

**Celtic Ins. Co. / Ambetter Health of DE
Individual**

Effective Date 01/01/2024
Expiration Date 12/31/2024

Plan ID	Plan Name	Age	Individual Rate	Individual Tobacco Rate
64004DE0090001	Premier Bronze HSA	0-14	\$ 293.83	\$ 293.83
64004DE0090001	Premier Bronze HSA	15	\$ 319.95	\$ 319.95
64004DE0090001	Premier Bronze HSA	16	\$ 329.93	\$ 329.93
64004DE0090001	Premier Bronze HSA	17	\$ 339.92	\$ 339.92
64004DE0090001	Premier Bronze HSA	18	\$ 350.68	\$ 350.68
64004DE0090001	Premier Bronze HSA	19	\$ 361.43	\$ 361.43
64004DE0090001	Premier Bronze HSA	20	\$ 372.57	\$ 372.57
64004DE0090001	Premier Bronze HSA	21	\$ 384.10	\$ 441.72
64004DE0090001	Premier Bronze HSA	22	\$ 384.10	\$ 441.72
64004DE0090001	Premier Bronze HSA	23	\$ 384.10	\$ 441.72
64004DE0090001	Premier Bronze HSA	24	\$ 384.10	\$ 441.72
64004DE0090001	Premier Bronze HSA	25	\$ 385.63	\$ 443.47
64004DE0090001	Premier Bronze HSA	26	\$ 393.31	\$ 452.31
64004DE0090001	Premier Bronze HSA	27	\$ 402.53	\$ 462.91
64004DE0090001	Premier Bronze HSA	28	\$ 417.51	\$ 480.13
64004DE0090001	Premier Bronze HSA	29	\$ 429.80	\$ 494.27
64004DE0090001	Premier Bronze HSA	30	\$ 435.94	\$ 501.34
64004DE0090001	Premier Bronze HSA	31	\$ 445.16	\$ 511.94
64004DE0090001	Premier Bronze HSA	32	\$ 454.38	\$ 522.54
64004DE0090001	Premier Bronze HSA	33	\$ 460.14	\$ 529.16
64004DE0090001	Premier Bronze HSA	34	\$ 466.29	\$ 536.23
64004DE0090001	Premier Bronze HSA	35	\$ 469.36	\$ 539.76
64004DE0090001	Premier Bronze HSA	36	\$ 472.43	\$ 543.30
64004DE0090001	Premier Bronze HSA	37	\$ 475.51	\$ 546.83
64004DE0090001	Premier Bronze HSA	38	\$ 478.58	\$ 550.36
64004DE0090001	Premier Bronze HSA	39	\$ 484.72	\$ 557.43
64004DE0090001	Premier Bronze HSA	40	\$ 490.87	\$ 564.50
64004DE0090001	Premier Bronze HSA	41	\$ 500.09	\$ 575.10
64004DE0090001	Premier Bronze HSA	42	\$ 508.92	\$ 585.26
64004DE0090001	Premier Bronze HSA	43	\$ 521.21	\$ 599.39
64004DE0090001	Premier Bronze HSA	44	\$ 536.58	\$ 617.06
64004DE0090001	Premier Bronze HSA	45	\$ 554.63	\$ 637.82
64004DE0090001	Premier Bronze HSA	46	\$ 576.14	\$ 662.56
64004DE0090001	Premier Bronze HSA	47	\$ 600.34	\$ 690.39
64004DE0090001	Premier Bronze HSA	48	\$ 627.99	\$ 722.19
64004DE0090001	Premier Bronze HSA	49	\$ 655.26	\$ 753.55
64004DE0090001	Premier Bronze HSA	50	\$ 685.99	\$ 788.89
64004DE0090001	Premier Bronze HSA	51	\$ 716.33	\$ 823.78
64004DE0090001	Premier Bronze HSA	52	\$ 749.75	\$ 862.21
64004DE0090001	Premier Bronze HSA	53	\$ 783.55	\$ 901.08
64004DE0090001	Premier Bronze HSA	54	\$ 820.04	\$ 943.04
64004DE0090001	Premier Bronze HSA	55	\$ 856.52	\$ 985.00
64004DE0090001	Premier Bronze HSA	56	\$ 896.09	\$ 1,030.50
64004DE0090001	Premier Bronze HSA	57	\$ 936.03	\$ 1,076.44
64004DE0090001	Premier Bronze HSA	58	\$ 978.67	\$ 1,125.46
64004DE0090001	Premier Bronze HSA	59	\$ 999.79	\$ 1,149.76
64004DE0090001	Premier Bronze HSA	60	\$ 1,042.42	\$ 1,198.79
64004DE0090001	Premier Bronze HSA	61	\$ 1,079.30	\$ 1,241.19
64004DE0090001	Premier Bronze HSA	62	\$ 1,103.49	\$ 1,269.02
64004DE0090001	Premier Bronze HSA	63	\$ 1,133.84	\$ 1,303.91
64004DE0090001	Premier Bronze HSA	64 and over	\$ 1,152.26	\$ 1,325.11

**Celtic Ins. Co. / Ambetter Health of DE
Individual**

Effective Date 01/01/2024
Expiration Date 12/31/2024

Plan ID	Plan Name	Age	Individual Rate	Individual Tobacco Rate
64004DE0090002	Everyday Bronze	0-14	\$ 293.97	\$ 293.97
64004DE0090002	Everyday Bronze	15	\$ 320.10	\$ 320.10
64004DE0090002	Everyday Bronze	16	\$ 330.09	\$ 330.09
64004DE0090002	Everyday Bronze	17	\$ 340.08	\$ 340.08
64004DE0090002	Everyday Bronze	18	\$ 350.84	\$ 350.84
64004DE0090002	Everyday Bronze	19	\$ 361.60	\$ 361.60
64004DE0090002	Everyday Bronze	20	\$ 372.74	\$ 372.74
64004DE0090002	Everyday Bronze	21	\$ 384.28	\$ 441.92
64004DE0090002	Everyday Bronze	22	\$ 384.28	\$ 441.92
64004DE0090002	Everyday Bronze	23	\$ 384.28	\$ 441.92
64004DE0090002	Everyday Bronze	24	\$ 384.28	\$ 441.92
64004DE0090002	Everyday Bronze	25	\$ 385.81	\$ 443.68
64004DE0090002	Everyday Bronze	26	\$ 393.49	\$ 452.51
64004DE0090002	Everyday Bronze	27	\$ 402.71	\$ 463.12
64004DE0090002	Everyday Bronze	28	\$ 417.70	\$ 480.35
64004DE0090002	Everyday Bronze	29	\$ 430.00	\$ 494.50
64004DE0090002	Everyday Bronze	30	\$ 436.14	\$ 501.57
64004DE0090002	Everyday Bronze	31	\$ 445.37	\$ 512.17
64004DE0090002	Everyday Bronze	32	\$ 454.59	\$ 522.78
64004DE0090002	Everyday Bronze	33	\$ 460.35	\$ 529.41
64004DE0090002	Everyday Bronze	34	\$ 466.50	\$ 536.48
64004DE0090002	Everyday Bronze	35	\$ 469.58	\$ 540.01
64004DE0090002	Everyday Bronze	36	\$ 472.65	\$ 543.55
64004DE0090002	Everyday Bronze	37	\$ 475.72	\$ 547.08
64004DE0090002	Everyday Bronze	38	\$ 478.80	\$ 550.62
64004DE0090002	Everyday Bronze	39	\$ 484.95	\$ 557.69
64004DE0090002	Everyday Bronze	40	\$ 491.09	\$ 564.76
64004DE0090002	Everyday Bronze	41	\$ 500.32	\$ 575.36
64004DE0090002	Everyday Bronze	42	\$ 509.16	\$ 585.53
64004DE0090002	Everyday Bronze	43	\$ 521.45	\$ 599.67
64004DE0090002	Everyday Bronze	44	\$ 536.82	\$ 617.35
64004DE0090002	Everyday Bronze	45	\$ 554.88	\$ 638.12
64004DE0090002	Everyday Bronze	46	\$ 576.40	\$ 662.86
64004DE0090002	Everyday Bronze	47	\$ 600.61	\$ 690.70
64004DE0090002	Everyday Bronze	48	\$ 628.28	\$ 722.52
64004DE0090002	Everyday Bronze	49	\$ 655.56	\$ 753.90
64004DE0090002	Everyday Bronze	50	\$ 686.30	\$ 789.25
64004DE0090002	Everyday Bronze	51	\$ 716.66	\$ 824.16
64004DE0090002	Everyday Bronze	52	\$ 750.09	\$ 862.61
64004DE0090002	Everyday Bronze	53	\$ 783.91	\$ 901.49
64004DE0090002	Everyday Bronze	54	\$ 820.41	\$ 943.47
64004DE0090002	Everyday Bronze	55	\$ 856.92	\$ 985.46
64004DE0090002	Everyday Bronze	56	\$ 896.50	\$ 1,030.97
64004DE0090002	Everyday Bronze	57	\$ 936.46	\$ 1,076.93
64004DE0090002	Everyday Bronze	58	\$ 979.12	\$ 1,125.98
64004DE0090002	Everyday Bronze	59	\$ 1,000.25	\$ 1,150.29
64004DE0090002	Everyday Bronze	60	\$ 1,042.90	\$ 1,199.34
64004DE0090002	Everyday Bronze	61	\$ 1,079.79	\$ 1,241.76
64004DE0090002	Everyday Bronze	62	\$ 1,104.00	\$ 1,269.60
64004DE0090002	Everyday Bronze	63	\$ 1,134.36	\$ 1,304.51
64004DE0090002	Everyday Bronze	64 and over	\$ 1,152.79	\$ 1,325.72

