after deductible

copay

Urgent Care: \$100 copay

Generic Drugs: \$32 copay

Adams, Clallam, Jefferson, King, Kittitas, Lincoln, Mason, Pierce,

10 Counties: Whitman, Yakima

Metal Level : Silver

Plan Name: UnitedHealthcare of Oregon, Inc. Cascade Silver

High: \$ 512 (Rating Area 2)

Primary Care Visit: \$30 copay

Specialist Visit: \$65 copay

Urgent Care: \$65 copay

Deductible: \$2500

OOPM: \$9200

Generic Drugs: \$25 copay

Adams, Clallam, Jefferson, King, Kittitas, Lincoln, Mason, Pierce,

10 Counties: Whitman, Yakima

United Healthcare of Oregon, Inc.

Metal Level: Gold

Plan Name: UnitedHealthcare of Oregon, Inc. Cascade Gold

Plan Type: EPO Low: \$ 541 (Rating Area 7)

Premium Range:

High: \$ 620 (Rating Area 2)

OOPM: \$6100

Deductible: \$600

Primary Care Visit: \$15 copay

Specialist Visit: \$40 copay

Urgent Care: \$35 copay

Generic Drugs: \$10 copay

Adams, Clallam, Jefferson, King, Kittitas, Lincoln, Mason, Pierce,

10 Counties: Whitman, Yakima

Plan Name: UHC Bronze Value HSA

Deductible: \$6300

Plan Type: EPO

OOPM: \$8050

Primary Care Visit: \$50 Copay after deductible

copay

Specialist Visit: \$100 Copay after deductible

copay

Urgent Care: \$75 Copay after deductible copay

Generic Drugs: \$30 Copay after deductible

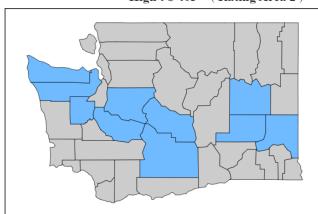
copay

10 Counties:

Metal Level : Bronze

Low: \$351 (Rating Area 7)

Premium Range:
High: \$ 403 (Rating Area 2)



Adams, Clallam, Jefferson, King, Kittitas, Lincoln, Mason, Pierce,

Whitman, Yakima

United Healthcare of Oregon, Inc.

Plan Name: UHC Silver Copay Focus

Plan Type: EPO

Premium Range:

Low: \$ 446 (Rating Area 7)

High: \$ 511 (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: \$30 copay

Adams, Clallam, Jefferson, King, Kittitas, Lincoln, Mason, Pierce,

Metal Level : Silver

10 Counties: Whitman, Yakima

Plan Name: UHC Gold Advantage

Plan Type: EPO

Premium Range:

Low: \$511 (Rating Area 7)

High: \$ 586 (Rating Area 2)

