

WASHINGTON HEALTHPLANFINDER

2016 QUALIFIED HEALTH PLAN AND QUALIFIED DENTAL PLAN CERTIFICATION REQUESTS

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SUMMARY OF INDIVIDUAL MARKET

Overview

- 11 Issuers
- 138 Individual QHPs
- 18 Renewals
- 120 New

Gold

- 11 Issuers
- 34 Plans
- 5 Renewals
- 29 New

Silver

- 11 Issuers
- 61 Plans
- 6 Renewals
- 54 New

Bronze

- 10 Issuers
- 41 Plans
- 4 Renewals
- 37 New

Catastrophic

- 3 Issuers
- 3 Plans
- 2 Renewals
- 1 New

SUMMARY OF DENTAL MARKET

Stand-Alone Pediatric Dental

- 5 Issuers
- 7 Individual QDPs
- 5 Low
- 2 High
- 1 New
- 6 Renewals

SUMMARY OF SHOP MARKET

Overview 2 Issuers 30 Plans 9 Gold 13 Silver 8 Bronze 30 New 0 Renewals

AT-A-GLANCE



Total Number of Individual Health Plans: 138
Total Number of Renewals: 18
Total Number of New: 120



SHOP plans are offered statewide by UnitedHealthcare; and in two counties by Kaiser

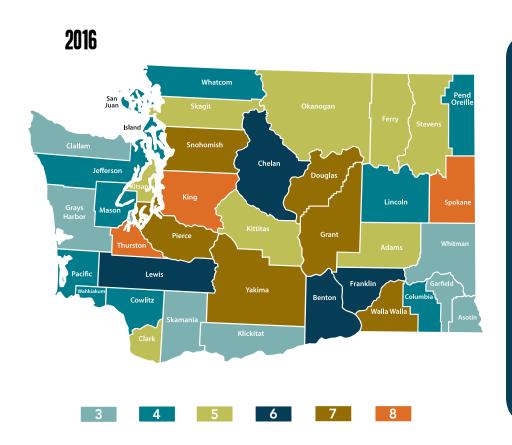


No Platinum Plans in 2016

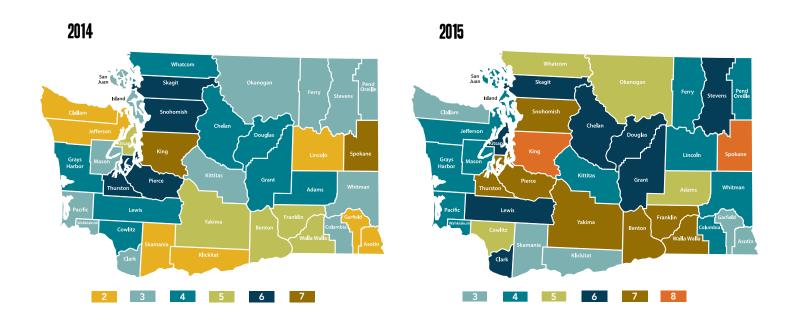


Group Health, Health Alliance Northwest and Kaiser are offering Catastrophic plans

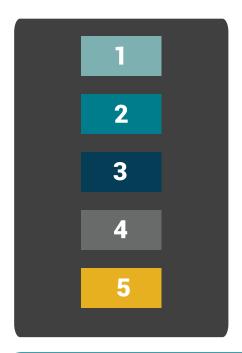
NUMBER OF ISSUERS BY COUNTY

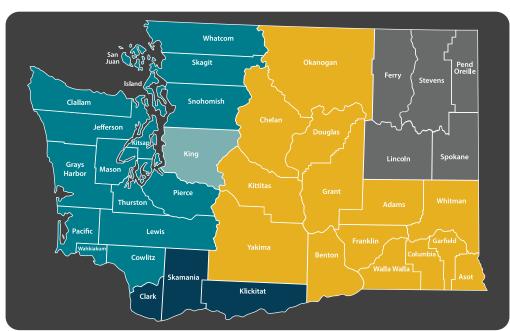


BREAKDOWN BY YEAR (2014)Zero counties with 8 carriers (2015)Two counties with 8 carriers (2016)Three counties with 8 carriers, (2014)72% of counties had 4 or fewer carriers (2016)41% of counties have 4 carriers: zero counties have less than 4 carriers (2014)2 of 39 counties (5%) had 7 carriers, other 37 counties had fewer than 7 carriers (2016) 9 of 39 counties (23%) have 7 or more carriers



RATING AREAS





Rating Area 1	King				
Rating Area 2	Clallam Kitsap San Juan Whatcom	Cowlitz Lewis Skagit	Grays Harbor Mason Snohomish	Island Pacific Thurston	Jefferson Pierce Wahkiakum
Rating Area 3	Clark	Klickitat	Skamania		
Rating Area 4	Ferry Stevens	Lincoln	Pend Oreille	Spokane	
Rating Area 5	Adams Douglas Okanogan	Asotin Franklin Walla Walla	Benton Garfield Whitman	Chelan Grant Yakima	Columbia Kittitas

GOLI

Issuer: BridgeSpan Health Company

Name: Gold 1000 Legacy Health

Premium (non-smoker 40 year old)

\$397.23 (Rating Area 3)

Counties Offered: (1) Clark

PLAN SUMMARY

Market: Individual New

Deductible: \$1,000

OOPM: \$5,500

PCP co-pay: \$20

ER co-pay: 20% after deductible



GOLD

Issuer: BridgeSpan Health Company

Name: Gold 1000 RealValue and SimpleConnect

Premium Range

(non-smoker 40 year old) Low: \$358.14 (Rating Area 4) High: \$391.36 (Rating Area 2)

Counties Offered: (11) Benton, Franklin, King, Kitsap, Pierce, Skagit, Snohomish, Spokane, Thurston, Walla

Walla, Yakima

PLAN SUMMARY

Market: Individual New

Deductible: \$1,000

OOPM: \$5,500

PCP co-pay: \$20



GOLI

Issuer: BridgeSpan Health Company

Name: Gold Align 1500 EvergreenHealth

Partners/Virginia Mason

PLAN SUMMARY

Market: Individual New

Deductible: \$1,500

OOPM: \$5,500

PCP co-pay: \$20

ER co-pay: 20% after deductible

Premium

(non-smoker 40 year old) \$359.65 (Rating Area 1)

Counties Offered: (1) King



GOLD

Issuer: BridgeSpan Health Company

Name: Gold Align 1500 MultiCare

Premium Range (non-smoker 40 year old) Low: \$376.63 (Rating Area 1)

High: \$386.04 (Rating Area 2)

Counties Offered: (2) Partial King, Pierce

PLAN SUMMARY

Market: Individual New

Deductible: \$1,500

OOPM: \$5,500

PCP co-pay: \$20



GOLI

Issuer: BridgeSpan Health Company

Name: Gold Align 1500 Providence-Swedish

Health

PLAN SUMMARY

Market: Individual New

Deductible: \$1,500

OOPM: \$5,500

PCP co-pay: \$20

ER co-pay: 20% after deductible

Premium

(non-smoker 40 year old) \$383.28 (Rating Area 1)

Counties Offered: (1) King



GOLD

Issuer: BridgeSpan Health Company

Name: Gold Align 1500 The Everett Clinic

Premium

(non-smoker 40 year old) \$392.00 (Rating Area 2)

Counties Offered: (1) Snohomish

PLAN SUMMARY

Market: Individual New

Deductible: \$1,500

OOPM: \$5,500

PCP co-pay: \$20



GOLI

Issuer: BridgeSpan Health Company

Name: Gold Align 1500 UW Medicine

Premium (non-smoker 40 year old) \$364.64 (Rating Area 1)

Counties Offered: (1) King

PLAN SUMMARY

Market: Individual New

Deductible: \$1,500

OOPM: \$5,500

PCP co-pay: \$20

ER co-pay: 20% after deductible

Offered Not Offered

GOLD

Issuer: Columbia United Providers

Name: Columbia United Providers-Summit Gold

Premium

(non-smoker 40 year old) \$378.19 (Rating Area 3)

AS OF NOV. 13, 2015 COLUMBIA UNITED PROVIDERS HAS WITHDRAWN FROM WASHINGTON HEALTHPLANFINDER

Market: Individual Renewal

Deductible: \$1,000

OOPM: \$4,500

PCP co-pay: \$20

ER co-pay: \$250 copay, 20% co-ins.

Offered Not Offered

Issuer: CHPW

Name: Community HealthEssentials Plus

PLAN SUMMARY

Market: Individual Renewal

Deductible: \$500

OOPM: \$4,800

PCP co-pay: No copay for CHC Provider;

\$30 copay for in-network provider

ER co-pay: \$250 Premium Range

(non-smoker 40 year old) Low: \$420.05 (Rating Area 4) High: \$469.20 (Rating Area 2)

Counties Offered: (14) Adams, Douglas, Ferry, Franklin, Grant, Lewis, Pacific, Pend Oreille, Spokane, Stevens, Thurston, Wahkiakum, Walla

Walla, Yakima



Issuer: Coordinated Care

Name: Ambetter Secure Care 1 + 3 Free PCP

Visits

PLAN SUMMARY

Market: Individual New

Deductible: \$1,000 medical; \$500 drug

OOPM: \$6,350

PCP co-pay: 20% co-ins, after deductible

(first 3 visits are 0 cost-share)

ER co-pay: \$250 copay after deductible Premium

(non-smoker 40 year old) Low: \$277.03 (Rating Area 4) High: \$318.56 (Rating Area 5)

Counties Offered: (16) Adams, Benton, Chelan, Douglas, Franklin, Grant, Jefferson, King, Lewis, Lincoln, Snohomish, Spokane, Stevens, Thurston,

Walla Walla, Yakima



GOLI

Issuer: Group Health Cooperative

Name: Flex Gold

PLAN SUMMARY

Market: Individual New

Deductible: \$600

OOPM: \$4,500

PCP co-pay: \$10

ER co-pay: \$200 + 20%

Premium Range

(non-smoker 40 year old) Low: \$308.11 (Rating Area 1)

High: \$343.54 (Rating Area 2)

Counties Offered: (19) Benton, Columbia, Franklin, Island, King, Kitsap, Kittitas, Lewis, Mason, Pierce, San Juan, Skagit, Snohomish, Spokane, Thurston,

Walla Walla, Whatcom, Whitman, Yakima



GOLD

Issuer: Health Alliance Northwest

Name: POS 1500 Gold

Premium

(non-smoker 40 year old) \$399.66 (Rating Area 5)

PLAN SUMMARY

Market: Individual New

Deductible: \$1,500

OOPM: \$5,250

PCP co-pay: \$10 copay

ER co-pay: \$300 copay

Counties Offered: (4) Chelan, Douglas, Okanogan, Grant



GOL

Issuer: Kaiser Permanente

Name: KP WA Gold 1000/20

Premium Range (non-smoker 40 year old) Low: \$330.06 (Rating Area 3) High: \$346.56 (Rating Area 2)

Counties Offered: (2) Clark, Cowlitz

PLAN SUMMARY

Market: Individual New

Deductible: \$1,000

OOPM: \$6,350

PCP co-pay: \$20

ER co-pay: 20% after deductible

Offered Not Offered

GOLD

Issuer: LifeWise

Name: LifeWise Essential Gold EPO 1000

Premium Range (non-smoker 40 year old)

Low: \$355.23 (Rating Area 4) High: \$395.77 (Rating Areas 2, 3)

Counties Offered: All counties

PLAN SUMMARY

Market: Individual New

Deductible: \$1,000

OOPM: \$4,500

PCP co-pay: \$30 copay first 2 w/ PCP in full

ER co-pay: \$200 copay, then deductible,

then 20% co-ins.



GOLI

Issuer: LifeWise

Name: LifeWise Essential Gold 1500

Premium Range (non-smoker 40 year old) Low: \$375.61 (Rating Area 4) High: \$418.48 (Rating Areas 2, 3)

Counties Offered: All counties

PLAN SUMMARY

Market: Individual Renewal

Deductible: \$1,500

OOPM: \$4,500

PCP co-pay: \$10 copay

ER co-pay: \$200 copay, then deductible,

then 20% co-ins.



GOLE

Issuer: Moda Health Plan

Name: Moda Health Be Tranquil

Premium Range (non-smoker 40 year old) Low: \$401.50 (Rating Area 4)

AS OF OCT. 28, 2015 MODA HEALTH PLAN HAS WITHDRAWN FROM WASHINGTON HEALTHPLANFINDER

Market: Individual Renewal

Deductible: \$650

OOPM: \$4,000

PCP co-pay: \$15 copay, deductible waived

ER co-pay: 15% co-ins.

Offered Not Offered

GOLI

Issuer: Molina

Name: Molina Marketplace Gold

PLAN SUMMARY

Market: Individual Renewal

Deductible: \$500 medical; \$40 drug

OOPM: \$6,660

PCP co-pay: \$15 copay

ER co-pay: \$250 copay

Premium Range

(non-smoker 40 year old) Low: \$290.90 (Rating Area 4) High: \$334.22 (Rating Area 2)

Counties Offered: (9) Chelan, Douglas, Grant, King, Mason, Okanogan, Pierce, Spokane, Thurston



GOLD

Issuer: Molina

Name: Molina Marketplace Choice Gold

PLAN SUMMARY

Market: Individual New

Deductible: \$500 medical; \$40 drug

OOPM: \$6,850

PCP co-pay: \$15 copay

ER co-pay: \$250 copay

Premium Range

(non-smoker 40 year old) Low: \$277.46 (Rating Area 4) High: \$318.78 (Rating Area 2)

Counties Offered: (9) Chelan, Douglas, Grant, King, Mason, Okanogan, Pierce, Spokane, Thurston



GOLI

Issuer: Premera Blue Cross

Name: Premera Blue Cross PersonalCare Gold

Premium Range (non-smoker 40 year old) Low: \$393.60 (Rating Area 1) High: \$403.44 (Rating Area 2)

Counties Offered: (3) King, Pierce, Snohomish

PLAN SUMMARY

Market: Individual New

Deductible: \$750

OOPM: \$4,500

PCP co-pay: \$15 copay

ER co-pay: \$200 copay



GOLD

Issuer: Premera Blue Cross

Name: Premera Blue Cross Preferred Gold 1000

Premium Range (non-smoker 40 year old) Low: \$381.02 (Rating Area 4) High: \$424.51 (Rating Areas 2, 3)

Counties Offered: All counties except Clark

PLAN SUMMARY

Market: Individual Renewal

Deductible: \$1,000

OOPM: \$4,500

PCP co-pay: \$10 copay first 2 w/ PCP in full

ER co-pay: \$200 copay, then deductible,

then 20% co-ins.