**Celtic Ins. Co. / Ambetter Health of DE
Individual**

Effective Date 01/01/2024
Expiration Date 12/31/2024

Plan ID	Plan Name	Age	Individual Rate	Individual Tobacco Rate
64004DE0090003	Elite Bronze	0-14	\$ 337.30	\$ 337.30
64004DE0090003	Elite Bronze	15	\$ 367.28	\$ 367.28
64004DE0090003	Elite Bronze	16	\$ 378.74	\$ 378.74
64004DE0090003	Elite Bronze	17	\$ 390.21	\$ 390.21
64004DE0090003	Elite Bronze	18	\$ 402.55	\$ 402.55
64004DE0090003	Elite Bronze	19	\$ 414.90	\$ 414.90
64004DE0090003	Elite Bronze	20	\$ 427.68	\$ 427.68
64004DE0090003	Elite Bronze	21	\$ 440.92	\$ 507.06
64004DE0090003	Elite Bronze	22	\$ 440.92	\$ 507.06
64004DE0090003	Elite Bronze	23	\$ 440.92	\$ 507.06
64004DE0090003	Elite Bronze	24	\$ 440.92	\$ 507.06
64004DE0090003	Elite Bronze	25	\$ 442.68	\$ 509.08
64004DE0090003	Elite Bronze	26	\$ 451.49	\$ 519.22
64004DE0090003	Elite Bronze	27	\$ 462.08	\$ 531.39
64004DE0090003	Elite Bronze	28	\$ 479.27	\$ 551.16
64004DE0090003	Elite Bronze	29	\$ 493.38	\$ 567.39
64004DE0090003	Elite Bronze	30	\$ 500.44	\$ 575.50
64004DE0090003	Elite Bronze	31	\$ 511.02	\$ 587.67
64004DE0090003	Elite Bronze	32	\$ 521.60	\$ 599.84
64004DE0090003	Elite Bronze	33	\$ 528.21	\$ 607.44
64004DE0090003	Elite Bronze	34	\$ 535.27	\$ 615.56
64004DE0090003	Elite Bronze	35	\$ 538.79	\$ 619.61
64004DE0090003	Elite Bronze	36	\$ 542.32	\$ 623.67
64004DE0090003	Elite Bronze	37	\$ 545.85	\$ 627.73
64004DE0090003	Elite Bronze	38	\$ 549.38	\$ 631.78
64004DE0090003	Elite Bronze	39	\$ 556.43	\$ 639.90
64004DE0090003	Elite Bronze	40	\$ 563.49	\$ 648.01
64004DE0090003	Elite Bronze	41	\$ 574.07	\$ 660.18
64004DE0090003	Elite Bronze	42	\$ 584.21	\$ 671.84
64004DE0090003	Elite Bronze	43	\$ 598.32	\$ 688.07
64004DE0090003	Elite Bronze	44	\$ 615.95	\$ 708.35
64004DE0090003	Elite Bronze	45	\$ 636.68	\$ 732.18
64004DE0090003	Elite Bronze	46	\$ 661.37	\$ 760.57
64004DE0090003	Elite Bronze	47	\$ 689.15	\$ 792.52
64004DE0090003	Elite Bronze	48	\$ 720.89	\$ 829.03
64004DE0090003	Elite Bronze	49	\$ 752.20	\$ 865.03
64004DE0090003	Elite Bronze	50	\$ 787.47	\$ 905.59
64004DE0090003	Elite Bronze	51	\$ 822.30	\$ 945.65
64004DE0090003	Elite Bronze	52	\$ 860.66	\$ 989.76
64004DE0090003	Elite Bronze	53	\$ 899.46	\$ 1,034.38
64004DE0090003	Elite Bronze	54	\$ 941.35	\$ 1,082.55
64004DE0090003	Elite Bronze	55	\$ 983.23	\$ 1,130.72
64004DE0090003	Elite Bronze	56	\$ 1,028.65	\$ 1,182.95
64004DE0090003	Elite Bronze	57	\$ 1,074.50	\$ 1,235.68
64004DE0090003	Elite Bronze	58	\$ 1,123.44	\$ 1,291.96
64004DE0090003	Elite Bronze	59	\$ 1,147.69	\$ 1,319.85
64004DE0090003	Elite Bronze	60	\$ 1,196.64	\$ 1,376.13
64004DE0090003	Elite Bronze	61	\$ 1,238.96	\$ 1,424.81
64004DE0090003	Elite Bronze	62	\$ 1,266.74	\$ 1,456.75
64004DE0090003	Elite Bronze	63	\$ 1,301.57	\$ 1,496.81
64004DE0090003	Elite Bronze	64 and over	\$ 1,322.73	\$ 1,521.14

**Celtic Ins. Co. / Ambetter Health of DE
Individual**

Effective Date 01/01/2024
Expiration Date 12/31/2024

Plan ID	Plan Name	Age	Individual Rate	Individual Tobacco Rate
64004DE0090004	Standard Expanded Bronze	0-14	\$ 289.84	\$ 289.84
64004DE0090004	Standard Expanded Bronze	15	\$ 315.61	\$ 315.61
64004DE0090004	Standard Expanded Bronze	16	\$ 325.46	\$ 325.46
64004DE0090004	Standard Expanded Bronze	17	\$ 335.31	\$ 335.31
64004DE0090004	Standard Expanded Bronze	18	\$ 345.92	\$ 345.92
64004DE0090004	Standard Expanded Bronze	19	\$ 356.52	\$ 356.52
64004DE0090004	Standard Expanded Bronze	20	\$ 367.51	\$ 367.51
64004DE0090004	Standard Expanded Bronze	21	\$ 378.89	\$ 435.72
64004DE0090004	Standard Expanded Bronze	22	\$ 378.89	\$ 435.72
64004DE0090004	Standard Expanded Bronze	23	\$ 378.89	\$ 435.72
64004DE0090004	Standard Expanded Bronze	24	\$ 378.89	\$ 435.72
64004DE0090004	Standard Expanded Bronze	25	\$ 380.39	\$ 437.45
64004DE0090004	Standard Expanded Bronze	26	\$ 387.97	\$ 446.17
64004DE0090004	Standard Expanded Bronze	27	\$ 397.06	\$ 456.62
64004DE0090004	Standard Expanded Bronze	28	\$ 411.84	\$ 473.62
64004DE0090004	Standard Expanded Bronze	29	\$ 423.96	\$ 487.56
64004DE0090004	Standard Expanded Bronze	30	\$ 430.03	\$ 494.53
64004DE0090004	Standard Expanded Bronze	31	\$ 439.12	\$ 504.99
64004DE0090004	Standard Expanded Bronze	32	\$ 448.21	\$ 515.44
64004DE0090004	Standard Expanded Bronze	33	\$ 453.90	\$ 521.98
64004DE0090004	Standard Expanded Bronze	34	\$ 459.96	\$ 528.95
64004DE0090004	Standard Expanded Bronze	35	\$ 462.99	\$ 532.44
64004DE0090004	Standard Expanded Bronze	36	\$ 466.02	\$ 535.92
64004DE0090004	Standard Expanded Bronze	37	\$ 469.05	\$ 539.41
64004DE0090004	Standard Expanded Bronze	38	\$ 472.08	\$ 542.89
64004DE0090004	Standard Expanded Bronze	39	\$ 478.14	\$ 549.87
64004DE0090004	Standard Expanded Bronze	40	\$ 484.21	\$ 556.84
64004DE0090004	Standard Expanded Bronze	41	\$ 493.30	\$ 567.29
64004DE0090004	Standard Expanded Bronze	42	\$ 502.01	\$ 577.32
64004DE0090004	Standard Expanded Bronze	43	\$ 514.14	\$ 591.26
64004DE0090004	Standard Expanded Bronze	44	\$ 529.29	\$ 608.69
64004DE0090004	Standard Expanded Bronze	45	\$ 547.10	\$ 629.16
64004DE0090004	Standard Expanded Bronze	46	\$ 568.32	\$ 653.56
64004DE0090004	Standard Expanded Bronze	47	\$ 592.19	\$ 681.01
64004DE0090004	Standard Expanded Bronze	48	\$ 619.47	\$ 712.38
64004DE0090004	Standard Expanded Bronze	49	\$ 646.37	\$ 743.32
64004DE0090004	Standard Expanded Bronze	50	\$ 676.68	\$ 778.18
64004DE0090004	Standard Expanded Bronze	51	\$ 706.61	\$ 812.60
64004DE0090004	Standard Expanded Bronze	52	\$ 739.57	\$ 850.50
64004DE0090004	Standard Expanded Bronze	53	\$ 772.91	\$ 888.85
64004DE0090004	Standard Expanded Bronze	54	\$ 808.90	\$ 930.24
64004DE0090004	Standard Expanded Bronze	55	\$ 844.90	\$ 971.63
64004DE0090004	Standard Expanded Bronze	56	\$ 883.92	\$ 1,016.51
64004DE0090004	Standard Expanded Bronze	57	\$ 923.33	\$ 1,061.82
64004DE0090004	Standard Expanded Bronze	58	\$ 965.38	\$ 1,110.19
64004DE0090004	Standard Expanded Bronze	59	\$ 986.22	\$ 1,134.15
64004DE0090004	Standard Expanded Bronze	60	\$ 1,028.27	\$ 1,182.52
64004DE0090004	Standard Expanded Bronze	61	\$ 1,064.65	\$ 1,224.34
64004DE0090004	Standard Expanded Bronze	62	\$ 1,088.52	\$ 1,251.79
64004DE0090004	Standard Expanded Bronze	63	\$ 1,118.45	\$ 1,286.21
64004DE0090004	Standard Expanded Bronze	64 and over	\$ 1,136.62	\$ 1,307.12

**Celtic Ins. Co. / Ambetter Health of DE
Individual**

Effective Date 01/01/2024
Expiration Date 12/31/2024

Plan ID	Plan Name	Age	Individual Rate	Individual Tobacco Rate
64004DE0090005	Premier Bronze HSA	0-14	\$ 345.51	\$ 345.51
64004DE0090005	Premier Bronze HSA	15	\$ 376.22	\$ 376.22
64004DE0090005	Premier Bronze HSA	16	\$ 387.97	\$ 387.97
64004DE0090005	Premier Bronze HSA	17	\$ 399.71	\$ 399.71
64004DE0090005	Premier Bronze HSA	18	\$ 412.36	\$ 412.36
64004DE0090005	Premier Bronze HSA	19	\$ 425.00	\$ 425.00
64004DE0090005	Premier Bronze HSA	20	\$ 438.10	\$ 438.10
64004DE0090005	Premier Bronze HSA	21	\$ 451.66	\$ 519.41
64004DE0090005	Premier Bronze HSA	22	\$ 451.66	\$ 519.41
64004DE0090005	Premier Bronze HSA	23	\$ 451.66	\$ 519.41
64004DE0090005	Premier Bronze HSA	24	\$ 451.66	\$ 519.41
64004DE0090005	Premier Bronze HSA	25	\$ 453.46	\$ 521.47
64004DE0090005	Premier Bronze HSA	26	\$ 462.49	\$ 531.86
64004DE0090005	Premier Bronze HSA	27	\$ 473.33	\$ 544.33
64004DE0090005	Premier Bronze HSA	28	\$ 490.94	\$ 564.58
64004DE0090005	Premier Bronze HSA	29	\$ 505.40	\$ 581.20
64004DE0090005	Premier Bronze HSA	30	\$ 512.62	\$ 589.51
64004DE0090005	Premier Bronze HSA	31	\$ 523.46	\$ 601.98
64004DE0090005	Premier Bronze HSA	32	\$ 534.30	\$ 614.45
64004DE0090005	Premier Bronze HSA	33	\$ 541.08	\$ 622.24
64004DE0090005	Premier Bronze HSA	34	\$ 548.30	\$ 630.55
64004DE0090005	Premier Bronze HSA	35	\$ 551.91	\$ 634.70
64004DE0090005	Premier Bronze HSA	36	\$ 555.53	\$ 638.86
64004DE0090005	Premier Bronze HSA	37	\$ 559.14	\$ 643.01
64004DE0090005	Premier Bronze HSA	38	\$ 562.75	\$ 647.17
64004DE0090005	Premier Bronze HSA	39	\$ 569.98	\$ 655.48
64004DE0090005	Premier Bronze HSA	40	\$ 577.21	\$ 663.79
64004DE0090005	Premier Bronze HSA	41	\$ 588.05	\$ 676.25
64004DE0090005	Premier Bronze HSA	42	\$ 598.43	\$ 688.20
64004DE0090005	Premier Bronze HSA	43	\$ 612.89	\$ 704.82
64004DE0090005	Premier Bronze HSA	44	\$ 630.95	\$ 725.60
64004DE0090005	Premier Bronze HSA	45	\$ 652.18	\$ 750.01
64004DE0090005	Premier Bronze HSA	46	\$ 677.47	\$ 779.09
64004DE0090005	Premier Bronze HSA	47	\$ 705.93	\$ 811.82
64004DE0090005	Premier Bronze HSA	48	\$ 738.45	\$ 849.21
64004DE0090005	Premier Bronze HSA	49	\$ 770.51	\$ 886.09
64004DE0090005	Premier Bronze HSA	50	\$ 806.64	\$ 927.64
64004DE0090005	Premier Bronze HSA	51	\$ 842.33	\$ 968.67
64004DE0090005	Premier Bronze HSA	52	\$ 881.62	\$ 1,013.86
64004DE0090005	Premier Bronze HSA	53	\$ 921.36	\$ 1,059.57
64004DE0090005	Premier Bronze HSA	54	\$ 964.27	\$ 1,108.91
64004DE0090005	Premier Bronze HSA	55	\$ 1,007.18	\$ 1,158.25
64004DE0090005	Premier Bronze HSA	56	\$ 1,053.70	\$ 1,211.75
64004DE0090005	Premier Bronze HSA	57	\$ 1,100.67	\$ 1,265.77
64004DE0090005	Premier Bronze HSA	58	\$ 1,150.80	\$ 1,323.42
64004DE0090005	Premier Bronze HSA	59	\$ 1,175.64	\$ 1,351.99
64004DE0090005	Premier Bronze HSA	60	\$ 1,225.77	\$ 1,409.64
64004DE0090005	Premier Bronze HSA	61	\$ 1,269.13	\$ 1,459.50
64004DE0090005	Premier Bronze HSA	62	\$ 1,297.59	\$ 1,492.23
64004DE0090005	Premier Bronze HSA	63	\$ 1,333.27	\$ 1,533.26
64004DE0090005	Premier Bronze HSA	64 and over	\$ 1,354.94	\$ 1,558.18