Deductible: \$500

OOPM: \$7500

Primary Care Visit: \$10 copay

Specialist Visit: \$35 copay

Urgent Care: \$50 copay

Generic Drugs: \$3 copay

Adams, Clallam, Jefferson, King, Kittitas, Lincoln, Mason, Pierce,

Metal Level: Gold

10 Counties: Whitman, Yakima

Companion Life Insurance Company-EMI Dental

Plan Name: WA Individual Premier PPO

Level Coverage: High

Plan Type : PPO

Offering: Adult and Child

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

MOOP: \$375 per person | \$750 per group

Child Basic Dental Care: 20% Coinsurance

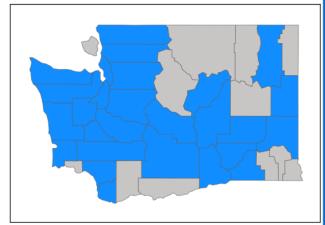
after deductible

Adult Basic Dental Care: 20% Coinsurance

after deductible

Monthly Premium

Adult: \$40 Child: \$54



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 Advantage PPO

Level Coverage : High

Plan Type: PPO

Offering: Adult and Child

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

MOOP: \$375 per person | \$750 per group

Child Basic Dental Care: 50% Coinsurance

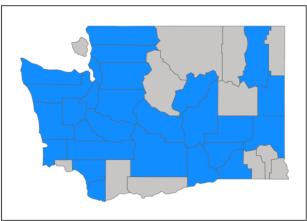
after deductible

Adult Basic Dental Care: 50% Coinsurance

after deductible

Monthly Premium

Adult: \$16 Child: \$31



27 Counties:

Adams, Benton, Clallam, Clark, Cowlitz, Douglas, Franklin, Grant, Grays Harbor, Island, Jefferson, King, Kitsap, Kittias, 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

Monthly Premium

Level Coverage : High

Adult : \$37 Child : \$51

Plan Type: PPO

Offering: Adult and Child

Deductible: \$85 (Individual)

MOOP: \$350 per child | \$700 per group

Child Basic Dental Care: 30% Coinsurance

after deductible

Adult Basic Dental Care: 50% Coinsurance

after deductible



All counties

39 Counties:

Plan Name: Delta Dental Individual - Washington Kids Plan

Level Coverage : High Monthly Premium

Plan Type : PPO

Offering: Child only

Deductible: \$85 (Individual)

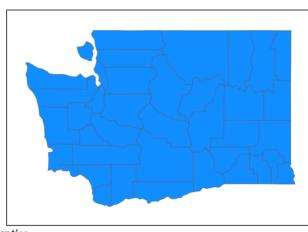
MOOP: \$350 per person | \$700 per group

Child Basic Dental Care: 30% Coinsurance

after deductible

Child Major Dental Care: 50% Coinsurance

after deductible



Child: \$49

All counties

Dentegra Insurance Company

Plan Name: Dentegra Dental PPO Family Basic Plan

Level Coverage : Low

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Plan Type: PPO

Offering: Adult and Child

Deductible: \$50 per person

MOOP: \$400 per person | \$800 per group

Child Basic Dental Care: 50% Coinsurance

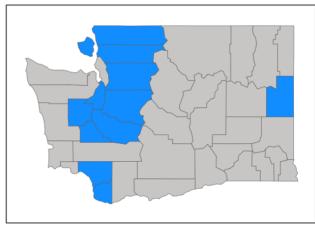
after deductible

Adult Basic Dental Care: 50% Coinsurance

after deductible

Monthly Premium

Adult: \$19 Child: \$23



Clark, Cowlitz, King, Kitsap, Mason, Pierce, San Juan, Skagit, Snohomish, Spokane, Thurston, Whatcom

Kaiser Foundation Health Plan of Washington

Plan Name: KP WA Family Dental 80

Level Coverage : Low

Plan Type: EPO

Offering: Adult and Child

Deductible: \$100 per person | \$300 per group

MOOP: \$400 per person | \$800 per group

Child Basic Dental Care: 50% Coinsurance

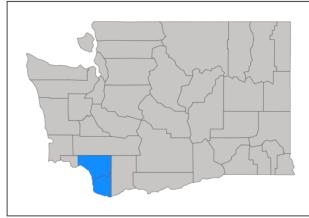
after deductible

Adult Basic Dental Care: 50% Coinsurance

after deductible

Monthly Premium

Adult: \$39 Child: \$31



Clark, Cowlitz

2 Counties:

Plan Name: KP WA Family Dental 100

Level Coverage: High

Plan Type: EPO

Offering: Adult and Child

Deductible: \$50 per person | \$150 per group

MOOP: \$400 per person | \$800 per group

Child Basic Dental Care: 20% Coinsurance

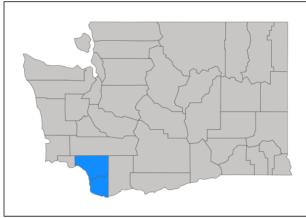
after deductible

Adult Basic Dental Care: 20% Coinsurance

after deductible

Monthly Premium

Adult: \$41 Child: \$39



Clark, Cowlitz

LifeWise Health Plan of Washington

Plan Name: LifeWise Family Dental Plan

Level Coverage: High

Plan Type: PPO

Offering: Adult and Child

Deductible: \$65

MOOP: \$400 per person | \$800 per group

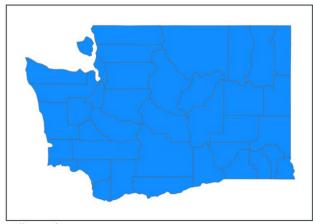
Child Basic Dental Care: 20% Coinsurance