GOLI

Issuer: Premera Blue Cross MSP

Name: Multi-State Plan Blue Cross Gold 1000

Premium Range (non-smoker 40 year old) Low: \$380.31 (Rating Area 4) High: \$423.72 (Rating Area 2, 3)

Counties Offered: All counties except Clark

PLAN SUMMARY

Market: Individual Renewal

Deductible: \$1,000

OOPM: \$4,500

PCP co-pay: \$10 copay first 2 w/ PCP in full

ER co-pay: \$200 copay, then deductible,

then 20% co-ins.



GOLD

Issuer: Regence BlueShield

Name: Gold Connect 1500 MultiCare

Premium Range

(non-smoker 40 year old) Low: \$388.55 (Rating Area 1) High: \$398.26 (Rating Area 2)

Counties Offered: Partial King, Pierce

PLAN SUMMARY

Market: Individual New

Deductible: \$1,500

OOPM: \$5,500

PCP co-pay: \$20



GOLI

Issuer: Regence BlueShield

Name: Gold Connect 1500 Evergreen Health

Partners/Virginia Mason

PLAN SUMMARY

Market: Individual New

Deductible: \$1,500

OOPM: \$5,500

PCP co-pay: \$20

ER co-pay: 20% after deductible

Premium

(non-smoker 40 year old) \$371.03 (Rating Area 1)

Counties Offered: (1) King



GOLD

Issuer: Regence BlueShield

Name: Gold Connect 1500 The Everett Clinic

Premium (non-smoker 40 year old) \$404.41 (Rating Area 2)

Counties Offered: (1) Snohomish

PLAN SUMMARY

Market: Individual New

Deductible: \$1,500

OOPM: \$5,500

PCP co-pay: \$20



GOL

Issuer: Regence BlueShield

Name: Gold Connect 1500 Providence-Swedish

Health

PLAN SUMMARY

Market: Individual New

Deductible: \$1,500

OOPM: \$5,500

PCP co-pay: \$20

ER co-pay: 20% after deductible

Premium

(non-smoker 40 year old) \$395.39 (Rating Area 1)

Counties Offered: (1) King



GOLD

Issuer: Regence BlueShield

Name: Gold Connect 1500 UW Medicine

Premium

(non-smoker 40 year old) \$376.18 (Rating Area 1)

Counties Offered: (1) King

PLAN SUMMARY

Market: Individual New

Deductible: \$1,500

OOPM: \$5,500

PCP co-pay: \$20



GOLI

Issuer: UnitedHealthcare of Washington, Inc.

Name: Gold Charter 500

Premium Range (non-smoker 40 year old) Low: \$338.47 (Rating Area 4) High: \$388.12 (Rating Area 2)

Counties Offered: All counties

PLAN SUMMARY

Market: Individual New

Deductible: \$500

OOPM: \$4,500

PCP co-pay: \$25 copay

ER co-pay: 20% co-ins. after deductible



GOLD

Issuer: UnitedHealthcare of Washington, Inc.

Name: Gold Navigate 500

Premium Range

(non-smoker 40 year old) Low: \$342.01 (Rating Area 4) High: \$392.18 (Rating Area 2)

Counties Offered: All counties

PLAN SUMMARY

Market: Individual New

Deductible: \$500

OOPM: \$4,500

PCP co-pay: \$25 copay

ER co-pay: 20% co-ins. after deductible



GOLI

Issuer: UnitedHealthcare of Washington, Inc.

Name: Gold Charter 1000

Premium Range (non-smoker 40 year old)

Low: \$324.88 (Rating Area 4) High: \$372.54 (Rating Area 2)

Counties Offered: All counties

PLAN SUMMARY

Market: Individual New

Deductible: \$1,000

OOPM: \$5,300

PCP co-pay: \$15 copay

ER co-pay: 30% co-ins. after deductible



GOLD

Issuer: UnitedHealthcare of Washington, Inc.

Name: Gold Navigate 1000

Premium Range

(non-smoker 40 year old) Low: \$328.13 (Rating Area 4) High: \$376.26 (Rating Area 2)

Counties Offered: All counties

PLAN SUMMARY

Market: Individual New

Deductible: \$1,000

OOPM: \$5,300

PCP co-pay: \$15 copay

ER co-pay: 30% co-ins. after deductible



GOLI

Issuer: UnitedHealthcare of Washington, Inc.

Name: Gold Charter 1100

Premium Range (non-smoker 40 year old) Low: \$326.95 (Rating Area 4) High: \$374.91 (Rating Area 2)

Counties Offered: All counties except Clark

PLAN SUMMARY

Market: Individual New

Deductible: \$1,100

OOPM: \$6,200

PCP co-pay: \$15 copay

ER co-pay: 20% co-ins. after deductible



GOLD

Issuer: UnitedHealthcare of Washington, Inc.

Name: Gold Navigate 1100

Premium Range

(non-smoker 40 year old) Low: \$330.20 (Rating Area 4) High: \$378.63 (Rating Area 2)

Counties Offered: All counties except Clark

PLAN SUMMARY

Market: Individual New

Deductible: \$1,100

OOPM: \$6,200

PCP co-pay: \$15 copay

ER co-pay: 20% co-ins. after deductible



GOLI

Issuer: UnitedHealthcare of Washington, Inc.

Name: Gold Charter 1200

Premium Range (non-smoker 40 year old)

Low: \$337.28 (Rating Area 4) High: \$386.76 (Rating Area 2)

Counties Offered: All counties

PLAN SUMMARY

Market: Individual New

Deductible: \$1,200

OOPM: \$6,850

PCP co-pay: \$12 copay

ER co-pay: 12% co-ins. after deductible



GOLD

Issuer: UnitedHealthcare of Washington, Inc.

Name: Gold Navigate 1200

Premium Range

(non-smoker 40 year old) Low: \$340.83 (Rating Area 4) High: \$390.83 (Rating Area 2)

Counties Offered: All counties

PLAN SUMMARY

Market: Individual New

Deductible: \$1,200

OOPM: \$6,850

PCP co-pay: \$12 copay

ER co-pay: 12% co-ins. after deductible



GOLI

Issuer: UnitedHealthcare of Washington, Inc.

Name: Gold Charter 1500

Premium Range (non-smoker 40 year old) Low: \$325.77 (Rating Area 4) High: \$373.55 (Rating Area 2)

Counties Offered: All counties

PLAN SUMMARY

Market: Individual New

Deductible: \$1,500

OOPM: \$4,450

PCP co-pay: \$15 copay

ER co-pay: 30% co-ins. after deductible



GOLD

Issuer: UnitedHealthcare of Washington, Inc.

Name: Gold Navigate 1500

Premium Range

(non-smoker 40 year old) Low: \$329.01 (Rating Area 4) High: \$377.28 (Rating Area 2)

Counties Offered: All counties

PLAN SUMMARY

Market: Individual New

Deductible: \$1,500

OOPM: \$4,450

PCP co-pay: \$15 copay

ER co-pay: 30% co-ins. after deductible



Issuer: BridgeSpan Health Company

Name: Silver HDHP 2500 Legacy Health

Premium (non-smoker 40 year old) \$306.96 (Rating Area 3)

Counties Offered: (1) Clark

PLAN SUMMARY

Individual Market: New

Deductible: \$2,500

OOPM: \$5,000

PCP co-pay: 20% after deductible

ER co-pay: 20% a deductible



Issuer: BridgeSpan Health Company

Name: Silver HDHP 2500 Evergreen Health

Partners/Virginia Mason

Premium

(non-smoker 40 year old) \$276.89 (Rating Area 1)

Counties Offered: (1) King

PLAN SUMMARY

Market: Individual New

Deductible: \$2,500

OOPM: \$5,000

PCP co-pay: 20% after deductible

20% after deductible ER co-pay:



SII VEE

Issuer: BridgeSpan Health Company

Name: Silver HDHP 2500 MultiCare

Premium Range (non-smoker 40 year old) Low: \$289.99 (Rating Area 1) High: \$297.24 (Rating Area 2)

Counties Offered: (2) Partial King County, Pierce

PLAN SUMMARY

Market: Individual New

Deductible: \$2,500

OOPM: \$5,000

PCP co-pay: 20% after deductible

ER co-pay: 20% after deductible



SILVEE

Issuer: BridgeSpan Health Company

Name: Silver HDHP 2500 Providence-

Swedish Health

PLAN SUMMARY

Market: Individual New

Deductible: \$2,500

OOPM: \$5,000

PCP co-pay: 20% after deductible

ER co-pay: 20% after deductible

Premium

(non-smoker 40 year old) \$295.08 (Rating Area 1)

Counties Offered: (1) King



SILVER

Issuer: BridgeSpan Health Company

Name: Silver HDHP 2500 RealValue and

SimpleConnect

PLAN SUMMARY

Market: Individual New

Deductible: \$2,500

OOPM: \$5,000

PCP co-pay: 20% after deductible

ER co-pay: 20% after deductible

Premium Range

(non-smoker 40 year old) Low: \$276.78 (Rating Area 4)

High: \$302.45 (Rating Area 2)

Counties Offered: (11) Benton, Franklin, King, Kitsap, Pierce, Skagit, Snohomish, Spokane, Thurston, Walla

Walla, Yakima



SILVEE

Issuer: BridgeSpan Health Company

Name: Silver HDHP 2500 The Everett Clinic

Premium

(non-smoker 40 year old) \$301.80 (Rating Area 2)

Counties Offered: (1) Snohomish

PLAN SUMMARY

Market: Individual New

Deductible: \$2,500

OOPM: \$5,000

PCP co-pay: 20% after deductible



SILVEF

Issuer: BridgeSpan Health Company

Name: Silver HDHP 2500 UW Medicine

Premium (non-smoker 40 year old) \$280.71 (Rating Area 1)

Counties Offered: (1) King

PLAN SUMMARY

Market: Individual New

Deductible: \$2,500

OOPM: \$5,000

PCP co-pay: 20% after deductible

ER co-pay: 20% after deductible



SILVEE

Issuer: BridgeSpan Health Company

Name: Silver 3000 Legacy Health

Premium

(non-smoker 40 year old) \$327.68 (Rating Area 3)

Counties Offered: (1) Clark

PLAN SUMMARY

Market: Individual New

Deductible: \$3,000

OOPM: \$6,850

PCP co-pay: \$20



SII VER

Issuer: BridgeSpan Health Company

Name: Silver 3000 RealValue and

SimpleConnect

PLAN SUMMARY

Market: Individual New

Deductible: \$3,000

OOPM: \$6,850

PCP co-pay: \$20

ER co-pay: 30% after deductible

Premium Range

(non-smoker 40 year old) Low: \$295.45 (Rating Area 4)

High: \$322.85 (Rating Area 2)

Counties Offered: (11) Benton, Franklin, King, Kitsap, Pierce, Skagit, Snohomish, Spokane, Thurston, Walla

Walla, Yakima



SILVEF

Issuer: BridgeSpan Health Company

Name: Silver Align 4000 Evergreen Health

Partners/Virginia Mason

PLAN SUMMARY

Market: Individual New

Deductible: \$4,000

OOPM: \$6,850

PCP co-pay: \$20

ER co-pay: 50% after deductible

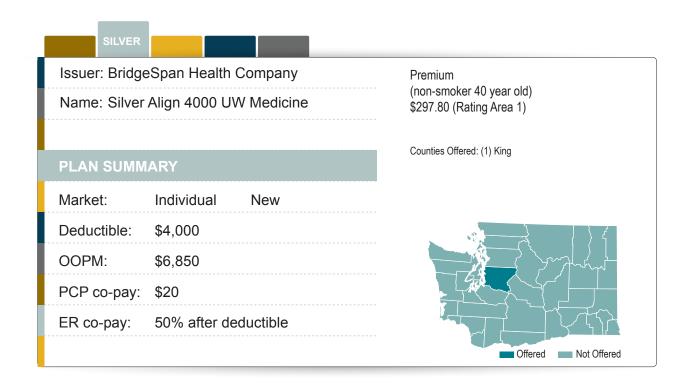
Premium

(non-smoker 40 year old) \$293.71 (Rating Area 1)

Counties Offered: (1) King



Issuer: BridgeSpan Health Company Premium (non-smoker 40 year old) Name: Silver Align 4000 The Everett Clinic \$320.16 (Rating Area 2) Counties Offered: (1) Snohomish **PLAN SUMMARY** Individual Market: New Deductible: \$4,000 OOPM: \$6,850 PCP co-pay: \$20 ER co-pay: 50% after deductible Offered Not Offered



SII VEE

Issuer: BridgeSpan Health Company

Name: Silver Align 4000 MultiCare

Premium Range (non-smoker 40 year old) Low: \$307.59 (Rating Area 1) High: \$315.28 (Rating Area 2)

Counties Offered: (2) Partial King County, Pierce

PLAN SUMMARY

Market: Individual New

Deductible: \$4,000

OOPM: \$6,850

PCP co-pay: \$20

ER co-pay: 50% after deductible



SILVEE

Issuer: BridgeSpan Health Company

Name: Silver Align 4000 Providence-Swedish

Health

PLAN SUMMARY

Market: Individual New

Deductible: \$4,000

OOPM: \$6,850

PCP co-pay: \$20

ER co-pay: 50% after deductible

Premium

(non-smoker 40 year old) \$313.03 (Rating Area 1)

Counties Offered: (1) King



SII VER

Issuer: Columbia United Providers

Name: Columbia United Providers-Summit Silver

Premium

(non-smoker 40 year old) \$311.33 (Rating Area 3)

AS OF NOV. 13, 2015 COLUMBIA UNITED PROVIDERS HAS WITHDRAWN FROM WASHINGTON HEALTHPLANFINDER

Deductible: \$2,000

OOPM: \$6,600

PCP co-pay: \$30

ER co-pay: \$350 copay, 20% co-ins.