**Celtic Ins. Co. / Ambetter Health of DE
Individual**

Effective Date 01/01/2024
Expiration Date 12/31/2024

Plan ID	Plan Name	Age	Individual Rate	Individual Tobacco Rate
64004DE0090006	Clear Silver	0-14	\$ 337.03	\$ 337.03
64004DE0090006	Clear Silver	15	\$ 366.99	\$ 366.99
64004DE0090006	Clear Silver	16	\$ 378.44	\$ 378.44
64004DE0090006	Clear Silver	17	\$ 389.89	\$ 389.89
64004DE0090006	Clear Silver	18	\$ 402.23	\$ 402.23
64004DE0090006	Clear Silver	19	\$ 414.57	\$ 414.57
64004DE0090006	Clear Silver	20	\$ 427.34	\$ 427.34
64004DE0090006	Clear Silver	21	\$ 440.57	\$ 506.65
64004DE0090006	Clear Silver	22	\$ 440.57	\$ 506.65
64004DE0090006	Clear Silver	23	\$ 440.57	\$ 506.65
64004DE0090006	Clear Silver	24	\$ 440.57	\$ 506.65
64004DE0090006	Clear Silver	25	\$ 442.32	\$ 508.67
64004DE0090006	Clear Silver	26	\$ 451.13	\$ 518.80
64004DE0090006	Clear Silver	27	\$ 461.71	\$ 530.96
64004DE0090006	Clear Silver	28	\$ 478.89	\$ 550.72
64004DE0090006	Clear Silver	29	\$ 492.99	\$ 566.93
64004DE0090006	Clear Silver	30	\$ 500.03	\$ 575.04
64004DE0090006	Clear Silver	31	\$ 510.61	\$ 587.20
64004DE0090006	Clear Silver	32	\$ 521.18	\$ 599.36
64004DE0090006	Clear Silver	33	\$ 527.79	\$ 606.96
64004DE0090006	Clear Silver	34	\$ 534.84	\$ 615.06
64004DE0090006	Clear Silver	35	\$ 538.36	\$ 619.12
64004DE0090006	Clear Silver	36	\$ 541.89	\$ 623.17
64004DE0090006	Clear Silver	37	\$ 545.41	\$ 627.22
64004DE0090006	Clear Silver	38	\$ 548.94	\$ 631.28
64004DE0090006	Clear Silver	39	\$ 555.99	\$ 639.38
64004DE0090006	Clear Silver	40	\$ 563.03	\$ 647.49
64004DE0090006	Clear Silver	41	\$ 573.61	\$ 659.65
64004DE0090006	Clear Silver	42	\$ 583.74	\$ 671.30
64004DE0090006	Clear Silver	43	\$ 597.84	\$ 687.51
64004DE0090006	Clear Silver	44	\$ 615.46	\$ 707.78
64004DE0090006	Clear Silver	45	\$ 636.17	\$ 731.59
64004DE0090006	Clear Silver	46	\$ 660.84	\$ 759.96
64004DE0090006	Clear Silver	47	\$ 688.59	\$ 791.88
64004DE0090006	Clear Silver	48	\$ 720.31	\$ 828.36
64004DE0090006	Clear Silver	49	\$ 751.59	\$ 864.33
64004DE0090006	Clear Silver	50	\$ 786.84	\$ 904.86
64004DE0090006	Clear Silver	51	\$ 821.64	\$ 944.89
64004DE0090006	Clear Silver	52	\$ 859.97	\$ 988.97
64004DE0090006	Clear Silver	53	\$ 898.74	\$ 1,033.55
64004DE0090006	Clear Silver	54	\$ 940.59	\$ 1,081.68
64004DE0090006	Clear Silver	55	\$ 982.45	\$ 1,129.81
64004DE0090006	Clear Silver	56	\$ 1,027.82	\$ 1,182.00
64004DE0090006	Clear Silver	57	\$ 1,073.64	\$ 1,234.69
64004DE0090006	Clear Silver	58	\$ 1,122.54	\$ 1,290.92
64004DE0090006	Clear Silver	59	\$ 1,146.77	\$ 1,318.79
64004DE0090006	Clear Silver	60	\$ 1,195.68	\$ 1,375.03
64004DE0090006	Clear Silver	61	\$ 1,237.97	\$ 1,423.67
64004DE0090006	Clear Silver	62	\$ 1,265.73	\$ 1,455.58
64004DE0090006	Clear Silver	63	\$ 1,300.53	\$ 1,495.61
64004DE0090006	Clear Silver	64 and over	\$ 1,321.67	\$ 1,519.92

**Celtic Ins. Co. / Ambetter Health of DE
Individual**

Effective Date 01/01/2024
Expiration Date 12/31/2024

Plan ID	Plan Name	Age	Individual Rate	Individual Tobacco Rate
64004DE0090007	Focused Silver	0-14	\$ 343.25	\$ 343.25
64004DE0090007	Focused Silver	15	\$ 373.76	\$ 373.76
64004DE0090007	Focused Silver	16	\$ 385.42	\$ 385.42
64004DE0090007	Focused Silver	17	\$ 397.09	\$ 397.09
64004DE0090007	Focused Silver	18	\$ 409.65	\$ 409.65
64004DE0090007	Focused Silver	19	\$ 422.22	\$ 422.22
64004DE0090007	Focused Silver	20	\$ 435.23	\$ 435.23
64004DE0090007	Focused Silver	21	\$ 448.70	\$ 516.00
64004DE0090007	Focused Silver	22	\$ 448.70	\$ 516.00
64004DE0090007	Focused Silver	23	\$ 448.70	\$ 516.00
64004DE0090007	Focused Silver	24	\$ 448.70	\$ 516.00
64004DE0090007	Focused Silver	25	\$ 450.48	\$ 518.06
64004DE0090007	Focused Silver	26	\$ 459.46	\$ 528.38
64004DE0090007	Focused Silver	27	\$ 470.23	\$ 540.76
64004DE0090007	Focused Silver	28	\$ 487.72	\$ 560.88
64004DE0090007	Focused Silver	29	\$ 502.08	\$ 577.39
64004DE0090007	Focused Silver	30	\$ 509.26	\$ 585.65
64004DE0090007	Focused Silver	31	\$ 520.03	\$ 598.03
64004DE0090007	Focused Silver	32	\$ 530.80	\$ 610.42
64004DE0090007	Focused Silver	33	\$ 537.53	\$ 618.16
64004DE0090007	Focused Silver	34	\$ 544.71	\$ 626.41
64004DE0090007	Focused Silver	35	\$ 548.30	\$ 630.54
64004DE0090007	Focused Silver	36	\$ 551.89	\$ 634.67
64004DE0090007	Focused Silver	37	\$ 555.48	\$ 638.80
64004DE0090007	Focused Silver	38	\$ 559.07	\$ 642.93
64004DE0090007	Focused Silver	39	\$ 566.24	\$ 651.18
64004DE0090007	Focused Silver	40	\$ 573.42	\$ 659.44
64004DE0090007	Focused Silver	41	\$ 584.19	\$ 671.82
64004DE0090007	Focused Silver	42	\$ 594.51	\$ 683.69
64004DE0090007	Focused Silver	43	\$ 608.87	\$ 700.20
64004DE0090007	Focused Silver	44	\$ 626.82	\$ 720.84
64004DE0090007	Focused Silver	45	\$ 647.91	\$ 745.09
64004DE0090007	Focused Silver	46	\$ 673.03	\$ 773.99
64004DE0090007	Focused Silver	47	\$ 701.30	\$ 806.50
64004DE0090007	Focused Silver	48	\$ 733.61	\$ 843.65
64004DE0090007	Focused Silver	49	\$ 765.46	\$ 880.28
64004DE0090007	Focused Silver	50	\$ 801.36	\$ 921.56
64004DE0090007	Focused Silver	51	\$ 836.80	\$ 962.32
64004DE0090007	Focused Silver	52	\$ 875.84	\$ 1,007.22
64004DE0090007	Focused Silver	53	\$ 915.32	\$ 1,052.62
64004DE0090007	Focused Silver	54	\$ 957.95	\$ 1,101.64
64004DE0090007	Focused Silver	55	\$ 1,000.58	\$ 1,150.66
64004DE0090007	Focused Silver	56	\$ 1,046.79	\$ 1,203.81
64004DE0090007	Focused Silver	57	\$ 1,093.45	\$ 1,257.47
64004DE0090007	Focused Silver	58	\$ 1,143.26	\$ 1,314.75
64004DE0090007	Focused Silver	59	\$ 1,167.94	\$ 1,343.13
64004DE0090007	Focused Silver	60	\$ 1,217.74	\$ 1,400.40
64004DE0090007	Focused Silver	61	\$ 1,260.81	\$ 1,449.94
64004DE0090007	Focused Silver	62	\$ 1,289.08	\$ 1,482.44
64004DE0090007	Focused Silver	63	\$ 1,324.53	\$ 1,523.21
64004DE0090007	Focused Silver	64 and over	\$ 1,346.06	\$ 1,547.97