after deductible

Adult Basic Dental Care: 40% Coinsurance

Monthly Premium

Adult: \$30 Child: \$32



All counties

39 Counties:

Plan Name: LifeWise Individual Pediatric Dental Plan

Level Coverage : High

Plan Type: PPO

Offering: Child only

Deductible: \$65

MOOP: \$400 per person | \$800 per group

Child Basic Dental Care: 20% Coinsurance

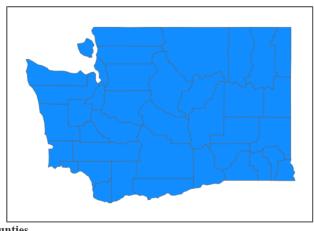
after deductible

Child Major Dental Care: 50% Coinsurance

after deductible

Monthly Premium

Child: \$32



All counties

PacificSource Health Plans

Plan Name: Dental PPO 0-20-50 1000

Level Coverage: High

Plan Type: PPO

Offering: Adult and Child

Deductible: \$50 per person | \$150 per group

MOOP: \$400 per person | \$800 per group

Child Basic Dental Care: 20% Coinsurance

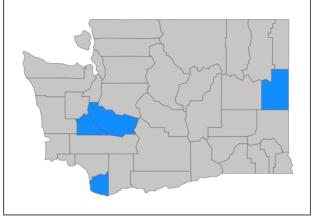
after deductible

Adult Basic Dental Care: 20% Coinsurance

after deductible

Monthly Premium

Adult: \$36 Child: \$43



Clark, Pierce, Spokane, Thurston

4 Counties:

Plan Name: Dental PPO 0-20-50 1500

Level Coverage: High

Plan Type: PPO

Offering: Adult and Child

Deductible: \$50 per person | \$150 per group

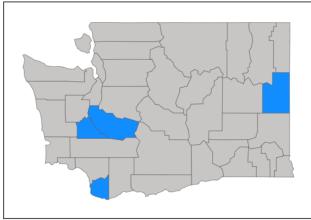
MOOP: \$400 per person | \$800 per group

Child Basic Dental Care: 20% Coinsurance

Adult Basic Dental Care: 20% Coinsurance

Monthly Premium

Adult: \$42 Child: \$43



Clark, Pierce, Spokane, Thurston

PacificSource Health Plans

Plan Name: Kids Dental PPO 0-20-50

Level Coverage: High

Plan Type: PPO

Offering: Child only

Deductible: \$50 per person |\$150 per group

MOOP: \$400 per person | \$800 per group

Child Basic Dental Care: 20% Coinsurance

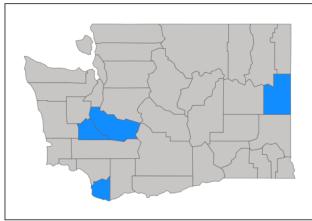
after deductible

Child Major Dental Care: 50% Coinsurance

after deductible

Monthly Premium

Child: \$43



Clark, Pierce, Spokane, Thurston

APPENDIX I

All plans listed for Exchange certification have met the 19 certification criteria.