SILVER

Issuer: Columbia United Providers

Name: Columbia United Providers-Cascade

Premium

(non-smoker 40 year old) \$294.32 (Rating Area 3)

AS OF NOV. 13, 2015 COLUMBIA UNITED PROVIDERS HAS WITHDRAWN FROM WASHINGTON HEALTHPLANFINDER

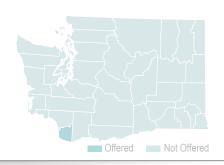
Market: Individual New

Deductible: \$2,300

OOPM: \$6,800

PCP co-pay: \$40

ER co-pay: 30% co-ins. after deductible



SII VER

Issuer: CHPW

Name: Community HealthEssentials Plus

PLAN SUMMARY

Market: Individual Renewal

Deductible: \$2,000

OOPM: \$6,350

PCP co-pay: No copay for CHC Provider;

\$30 copay for in-network provider

ER co-pay: \$250

Premium Range

(non-smoker 40 year old) Low: \$362.84 (Rating Area 4) High: \$405.29 (Rating Area 2)

Counties Offered: (14) Adams, Douglas, Ferry, Franklin, Grant, Lewis, Pacific, Pend Oreille, Spokane, Stevens, Thurston, Wahkiakum, Walla

Walla, Yakima



SILVEF

Issuer: Coordinated Care

Name: Ambetter Balanced Care 9

PLAN SUMMARY

Market: Individual New

Deductible: \$2,000 medical; \$1,000 drug

OOPM: \$6,000

PCP co-pay: \$50 copay

ER co-pay: \$300 copay after deductible

Premium Range

(non-smoker 40 year old) Low: \$244.00 (Rating Area 4) High: \$280.57 (Rating Area 5)

Counties Offered: (16) Adams, Benton, Chelan, Douglas, Franklin, Grant, Jefferson, King, Lewis, Lincoln, Snohomish, Spokane, Stevens, Thurston,

Walla Walla, Yakima



SII VER

Issuer: Coordinated Care

Name: Ambetter Balanced Care 10

PLAN SUMMARY

Market: Individual New

Deductible: \$4,500

OOPM: \$6,500

PCP co-pay: \$20 copay

ER co-pay: 20% co-ins. after deductible

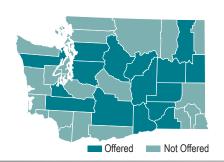
Premium Range

(non-smoker 40 year old) Low: \$218.70 (Rating Area 4)

High: \$251.48 (Rating Area 5)

Counties Offered: (16) Adams, Benton, Chelan, Douglas, Franklin, Grant, Jefferson, King, Lewis, Lincoln, Snohomish, Spokane, Stevens, Thurston,

Walla Walla, Yakima



SILVEF

Issuer: Coordinated Care

Name: Ambetter Balanced Care 10 + Vision

PLAN SUMMARY

Market: Individual New

Deductible: \$4,500

OOPM: \$6,500

PCP co-pay: \$20 copay

ER co-pay: 20% co-ins. after deductible

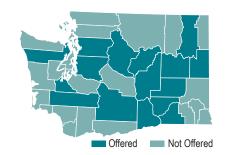
Premium Range

(non-smoker 40 year old)

Low: \$224.07 (Rating Area 4) High: \$257.65 (Rating Area 5)

Counties Offered: (16) Adams, Benton, Chelan, Douglas, Franklin, Grant, Jefferson, King, Lewis, Lincoln, Snohomish, Spokane, Stevens, Thurston,

Walla Walla, Yakima



SII VER

Issuer: Coordinated Care

Name: Ambetter Balanced Care 1

PLAN SUMMARY

Market: Individual New

Deductible: \$5,500

OOPM: \$6,500

PCP co-pay: \$30 copay

ER co-pay: 20% co-ins. after deductible

Premium Range

(non-smoker 40 year old) Low: \$212.22 (Rating Area 4)

High: \$244.03 (Rating Area 5)

Counties Offered: (16) Adams, Benton, Chelan, Douglas, Franklin, Grant, Jefferson, King, Lewis, Lincoln, Snohomish, Spokane, Stevens, Thurston,

Walla Walla, Yakima



SILVEF

Issuer: Coordinated Care

Name: Ambetter Balanced Care 1 + Vision

PLAN SUMMARY

Market: Individual New

Deductible: \$5,500

OOPM: \$6,500

PCP co-pay: \$30 copay

ER co-pay: 20% co-ins. after deductible

Premium Range

(non-smoker 40 year old)

Low: \$217.43 (Rating Area 4) High: \$250.02 (Rating Area 5)

Counties Offered: (16) Adams, Benton, Chelan, Douglas, Franklin, Grant, Jefferson, King, Lewis, Lincoln, Snohomish, Spokane, Stevens, Thurston,

Walla Walla, Yakima



SILVER

Issuer: Coordinated Care

Name: Ambetter Balanced Care 2

PLAN SUMMARY

Market: Individual New

Deductible: \$6,500

OOPM: \$6,500

PCP co-pay: \$30 copay

ER co-pay: No charge after deductible

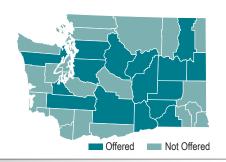
Premium Range

(non-smoker 40 year old) Low: \$209.08 (Rating Area 4)

High: \$240.42 (Rating Area 5)

Counties Offered: (16) Adams, Benton, Chelan, Douglas, Franklin, Grant, Jefferson, King, Lewis, Lincoln, Snohomish, Spokane, Stevens, Thurston,

Walla Walla, Yakima



SILVEF

Issuer: Coordinated Care

Name: Ambetter Balanced Care 2 + Vision

PLAN SUMMARY

Market: Individual New

Deductible: \$6,500

OOPM: \$6,500

PCP co-pay: \$30 copay

ER co-pay: No charge after deductible

Premium Range

(non-smoker 40 year old)

Low: \$214.21 (Rating Area 4) High: \$246.32 (Rating Area 5)

Counties Offered: (16) Adams, Benton, Chelan, Douglas, Franklin, Grant, Jefferson, King, Lewis, Lincoln, Snohomish, Spokane, Stevens, Thurston,

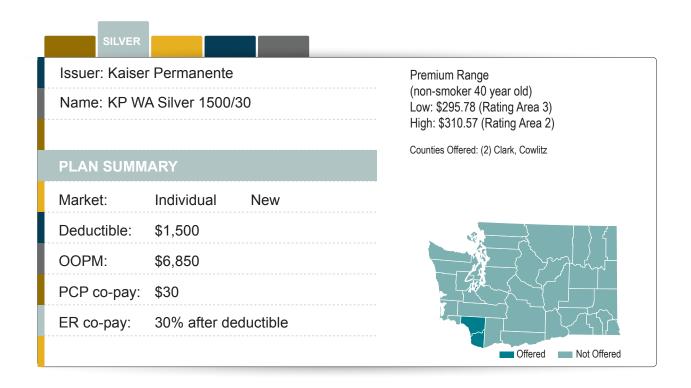
Walla Walla, Yakima



Issuer: Group Health Cooperative Premium Range (non-smoker 40 year old) Name: Flex Silver Low: \$251.26 (Rating Area 1) High: \$280.15 (Rating Area 2) Counties Offered: (19) Benton, Columbia, Franklin, **PLAN SUMMARY** Island, King, Kitsap, Kittitas, Lewis, Mason, Pierce, San Juan, Skagit, Snohomish, Spokane, Thurston, Walla Walla, Whatcom, Whitman, Yakima Market: Individual New Deductible: \$1,500 OOPM: \$6,350 PCP co-pay: \$20 ER co-pay: \$200 + 30% Offered Not Offered

Issuer: Group Health Cooperative Premium Range (non-smoker 40 year old) Name: Core Silver HSA Low: \$240.62 (Rating Area 1) High: \$268.29 (Rating Area 2) Counties Offered: (19) Benton, Columbia, Franklin, **PLAN SUMMARY** Island, King, Kitsap, Kittitas, Lewis, Mason, Pierce, San Juan, Skagit, Snohomish, Spokane, Thurston, Walla Walla, Whatcom, Whitman, Yakima Market: Individual New Deductible: \$2,800 OOPM: \$5,500 PCP co-pay: 10% ER co-pay: 10% Offered Not Offered

Issuer: Health Alliance Northwest Premium (non-smoker 40 year old) Name: Summit 3000c Silver \$329.23 (Rating Area 5) Counties Offered: (4) Grant, Douglas, Okanogan, **PLAN SUMMARY** Chelan Individual Market: New Deductible: \$3,000 OOPM: \$6,700 PCP co-pay: \$25 copay ER co-pay: \$300 copay Not Offered Offered



SILVER

Issuer: Kaiser Permanente

Name: KP WA Silver 3000/30

Premium Range (non-smoker 40 year old) Low: \$276.01 (Rating Area 3) High: \$289.81 (Rating Area 2)

Counties Offered: (2) Clark, Cowlitz

PLAN SUMMARY

Market: Individual New

Deductible: \$3,000

OOPM: \$6,850

PCP co-pay: \$30

ER co-pay: 30% after deductible



II VER

Issuer: LifeWise

Name: LifeWise Essential Silver EPO 3000

Premium Range (non-smoker 40 year old) Low: \$283.45 (Rating Area 4) High: \$315.80 (Rating Areas 2, 3)

Counties Offered: All counties

PLAN SUMMARY

Market: Individual New

Deductible: \$3,000

OOPM: \$6,850

PCP co-pay: \$30 copay first 2 w/ PCP in full

ER co-pay: \$250 copay, then deductible,

then 20% co-ins.



Issuer: LifeWise Premium Range (non-smoker 40 year old) Name: LifeWise Essential Silver EPO HSA 3000 Low: \$274.09 (Rating Area 4) High: \$305.38 (Rating Areas 2, 3) Counties Offered: All counties **PLAN SUMMARY** Market: Individual New Deductible: \$3,000 OOPM: \$4,850 PCP co-pay: Deductible, then 20% co-ins. Deductible, then 20% co-ins. ER co-pay: Offered Not Offered

SILVER

Issuer: Moda Health Plan

Name: Moda Health Be Confident

Premium Range (non-smoker 40 year old) Low: \$335.59 (Rating Area 4)

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AS OF OCT. 28, 2015 MODA HEALTH PLAN HAS WITHDRAWN FROM WASHINGTON HEALTHPLANFINDER

Market: Individual Renewal

Deductible: \$1,550

OOPM: \$6,850

PCP co-pay: \$30 copay, deductible waived

ER co-pay: 30% co-ins.

Offered Not Offered

SII VER

Issuer: Moda Health Plan

Name: Moda Health Be Steady

Premium Range

(non-smoker 40 year old) Low: \$299.39 (Rating Area 4)

AS OF OCT. 28, 2015 MODA HEALTH PLAN HAS WITHDRAWN FROM WASHINGTON HEALTHPLANFINDER

Market: Individual New

Deductible: \$3,500

OOPM: \$6,850

PCP co-pay: \$30 copay, deductible waived

ER co-pay: 30% co-ins., deductible waived



SILVEE

Issuer: Molina

Name: Molina Marketplace Silver

Premium Range

(non-smoker 40 year old) Low: \$226.22 (Rating Area 4) High: \$259.91 (Rating Area 2)

PLAN SUMMARY

Market: Individual Renewal

Deductible: \$2,000 medical; \$200 drug

OOPM: \$6,600

PCP co-pay: \$25 copay

ER co-pay: \$250 copay

Counties Offered: (9) Chelan, Douglas, Grant, King, Mason, Okanogan, Pierce, Spokane, Thurston



SILVER

Issuer: Molina

Name: Molina Marketplace Choice Silver

PLAN SUMMARY

Market: Individual New

Deductible: \$2,000 medical; \$200 drug

OOPM: \$6,850

PCP co-pay: \$20 copay

ER co-pay: \$300 copay

Premium Range

(non-smoker 40 year old) Low: \$220.24 (Rating Area 4) High: \$253.04 (Rating Area 2)

Counties Offered: (9) Chelan, Douglas, Grant, King, Mason, Okanogan, Pierce, Spokane, Thurston



SILVEE

Issuer: Premera Blue Cross

Name: Premera Blue Cross PersonalCare Silver

Premium Range

(non-smoker 40 year old) Low: \$329.55 (Rating Area 1) High: \$337.78 (Rating Area 2)

Counties Offered: All counties except Clark

PLAN SUMMARY

Market: Individual New

Deductible: \$2,500

OOPM: \$6,850

PCP co-pay: \$20 copay

ER co-pay: \$250 copay, then deductible



SILVER

Issuer: Premera Blue Cross

Name: Premera Blue Cross Preferred Silver

3000 HSA

PLAN SUMMARY

Market: Individual Renewal

Deductible: \$3,000

OOPM: \$4,100

PCP co-pay: Deductible, then 20% co-ins.

ER co-pay: Deductible, then 20% co-ins.

Premium Range

(non-smoker 40 year old) Low: \$290.38 (Rating Area 4) High: \$323.52 (Rating Area 2, 3)

Counties Offered: All counties except Clark



SILVEF

Issuer: Premera Blue Cross

Name: Premera Blue Cross Preferred Silver

3000

PLAN SUMMARY

Market: Individual Renewal

Deductible: \$3,000

OOPM: \$6,850

PCP co-pay: \$15 copay first 2 w/ PCP in full

ER co-pay: \$250 copay, then deductible,

then 20% co-ins.

Premium Range

(non-smoker 40 year old) Low: \$313.80 (Rating Area 4) High: \$349.62 (Rating Areas 2, 3)

Counties Offered: All counties except Clark



SII VER

Issuer: Premera Blue Cross MSP

Name: Multi-State Plan Blue Cross Silver 3000

HSA

PLAN SUMMARY

Market: Individual Renewal

Deductible: \$3,000

OOPM: \$4,100

PCP co-pay: Deductible, then 20% co-ins.

ER co-pay: Deductible, then 20% co-ins.