**Celtic Ins. Co. / Ambetter Health of DE
Individual**

Effective Date 01/01/2024
Expiration Date 12/31/2024

Plan ID	Plan Name	Age	Individual Rate	Individual Tobacco Rate
64004DE0090008	Standard Silver	0-14	\$ 338.01	\$ 338.01
64004DE0090008	Standard Silver	15	\$ 368.05	\$ 368.05
64004DE0090008	Standard Silver	16	\$ 379.54	\$ 379.54
64004DE0090008	Standard Silver	17	\$ 391.03	\$ 391.03
64004DE0090008	Standard Silver	18	\$ 403.40	\$ 403.40
64004DE0090008	Standard Silver	19	\$ 415.77	\$ 415.77
64004DE0090008	Standard Silver	20	\$ 428.58	\$ 428.58
64004DE0090008	Standard Silver	21	\$ 441.85	\$ 508.13
64004DE0090008	Standard Silver	22	\$ 441.85	\$ 508.13
64004DE0090008	Standard Silver	23	\$ 441.85	\$ 508.13
64004DE0090008	Standard Silver	24	\$ 441.85	\$ 508.13
64004DE0090008	Standard Silver	25	\$ 443.61	\$ 510.15
64004DE0090008	Standard Silver	26	\$ 452.44	\$ 520.31
64004DE0090008	Standard Silver	27	\$ 463.05	\$ 532.51
64004DE0090008	Standard Silver	28	\$ 480.28	\$ 552.32
64004DE0090008	Standard Silver	29	\$ 494.42	\$ 568.58
64004DE0090008	Standard Silver	30	\$ 501.49	\$ 576.71
64004DE0090008	Standard Silver	31	\$ 512.09	\$ 588.91
64004DE0090008	Standard Silver	32	\$ 522.70	\$ 601.10
64004DE0090008	Standard Silver	33	\$ 529.32	\$ 608.72
64004DE0090008	Standard Silver	34	\$ 536.39	\$ 616.85
64004DE0090008	Standard Silver	35	\$ 539.93	\$ 620.92
64004DE0090008	Standard Silver	36	\$ 543.46	\$ 624.98
64004DE0090008	Standard Silver	37	\$ 547.00	\$ 629.05
64004DE0090008	Standard Silver	38	\$ 550.53	\$ 633.11
64004DE0090008	Standard Silver	39	\$ 557.60	\$ 641.24
64004DE0090008	Standard Silver	40	\$ 564.67	\$ 649.37
64004DE0090008	Standard Silver	41	\$ 575.28	\$ 661.57
64004DE0090008	Standard Silver	42	\$ 585.44	\$ 673.25
64004DE0090008	Standard Silver	43	\$ 599.58	\$ 689.51
64004DE0090008	Standard Silver	44	\$ 617.25	\$ 709.84
64004DE0090008	Standard Silver	45	\$ 638.02	\$ 733.72
64004DE0090008	Standard Silver	46	\$ 662.76	\$ 762.17
64004DE0090008	Standard Silver	47	\$ 690.60	\$ 794.19
64004DE0090008	Standard Silver	48	\$ 722.41	\$ 830.77
64004DE0090008	Standard Silver	49	\$ 753.78	\$ 866.85
64004DE0090008	Standard Silver	50	\$ 789.13	\$ 907.50
64004DE0090008	Standard Silver	51	\$ 824.03	\$ 947.64
64004DE0090008	Standard Silver	52	\$ 862.47	\$ 991.84
64004DE0090008	Standard Silver	53	\$ 901.35	\$ 1,036.56
64004DE0090008	Standard Silver	54	\$ 943.33	\$ 1,084.83
64004DE0090008	Standard Silver	55	\$ 985.30	\$ 1,133.10
64004DE0090008	Standard Silver	56	\$ 1,030.81	\$ 1,185.43
64004DE0090008	Standard Silver	57	\$ 1,076.76	\$ 1,238.28
64004DE0090008	Standard Silver	58	\$ 1,125.81	\$ 1,294.68
64004DE0090008	Standard Silver	59	\$ 1,150.11	\$ 1,322.63
64004DE0090008	Standard Silver	60	\$ 1,199.15	\$ 1,379.03
64004DE0090008	Standard Silver	61	\$ 1,241.57	\$ 1,427.81
64004DE0090008	Standard Silver	62	\$ 1,269.41	\$ 1,459.82
64004DE0090008	Standard Silver	63	\$ 1,304.31	\$ 1,499.96
64004DE0090008	Standard Silver	64 and over	\$ 1,325.51	\$ 1,524.34

**Celtic Ins. Co. / Ambetter Health of DE
Individual**

Effective Date 01/01/2024
Expiration Date 12/31/2024

Plan ID	Plan Name	Age	Individual Rate	Individual Tobacco Rate
64004DE0090009	Complete Gold	0-14	\$ 391.68	\$ 391.68
64004DE0090009	Complete Gold	15	\$ 426.50	\$ 426.50
64004DE0090009	Complete Gold	16	\$ 439.81	\$ 439.81
64004DE0090009	Complete Gold	17	\$ 453.12	\$ 453.12
64004DE0090009	Complete Gold	18	\$ 467.46	\$ 467.46
64004DE0090009	Complete Gold	19	\$ 481.80	\$ 481.80
64004DE0090009	Complete Gold	20	\$ 496.64	\$ 496.64
64004DE0090009	Complete Gold	21	\$ 512.01	\$ 588.81
64004DE0090009	Complete Gold	22	\$ 512.01	\$ 588.81
64004DE0090009	Complete Gold	23	\$ 512.01	\$ 588.81
64004DE0090009	Complete Gold	24	\$ 512.01	\$ 588.81
64004DE0090009	Complete Gold	25	\$ 514.05	\$ 591.16
64004DE0090009	Complete Gold	26	\$ 524.29	\$ 602.94
64004DE0090009	Complete Gold	27	\$ 536.58	\$ 617.07
64004DE0090009	Complete Gold	28	\$ 556.55	\$ 640.03
64004DE0090009	Complete Gold	29	\$ 572.93	\$ 658.87
64004DE0090009	Complete Gold	30	\$ 581.12	\$ 668.29
64004DE0090009	Complete Gold	31	\$ 593.41	\$ 682.42
64004DE0090009	Complete Gold	32	\$ 605.70	\$ 696.56
64004DE0090009	Complete Gold	33	\$ 613.38	\$ 705.39
64004DE0090009	Complete Gold	34	\$ 621.57	\$ 714.81
64004DE0090009	Complete Gold	35	\$ 625.67	\$ 719.52
64004DE0090009	Complete Gold	36	\$ 629.77	\$ 724.23
64004DE0090009	Complete Gold	37	\$ 633.86	\$ 728.94
64004DE0090009	Complete Gold	38	\$ 637.96	\$ 733.65
64004DE0090009	Complete Gold	39	\$ 646.15	\$ 743.07
64004DE0090009	Complete Gold	40	\$ 654.34	\$ 752.49
64004DE0090009	Complete Gold	41	\$ 666.63	\$ 766.62
64004DE0090009	Complete Gold	42	\$ 678.41	\$ 780.17
64004DE0090009	Complete Gold	43	\$ 694.79	\$ 799.01
64004DE0090009	Complete Gold	44	\$ 715.27	\$ 822.56
64004DE0090009	Complete Gold	45	\$ 739.33	\$ 850.23
64004DE0090009	Complete Gold	46	\$ 768.01	\$ 883.21
64004DE0090009	Complete Gold	47	\$ 800.26	\$ 920.30
64004DE0090009	Complete Gold	48	\$ 837.13	\$ 962.70
64004DE0090009	Complete Gold	49	\$ 873.48	\$ 1,004.50
64004DE0090009	Complete Gold	50	\$ 914.44	\$ 1,051.61
64004DE0090009	Complete Gold	51	\$ 954.89	\$ 1,098.12
64004DE0090009	Complete Gold	52	\$ 999.43	\$ 1,149.35
64004DE0090009	Complete Gold	53	\$ 1,044.49	\$ 1,201.16
64004DE0090009	Complete Gold	54	\$ 1,093.13	\$ 1,257.10
64004DE0090009	Complete Gold	55	\$ 1,141.77	\$ 1,313.03
64004DE0090009	Complete Gold	56	\$ 1,194.51	\$ 1,373.68
64004DE0090009	Complete Gold	57	\$ 1,247.75	\$ 1,434.92
64004DE0090009	Complete Gold	58	\$ 1,304.59	\$ 1,500.27
64004DE0090009	Complete Gold	59	\$ 1,332.75	\$ 1,532.66
64004DE0090009	Complete Gold	60	\$ 1,389.58	\$ 1,598.02
64004DE0090009	Complete Gold	61	\$ 1,438.73	\$ 1,654.54
64004DE0090009	Complete Gold	62	\$ 1,470.99	\$ 1,691.64
64004DE0090009	Complete Gold	63	\$ 1,511.44	\$ 1,738.15
64004DE0090009	Complete Gold	64 and over	\$ 1,536.00	\$ 1,766.40

