

**STATE HEALTH BENEFIT PLAN
DIRECT PAY ANNUITANT UNDER 65 RATES
JANUARY 1 - DECEMBER 31, 2015**

	YOU	YOU + CHILD(REN)	YOU + SPOUSE	YOU + FAMILY
BCBS Gold	\$ 169.40	\$ 306.39	\$ 413.63	\$ 550.64
BCBS Silver	\$ 110.81	\$ 206.79	\$ 290.60	\$ 386.58
BCBS Bronze	\$ 67.61	\$ 133.35	\$ 199.88	\$ 265.61
BCBS HMO	\$ 133.35	\$ 245.70	\$ 339.72	\$ 452.04
UHC HMO	\$ 184.95	\$ 333.40	\$ 448.05	\$ 596.50
UHC HDHP	\$ 54.08	\$ 110.91	\$ 173.24	\$ 230.07
Kaiser HMO	\$ 148.70	\$ 271.77	\$ 371.93	\$ 495.01