Premium Range (non-smoker 40 year old)

Low: \$289.67 (Rating Area 4) High: \$322.73 (Rating Areas 2, 3)

Counties Offered: All counties except Clark



SILVEF

Issuer: Premera Blue Cross MSP

Name: Multi-State Plan Blue Cross Silver 3000

Premium Range

(non-smoker 40 year old) Low: \$313.09 (Rating Area 4) High: \$348.83 (Rating Areas 2, 3)

Counties Offered: All counties except Clark

PLAN SUMMARY

Market: Individual Renewal

Deductible: \$3,000

OOPM: \$6,850

PCP co-pay: \$15 copay first 2 w/ PCP in full

ER co-pay: \$250 copay, then deductible,

then 20% co-ins.



SII VER

Issuer: Regence BlueShield

Name: Silver HDHP 2500 MultiCare

PLAN SUMMARY

Market: Individual New

Deductible: \$2,500

OOPM: \$5,000

PCP co-pay: 20% after deductible

ER co-pay: 20% after deductible

Premium Range (non-smoker 40 year old)

Low: \$292.15 (Rating Area 1) High: \$299.45 (Rating Area 2)

Counties Offered: (2) Partial King, Pierce



SILVEE

Issuer: Regence BlueShield

Name: Silver HDHP 2500 EvergreenHealth

Partners/Virginia Mason

PLAN SUMMARY

Market: Individual New

Deductible: \$2,500

OOPM: \$5,000

PCP co-pay: 20% after deductible

ER co-pay: 20% after deductible

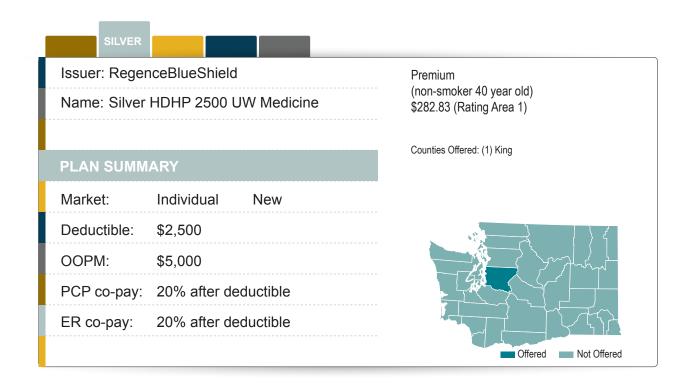
Premium

(non-smoker 40 year old) \$278.99 (Rating Area 1)

Counties Offered: (1) King



Issuer: Regence BlueShield Premium (non-smoker 40 year old) Name: Silver HDHP 2500 Providence-Swedish \$297.30 (Rating Area 1) Health Counties Offered: (1) King **PLAN SUMMARY** Individual Market: New Deductible: \$2,500 OOPM: \$5,000 PCP co-pay: 20% after deductible 20% after deductible ER co-pay: Offered Not Offered



SILVEF

Issuer: Regence BlueShield

Name: Silver HDHP 2500 The Everett Clinic

Premium (non-smoker 40 year old) \$304.09 (Rating Area 1)

Counties Offered: (1) Snohomish

PLAN SUMMARY

Market: Individual New

Deductible: \$2,500

OOPM: \$5,000

PCP co-pay: 20% after deductible

ER co-pay: 20% after deductible



SILVEE

Issuer: Regence BlueShield

Name: Silver Connect 4000 MultiCare

Premium Range

(non-smoker 40 year old) Low: \$319.19 (Rating Area 1) High: \$327.17 (Rating Area 2)

Counties Offered: (2) Partial King, Pierce

PLAN SUMMARY

Market: Individual New

Deductible: \$4,000

OOPM: \$6,850

PCP co-pay: \$20

ER co-pay: 50% after deductible



SILVE

Issuer: Regence BlueShield

Name: Silver Connect 4000 Evergreen Health

Partners/Virginia Mason

PLAN SUMMARY

Market: Individual New

Deductible: \$4,000

OOPM: \$6,850

PCP co-pay: \$20

ER co-pay: 50% after deductible

Premium

(non-smoker 40 year old) \$304.78 (Rating Area 1)

Counties Offered: (1) King



SILVEE

Issuer: Regence BlueShield

Name: Silver Connect 4000 Providence-Swedish

Health

PLAN SUMMARY

Market: Individual New

Deductible: \$4,000

OOPM: \$6,850

PCP co-pay: \$20

ER co-pay: 50% after deductible

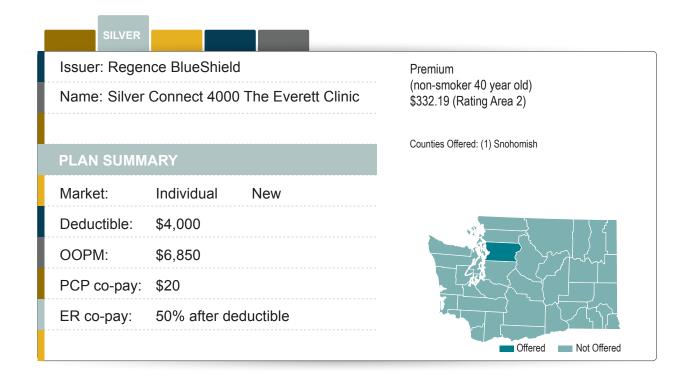
Premium

(non-smoker 40 year old) \$324.83 (Rating Area 1)

Counties Offered: (1) King



Issuer: Regence BlueShield Premium (non-smoker 40 year old) Name: Silver Connect 4000 UW Medicine \$308.98 (Rating Area 1) Counties Offered: (1) King **PLAN SUMMARY** Individual Market: New Deductible: \$4,000 OOPM: \$6,850 PCP co-pay: \$20 50% after deductible ER co-pay: Offered Not Offered



SII VER

Issuer: UnitedHealthcare of Washington, Inc.

Name: Silver Charter 1750

Premium Range (non-smoker 40 year old) Low: \$275.85 (Rating Area 4)

High: \$316.32 (Rating Area 2)

Counties Offered: All counties

PLAN SUMMARY

Market: Individual New

Deductible: \$1,750 (combined medical and drug)

OOPM: \$4,500

PCP co-pay: 30% co-ins. after deductible

ER co-pay: 30% co-ins. after deductible



SILVEE

Issuer: UnitedHealthcare of Washington, Inc.

Name: Silver Navigate 1750

Premium Range

(non-smoker 40 year old) Low: \$278.81 (Rating Area 4) High: \$319.71 (Rating Area 2)

Counties Offered: All counties

PLAN SUMMARY

Market: Individual New

Deductible: \$1,750 (combined medical and drug)

OOPM: \$4,500

PCP co-pay: 30% co-ins. after deductible



SII VER

Issuer: UnitedHealthcare of Washington, Inc.

Name: Silver Charter 2000

Premium Range (non-smoker 40 year old) Low: \$289.14 (Rating Area 4)

High: \$331.56 (Rating Area 2)

Counties Offered: All counties

PLAN SUMMARY

Market: Individual New

Deductible: \$2,000

OOPM: \$6,850

PCP co-pay: \$30 copay

ER co-pay: 30% co-ins. after deductible



SILVEE

Issuer: UnitedHealthcare of Washington, Inc.

Name: Silver Navigate 2000

Premium Range

(non-smoker 40 year old) Low: \$292.10 (Rating Area 4) High: \$334.95 ((Rating Area 2)

Counties Offered: All counties

PLAN SUMMARY

Market: Individual New

Deductible: \$2,000

OOPM: \$6,850

PCP co-pay: \$30 copay



SII VER

Issuer: UnitedHealthcare of Washington, Inc.

Name: Silver Charter HSA 2700

Premium Range (non-smoker 40 year old) Low: \$269.95 (Rating Area 4)

High: \$309.55 (Rating Area 2)

Counties Offered: All counties

PLAN SUMMARY

Market: Individual New

Deductible: \$2,700 (combined medical and drug)

OOPM: \$4,700

PCP co-pay: 30% co-ins. after deductible

ER co-pay: 30% co-ins. after deductible



SILVEE

Issuer: UnitedHealthcare of Washington, Inc.

Name: Silver Navigate HSA 2700

Premium Range (non-smoker 40 year old) Low: \$272.90 (Rating Area 4)

High: \$312.93 (Rating Area 2)

Counties Offered: All counties

PLAN SUMMARY

Market: Individual New

Deductible: \$2,700 (combined medical and drug)

OOPM: \$4,700

PCP co-pay: 30% co-ins. after deductible



SILVEF

Issuer: UnitedHealthcare of Washington, Inc.

Name: Silver Charter 3500

Premium Range (non-smoker 40 year old) Low: \$281.17 (Rating Area 4)

High: \$322.42 (Rating Area 2)

Counties Offered: All counties

PLAN SUMMARY

Market: Individual New

Deductible: \$3,500

OOPM: \$6,600

PCP co-pay: \$35 copay

ER co-pay: 30% co-ins. after deductible



SILVEE

Issuer: UnitedHealthcare of Washington, Inc.

Name: Silver Navigate 3500

Premium Range

(non-smoker 40 year old) Low: \$284.12 (Rating Area 4) High: \$325.80 (Rating Area 2)

Counties Offered: All counties

PLAN SUMMARY

Market: Individual New

Deductible: \$3,500

OOPM: \$6,600

PCP co-pay: \$35 copay



SILVER

Issuer: UnitedHealthcare of Washington, Inc.

Name: Silver Charter 4000

Premium Range (non-smoker 40 year old) Low: \$285.30 (Rating Area 4)

Counties Offered: All counties

High: \$327.16 (Rating Area 2)

PLAN SUMMARY

Market: Individual New

Deductible: \$4,000

OOPM: \$6,850

PCP co-pay: \$12 co-pay

ER co-pay: 30% co-ins. after deductible

Offered Not Offered

SILVEE

Issuer: UnitedHealthcare of Washington, Inc.

Name: Silver Navigate 4000

Premium Range

(non-smoker 40 year old) Low: \$288.26 (Rating Area 4) High: \$330.54 (Rating Area 2)

Counties Offered: All counties

PLAN SUMMARY

Market: Individual New

Deductible: \$4,000

OOPM: \$6,850

PCP co-pay: \$12 copay



SILVER

Issuer: UnitedHealthcare of Washington, Inc.

Name: Silver Charter 5000

Premium Range (non-smoker 40 year old) Low: \$283.83 (Rating Area 4)

High: \$325.46 (Rating Area 2)

Counties Offered: All counties

PLAN SUMMARY

Market: Individual New

Deductible: \$5,000

OOPM: \$6,300

PCP co-pay: \$15 copay

ER co-pay: 30% co-ins. after deductible



SILVEE

Issuer: UnitedHealthcare of Washington, Inc.

Name: Silver Navigate 5000

Premium Range

(non-smoker 40 year old) Low: \$286.78 (Rating Area 4) High: \$328.85 (Rating Area 2)

Counties Offered: All counties

PLAN SUMMARY

Market: Individual New

Deductible: \$5,000

OOPM: \$6,300

PCP co-pay: \$15 copay



SII VEE

Issuer: UnitedHealthcare of Washington, Inc.

Name: Silver Charter 6000

Premium Range (non-smoker 40 year old)

Low: \$284.71 (Rating Area 4) High: \$326.48 (Rating Area 2)

Counties Offered: All counties

PLAN SUMMARY

Market: Individual New

Deductible: \$6,000

OOPM: \$6,000

PCP co-pay: \$25 copay

ER co-pay: 0% co-ins. after deductible



SILVEE

Issuer: UnitedHealthcare of Washington, Inc.

Name: Silver Navigate 6000

Premium Range

(non-smoker 40 year old) Low: \$287.96 (Rating Area 4) High: \$330.20 (Rating Area 2)

Counties Offered: All counties

PLAN SUMMARY

Market: Individual New

Deductible: \$6,000

OOPM: \$6,000

PCP co-pay: \$25 copay



BRONZE

Issuer: BridgeSpan Health Company

Name: Bronze HDHP 5000 Legacy Health

Premium (non-smoker 40 year old)

\$263.63 (Rating Area 3)

Counties Offered: (1) Clark

PLAN SUMMARY

Market: Individual New

Deductible: \$5,000

OOPM: \$6,250

PCP co-pay: 30% after deductible

ER co-pay: 30% after deductible



BRONZE

Issuer: BridgeSpan Health Company

Name: Bronze HDHP 5000 RealValue and

SimpleConnect

PLAN SUMMARY

Market: Individual Renewal

Deductible: \$5,000

OOPM: \$6,250

PCP co-pay: 30% after deductible

ER co-pay: 30% after deductible

Premium Range

(non-smoker 40 year old) Low: \$237.71 (Rating Area 4)

High: \$259.76 (Rating Area 2)

Counties Offered: (11) Benton, Franklin, King, Kitsap, Pierce, Skagit, Snohomish, Spokane, Thurston, Walla

Walla, Yakima



BRONZE

Issuer: BridgeSpan Health Company

Name: Bronze HDHP 5000 MultiCare

Premium Range (non-smoker 40 year old) Low: \$249.03 (Rating Area 1) High: \$255.26 (Rating Area 2)

Counties Offered: (2) Partial King, Pierce

PLAN SUMMARY

Market: Individual New

Deductible: \$5,000

OOPM: \$6,250

PCP co-pay: 30% after deductible

ER co-pay: 30% after deductible



BRONZE

Issuer: BridgeSpan Health Company

Name: Bronze HDHP 5000 Providence-Swedish

Health

PLAN SUMMARY

Market: Individual New

Deductible: \$5,000

OOPM: \$6,250

PCP co-pay: 30% after deductible

ER co-pay: 30% after deductible

Premium

(non-smoker 40 year old) \$253.43 (Rating Area 1)

Counties Offered: (1) King



BRONZE

Issuer: BridgeSpan Health Company

Name: Bronze HDHP 5000 EvergreenHealth

Partners/Virginia Mason

PLAN SUMMARY

Market: Individual New

Deductible: \$5,000

OOPM: \$6,250

PCP co-pay: 30% after deductible

ER co-pay: 30% after deductible

Premium

(non-smoker 40 year old) \$237.82 (Rating Area 1)

Counties Offered: (1) King



BRONZE

Issuer: BridgeSpan Health Company

Name: Bronze HDHP 5000 UW Medicine

Premium

(non-smoker 40 year old) \$241.07 (Rating Area 1)