**Celtic Ins. Co. / Ambetter Health of DE
Individual**

Effective Date 01/01/2024
Expiration Date 12/31/2024

Plan ID	Plan Name	Age	Individual Rate	Individual Tobacco Rate
64004DE0090010	Everyday Gold	0-14	\$ 375.63	\$ 375.63
64004DE0090010	Everyday Gold	15	\$ 409.02	\$ 409.02
64004DE0090010	Everyday Gold	16	\$ 421.78	\$ 421.78
64004DE0090010	Everyday Gold	17	\$ 434.55	\$ 434.55
64004DE0090010	Everyday Gold	18	\$ 448.30	\$ 448.30
64004DE0090010	Everyday Gold	19	\$ 462.05	\$ 462.05
64004DE0090010	Everyday Gold	20	\$ 476.29	\$ 476.29
64004DE0090010	Everyday Gold	21	\$ 491.03	\$ 564.68
64004DE0090010	Everyday Gold	22	\$ 491.03	\$ 564.68
64004DE0090010	Everyday Gold	23	\$ 491.03	\$ 564.68
64004DE0090010	Everyday Gold	24	\$ 491.03	\$ 564.68
64004DE0090010	Everyday Gold	25	\$ 492.98	\$ 566.93
64004DE0090010	Everyday Gold	26	\$ 502.80	\$ 578.22
64004DE0090010	Everyday Gold	27	\$ 514.59	\$ 591.77
64004DE0090010	Everyday Gold	28	\$ 533.74	\$ 613.80
64004DE0090010	Everyday Gold	29	\$ 549.45	\$ 631.86
64004DE0090010	Everyday Gold	30	\$ 557.30	\$ 640.90
64004DE0090010	Everyday Gold	31	\$ 569.09	\$ 654.45
64004DE0090010	Everyday Gold	32	\$ 580.87	\$ 668.00
64004DE0090010	Everyday Gold	33	\$ 588.24	\$ 676.47
64004DE0090010	Everyday Gold	34	\$ 596.09	\$ 685.51
64004DE0090010	Everyday Gold	35	\$ 600.02	\$ 690.03
64004DE0090010	Everyday Gold	36	\$ 603.95	\$ 694.54
64004DE0090010	Everyday Gold	37	\$ 607.88	\$ 699.06
64004DE0090010	Everyday Gold	38	\$ 611.81	\$ 703.58
64004DE0090010	Everyday Gold	39	\$ 619.66	\$ 712.61
64004DE0090010	Everyday Gold	40	\$ 627.52	\$ 721.65
64004DE0090010	Everyday Gold	41	\$ 639.30	\$ 735.20
64004DE0090010	Everyday Gold	42	\$ 650.60	\$ 748.19
64004DE0090010	Everyday Gold	43	\$ 666.31	\$ 766.26
64004DE0090010	Everyday Gold	44	\$ 685.95	\$ 788.84
64004DE0090010	Everyday Gold	45	\$ 709.03	\$ 815.38
64004DE0090010	Everyday Gold	46	\$ 736.53	\$ 847.00
64004DE0090010	Everyday Gold	47	\$ 767.46	\$ 882.58
64004DE0090010	Everyday Gold	48	\$ 802.81	\$ 923.23
64004DE0090010	Everyday Gold	49	\$ 837.67	\$ 963.33
64004DE0090010	Everyday Gold	50	\$ 876.96	\$ 1,008.50
64004DE0090010	Everyday Gold	51	\$ 915.75	\$ 1,053.11
64004DE0090010	Everyday Gold	52	\$ 958.46	\$ 1,102.23
64004DE0090010	Everyday Gold	53	\$ 1,001.67	\$ 1,151.93
64004DE0090010	Everyday Gold	54	\$ 1,048.32	\$ 1,205.57
64004DE0090010	Everyday Gold	55	\$ 1,094.97	\$ 1,259.21
64004DE0090010	Everyday Gold	56	\$ 1,145.54	\$ 1,317.37
64004DE0090010	Everyday Gold	57	\$ 1,196.61	\$ 1,376.10
64004DE0090010	Everyday Gold	58	\$ 1,251.11	\$ 1,438.78
64004DE0090010	Everyday Gold	59	\$ 1,278.12	\$ 1,469.83
64004DE0090010	Everyday Gold	60	\$ 1,332.62	\$ 1,532.51
64004DE0090010	Everyday Gold	61	\$ 1,379.76	\$ 1,586.72
64004DE0090010	Everyday Gold	62	\$ 1,410.69	\$ 1,622.29
64004DE0090010	Everyday Gold	63	\$ 1,449.48	\$ 1,666.90
64004DE0090010	Everyday Gold	64 and over	\$ 1,473.04	\$ 1,694.00

**Celtic Ins. Co. / Ambetter Health of DE
Individual**

Effective Date 01/01/2024
Expiration Date 12/31/2024

Plan ID	Plan Name	Age	Individual Rate	Individual Tobacco Rate
64004DE0090011	Clear Gold	0-14	\$ 371.40	\$ 371.40
64004DE0090011	Clear Gold	15	\$ 404.42	\$ 404.42
64004DE0090011	Clear Gold	16	\$ 417.04	\$ 417.04
64004DE0090011	Clear Gold	17	\$ 429.66	\$ 429.66
64004DE0090011	Clear Gold	18	\$ 443.26	\$ 443.26
64004DE0090011	Clear Gold	19	\$ 456.85	\$ 456.85
64004DE0090011	Clear Gold	20	\$ 470.93	\$ 470.93
64004DE0090011	Clear Gold	21	\$ 485.50	\$ 558.33
64004DE0090011	Clear Gold	22	\$ 485.50	\$ 558.33
64004DE0090011	Clear Gold	23	\$ 485.50	\$ 558.33
64004DE0090011	Clear Gold	24	\$ 485.50	\$ 558.33
64004DE0090011	Clear Gold	25	\$ 487.44	\$ 560.55
64004DE0090011	Clear Gold	26	\$ 497.15	\$ 571.72
64004DE0090011	Clear Gold	27	\$ 508.80	\$ 585.12
64004DE0090011	Clear Gold	28	\$ 527.73	\$ 606.89
64004DE0090011	Clear Gold	29	\$ 543.27	\$ 624.76
64004DE0090011	Clear Gold	30	\$ 551.04	\$ 633.69
64004DE0090011	Clear Gold	31	\$ 562.69	\$ 647.09
64004DE0090011	Clear Gold	32	\$ 574.34	\$ 660.49
64004DE0090011	Clear Gold	33	\$ 581.62	\$ 668.86
64004DE0090011	Clear Gold	34	\$ 589.39	\$ 677.80
64004DE0090011	Clear Gold	35	\$ 593.27	\$ 682.26
64004DE0090011	Clear Gold	36	\$ 597.16	\$ 686.73
64004DE0090011	Clear Gold	37	\$ 601.04	\$ 691.20
64004DE0090011	Clear Gold	38	\$ 604.93	\$ 695.66
64004DE0090011	Clear Gold	39	\$ 612.69	\$ 704.60
64004DE0090011	Clear Gold	40	\$ 620.46	\$ 713.53
64004DE0090011	Clear Gold	41	\$ 632.11	\$ 726.93
64004DE0090011	Clear Gold	42	\$ 643.28	\$ 739.77
64004DE0090011	Clear Gold	43	\$ 658.82	\$ 757.64
64004DE0090011	Clear Gold	44	\$ 678.23	\$ 779.97
64004DE0090011	Clear Gold	45	\$ 701.05	\$ 806.21
64004DE0090011	Clear Gold	46	\$ 728.24	\$ 837.48
64004DE0090011	Clear Gold	47	\$ 758.83	\$ 872.65
64004DE0090011	Clear Gold	48	\$ 793.78	\$ 912.85
64004DE0090011	Clear Gold	49	\$ 828.25	\$ 952.49
64004DE0090011	Clear Gold	50	\$ 867.09	\$ 997.16
64004DE0090011	Clear Gold	51	\$ 905.45	\$ 1,041.26
64004DE0090011	Clear Gold	52	\$ 947.68	\$ 1,089.84
64004DE0090011	Clear Gold	53	\$ 990.41	\$ 1,138.97
64004DE0090011	Clear Gold	54	\$ 1,036.53	\$ 1,192.01
64004DE0090011	Clear Gold	55	\$ 1,082.65	\$ 1,245.05
64004DE0090011	Clear Gold	56	\$ 1,132.66	\$ 1,302.56
64004DE0090011	Clear Gold	57	\$ 1,183.15	\$ 1,360.62
64004DE0090011	Clear Gold	58	\$ 1,237.04	\$ 1,422.59
64004DE0090011	Clear Gold	59	\$ 1,263.74	\$ 1,453.30
64004DE0090011	Clear Gold	60	\$ 1,317.63	\$ 1,515.27
64004DE0090011	Clear Gold	61	\$ 1,364.24	\$ 1,568.87
64004DE0090011	Clear Gold	62	\$ 1,394.82	\$ 1,604.05
64004DE0090011	Clear Gold	63	\$ 1,433.18	\$ 1,648.15
64004DE0090011	Clear Gold	64 and over	\$ 1,456.47	\$ 1,674.94

**Celtic Ins. Co. / Ambetter Health of DE
Individual**

Effective Date 01/01/2024
Expiration Date 12/31/2024

Plan ID	Plan Name	Age	Individual Rate	Individual Tobacco Rate
64004DE0090012	Standard Gold	0-14	\$ 377.42	\$ 377.42
64004DE0090012	Standard Gold	15	\$ 410.97	\$ 410.97
64004DE0090012	Standard Gold	16	\$ 423.79	\$ 423.79
64004DE0090012	Standard Gold	17	\$ 436.62	\$ 436.62
64004DE0090012	Standard Gold	18	\$ 450.44	\$ 450.44
64004DE0090012	Standard Gold	19	\$ 464.25	\$ 464.25
64004DE0090012	Standard Gold	20	\$ 478.56	\$ 478.56
64004DE0090012	Standard Gold	21	\$ 493.37	\$ 567.37
64004DE0090012	Standard Gold	22	\$ 493.37	\$ 567.37
64004DE0090012	Standard Gold	23	\$ 493.37	\$ 567.37
64004DE0090012	Standard Gold	24	\$ 493.37	\$ 567.37
64004DE0090012	Standard Gold	25	\$ 495.33	\$ 569.63
64004DE0090012	Standard Gold	26	\$ 505.20	\$ 580.98
64004DE0090012	Standard Gold	27	\$ 517.04	\$ 594.60
64004DE0090012	Standard Gold	28	\$ 536.28	\$ 616.72
64004DE0090012	Standard Gold	29	\$ 552.07	\$ 634.88
64004DE0090012	Standard Gold	30	\$ 559.96	\$ 643.96
64004DE0090012	Standard Gold	31	\$ 571.80	\$ 657.57
64004DE0090012	Standard Gold	32	\$ 583.64	\$ 671.19
64004DE0090012	Standard Gold	33	\$ 591.04	\$ 679.70
64004DE0090012	Standard Gold	34	\$ 598.94	\$ 688.78
64004DE0090012	Standard Gold	35	\$ 602.88	\$ 693.32
64004DE0090012	Standard Gold	36	\$ 606.83	\$ 697.86
64004DE0090012	Standard Gold	37	\$ 610.78	\$ 702.39
64004DE0090012	Standard Gold	38	\$ 614.72	\$ 706.93
64004DE0090012	Standard Gold	39	\$ 622.62	\$ 716.01
64004DE0090012	Standard Gold	40	\$ 630.51	\$ 725.09
64004DE0090012	Standard Gold	41	\$ 642.35	\$ 738.71
64004DE0090012	Standard Gold	42	\$ 653.70	\$ 751.76
64004DE0090012	Standard Gold	43	\$ 669.49	\$ 769.91
64004DE0090012	Standard Gold	44	\$ 689.22	\$ 792.61
64004DE0090012	Standard Gold	45	\$ 712.41	\$ 819.27
64004DE0090012	Standard Gold	46	\$ 740.04	\$ 851.04
64004DE0090012	Standard Gold	47	\$ 771.12	\$ 886.79
64004DE0090012	Standard Gold	48	\$ 806.64	\$ 927.64
64004DE0090012	Standard Gold	49	\$ 841.67	\$ 967.92
64004DE0090012	Standard Gold	50	\$ 881.14	\$ 1,013.31
64004DE0090012	Standard Gold	51	\$ 920.11	\$ 1,058.13
64004DE0090012	Standard Gold	52	\$ 963.04	\$ 1,107.49
64004DE0090012	Standard Gold	53	\$ 1,006.45	\$ 1,157.42
64004DE0090012	Standard Gold	54	\$ 1,053.32	\$ 1,211.32
64004DE0090012	Standard Gold	55	\$ 1,100.19	\$ 1,265.22
64004DE0090012	Standard Gold	56	\$ 1,151.01	\$ 1,323.66
64004DE0090012	Standard Gold	57	\$ 1,202.31	\$ 1,382.66
64004DE0090012	Standard Gold	58	\$ 1,257.08	\$ 1,445.64
64004DE0090012	Standard Gold	59	\$ 1,284.21	\$ 1,476.84
64004DE0090012	Standard Gold	60	\$ 1,338.98	\$ 1,539.82
64004DE0090012	Standard Gold	61	\$ 1,386.34	\$ 1,594.29
64004DE0090012	Standard Gold	62	\$ 1,417.42	\$ 1,630.03
64004DE0090012	Standard Gold	63	\$ 1,456.39	\$ 1,674.85
64004DE0090012	Standard Gold	64 and over	\$ 1,480.07	\$ 1,702.08