EXCHANGE INDIVIDUAL MARKET

BridgeSpan Health Company

BridgeSpan Cascade Bronze BridgeSpan Cascade Gold BridgeSpan Cascade Silver Bronze Essential 8500

Community Health Plan of Washington

Community Health Plan of Washington Cascade Select Bronze

Community Health Plan of Washington Cascade Select Gold Community Health Plan of Washington Cascade Select Silver

Coordinated Care Corporation

Ambetter Cascade Select Bronze
Ambetter Cascade Select Gold
Ambetter Cascade Select Silver
Ambetter Cascade Bronze
Ambetter Cascade Gold
Ambetter Cascade Silver
Ambetter Balanced Care 4
Ambetter Clear Gold

Ambetter Essential Care: \$0 Medical Deductible

Ambetter Secure Care 5

Ambetter Essential Care 1

Kaiser Foundation Health Plan of the Northwest

KP Cascade Bronze
KP Cascade Gold
KP Cascade Silver
KP WA Bronze 7100/0% HSA
KP WA Bronze 9100/75
KP WA Gold 0/15
KP WA Gold 1750/20
KP WA Silver 750/35

Kaiser Foundation Health Plan of Washington

Kaiser Permanente Cascade Bronze Kaiser Permanente Cascade Gold Kaiser Permanente Cascade Silver Basics Plus Catastrophic Bronze HSA Flex Bronze

Flex Gold

Flex Silver

Virtual Plus Bronze Virtual Plus Silver

LifeWise Health Plan of Washington

LifeWise Cascade Bronze
LifeWise Cascade Gold
LifeWise Cascade Select Bronze
LifeWise Cascade Select Gold
LifeWise Cascade Select Silver
LifeWise Cascade Silver
LifeWise Essential Bronze
LifeWise Essential Bronze HSA
LifeWise Essential Gold

LifeWise Essential Silver Low Deductible

Molina Healthcare of Washington

Constant Care Silver 1 Molina Cascade Bronze Molina Cascade Gold Molina Cascade Silver

PacificSource Health Plans

Navigator Bronze 7000 Navigator Bronze HSA 7500 Navigator Gold 2000 Navigator Silver 5000 PacificSource Cascade Bronze PacificSource Cascade Gold PacificSource Cascade Silver

Premera Blue Cross

Premera Blue Cross Cascade Bronze
Premera Blue Cross Cascade Gold
Premera Blue Cross Cascade Silver
Premera Blue Cross Preferred Bronze EPO 6650
Premera Blue Cross Preferred Bronze HSA EPO 6400
Premera Blue Cross Preferred Gold EPO 1500
Premera Blue Cross Preferred Silver EPO 4500

Regence BlueShield

Regence Cascade Bronze Regence Cascade Gold Regence Cascade Silver Bronze Essential 8500 Gold 2500

APPENDIX I

EXCHANGE INDIVIDUAL MARKET (Cont.)

Regence BlueCross BlueShield of Oregon

Regence Cascade Bronze Individual and Family Network
Regence Cascade Bronze Legacy Network
Regence Cascade Gold Individual and Family Network
Regence Cascade Gold Legacy Network
Regence Cascade Silver Individual and Family Network
Regence Cascade Silver Legacy Network
Bronze Essential 8500 Legacy

United Healthcare of Oregon

UHC Bronze Value HSA
UHC Silver Copay Focus
UHC Gold Advantage
UnitedHealthcare of Oregon, Inc. Cascade Bronze
UnitedHealthcare of Oregon, Inc. Cascade Silver
UnitedHealthcare of Oregon, Inc. Cascade Gold

APPENDIX II

All plans listed for Exchange certification have met the 10 certification criteria.

Delta Dental of Washington

Delta Dental Individual – Washington Kids Plan Delta Dental Individual and Family – Washington Family Plan

Dentegra Insurance Company

Dentegra Dental PPO Family Basic Plan

EMI/Companion Life Insurance Company

WA Individual Advantage PPO WA Individual Premier PPO

Kaiser Foundation Health Plan of the Northwest

KP WA Family Dental 100 KP WA Family Dental 80

LifeWise Health Plan of Washington

LifeWise Individual Pediatric Dental Plan LifeWise Family Dental Plan

PacificSource Health Plans

Kids Dental PPO 0-20-50 Dental PPO 0-20-50 1000 Dental PPO 0-20-50 1500