Counties Offered: (1) King

PLAN SUMMARY

Market: Individual New

Deductible: \$5,000

OOPM: \$6,250

PCP co-pay: 30% after deductible

ER co-pay: 30% after deductible



BRONZE

Issuer: BridgeSpan Health Company

Name: Bronze HDHP 5000 The Everett Clinic

Premium (non-smoker 40 year old) \$259.17 (Rating Area 2)

Counties Offered: (1) Snohomish

PLAN SUMMARY

Market: Individual New

Deductible: \$5,000

OOPM: \$6,250

PCP co-pay: 30% after deductible

ER co-pay: 30% after deductible



BRONZE

Issuer: BridgeSpan Health Company

Name: Bronze Essential 6850 RealValue and

SimpleConnect

PLAN SUMMARY

Market: Individual New

Deductible: \$6,850

OOPM: \$6,850

PCP co-pay: 2 visits at \$40 before deductible

ER co-pay: 0% after deductible

Premium Range

(non-smoker 40 year old) Low: \$263.61 (Rating Area 4) High: \$288.06 (Rating Area 2)

Counties Offered: (11) Benton, Franklin, King, Kitsap, Pierce, Skagit, Snohomish, Spokane, Thurston, Walla Walla, Yakima



BRONZE

Issuer: BridgeSpan Health Company

Name: Bronze Essential 6850 Legacy Health

Premium (non-smoker 40 year old) \$292.39 (Rating Area 3)

Counties Offered: (1) Clark

PLAN SUMMARY

Market: Individual New

Deductible: \$6,850

OOPM: \$6,850

PCP co-pay: 2 visits at \$40 before deductible

ER co-pay: 0% after deductible



BRONZE

Issuer: Columbia United Providers

Name: Columbia United Providers-Cascade

Premium

(non-smoker 40 year old) \$244.52 (Rating Area 3)

AS OF NOV. 13, 2015 COLUMBIA UNITED PROVIDERS HAS WITHDRAWN FROM WASHINGTON HEALTHPLANFINDER

Market: Individual New

Deductible: \$5,500

OOPM: \$6,800

PCP co-pay: \$60



BRONZE

Issuer: Columbia United Providers

(non-smoker 40 year old) \$272.88 (Rating Area 3)

AS OF NOV. 13, 2015 COLUMBIA UNITED PROVIDERS HAS WITHDRAWN FROM WASHINGTON HEALTHPLANFINDER

Market:

Deductible: \$6,500

OOPM: \$6,800

PCP co-pay:

30% co-ins. after deductible ER co-pay:



BRONZE

Issuer: Coordinated Care

Name: Ambetter Essential Care 1

PLAN SUMMARY

Market: Individual Renewal

Deductible: \$6,500

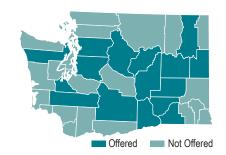
OOPM: \$6,500

PCP co-pay: No charge after deductible

ER co-pay: No charge after deductible Premium Range

(non-smoker 40 year old) Low: \$186.08 (Rating Area 4) High: \$213.97 (Rating Area 5)

Counties Offered: (16) Adams, Benton, Chelan, Douglas, Franklin, Grant, Jefferson, King, Lewis, Lincoln, Snohomish, Spokane, Stevens, Thurston, Walla Walla, Yakima



BRONZE

Issuer: Coordinated Care

Name: Ambetter Essential Care 1 + Vision

PLAN SUMMARY

Individual Renewal Market:

Deductible: \$6,500

OOPM: \$6,500

PCP co-pay: No charge after deductible

No charge after deductible ER co-pay:

Premium Range

(non-smoker 40 year old) Low: \$190.65 (Rating Area 4)

High: \$219.23 (Rating Area 5)

Counties Offered: (16) Adams, Benton, Chelan, Douglas, Franklin, Grant, Jefferson, King, Lewis, Lincoln, Snohomish, Spokane, Stevens, Thurston,

Walla Walla, Yakima



BRONZE

Issuer: Coordinated Care

Name: Ambetter Essential Care 5 + 3 Free PCP

Visits

PLAN SUMMARY

Market: Individual New

Deductible: \$6,800

OOPM: \$6,800

PCP co-pay: No charge after deductible,

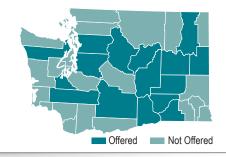
first 3 visits are no cost-share

ER co-pay: No charge after deductible Premium Range

(non-smoker 40 year old) Low: \$191.10 (Rating Area 4) High: \$219.74 (Rating Area 5)

Counties Offered: (16) Adams, Benton, Chelan, Douglas, Franklin, Grant, Jefferson, King, Lewis, Lincoln, Snohomish, Spokane, Stevens, Thurston,

Walla Walla, Yakima



BRONZE

Issuer: Coordinated Care

Name: Ambetter Essential Care 5 + 3 Free

PCP Visits + Vision

PLAN SUMMARY

Market: Individual New

Deductible: \$6,800

OOPM: \$6,800

PCP co-pay: No charge after deductible,

first 3 visits are no cost-share

ER co-pay: No charge after deductible

Premium Range

(non-smoker 40 year old) Low: \$195.79 (Rating Area 4)

High: \$225.14 (Rating Area 5)

Counties Offered: (16) Adams, Benton, Chelan, Douglas, Franklin, Grant, Jefferson, King, Lewis, Lincoln, Snohomish, Spokane, Stevens, Thurston,

Walla Walla, Yakima



BRONZE

Issuer: Group Health Cooperative

Name: Core Bronze HSA

PLAN SUMMARY

Market: Individual Renewal

Deductible: \$4,500

OOPM: \$6,450

PCP co-pay: 20%

ER co-pay: 20%

Premium Range

(non-smoker 40 year old) Low: \$209.21 (Rating Area 1)

High: \$233.27 (Rating Area 2)

Counties Offered: (19) Benton, Columbia, Franklin, Island, King, Kitsap, Kittitas, Lewis, Mason, Pierce, San Juan, Skagit, Snohomish, Spokane, Thurston, Walla Walla, Whatcom, Whitman, Yakima



BRONZE

Issuer: Group Health Cooperative

Name: Flex Bronze

PLAN SUMMARY

Market: Individual New

Deductible: \$6,000

OOPM: \$6,850

PCP co-pay: \$40, 1st 3 not subject to ded;

then 20%

ER co-pay: 20%

Premium Range

(non-smoker 40 year old) Low: \$207.71 (Rating Area 1)

High: \$231.60 (Rating Area 2)

Counties Offered: (19) Benton, Columbia, Franklin, Island, King, Kitsap, Kittitas, Lewis, Mason, Pierce, San Juan, Skagit, Snohomish, Spokane, Thurston, Walla Walla, Whatcom, Whitman, Yakima



BRONZE

Issuer: Health Alliance Northwest

Name: Summit 5500 Bronze

Premium

(non-smoker 40 year old) \$264.18 (Rating Area 5)

PLAN SUMMARY

Market: Individual New

Deductible: \$5,500

OOPM: \$6,600

PCP co-pay: 30% co-ins. after deductible

ER co-pay: 30% co-ins. after deductible

Counties Offered: (4) Chelan, Douglas, Okanogan, Grant



BRONZE

Issuer: Health Alliance Northwest

Name: Summit 6250 Bronze

Premium

(non-smoker 40 year old) \$264.46 (Rating Area 5)

PLAN SUMMARY

Counties Offered: (4) Chelan, Douglas, Okanogan,
Grant

Market: Individual New

Deductible: \$6,250

OOPM: \$6,250

PCP co-pay: No charge after deductible

ER co-pay: No charge after deductible



BRONZE

Issuer: Kaiser Permanente

Name: KP WA Bronze 4500/50

Premium Range

(non-smoker 40 year old) Low: \$220.38 (Rating Area 3) High: \$231.39 (Rating Area 2)

PLAN SUMMARY

Counties Offered: (2) Clark, Cowlitz

Market: Individual New

Deductible: \$4,500

OOPM: \$6,850

PCP co-pay: First 3 visits at \$50, prior deductible

ER co-pay: 40% after deductible



BRONZE

Issuer: Kaiser Permanente

Name: KP WA Bronze 5000/30% HSA

PLAN SUMMARY

Market: Individual New

Deductible: \$5,000

OOPM: \$6,450

PCP co-pay: 30% after deductible

ER co-pay: 30% after deductible

Premium Range

(non-smoker 40 year old) Low: \$212.33 (Rating Area 3) High: \$222.95 (Rating Area 2)

Counties Offered: (2) Clark, Cowlitz



BRONZE

Issuer: Kaiser Permanente

Name: KP WA Bronze 6000/50

Premium Range

(non-smoker 40 year old) Low: \$215.76 (Rating Area 3) High: \$226.55 (Rating Area 2)

Counties Offered: (2) Clark, Cowlitz

PLAN SUMMARY

Market: Individual New

Deductible: \$6,000

OOPM: \$6,850

PCP co-pay: First 3 visits at \$50, prior deductible

ER co-pay: 50% after deductible



BRONZE

Issuer: LifeWise

Name: LifeWise Essential Bronze EPO HSA 6000

Premium Range (non-smoker 40 year old) Low: \$217.21 (Rating Area 4) High: \$242.00 (Rating Areas 2, 3)

Counties Offered: All counties

PLAN SUMMARY

Market: Individual New

Deductible: \$6,000

OOPM: \$6,000

PCP co-pay: Deductible, then 0% co-ins.

ER co-pay: Deductible, then 0% co-ins.



BRONZE

Issuer: LifeWise

Name: LifeWise Essential Bronze EPO 6350

Premium Range (non-smoker 40 year old)

Low: \$223.62 (Rating Area 4) High: \$249.14 (Rating Areas 2, 3)

Counties Offered: All counties

PLAN SUMMARY

Market: Individual New

Deductible: \$6,350

OOPM: \$6,850

PCP co-pay: \$30 copay

ER co-pay: \$250 copay, then deductible,

then 20% co-ins.



BRONZE

Issuer: Moda Health Plan

Name: Moda Health HSA

Premium Range

(non-smoker 40 year old) Low: \$285.46 (Rating Area 4)

AS OF OCT. 28, 2015 MODA HEALTH PLAN HAS WITHDRAWN FROM WASHINGTON HEALTHPLANFINDER

Market: Individual New

Deductible: \$3,250

OOPM: \$6,550

PCP co-pay: 50% co-ins.

ER co-pay: 50% co-ins.



BRONZE

Issuer: Moda Health Plan

Name: Moda Health Be Concise

Premium Range

(non-smoker 40 year old) Low: \$263.18 (Rating Area 4)

AS OF OCT. 28, 2015 MODA HEALTH PLAN HAS WITHDRAWN FROM WASHINGTON HEALTHPLANFINDER

Market: Individual New

Deductible: \$5,400

OOPM: \$6,850

PCP co-pay: \$80 copay, deductible waived

ER co-pay: 35% co-ins.



BRONZE

Issuer: Molina

Name: Molina Marketplace Choice Bronze

PLAN SUMMARY

Market: Individual New

Deductible: \$5,000

OOPM: \$6,850

PCP co-pay: \$25 copay after deductible

ER co-pay: \$300 copay after deductible

Premium Range

(non-smoker 40 year old) Low: \$185.35 (Rating Area 4) High: \$212.95 (Rating Area 2)

Counties Offered: (9) Chelan, Douglas, Grant, King, Mason, Okanogan, Pierce, Spokane, Thurston



BRONZE

Issuer: Premera Blue Cross

Name: Premera Blue Cross PersonalCare

Bronze

PLAN SUMMARY

Market: Individual New

Deductible: \$4500 Med; \$1000 Rx

OOPM: \$6,850

PCP co-pay: \$30 copay

ER co-pay: \$250 copay, then deductible

Premium Range

(non-smoker 40 year old) Low: \$247.43 (Rating Area 1) High: \$253.61 (Rating Area 2)

Counties Offered: (3) King, Pierce, Snohomish



BRONZE

Issuer: Premera Blue Cross

Name: Premera Blue Cross Preferred Bronze

HSA 5250

PLAN SUMMARY

Market: Individual New

Deductible: \$5,250

OOPM: \$6,100

PCP co-pay: Deductible, then 20% co-ins.

ER co-pay: Deductible, then 20% co-ins.

Premium Range

(non-smoker 40 year old) Low: \$237.95 (Rating Area 4) High: \$265.11 (Rating Areas 2, 3)

Counties Offered: All counties except Clark



BRONZE

Issuer: Premera Blue Cross MSP

Name: Multi-State Plan Blue Cross Bronze

HSA 5250

PLAN SUMMARY

Market: Individual New

Deductible: \$5,250

OOPM: \$6,100

PCP co-pay: Deductible, then 20% co-ins.

ER co-pay: Deductible, then 20% co-ins.

Premium Range

(non-smoker 40 year old)

Low: \$239.23(Rating Area 4) High: \$266.54 (Rating Areas 2, 3)

Counties Offered: All counties except Clark



BRONZE

Issuer: Premera Blue Cross

Name: Premera Blue Cross Preferred Bronze

PPO 6350

PLAN SUMMARY

Market: Individual New

Deductible: \$6,350

OOPM: \$6,850

PCP co-pay: \$20 copay

ER co-pay: \$250 copay, then deductible,

then 20% co-ins.

Premium Range

(non-smoker 40 year old) Low: \$238.55 (Rating Area 4) High: \$265.78 (Rating Areas 2, 3)

Counties Offered: All counties except Clark



BRONZE

Issuer: Premera Blue Cross MSP

Name: Multi-State Plan Blue Cross Bronze PPO

6350

PLAN SUMMARY

Market: Individual New

Deductible: \$6,350

OOPM: \$6,850

PCP co-pay: \$20 copay

ER co-pay: \$250 copay, then deductible,

then 20% co-ins.