**Celtic Ins. Co. / Ambetter Health of DE
Individual**

Effective Date 01/01/2024
Expiration Date 12/31/2024

Plan ID	Plan Name	Age	Individual Rate	Individual Tobacco Rate
64004DE0100001	Premier Bronze HSA + Vision + Adult Dental	0-14	\$ 305.60	\$ 305.60
64004DE0100001	Premier Bronze HSA + Vision + Adult Dental	15	\$ 332.77	\$ 332.77
64004DE0100001	Premier Bronze HSA + Vision + Adult Dental	16	\$ 343.15	\$ 343.15
64004DE0100001	Premier Bronze HSA + Vision + Adult Dental	17	\$ 353.54	\$ 353.54
64004DE0100001	Premier Bronze HSA + Vision + Adult Dental	18	\$ 364.72	\$ 364.72
64004DE0100001	Premier Bronze HSA + Vision + Adult Dental	19	\$ 375.91	\$ 375.91
64004DE0100001	Premier Bronze HSA + Vision + Adult Dental	20	\$ 387.49	\$ 387.49
64004DE0100001	Premier Bronze HSA + Vision + Adult Dental	21	\$ 399.49	\$ 459.41
64004DE0100001	Premier Bronze HSA + Vision + Adult Dental	22	\$ 399.49	\$ 459.41
64004DE0100001	Premier Bronze HSA + Vision + Adult Dental	23	\$ 399.49	\$ 459.41
64004DE0100001	Premier Bronze HSA + Vision + Adult Dental	24	\$ 399.49	\$ 459.41
64004DE0100001	Premier Bronze HSA + Vision + Adult Dental	25	\$ 401.08	\$ 461.24
64004DE0100001	Premier Bronze HSA + Vision + Adult Dental	26	\$ 409.07	\$ 470.43
64004DE0100001	Premier Bronze HSA + Vision + Adult Dental	27	\$ 418.65	\$ 481.45
64004DE0100001	Premier Bronze HSA + Vision + Adult Dental	28	\$ 434.23	\$ 499.37
64004DE0100001	Premier Bronze HSA + Vision + Adult Dental	29	\$ 447.02	\$ 514.07
64004DE0100001	Premier Bronze HSA + Vision + Adult Dental	30	\$ 453.41	\$ 521.42
64004DE0100001	Premier Bronze HSA + Vision + Adult Dental	31	\$ 463.00	\$ 532.44
64004DE0100001	Premier Bronze HSA + Vision + Adult Dental	32	\$ 472.58	\$ 543.47
64004DE0100001	Premier Bronze HSA + Vision + Adult Dental	33	\$ 478.57	\$ 550.36
64004DE0100001	Premier Bronze HSA + Vision + Adult Dental	34	\$ 484.97	\$ 557.71
64004DE0100001	Premier Bronze HSA + Vision + Adult Dental	35	\$ 488.16	\$ 561.39
64004DE0100001	Premier Bronze HSA + Vision + Adult Dental	36	\$ 491.36	\$ 565.06
64004DE0100001	Premier Bronze HSA + Vision + Adult Dental	37	\$ 494.55	\$ 568.74
64004DE0100001	Premier Bronze HSA + Vision + Adult Dental	38	\$ 497.75	\$ 572.41
64004DE0100001	Premier Bronze HSA + Vision + Adult Dental	39	\$ 504.14	\$ 579.76
64004DE0100001	Premier Bronze HSA + Vision + Adult Dental	40	\$ 510.53	\$ 587.11
64004DE0100001	Premier Bronze HSA + Vision + Adult Dental	41	\$ 520.12	\$ 598.14
64004DE0100001	Premier Bronze HSA + Vision + Adult Dental	42	\$ 529.31	\$ 608.70
64004DE0100001	Premier Bronze HSA + Vision + Adult Dental	43	\$ 542.09	\$ 623.41
64004DE0100001	Premier Bronze HSA + Vision + Adult Dental	44	\$ 558.07	\$ 641.78
64004DE0100001	Premier Bronze HSA + Vision + Adult Dental	45	\$ 576.85	\$ 663.37
64004DE0100001	Premier Bronze HSA + Vision + Adult Dental	46	\$ 599.22	\$ 689.10
64004DE0100001	Premier Bronze HSA + Vision + Adult Dental	47	\$ 624.38	\$ 718.04
64004DE0100001	Premier Bronze HSA + Vision + Adult Dental	48	\$ 653.15	\$ 751.12
64004DE0100001	Premier Bronze HSA + Vision + Adult Dental	49	\$ 681.51	\$ 783.74
64004DE0100001	Premier Bronze HSA + Vision + Adult Dental	50	\$ 713.47	\$ 820.49
64004DE0100001	Premier Bronze HSA + Vision + Adult Dental	51	\$ 745.03	\$ 856.78
64004DE0100001	Premier Bronze HSA + Vision + Adult Dental	52	\$ 779.78	\$ 896.75
64004DE0100001	Premier Bronze HSA + Vision + Adult Dental	53	\$ 814.94	\$ 937.18
64004DE0100001	Premier Bronze HSA + Vision + Adult Dental	54	\$ 852.89	\$ 980.82
64004DE0100001	Premier Bronze HSA + Vision + Adult Dental	55	\$ 890.84	\$ 1,024.46
64004DE0100001	Premier Bronze HSA + Vision + Adult Dental	56	\$ 931.98	\$ 1,071.78
64004DE0100001	Premier Bronze HSA + Vision + Adult Dental	57	\$ 973.53	\$ 1,119.56
64004DE0100001	Premier Bronze HSA + Vision + Adult Dental	58	\$ 1,017.87	\$ 1,170.55
64004DE0100001	Premier Bronze HSA + Vision + Adult Dental	59	\$ 1,039.84	\$ 1,195.82
64004DE0100001	Premier Bronze HSA + Vision + Adult Dental	60	\$ 1,084.18	\$ 1,246.81
64004DE0100001	Premier Bronze HSA + Vision + Adult Dental	61	\$ 1,122.53	\$ 1,290.91
64004DE0100001	Premier Bronze HSA + Vision + Adult Dental	62	\$ 1,147.70	\$ 1,319.86
64004DE0100001	Premier Bronze HSA + Vision + Adult Dental	63	\$ 1,179.26	\$ 1,356.15
64004DE0100001	Premier Bronze HSA + Vision + Adult Dental	64 and over	\$ 1,198.42	\$ 1,378.19

**Celtic Ins. Co. / Ambetter Health of DE
Individual**

Effective Date 01/01/2024
Expiration Date 12/31/2024

Plan ID	Plan Name	Age	Individual Rate	Individual Tobacco Rate
64004DE0100002	Everyday Bronze + Vision + Adult Dental	0-14	\$ 305.74	\$ 305.74
64004DE0100002	Everyday Bronze + Vision + Adult Dental	15	\$ 332.92	\$ 332.92
64004DE0100002	Everyday Bronze + Vision + Adult Dental	16	\$ 343.31	\$ 343.31
64004DE0100002	Everyday Bronze + Vision + Adult Dental	17	\$ 353.70	\$ 353.70
64004DE0100002	Everyday Bronze + Vision + Adult Dental	18	\$ 364.89	\$ 364.89
64004DE0100002	Everyday Bronze + Vision + Adult Dental	19	\$ 376.08	\$ 376.08
64004DE0100002	Everyday Bronze + Vision + Adult Dental	20	\$ 387.67	\$ 387.67
64004DE0100002	Everyday Bronze + Vision + Adult Dental	21	\$ 399.67	\$ 459.62
64004DE0100002	Everyday Bronze + Vision + Adult Dental	22	\$ 399.67	\$ 459.62
64004DE0100002	Everyday Bronze + Vision + Adult Dental	23	\$ 399.67	\$ 459.62
64004DE0100002	Everyday Bronze + Vision + Adult Dental	24	\$ 399.67	\$ 459.62
64004DE0100002	Everyday Bronze + Vision + Adult Dental	25	\$ 401.26	\$ 461.45
64004DE0100002	Everyday Bronze + Vision + Adult Dental	26	\$ 409.25	\$ 470.64
64004DE0100002	Everyday Bronze + Vision + Adult Dental	27	\$ 418.85	\$ 481.67
64004DE0100002	Everyday Bronze + Vision + Adult Dental	28	\$ 434.43	\$ 499.60
64004DE0100002	Everyday Bronze + Vision + Adult Dental	29	\$ 447.22	\$ 514.30
64004DE0100002	Everyday Bronze + Vision + Adult Dental	30	\$ 453.62	\$ 521.66
64004DE0100002	Everyday Bronze + Vision + Adult Dental	31	\$ 463.21	\$ 532.69
64004DE0100002	Everyday Bronze + Vision + Adult Dental	32	\$ 472.80	\$ 543.72
64004DE0100002	Everyday Bronze + Vision + Adult Dental	33	\$ 478.80	\$ 550.61
64004DE0100002	Everyday Bronze + Vision + Adult Dental	34	\$ 485.19	\$ 557.97
64004DE0100002	Everyday Bronze + Vision + Adult Dental	35	\$ 488.39	\$ 561.64
64004DE0100002	Everyday Bronze + Vision + Adult Dental	36	\$ 491.58	\$ 565.32
64004DE0100002	Everyday Bronze + Vision + Adult Dental	37	\$ 494.78	\$ 569.00
64004DE0100002	Everyday Bronze + Vision + Adult Dental	38	\$ 497.98	\$ 572.68
64004DE0100002	Everyday Bronze + Vision + Adult Dental	39	\$ 504.37	\$ 580.03
64004DE0100002	Everyday Bronze + Vision + Adult Dental	40	\$ 510.77	\$ 587.38
64004DE0100002	Everyday Bronze + Vision + Adult Dental	41	\$ 520.36	\$ 598.41
64004DE0100002	Everyday Bronze + Vision + Adult Dental	42	\$ 529.55	\$ 608.98
64004DE0100002	Everyday Bronze + Vision + Adult Dental	43	\$ 542.34	\$ 623.69
64004DE0100002	Everyday Bronze + Vision + Adult Dental	44	\$ 558.33	\$ 642.08
64004DE0100002	Everyday Bronze + Vision + Adult Dental	45	\$ 577.11	\$ 663.68
64004DE0100002	Everyday Bronze + Vision + Adult Dental	46	\$ 599.49	\$ 689.42
64004DE0100002	Everyday Bronze + Vision + Adult Dental	47	\$ 624.67	\$ 718.37
64004DE0100002	Everyday Bronze + Vision + Adult Dental	48	\$ 653.45	\$ 751.46
64004DE0100002	Everyday Bronze + Vision + Adult Dental	49	\$ 681.82	\$ 784.10
64004DE0100002	Everyday Bronze + Vision + Adult Dental	50	\$ 713.80	\$ 820.87
64004DE0100002	Everyday Bronze + Vision + Adult Dental	51	\$ 745.37	\$ 857.17
64004DE0100002	Everyday Bronze + Vision + Adult Dental	52	\$ 780.14	\$ 897.16
64004DE0100002	Everyday Bronze + Vision + Adult Dental	53	\$ 815.31	\$ 937.61
64004DE0100002	Everyday Bronze + Vision + Adult Dental	54	\$ 853.28	\$ 981.27
64004DE0100002	Everyday Bronze + Vision + Adult Dental	55	\$ 891.25	\$ 1,024.93
64004DE0100002	Everyday Bronze + Vision + Adult Dental	56	\$ 932.41	\$ 1,072.27
64004DE0100002	Everyday Bronze + Vision + Adult Dental	57	\$ 973.98	\$ 1,120.07
64004DE0100002	Everyday Bronze + Vision + Adult Dental	58	\$ 1,018.34	\$ 1,171.09
64004DE0100002	Everyday Bronze + Vision + Adult Dental	59	\$ 1,040.32	\$ 1,196.37
64004DE0100002	Everyday Bronze + Vision + Adult Dental	60	\$ 1,084.68	\$ 1,247.38
64004DE0100002	Everyday Bronze + Vision + Adult Dental	61	\$ 1,123.05	\$ 1,291.51
64004DE0100002	Everyday Bronze + Vision + Adult Dental	62	\$ 1,148.23	\$ 1,320.46
64004DE0100002	Everyday Bronze + Vision + Adult Dental	63	\$ 1,179.80	\$ 1,356.77
64004DE0100002	Everyday Bronze + Vision + Adult Dental	64 and over	\$ 1,198.98	\$ 1,378.82

**Celtic Ins. Co. / Ambetter Health of DE
Individual**

Effective Date 01/01/2024
Expiration Date 12/31/2024

Plan ID	Plan Name	Age	Individual Rate	Individual Tobacco Rate
64004DE0100003	Elite Bronze + Vision + Adult Dental	0-14	\$ 350.81	\$ 350.81
64004DE0100003	Elite Bronze + Vision + Adult Dental	15	\$ 381.99	\$ 381.99
64004DE0100003	Elite Bronze + Vision + Adult Dental	16	\$ 393.92	\$ 393.92
64004DE0100003	Elite Bronze + Vision + Adult Dental	17	\$ 405.84	\$ 405.84
64004DE0100003	Elite Bronze + Vision + Adult Dental	18	\$ 418.68	\$ 418.68
64004DE0100003	Elite Bronze + Vision + Adult Dental	19	\$ 431.52	\$ 431.52
64004DE0100003	Elite Bronze + Vision + Adult Dental	20	\$ 444.82	\$ 444.82
64004DE0100003	Elite Bronze + Vision + Adult Dental	21	\$ 458.58	\$ 527.37
64004DE0100003	Elite Bronze + Vision + Adult Dental	22	\$ 458.58	\$ 527.37
64004DE0100003	Elite Bronze + Vision + Adult Dental	23	\$ 458.58	\$ 527.37
64004DE0100003	Elite Bronze + Vision + Adult Dental	24	\$ 458.58	\$ 527.37
64004DE0100003	Elite Bronze + Vision + Adult Dental	25	\$ 460.41	\$ 529.47
64004DE0100003	Elite Bronze + Vision + Adult Dental	26	\$ 469.58	\$ 540.02
64004DE0100003	Elite Bronze + Vision + Adult Dental	27	\$ 480.59	\$ 552.67
64004DE0100003	Elite Bronze + Vision + Adult Dental	28	\$ 498.47	\$ 573.24
64004DE0100003	Elite Bronze + Vision + Adult Dental	29	\$ 513.15	\$ 590.12
64004DE0100003	Elite Bronze + Vision + Adult Dental	30	\$ 520.48	\$ 598.55
64004DE0100003	Elite Bronze + Vision + Adult Dental	31	\$ 531.49	\$ 611.21
64004DE0100003	Elite Bronze + Vision + Adult Dental	32	\$ 542.49	\$ 623.87
64004DE0100003	Elite Bronze + Vision + Adult Dental	33	\$ 549.37	\$ 631.78
64004DE0100003	Elite Bronze + Vision + Adult Dental	34	\$ 556.71	\$ 640.22
64004DE0100003	Elite Bronze + Vision + Adult Dental	35	\$ 560.38	\$ 644.44
64004DE0100003	Elite Bronze + Vision + Adult Dental	36	\$ 564.05	\$ 648.65
64004DE0100003	Elite Bronze + Vision + Adult Dental	37	\$ 567.72	\$ 652.87
64004DE0100003	Elite Bronze + Vision + Adult Dental	38	\$ 571.38	\$ 657.09
64004DE0100003	Elite Bronze + Vision + Adult Dental	39	\$ 578.72	\$ 665.53
64004DE0100003	Elite Bronze + Vision + Adult Dental	40	\$ 586.06	\$ 673.97
64004DE0100003	Elite Bronze + Vision + Adult Dental	41	\$ 597.06	\$ 686.62
64004DE0100003	Elite Bronze + Vision + Adult Dental	42	\$ 607.61	\$ 698.75
64004DE0100003	Elite Bronze + Vision + Adult Dental	43	\$ 622.29	\$ 715.63
64004DE0100003	Elite Bronze + Vision + Adult Dental	44	\$ 640.63	\$ 736.72
64004DE0100003	Elite Bronze + Vision + Adult Dental	45	\$ 662.18	\$ 761.51
64004DE0100003	Elite Bronze + Vision + Adult Dental	46	\$ 687.86	\$ 791.04
64004DE0100003	Elite Bronze + Vision + Adult Dental	47	\$ 716.75	\$ 824.27
64004DE0100003	Elite Bronze + Vision + Adult Dental	48	\$ 749.77	\$ 862.24
64004DE0100003	Elite Bronze + Vision + Adult Dental	49	\$ 782.33	\$ 899.68
64004DE0100003	Elite Bronze + Vision + Adult Dental	50	\$ 819.01	\$ 941.87
64004DE0100003	Elite Bronze + Vision + Adult Dental	51	\$ 855.24	\$ 983.53
64004DE0100003	Elite Bronze + Vision + Adult Dental	52	\$ 895.14	\$ 1,029.41
64004DE0100003	Elite Bronze + Vision + Adult Dental	53	\$ 935.49	\$ 1,075.82
64004DE0100003	Elite Bronze + Vision + Adult Dental	54	\$ 979.06	\$ 1,125.92
64004DE0100003	Elite Bronze + Vision + Adult Dental	55	\$ 1,022.62	\$ 1,176.02
64004DE0100003	Elite Bronze + Vision + Adult Dental	56	\$ 1,069.86	\$ 1,230.33
64004DE0100003	Elite Bronze + Vision + Adult Dental	57	\$ 1,117.55	\$ 1,285.18
64004DE0100003	Elite Bronze + Vision + Adult Dental	58	\$ 1,168.45	\$ 1,343.72
64004DE0100003	Elite Bronze + Vision + Adult Dental	59	\$ 1,193.67	\$ 1,372.72
64004DE0100003	Elite Bronze + Vision + Adult Dental	60	\$ 1,244.57	\$ 1,431.26
64004DE0100003	Elite Bronze + Vision + Adult Dental	61	\$ 1,288.60	\$ 1,481.89
64004DE0100003	Elite Bronze + Vision + Adult Dental	62	\$ 1,317.49	\$ 1,515.11
64004DE0100003	Elite Bronze + Vision + Adult Dental	63	\$ 1,353.71	\$ 1,556.77
64004DE0100003	Elite Bronze + Vision + Adult Dental	64 and over	\$ 1,375.71	\$ 1,582.07

**Celtic Ins. Co. / Ambetter Health of DE
Individual**

Effective Date 01/01/2024
Expiration Date 12/31/2024

Plan ID	Plan Name	Age	Individual Rate	Individual Tobacco Rate
64004DE0100004	Standard Expanded Bronze + Vision + Adult Dental	0-14	\$ 301.45	\$ 301.45
64004DE0100004	Standard Expanded Bronze + Vision + Adult Dental	15	\$ 328.25	\$ 328.25
64004DE0100004	Standard Expanded Bronze + Vision + Adult Dental	16	\$ 338.49	\$ 338.49
64004DE0100004	Standard Expanded Bronze + Vision + Adult Dental	17	\$ 348.74	\$ 348.74
64004DE0100004	Standard Expanded Bronze + Vision + Adult Dental	18	\$ 359.77	\$ 359.77
64004DE0100004	Standard Expanded Bronze + Vision + Adult Dental	19	\$ 370.81	\$ 370.81
64004DE0100004	Standard Expanded Bronze + Vision + Adult Dental	20	\$ 382.23	\$ 382.23
64004DE0100004	Standard Expanded Bronze + Vision + Adult Dental	21	\$ 394.07	\$ 453.17
64004DE0100004	Standard Expanded Bronze + Vision + Adult Dental	22	\$ 394.07	\$ 453.17
64004DE0100004	Standard Expanded Bronze + Vision + Adult Dental	23	\$ 394.07	\$ 453.17
64004DE0100004	Standard Expanded Bronze + Vision + Adult Dental	24	\$ 394.07	\$ 453.17
64004DE0100004	Standard Expanded Bronze + Vision + Adult Dental	25	\$ 395.63	\$ 454.98
64004DE0100004	Standard Expanded Bronze + Vision + Adult Dental	26	\$ 403.51	\$ 464.04
64004DE0100004	Standard Expanded Bronze + Vision + Adult Dental	27	\$ 412.97	\$ 474.92
64004DE0100004	Standard Expanded Bronze + Vision + Adult Dental	28	\$ 428.34	\$ 492.59
64004DE0100004	Standard Expanded Bronze + Vision + Adult Dental	29	\$ 440.95	\$ 507.09
64004DE0100004	Standard Expanded Bronze + Vision + Adult Dental	30	\$ 447.25	\$ 514.34
64004DE0100004	Standard Expanded Bronze + Vision + Adult Dental	31	\$ 456.71	\$ 525.22
64004DE0100004	Standard Expanded Bronze + Vision + Adult Dental	32	\$ 466.17	\$ 536.09
64004DE0100004	Standard Expanded Bronze + Vision + Adult Dental	33	\$ 472.08	\$ 542.89
64004DE0100004	Standard Expanded Bronze + Vision + Adult Dental	34	\$ 478.38	\$ 550.14
64004DE0100004	Standard Expanded Bronze + Vision + Adult Dental	35	\$ 481.54	\$ 553.77
64004DE0100004	Standard Expanded Bronze + Vision + Adult Dental	36	\$ 484.69	\$ 557.39
64004DE0100004	Standard Expanded Bronze + Vision + Adult Dental	37	\$ 487.84	\$ 561.02
64004DE0100004	Standard Expanded Bronze + Vision + Adult Dental	38	\$ 490.99	\$ 564.64
64004DE0100004	Standard Expanded Bronze + Vision + Adult Dental	39	\$ 497.30	\$ 571.89
64004DE0100004	Standard Expanded Bronze + Vision + Adult Dental	40	\$ 503.60	\$ 579.14
64004DE0100004	Standard Expanded Bronze + Vision + Adult Dental	41	\$ 513.06	\$ 590.02
64004DE0100004	Standard Expanded Bronze + Vision + Adult Dental	42	\$ 522.12	\$ 600.44
64004DE0100004	Standard Expanded Bronze + Vision + Adult Dental	43	\$ 534.73	\$ 614.94
64004DE0100004	Standard Expanded Bronze + Vision + Adult Dental	44	\$ 550.50	\$ 633.07
64004DE0100004	Standard Expanded Bronze + Vision + Adult Dental	45	\$ 569.02	\$ 654.37
64004DE0100004	Standard Expanded Bronze + Vision + Adult Dental	46	\$ 591.08	\$ 679.75
64004DE0100004	Standard Expanded Bronze + Vision + Adult Dental	47	\$ 615.91	\$ 708.30
64004DE0100004	Standard Expanded Bronze + Vision + Adult Dental	48	\$ 644.28	\$ 740.92
64004DE0100004	Standard Expanded Bronze + Vision + Adult Dental	49	\$ 672.26	\$ 773.10
64004DE0100004	Standard Expanded Bronze + Vision + Adult Dental	50	\$ 703.78	\$ 809.35
64004DE0100004	Standard Expanded Bronze + Vision + Adult Dental	51	\$ 734.91	\$ 845.15
64004DE0100004	Standard Expanded Bronze + Vision + Adult Dental	52	\$ 769.20	\$ 884.58
64004DE0100004	Standard Expanded Bronze + Vision + Adult Dental	53	\$ 803.87	\$ 924.45
64004DE0100004	Standard Expanded Bronze + Vision + Adult Dental	54	\$ 841.31	\$ 967.50
64004DE0100004	Standard Expanded Bronze + Vision + Adult Dental	55	\$ 878.74	\$ 1,010.56
64004DE0100004	Standard Expanded Bronze + Vision + Adult Dental	56	\$ 919.33	\$ 1,057.23
64004DE0100004	Standard Expanded Bronze + Vision + Adult Dental	57	\$ 960.31	\$ 1,104.36
64004DE0100004	Standard Expanded Bronze + Vision + Adult Dental	58	\$ 1,004.05	\$ 1,154.66
64004DE0100004	Standard Expanded Bronze + Vision + Adult Dental	59	\$ 1,025.73	\$ 1,179.59
64004DE0100004	Standard Expanded Bronze + Vision + Adult Dental	60	\$ 1,069.47	\$ 1,229.89
64004DE0100004	Standard Expanded Bronze + Vision + Adult Dental	61	\$ 1,107.30	\$ 1,273.39
64004DE0100004	Standard Expanded Bronze + Vision + Adult Dental	62	\$ 1,132.12	\$ 1,301.94
64004DE0100004	Standard Expanded Bronze + Vision + Adult Dental	63	\$ 1,163.25	\$ 1,337.74
64004DE0100004	Standard Expanded Bronze + Vision + Adult Dental	64 and over	\$ 1,182.16	\$ 1,359.48