Premium Range

(non-smoker 40 year old)

Low: \$239.44 (Rating Area 4) High: \$266.76 (Rating Areas 2, 3)

Counties Offered: All counties except Clark



BRONZE

Issuer: Regence BlueShield

Name: Bronze HDHP 5000 MultiCare

Premium Range (non-smoker 40 year old) Low: \$250.68 (Rating Area 1) High: \$256.95 (Rating Area 2)

Counties Offered: (2) Partial King, Pierce

PLAN SUMMARY

Market: Individual New

Deductible: \$5,000

OOPM: \$6,250

PCP co-pay: 30% after deductible

ER co-pay: 30% after deductible



BRONZE

Issuer: Regence BlueShield

Name: Bronze HDHP 5000 EvergreenHealth

Partners/Virginia Mason

PLAN SUMMARY

Market: Individual New

Deductible: \$5,000

OOPM: \$6,250

PCP co-pay: 30% after deductible

ER co-pay: 30% after deductible

Premium

(non-smoker 40 year old) \$239.37 (Rating Area 1)

Counties Offered: (1) King



BRONZE

Issuer: Regence BlueShield

Name: Bronze HDHP 5000 Providence-Swedish

Health

PLAN SUMMARY

Market: Individual New

Deductible: \$5,000

OOPM: \$6,250

PCP co-pay: 30% after deductible

ER co-pay: 30% after deductible

Premium

(non-smoker 40 year old) \$255.05 (Rating Area 1)

Counties Offered: (1) King



BRONZE

Issuer: Regence BlueShield

Name: Bronze HDHP 5000 UW Medicine

Premium

(non-smoker 40 year old) \$242.68 (Rating Area 1)

Counties Offered: (1) King

PLAN SUMMARY

Market: Individual New

Deductible: \$5,000

OOPM: \$6,250

PCP co-pay: 30% after deductible

ER co-pay: 30% after deductible



BRONZE

Issuer: Regence BlueShield

Name: Bronze HDHP 5000 The Everett Clinic

Premium
(non smoker 40)

(non-smoker 40 year old) \$260.89 (Rating Area 2)

Counties Offered: (1) Snohomish

PLAN SUMMARY

Market: Individual New

Deductible: \$5,000

OOPM: \$6,250

PCP co-pay: 30% after deductible

ER co-pay: 30% after deductible



BRONZE

Issuer: UnitedHealthcare of Washington, Inc.

Name: Bronze Charter HSA 4500

Premium Range (non-smoker 40 year old)

Low: \$235.69 (Rating Area 4) High: \$270.26 (Rating Area 2)

Counties Offered: All counties

PLAN SUMMARY

Market: Individual New

Deductible: \$4,500 (combined medical and drug)

OOPM: \$6,500

PCP co-pay: 30% co-ins. after deductible



BRONZE

Issuer: UnitedHealthcare of Washington, Inc.

Name: Bronze Navigate HSA 4500

Premium Range (non-smoker 40 year old) Low: \$238.05 (Rating Area 4) High: \$272.97 (Rating Area 2)

Counties Offered: All counties

PLAN SUMMARY

Market: Individual New

Deductible: \$4,500 (combined medical and drug)

OOPM: \$6,500

PCP co-pay: 30% co-ins. after deductible

ER co-pay: 30% co-ins. after deductible



BRONZE

Issuer: UnitedHealthcare of Washington, Inc.

Name: Bronze Charter 6450

Premium Range (non-smoker 40 vea

(non-smoker 40 year old) Low: \$263.45 (Rating Area 4) High: \$302.09 (Rating Area 2)

Counties Offered: All counties

PLAN SUMMARY

Market: Individual New

Deductible: \$6,450 (combined medical and drug)

OOPM: \$6,850

PCP co-pay: \$25 copay



BRONZE

Issuer: UnitedHealthcare of Washington, Inc.

Name: Bronze Navigate 6450

Premium Range (non-smoker 40 year old) Low: \$266.11 (Rating Area 4) High: \$305.14 (Rating Area 2)

Counties Offered: All counties

PLAN SUMMARY

Market: Individual New

Deductible: \$6,450 (combined medical and drug)

OOPM: \$6,850

PCP co-pay: \$25 copay

ER co-pay: 0% co-ins. after deductible



BRONZE

Issuer: UnitedHealthcare of Washington, Inc.

Name: Bronze Charter HSA 6500

Premium Range (non-smoker 40 year old) Low: \$229.19 (Rating Area 4)

High: \$262.81 (Rating Area 2)

Counties Offered: All counties

PLAN SUMMARY

Market: Individual New

Deductible: \$6,500 (combined medical and drug)

OOPM: \$6,500

PCP co-pay: 0% co-ins. after deductible



BRONZE

Issuer: UnitedHealthcare of Washington, Inc.

Name: Bronze Navigate HSA 6500

Premium Range (non-smoker 40 year old) Low: \$231.55 (Rating Area 4) High: \$265.52 (Rating Area 2)

Counties Offered: All counties

PLAN SUMMARY

Market: Individual New

Deductible: \$6,500 (combined medical and drug)

OOPM: \$6,500

PCP co-pay: 0% co-ins. after deductible

ER co-pay: 0% co-ins. after deductible



BRONZE

Issuer: UnitedHealthcare of Washington, Inc.

Name: Bronze Charter 6500

Premium Range

(non-smoker 40 year old) Low: \$233.91 (Rating Area 4) High: \$268.23 (Rating Area 2)

Counties Offered: All counties

PLAN SUMMARY

Market: Individual New

Deductible: \$6,500 (combined medical and drug)

OOPM: \$6,850

PCP co-pay: 0% co-ins. after deductible



BRONZE

Issuer: UnitedHealthcare of Washington, Inc.

Name: Bronze Navigate 6500

Premium Range (non-smoker 40 year old) Low: \$236.57 (Rating Area 4) High: \$271.28 (Rating Area 2)

Counties Offered: All counties

PLAN SUMMARY

Market: Individual New

Deductible: \$6,500 (combined medical and drug)

OOPM: \$6,850

PCP co-pay: 0% co-ins. after deductible



CATASTROPHIC PLANS

CATASTROPHIC

Issuer: Group Health Cooperative

Name: Core Basics Plus Catastrophic Plan

PLAN SUMMARY

Market: Individual Renewal

Deductible: \$6,850

OOPM: \$6,850

PCP co-pay: No charge after the deductible is met

ER co-pay: No charge after the deductible is met

Premium Range (non-smoker 40 year old) Low: \$187.70 (Rating Area 1) High: \$209.29 (Rating Area 2)

Counties Offered: (19) Benton, Columbia, Franklin, Island, King, Kitsap, Kittitas, Lewis, Mason, Pierce, San Juan, Skagit, Snohomish, Spokane, Thurston, Walla Walla, Whatcom, Whitman, Yakima



CATASTROPHI

Issuer: Health Alliance Northwest

Name: Summit 6850 Catastrophic

Premium

(non-smoker 40 year old) \$213.32 (Rating Area 5)

Counties Offered: (4) Grant, Douglas, Okanogan,

Chelan

PLAN SUMMARY

Market: Individual New

Deductible: \$6,850

OOPM: \$6,850

PCP co-pay: First 3 PCP visits no charge, 4+,

No charge after the deductible

ER co-pay: No charge after the deductible



CATASTROPHIC PLANS

CATASTROPHIC Issuer: Kaiser Permanente Premium Range (non-smoker 40 year old) Name: KP WA Catastrophic 6850/0 Low: \$220.46 (Rating Area 3) High: \$231.48 (Rating Area 2) Counties Offered: (2) Clark, Cowlitz **PLAN SUMMARY** Market: Individual Renewal Deductible: \$6,850 OOPM: \$6,850 PCP co-pay: First 3 visits at \$0, then 0% after deductible ER co-pay: 0% after the deductible Offered Not Offered

DENTAL

Issuer: Delta Dental of Washington

Name: Delta Dental Individual - Washington

Kids Plan

PLAN SUMMARY

Market: Individual - Dental Renewal

High/Low: Low

Deductible: \$75

Premium Per Month: \$30.81 - 1 child

\$61.62 - 2 children

\$92.43 - 3 or more

Counties Offered: All counties



Monthly Premium: \$30.81; \$61.62; \$92.43

DENTAL

Issuer: Dental Health Services

Name: First Smile - EarlyCare Plus

PLAN SUMMARY

Market: Individual - Dental Renewal

High/Low: High

Deductible: \$0

Premium Per Month: \$22.75

Monthly Premium: \$22.75

Counties Offered: (29) Benton, Chelan, Clark, Columbia, Cowlitz, Douglas, Franklin, Garfield, Grays Harbor, Island, Jefferson, King, Kitsap, Kittitas, Klickitat, Lewis, Mason, Pacific, Pierce, San Juan, Skagit, Skamania, Snohomish, Spokane, Thurston, Wahkiakum, Walla Walla, Whatcom, Yakima



DENTAL

Issuer: Dental Health Services

Name: First Smile - EarlyCare

Monthly Premium: \$21.25

PLAN SUMMARY

Market: Individual - Dental Renewal

High/Low: Low

Deductible: \$0

Premium Per Month: \$21.25

Counties Offered: (29) Benton, Chelan, Clark, Columbia, Cowlitz, Douglas, Franklin, Garfield, Grays Harbor, Island, Jefferson, King, Kitsap, Kittitas, Klickitat, Lewis, Mason, Pacific, Pierce, San Juan, Skagit, Skamania, Snohomish, Spokane, Thurston, Wahkiakum, Walla Walla, Whatcom, Yakima



DENTAL

Issuer: Kaiser Permanente

Name: KP WA Pediatric Dental 80

Monthly Premium: \$20.72

PLAN SUMMARY

Market: Individual - Dental New

High/Low: Low

Deductible: \$50

Premium Per Month: \$20.72

Counties Offered: (2) Clark, Cowlitz



Issuer: Kaiser Permanente

Name: KP WA Pediatric Dental 100

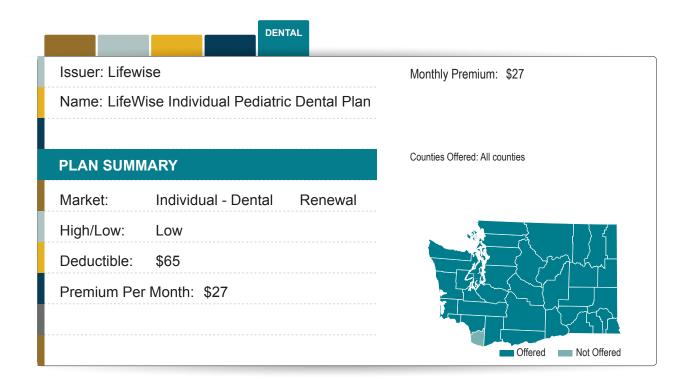
PLAN SUMMARY

Market: Individual - Dental Renewal

High/Low: High

Deductible: \$50

Premium Per Month: \$24.94



DENTAL Issuer: Premera Blue Cross Monthly Premium: \$27 Name: Premera Blue Cross Individual Pediatric Dental Plan Counties Offered: All counties except Clark **PLAN SUMMARY** Market: Individual - Dental Renewal High/Low: Low Deductible: \$65 Premium Per Month: \$27 Offered Not Offered

Issuer: Kaiser Permanente

Name: KD WA COLD 0/20

Name: KP WA GOLD 0/30

Premium Range (non-smoker 40 year old) Low: \$361.55 (Rating Area 3) High: \$379.62 (Rating Area 2)

Counties Offered: (2) Clark, Cowlitz

PLAN SUMMARY

Market: SHOP New

Metal Level: Gold

Deductible: \$0

OOPM: \$5,000

PCP co-pay: \$30

ER co-pay: \$200



SHOP

Issuer: Kaiser Permanente

Name: KP WA GOLD 500/20

Premium Range (non-smoker 40 year old) Low: \$352.34 (Rating Area 3)

High: \$369.96 (Rating Area 2)

Counties Offered: (2) Clark, Cowlitz

PLAN SUMMARY

Market: SHOP New

Metal Level: Gold

Deductible: \$500

OOPM: \$4,500

PCP co-pay: \$20

ER co-pay: 20% after deductible

Offered Not Offered

SHOP

Issuer: Kaiser Permanente

Name: KP WA GOLD 1000/20

Premium Range (non-smoker 40 year old) Low: \$339.49 (Rating Area 3) High: \$356.46 (Rating Area 2)

Counties Offered: (2) Clark, Cowlitz

PLAN SUMMARY

Market: SHOP New

Metal Level: Gold

Deductible: \$1,000

OOPM: \$5,000

PCP co-pay: \$20

ER co-pay: 20% after deductible



SHOP

Issuer: Kaiser Permanente

Name: KP WA SILVER 0/50

Premium Range

(non-smoker 40 year old) Low: \$305.08 (Rating Area 3) High: \$320.34 (Rating Area 2)

Counties Offered: (2) Clark, Cowlitz

PLAN SUMMARY

Market: SHOP New

Metal Level: Silver

Deductible: \$0

OOPM: \$6,850

PCP co-pay: \$50

ER co-pay: 50%



SHOP

Issuer: Kaiser Permanente

Name: KP WA SILVER 1500/35

Premium Range (non-smoker 40 year old) Low: \$303.00 (Rating Area 3) High: \$318.15 (Rating Area 2)

Counties Offered: (2) Clark, Cowlitz

PLAN SUMMARY

Market: SHOP New

Metal Level: Silver

Deductible: \$1,500

OOPM: \$6,850

PCP co-pay: \$35

ER co-pay: 25% after deductible



SHOP

Issuer: Kaiser Permanente

Name: KP WA SILVER 2000/35

Premium Range (non-smoker 40 year old) Low: \$296.39 (Rating Area 3) High: \$311.21 (Rating Area 2)

Counties Offered: (2) Clark, Cowlitz

PLAN SUMMARY

Market: SHOP New

Metal Level: Silver

Deductible: \$2,000

OOPM: \$6,850

PCP co-pay: \$35

ER co-pay: 25% after deductible



SHOP

Issuer: Kaiser Permanente

Name: KP WA SILVER 2600/25% HSA

Premium Range (non-smoker 40 year old) Low: \$254.46 (Rating Area 3) High: \$267.19 (Rating Area 2)

Counties Offered: (2) Clark, Cowlitz

PLAN SUMMARY

Market: SHOP New

Metal Level: Silver

Deductible: \$2,600

OOPM: \$5,200

PCP co-pay: 25% after deductible

ER co-pay: 25% after deductible



SHOP

Issuer: Kaiser Permanente

Name: KP WA SILVER 3500/40

Premium Range (non-smoker 40 year old)

Low: \$276.47 (Rating Area 3) High: \$290.28 (Rating Area 2

Counties Offered: (2) Clark, Cowlitz

PLAN SUMMARY

Market: SHOP New

Metal Level: Silver

Deductible: \$3,500

OOPM: \$6,850

PCP co-pay: \$40

ER co-pay: 30% after deductible



SHOP

Issuer: Kaiser Permanente

Name: KP WA BRONZE 3800/50% HSA

Premium Range (non-smoker 40 year old) Low: \$215.85 (Rating Area 3)

High: \$226.65 (Rating Area 2)

Counties Offered: (2) Clark, Cowlitz

PLAN SUMMARY

Market: SHOP New

Metal Level: Bronze

Deductible: \$3,800

OOPM: \$6,450

PCP co-pay: 50% after deductible

ER co-pay: 50% after deductible



SHOP

Issuer: Kaiser Permanente

Name: KP WA BRONZE 4500/50

Premium Range

(non-smoker 40 year old) Low: \$248.05 (Rating Area 3) High: \$260.46 (Rating Area 2

Counties Offered: (2) Clark, Cowlitz

PLAN SUMMARY

Market: SHOP New

Metal Level: Bronze

Deductible: \$4,500

OOPM: \$6,850

PCP co-pay: \$50

ER co-pay: 40% after deductible



SHOP

Issuer: Kaiser Permanente

Name: KP WA BRONZE 5000/60 HSA

Premium Range (non-smoker 40 year old) Low: \$206.63 (Rating Area 3) High: \$216.95 (Rating Area 2)

Counties Offered: (2) Clark, Cowlitz

PLAN SUMMARY

Market: SHOP New

Metal Level: Bronze

Deductible: \$5,000

OOPM: \$6,350

PCP co-pay: \$60 after deductible

ER co-pay: 50% after deductible



SHOP

Issuer: Kaiser Permanente

Name: KP WA BRONZE 6600/35

Premium Range (non-smoker 40 year old) Low: \$245.48 (Rating Area 3) High: \$257.76 (Rating Area 2

Counties Offered: (2) Clark, Cowlitz

PLAN SUMMARY

Market: SHOP New

Metal Level: Bronze

Deductible: \$6,600

OOPM: \$6,850

PCP co-pay: 3 visits at \$35 prior to ded/co-ins.

ER co-pay: 50% after deductible



SHOP

Issuer: Moda Health Plan

Name: PPO 500 (non-smoker 40 year old)

Low: \$405.01 (Rating Area 2)

AS OF OCT. 28, 2015 MODA HEALTH PLAN HAS WITHDRAWN FROM WASHINGTON HEALTHPLANFINDER

Market: SHOP Renewal

Metal Level: Gold

Deductible: \$500

OOPM: \$4,000

PCP co-pay: \$15 copay, deductible waived

ER co-pay: \$200 copay+20% co-ins, ded. waived



SHOP

Issuer: Moda Health Plan

Name: Moda Health Rockwood Gold 750

Premium

Premium Range

(non-smoker 40 year old) \$309.86 (Rating Area 4)

AS OF OCT. 28, 2015 MODA HEALTH PLAN HAS WITHDRAWN FROM WASHINGTON HEALTHPLANFINDER

Market: SHOP New

Metal Level: Gold

Deductible: \$750

OOPM: \$3,000

PCP co-pay: \$5 copay, deductible waived

ER co-pay: 20% co-ins.

Offered Not Offered

SHOP

Issuer: Moda Health Plan

Name: PPO 1000 (non-smoker 40 year old)

Low: \$393.25 (Rating Area 2)

AS OF OCT. 28, 2015 MODA HEALTH PLAN HAS WITHDRAWN FROM WASHINGTON HEALTHPLANFINDER

Metal Level: Gold

Deductible: \$1,000

OOPM: \$4,000

PCP co-pay: \$15 copay, deductible waived

ER co-pay: \$200 copay+20% co-ins, ded. waived



SHOP

Issuer: Moda Health Plan

ER co-pay:

Name: Moda Health HSA 1500

Premium Range (non-smoker 40 year old) Low: \$339.16 (Rating Area 4)

Premium Range

AS OF OCT. 28, 2015 MODA HEALTH PLAN HAS WITHDRAWN FROM WASHINGTON HEALTHPLANFINDER

Market: SHOP New

Metal Level: Silver

Deductible: \$1,500

OOPM: \$5,500

PCP co-pay: 30% co-ins.

30% co-ins.

Offered Not Offered

SHOP

Issuer: Moda Health Plan

Name: PPO 2000 (non-smoker 40 year old)

Low: \$338.22 (Rating Area 2)

High: \$383.12 (Rating Area 2)

AS OF OCT. 28, 2015 MODA HEALTH PLAN HAS WITHDRAWN FROM WASHINGTON HEALTHPLANFINDER

Metal Level: Silver

Deductible: \$2,000

OOPM: \$6,850

PCP co-pay: \$30 copay, deductible waived

ER co-pay: \$250 copay+30% co-ins, ded. waived



SHOP

Issuer: Moda Health Plan

Name: Value 2000

Premium Range (non-smoker 40 year old) Low: \$330.22 (Rating Area 4)

Premium Range

AS OF OCT. 28, 2015 MODA HEALTH PLAN HAS WITHDRAWN FROM WASHINGTON HEALTHPLANFINDER

Market: SHOP Renewal

Metal Level: Silver

Deductible: \$2,000

OOPM: \$6,850

PCP co-pay: \$35 copay, deductible waived

ER co-pay: \$250 copay+35% co-ins, ded. is not waived



SHOP

Issuer: Moda Health Plan

Name: Moda Health Value 2000

Premium Range (non-smoker 40 year old) Low: \$334.45 (Rating Area 4) High: \$378.86 (Rating Area 2)

AS OF OCT. 28, 2015 MODA HEALTH PLAN HAS WITHDRAWN FROM WASHINGTON HEALTHPLANFINDER

Metal Level: Silver

Deductible: \$2,000

OOPM: \$6,850

PCP co-pay: \$35 copay, deductible waived

ER co-pay: \$250 copay+30% co-ins, ded. is not waived



SHOP

Issuer: Moda Health Plan

Name: PPO 2500

Premium Range (non-smoker 40 year old) Low: \$331.63 (Rating Area 4)

AS OF OCT. 28, 2015 MODA HEALTH PLAN HAS WITHDRAWN FROM WASHINGTON HEALTHPLANFINDER

Market: SHOP Renewal

Metal Level: Silver

Deductible: \$2,500

OOPM: \$6,850

PCP co-pay: \$30 copay, deductible waived

ER co-pay: \$250 copay+30% co-ins, ded. waived



SHOP

Issuer: Moda Health Plan

Name: Value 2500 (non-smoker 40 year old)
Low: \$324.11 (Rating Area 4)

AS OF OCT. 28, 2015 MODA HEALTH PLAN HAS WITHDRAWN FROM WASHINGTON HEALTHPLANFINDER

Metal Level: Silver

Deductible: \$2,500

OOPM: \$6,850

PCP co-pay: \$35 copay, deductible waived

ER co-pay: \$250 copay+35% co-ins, ded. is not waived



SHOP

Issuer: Moda Health Plan

Name: Moda Health Rockwood Silver 2500

Premium

Premium Range

(non-smoker 40 year old) \$254.40 (Rating Area 4)

AS OF OCT. 28, 2015 MODA HEALTH PLAN HAS WITHDRAWN FROM WASHINGTON HEALTHPLANFINDER

Market: SHOP New

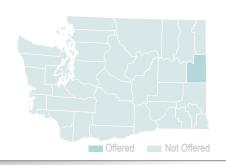
Metal Level: Silver

Deductible: \$2,500

OOPM: \$6,000

PCP co-pay: \$15 copay, deductible waived

ER co-pay: 20% co-ins.



SHOP

Issuer: Moda Health Plan

Name: Moda Health Strive 2500 (non-smoker 40 year old)
Low: \$313.76 (Rating Area 4)

AS OF OCT. 28, 2015 MODA HEALTH PLAN HAS WITHDRAWN FROM WASHINGTON HEALTHPLANFINDER

Metal Level: SHOP New

Metal Level: Silver

Deductible: \$2,500

OOPM: \$6,850

PCP co-pay: 30% co-ins., deductible waived

ER co-pay: \$250 copay + 30% co-ins.



SHOP

Issuer: Moda Health Plan

Name: PPO 3000

Premium Range (non-smoker 40 year old)

Premium Range

Low: \$325.05 (Rating Area 4)

AS OF OCT. 28, 2015 MODA HEALTH PLAN HAS WITHDRAWN FROM WASHINGTON HEALTHPLANFINDER

Market: SHOP Renewal

Metal Level: Silver

Deductible: \$3,000

OOPM: \$6,850

PCP co-pay: \$30 copay, deductible waived

ER co-pay: \$250 copay+30% co-ins, ded. waived



SHOP

Issuer: Moda Health Plan

Name: Moda Health HSA 3250 (non-smoker 40 year old)
Low: \$279.42 (Rating Area 2)

AS OF OCT. 28, 2015 MODA HEALTH PLAN HAS WITHDRAWN FROM WASHINGTON HEALTHPLANFINDER

Metal Level: Bronze

Deductible: \$3,250

OOPM: \$6,550

PCP co-pay: 50% co-ins.

ER co-pay: 50% co-ins.



Premium Range

Premium Range

SHOP

Issuer: Moda Health Plan

Name: Value 3500 (non-smoker 40 year old)
Low: \$311.41 (Rating Area 4)

AS OF OCT. 28, 2015 MODA HEALTH PLAN HAS WITHDRAWN FROM WASHINGTON HEALTHPLANFINDER

Market: SHOP New

Metal Level: Bronze

Deductible: \$3,500

OOPM: \$6,850

PCP co-pay: \$35 copay, deductible waived

ER co-pay: \$250 copay + 35% co-ins.



SHOP

Issuer: Moda Health Plan

Name: Moda Health Core 3500

Premium Range (non-smoker 40 year old) Low: \$275.65 (Rating Area 4) High: \$312.25 (Rating Area 2)

AS OF OCT. 28, 2015 MODA HEALTH PLAN HAS WITHDRAWN FROM WASHINGTON HEALTHPLANFINDER

Market:	SHOP	INew
Metal Level:	Bronze	
Deductible:	\$3,500	
OOPM:	\$6,850	
PCP co-pay:	50% co-ins.	

ER co-pay: \$250 copay + 50% co-ins.



SHOP

Issuer: Moda Health Plan

Name: Moda Health Core 5000

Premium Range (non-smoker 40 year old) Low: \$254.48 (Rating Area 4)

AS OF OCT. 28, 2015 MODA HEALTH PLAN HAS WITHDRAWN FROM WASHINGTON HEALTHPLANFINDER

Market:	SHOP	New
Metal Level:	Bronze	
Deductible:	\$5,000	
OOPM:	\$6,850	
PCP co-pay:	50% co-ins.	
ER co-pay:	\$250 copay +	50% co-ins.



SHOP

Issuer: Moda Health Plan

Name: Moda Health Option 6000

Premium Range (non-smoker 40 year old)

Low: \$251.19 (Rating Area 4)

High: \$284.53 (Rating Area 2)

AS OF OCT. 28, 2015 MODA HEALTH PLAN HAS WITHDRAWN FROM WASHINGTON HEALTHPLANFINDER

Metal Level: Bronze

Deductible: \$6,000

OOPM: \$6,850

PCP co-pay: \$75 copay, deductible waived

ER co-pay: \$250 copay + 50% co-ins.



SHOP

Issuer: UnitedHealthcare of WA

Name: Gold Navigate 25/500/80

Premium Range (non-smoker 40 year old) Low: \$342.28 (Rating Area 4) High: \$392.19 (Rating Area 2)

Counties Offered: All counties

PLAN SUMMARY

Market: SHOP New

Metal Level: Gold

Deductible: \$500

OOPM: \$4,500

PCP co-pay: \$25 copay



SHOP

Issuer: UnitedHealthcare of WA

Name: Gold Charter 25/500/80

Premium Range (non-smoker 40 year old) Low: \$340.41 (Rating Area 4) High: \$390.04 (Rating Area 2)

Counties Offered: All counties

PLAN SUMMARY

Market: SHOP New

Metal Level: Gold

Deductible: \$500

OOPM: \$4,500

PCP co-pay: \$25 co-pay

ER co-pay: 20% co-ins. after deductible



SHOP

Issuer: UnitedHealthcare of WA

Name: Gold Navigate 25/1500/70

Premium Range (non-smoker 40 year old) Low: \$310.66 (Rating Area 4) High: \$355.96 (Rating Area 2)

Counties Offered: All counties

PLAN SUMMARY

Market: SHOP New

Metal Level: Gold

Deductible: \$1,500

OOPM: \$4,750

PCP co-pay: \$25 copay



SHOP

Issuer: UnitedHealthcare of WA

Name: Gold Charter 25/1500/70

Premium Range (non-smoker 40 year old) Low: \$309.03 (Rating Area 4) High: \$354.09 (Rating Area 2)

Counties Offered: All counties

PLAN SUMMARY

Market: SHOP New

Metal Level: Gold

Deductible: \$1,500

OOPM: \$4,750

PCP co-pay: \$25 copay

ER co-pay: 30% co-ins. after deductible



SHOP

Issuer: UnitedHealthcare of WA

Name: Gold Navigate HSA 2000/70

Premium Range (non-smoker 40 year old) Low: \$257.36 (Rating Area 4) High: \$294.89 (Rating Area 2)

Counties Offered: All counties

PLAN SUMMARY

Market: SHOP New

Metal Level: Gold

Deductible: \$2,000 (combined medical and drug)

OOPM: \$6,000

PCP co-pay: 30% co-ins. after deductible



SHOP

Issuer: UnitedHealthcare of WA

Name: Gold Charter HSA 2000/70

Premium Range (non-smoker 40 year old) Low: \$256.01 (Rating Area 4) High: \$293.35 (Rating Area 2)

Counties Offered: All counties

PLAN SUMMARY

Market: SHOP New

Metal Level: Gold

Deductible: \$2,000 (combined medical and drug)

OOPM: \$6,000

PCP co-pay: 30% co-ins. after deductible

ER co-pay: 30% co-ins. after deductible



SHOP

Issuer: UnitedHealthcare of WA

Name: Silver Navigate HSA 2000/70

Premium Range (non-smoker 40 year old) Low: \$257.36 (Rating Area 4) High: \$294.89 (Rating Area 2)

Counties Offered: All counties

PLAN SUMMARY

Market: SHOP New

Metal Level: Silver

Deductible: \$2,000 (combined medical and drug)

OOPM: \$6,000

PCP co-pay: 30% co-ins. after deductible



SHOP

Issuer: UnitedHealthcare of WA

Name: Silver Charter HSA 2000/70

Premium Range (non-smoker 40 year old) Low: \$256.01 (Rating Area 4) High: \$293.35 (Rating Area 2)

Counties Offered: All counties

PLAN SUMMARY

Market: SHOP New

Metal Level: Silver

Deductible: \$2,000 (combined medical and drug)

OOPM: \$6,000

PCP co-pay: 30% co-ins. after deductible

ER co-pay: 30% co-ins. after deductible



SHOP

Issuer: UnitedHealthcare of WA

Name: Silver Navigate 30/2500/70

Premium Range (non-smoker 40 year old) Low: \$271.68 (Rating Area 4)

High: \$311.31 (Rating Area 2)

Counties Offered: All counties

PLAN SUMMARY

Market: SHOP New

Metal Level: Silver

Deductible: \$2,500

OOPM: \$6,850

PCP co-pay: \$30 copay



SHOP

Issuer: UnitedHealthcare of WA

Name: Silver Charter 30/2500/70

Premium Range (non-smoker 40 year old)

Low: \$270.25 (Rating Area 4) High: \$309.66 (Rating Area 2)

Counties Offered: All counties

PLAN SUMMARY

Market: SHOP New

Metal Level: Silver

Deductible: \$2,500

OOPM: \$6,850

PCP co-pay: \$30 copay

ER co-pay: 30% co-ins. after deductible



SHOP

Issuer: UnitedHealthcare of WA

Name: Silver Navigate 15/5000/70

Premium Range

(non-smoker 40 year old) Low: \$262.90 (Rating Area 4) High: \$301.25 (Rating Area 2)

Counties Offered: All counties

PLAN SUMMARY

Market: SHOP New

Metal Level: Silver

Deductible: \$5,000

OOPM: \$6,850

PCP co-pay: \$15 copay



SHOP

Issuer: UnitedHealthcare of WA

Name: Silver Charter 15/5000/70

Premium Range (non-smoker 40 year old) Low: \$261.52 (Rating Area 4)

High: \$299.66 (Rating Area 2)

Counties Offered: All counties

PLAN SUMMARY

Market: SHOP New

Metal Level: Silver

Deductible: \$5,000

OOPM: \$6,850

PCP co-pay: \$15 copay

ER co-pay: 30% co-ins. after deductible



SHOP

Issuer: UnitedHealthcare of WA

Name: Silver Navigate HSA 5500/70

Premium Range (non-smoker 40 year old) Low: \$224.20 (Rating Area 4)

High: \$256.90 (Rating Area 2)

Counties Offered: All counties

PLAN SUMMARY

Market: SHOP New

Metal Level: Silver

Deductible: \$5,500 (combined medical and drug)

OOPM: \$6,500

PCP co-pay: 30% co-ins. after deductible



SHOP

Issuer: UnitedHealthcare of WA

Name: Silver Charter HSA 5500/70

Premium Range (non-smoker 40 year old) Low: \$223.05 (Rating Area 4) High: \$255.59 (Rating Area 2)

Counties Offered: All counties

PLAN SUMMARY

Market: SHOP New

Metal Level: Silver

Deductible: \$5,500 (combined medical and drug)

OOPM: \$6,500

PCP co-pay: 30% co-ins. after deductible

ER co-pay: 30% co-ins. after deductible



SHOP

Issuer: UnitedHealthcare of WA

Name: Bronze Navigate HSA 5500/70

Premium Range (non-smoker 40 year old) Low: \$224.20 (Rating Area 4) High: \$256.90 (Rating Area 2)

Counties Offered: All counties

PLAN SUMMARY

Market: SHOP New

Metal Level: Bronze

Deductible: \$5,500 (combined medical and drug)

OOPM: \$6,500

PCP co-pay: 30% co-ins. after deductible



SHOP

Issuer: UnitedHealthcare of WA

Name: Bronze Charter HSA 5500/70

Premium Range (non-smoker 40 year old) Low: \$223.05 (Rating Area 4) High: \$255.59 (Rating Area 2)

Counties Offered: All counties

PLAN SUMMARY

Market: SHOP New

Metal Level: Bronze

Deductible: \$5,500 (combined medical and drug)

OOPM: \$6,500

PCP co-pay: 30% co-ins. after deductible

ER co-pay: 30% co-ins. after deductible



SHOP

Issuer: UnitedHealthcare of WA

Name: Bronze Navigate 6500/100

Premium Range (non-smoker 40 year old) Low: \$223.40 (Rating Area 4) High: \$255.97 (Rating Area 2)

Counties Offered: All counties

PLAN SUMMARY

Market: SHOP New

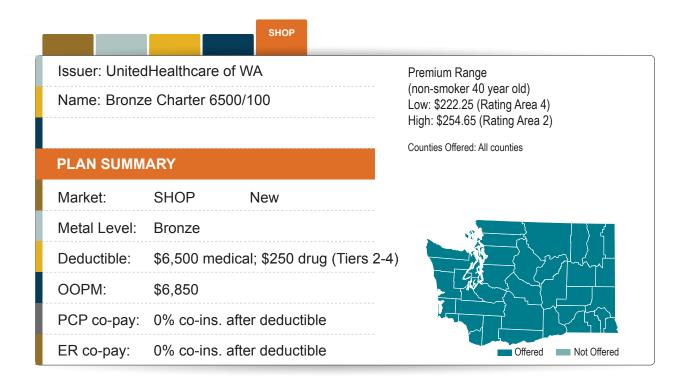
Metal Level: Bronze

Deductible: \$6,500 medical; \$250 drug (Tiers 2-4)

OOPM: \$6,850

PCP co-pay: 0% co-ins. after deductible





APPENDIX I

All plans listed have met the 19 certification criteria.

INDIVIDUAL MARKET

BRIDGESPAN HEALTH COMPANY

Gold 1000 Legacy Health

Gold 1000 RealValue and SimpleConnect

Gold Align 1500 EvergreenHealth Partners/Virginia Mason

Gold Align 1500 MultiCare

Gold Align 1500 Providence-Swedish Health

Gold Align 1500 The Everett Clinic Gold Align 1500 UW Medicine Silver HDHP 2500 Legacy Health

Silver HDHP 2500 EvergreenHealth Partners/Virginia Mason

Silver HDHP 2500 MultiCare

Silver HDHP 2500 Providence-Swedish Health Silver HDHP 2500 RealValue and SimpleConnect

Silver HDHP 2500 The Everett Clinic Silver HDHP 2500 UW Medicine

Silver 3000 Legacy Health

Silver 3000 RealValue and SimpleConnect

Silver Align 4000 EvergreenHealth Partners/Virginia Mason

Silver Align 4000 The Everett Clinic Silver Align 4000 UW Medicine Silver Align 4000 MultiCare

Silver Align 4000 Providence-Swedish Health

Bronze HDHP 5000 Legacy Health

Bronze HDHP 5000 RealValue and SimpleConnect

Bronze HDHP 5000 MultiCare

Bronze HDHP 5000 Providence-Swedish Health

Bronze HDHP 5000 EvergreenHealth Partners/Virginia Mason

Bronze HDHP 5000 UW Medicine Bronze HDHP 5000 The Everett Clinic

Bronze Essential 6850 RealValue and SimpleConnect

Bronze Essential 6850 Legacy Health

CHPW

Community HealthEssentials Plus Gold Community HealthEssentials Plus Silver

COORDINATED CARE

Ambetter Secure Care 1 + 3 Free PCP Visits

Ambetter Balanced Care 9 Ambetter Balanced Care 10

Ambetter Balanced Care 10 + Vision

Ambetter Balanced Care 1

Ambetter Balanced Care 1 + Vision

Ambetter Balanced Care 2

Ambetter Balanced Care 2 + Vision

Ambetter Essential Care 1

Ambetter Essential Care 1 + Vision

Ambetter Essential Care 5 + 3 Free PCP Visits

Ambetter Essential Care 5 + 3 Free PCP Visits + Vision

GROUP HEALTH COOPERATIVE

Flex Gold Flex Silver

Core Silver HSA Core Bronze HSA

Flex Bronze

Core Basics Plus Catastrophic Plan

HEALTH ALLIANCE NORTHWEST

POS 1500 Gold

Summit 3000c Silver

Summit 5500 Bronze

Summit 6250 Bronze

Summit 6850 Catastrophic

KAISER PERMANENTE

KP WA Gold 1000/20

KP WA Silver 1500/30

KP WA Silver 3000/30

KP WA Bronze 4500/50

KP WA Bronze 5000/30% HSA

KP WA Bronze 6000/50

KP WA Catastrophic 6850/0

LIFEWISE

LifeWise Essential Gold EPO 1000

LifeWise Essential Gold 1500

LifeWise Essential Silver EPO 3000

LifeWise Essential Silver EPO HSA 3000

LifeWise Essential Bronze EPO HSA 6000

LifeWise Essential Bronze EPO 6350

MOLINA

Molina Marketplace Gold

Molina Marketplace Choice Gold

Molina Marketplace Silver

Molina Marketplace Choice Silver

Molina Marketplace Choice Bronze

PREMERA BLUE CROSS

Premera Blue Cross PersonalCare Gold

Premera Blue Cross Preferred Gold 1000

Multi-State Plan Blue Cross Gold 1000

Premera Blue Cross PersonalCare Silver

Premera Blue Cross Preferred Silver 3000 HSA

Premera Blue Cross Preferred Silver 3000

Multi-State Plan Blue Cross Silver 3000 HSA

Multi-State Plan Blue Cross Silver 3000

Premera Blue Cross PersonalCare Bronze

Premera Blue Cross Preferred Bronze HSA 5250

Multi-State Plan Blue Cross Bronze HSA 5250

Premera Blue Cross Preferred Bronze PPO 6350

Multi-State Plan Blue Cross Bronze PPO 6350

REGENCE BLUESHIELD

Gold Connect 1500 MultiCare

Gold Connect 1500 EvergreenHealth Partners/Virginia Mason

Gold Connect 1500 The Everett Clinic

Gold Connect 1500 Providence-Swedish Health

Gold Connect 1500 UW Medicine

Silver HDHP 2500 MultiCare

Silver HDHP 2500 EvergreenHealth Partners/Virginia Mason

Silver HDHP 2500 Providence-Swedish Health

Silver HDHP 2500 UW Medicine

Silver HDHP 2500 The Everett Clinic

APPENDIX I (CONT'D)

Silver Connect 4000 MultiCare

Silver Connect 4000 EvergreenHealth Partners/Virginia Mason

Silver Connect 4000 Providence-Swedish Health

Silver Connect 4000 UW Medicine

Silver Connect 4000 The Everett Clinic

Bronze HDHP 5000 MultiCare

Bronze HDHP 5000 EvergreenHealth Partners/Virginia Mason

Bronze HDHP 5000 Providence-Swedish Health

Bronze HDHP 5000 UW Medicine

Bronze HDHP 5000 The Everett Clinic

UNITEDHEALTHCARE OF WASHINGTON, INC.

Gold Charter 500

Gold Navigate 500

Gold Charter 1000

Gold Navigate 1000

Gold Charter 1100

Gold Navigate 1100

Gold Charter 1200

Gold Navigate 1200 Gold Charter 1500

Gold Navigate 1500

Silver Charter 1750

Silver Navigate 1750

Silver Charter 2000

Silver Navigate 2000

Silver Charter HSA 2700

Silver Navigate HSA 2700

Silver Charter 3500

Silver Navigate 3500

Silver Charter 4000

Silver Navigate 4000

Silver Charter 5000

Silver Navigate 5000

Silver Charter 6000

Silver Navigate 6000

Bronze Charter HSA 4500

Bronze Navigate HSA 4500

Bronze Charter 6450

Bronze Navigate 6450

Bronze Charter HSA 6500

Bronze Navigate HSA 6500

Bronze Charter 6500

Bronze Navigate 6500

SHOP

KAISER PERMANENTE

KP WA GOLD 0/30

KP WA GOLD 500/20

KP WA GOLD 1000/20

KP WA SILVER 0/50

KP WA SILVER 1500/35

KP WA SILVER 2000/35

KP WA SILVER 2600/25% HSA

KP WA SILVER 3500/40

KP WA BRONZE 3800/50% HSA

KP WA BRONZE 4500/50

KP WA BRONZE 5000/60 HSA

KP WA BRONZE 6600/35

UNITEDHEALTHCARE OF WASHINGTON, INC.

Gold Navigate 25/500/80

Gold Charter 25/500/80

Gold Navigate 25/1500/70

Gold Charter 25/1500/70

Gold Navigate HSA 2000/70

Gold Charter HSA 2000/70

Silver Navigate HSA 2000/70

Silver Charter HSA 2000/70

Silver Navigate 30/2500/70

Silver Charter 30/2500/70

Silver Navigate 15/5000/70

Silver Charter 15/5000/70

Silver Navigate HSA 5500/70

Silver Charter HSA 5500/70

Bronze Navigate HSA 5500/70

Bronze Charter HSA 5500/70 Bronze Navigate 6500/100

Bronze Charter 6500/100

APPENDIX II

All plans listed have met the 10 certification criteria.

DENTAL

DELTA DENTAL OF WASHINGTON

Delta Dental Individual – Washington Kids Plan

DENTAL HEALTH SERVICES

First Smile – EarlyCare Plus First Smile – EarlyCare

KAISER PERMANENTE

KP WA Pediatric Dental 80 KP WA Pediatric Dental 100

LIFEWISE

LifeWise Individual Pediatric Dental Plan

PREMERA BLUE CROSS

Premera Blue Cross Individual Pediatric Dental Plan