**Celtic Ins. Co. / Ambetter Health of DE
Individual**

Effective Date 01/01/2024
Expiration Date 12/31/2024

Plan ID	Plan Name	Age	Individual Rate	Individual Tobacco Rate
64004DE0100005	Premier Bronze HSA + Vision + Adult Dental	0-14	\$ 359.35	\$ 359.35
64004DE0100005	Premier Bronze HSA + Vision + Adult Dental	15	\$ 391.29	\$ 391.29
64004DE0100005	Premier Bronze HSA + Vision + Adult Dental	16	\$ 403.51	\$ 403.51
64004DE0100005	Premier Bronze HSA + Vision + Adult Dental	17	\$ 415.72	\$ 415.72
64004DE0100005	Premier Bronze HSA + Vision + Adult Dental	18	\$ 428.87	\$ 428.87
64004DE0100005	Premier Bronze HSA + Vision + Adult Dental	19	\$ 442.03	\$ 442.03
64004DE0100005	Premier Bronze HSA + Vision + Adult Dental	20	\$ 455.65	\$ 455.65
64004DE0100005	Premier Bronze HSA + Vision + Adult Dental	21	\$ 469.75	\$ 540.21
64004DE0100005	Premier Bronze HSA + Vision + Adult Dental	22	\$ 469.75	\$ 540.21
64004DE0100005	Premier Bronze HSA + Vision + Adult Dental	23	\$ 469.75	\$ 540.21
64004DE0100005	Premier Bronze HSA + Vision + Adult Dental	24	\$ 469.75	\$ 540.21
64004DE0100005	Premier Bronze HSA + Vision + Adult Dental	25	\$ 471.62	\$ 542.36
64004DE0100005	Premier Bronze HSA + Vision + Adult Dental	26	\$ 481.02	\$ 553.17
64004DE0100005	Premier Bronze HSA + Vision + Adult Dental	27	\$ 492.29	\$ 566.13
64004DE0100005	Premier Bronze HSA + Vision + Adult Dental	28	\$ 510.61	\$ 587.20
64004DE0100005	Premier Bronze HSA + Vision + Adult Dental	29	\$ 525.64	\$ 604.49
64004DE0100005	Premier Bronze HSA + Vision + Adult Dental	30	\$ 533.16	\$ 613.13
64004DE0100005	Premier Bronze HSA + Vision + Adult Dental	31	\$ 544.43	\$ 626.10
64004DE0100005	Premier Bronze HSA + Vision + Adult Dental	32	\$ 555.70	\$ 639.06
64004DE0100005	Premier Bronze HSA + Vision + Adult Dental	33	\$ 562.75	\$ 647.16
64004DE0100005	Premier Bronze HSA + Vision + Adult Dental	34	\$ 570.27	\$ 655.81
64004DE0100005	Premier Bronze HSA + Vision + Adult Dental	35	\$ 574.02	\$ 660.13
64004DE0100005	Premier Bronze HSA + Vision + Adult Dental	36	\$ 577.78	\$ 664.45
64004DE0100005	Premier Bronze HSA + Vision + Adult Dental	37	\$ 581.54	\$ 668.77
64004DE0100005	Premier Bronze HSA + Vision + Adult Dental	38	\$ 585.30	\$ 673.09
64004DE0100005	Premier Bronze HSA + Vision + Adult Dental	39	\$ 592.81	\$ 681.74
64004DE0100005	Premier Bronze HSA + Vision + Adult Dental	40	\$ 600.33	\$ 690.38
64004DE0100005	Premier Bronze HSA + Vision + Adult Dental	41	\$ 611.60	\$ 703.34
64004DE0100005	Premier Bronze HSA + Vision + Adult Dental	42	\$ 622.41	\$ 715.77
64004DE0100005	Premier Bronze HSA + Vision + Adult Dental	43	\$ 637.44	\$ 733.06
64004DE0100005	Premier Bronze HSA + Vision + Adult Dental	44	\$ 656.23	\$ 754.66
64004DE0100005	Premier Bronze HSA + Vision + Adult Dental	45	\$ 678.31	\$ 780.05
64004DE0100005	Premier Bronze HSA + Vision + Adult Dental	46	\$ 704.61	\$ 810.30
64004DE0100005	Premier Bronze HSA + Vision + Adult Dental	47	\$ 734.21	\$ 844.34
64004DE0100005	Premier Bronze HSA + Vision + Adult Dental	48	\$ 768.03	\$ 883.23
64004DE0100005	Premier Bronze HSA + Vision + Adult Dental	49	\$ 801.38	\$ 921.59
64004DE0100005	Premier Bronze HSA + Vision + Adult Dental	50	\$ 838.96	\$ 964.80
64004DE0100005	Premier Bronze HSA + Vision + Adult Dental	51	\$ 876.07	\$ 1,007.48
64004DE0100005	Premier Bronze HSA + Vision + Adult Dental	52	\$ 916.94	\$ 1,054.48
64004DE0100005	Premier Bronze HSA + Vision + Adult Dental	53	\$ 958.27	\$ 1,102.01
64004DE0100005	Premier Bronze HSA + Vision + Adult Dental	54	\$ 1,002.90	\$ 1,153.33
64004DE0100005	Premier Bronze HSA + Vision + Adult Dental	55	\$ 1,047.52	\$ 1,204.65
64004DE0100005	Premier Bronze HSA + Vision + Adult Dental	56	\$ 1,095.91	\$ 1,260.29
64004DE0100005	Premier Bronze HSA + Vision + Adult Dental	57	\$ 1,144.76	\$ 1,316.47
64004DE0100005	Premier Bronze HSA + Vision + Adult Dental	58	\$ 1,196.90	\$ 1,376.44
64004DE0100005	Premier Bronze HSA + Vision + Adult Dental	59	\$ 1,222.74	\$ 1,406.15
64004DE0100005	Premier Bronze HSA + Vision + Adult Dental	60	\$ 1,274.88	\$ 1,466.11
64004DE0100005	Premier Bronze HSA + Vision + Adult Dental	61	\$ 1,319.97	\$ 1,517.97
64004DE0100005	Premier Bronze HSA + Vision + Adult Dental	62	\$ 1,349.57	\$ 1,552.00
64004DE0100005	Premier Bronze HSA + Vision + Adult Dental	63	\$ 1,386.68	\$ 1,594.68
64004DE0100005	Premier Bronze HSA + Vision + Adult Dental	64 and over	\$ 1,409.22	\$ 1,620.60

**Celtic Ins. Co. / Ambetter Health of DE
Individual**

Effective Date 01/01/2024
Expiration Date 12/31/2024

Plan ID	Plan Name	Age	Individual Rate	Individual Tobacco Rate
64004DE010006	Clear Silver + Vision + Adult Dental	0-14	\$ 350.53	\$ 350.53
64004DE010006	Clear Silver + Vision + Adult Dental	15	\$ 381.69	\$ 381.69
64004DE010006	Clear Silver + Vision + Adult Dental	16	\$ 393.60	\$ 393.60
64004DE010006	Clear Silver + Vision + Adult Dental	17	\$ 405.51	\$ 405.51
64004DE010006	Clear Silver + Vision + Adult Dental	18	\$ 418.34	\$ 418.34
64004DE010006	Clear Silver + Vision + Adult Dental	19	\$ 431.17	\$ 431.17
64004DE010006	Clear Silver + Vision + Adult Dental	20	\$ 444.46	\$ 444.46
64004DE010006	Clear Silver + Vision + Adult Dental	21	\$ 458.22	\$ 526.95
64004DE010006	Clear Silver + Vision + Adult Dental	22	\$ 458.22	\$ 526.95
64004DE010006	Clear Silver + Vision + Adult Dental	23	\$ 458.22	\$ 526.95
64004DE010006	Clear Silver + Vision + Adult Dental	24	\$ 458.22	\$ 526.95
64004DE010006	Clear Silver + Vision + Adult Dental	25	\$ 460.04	\$ 529.05
64004DE010006	Clear Silver + Vision + Adult Dental	26	\$ 469.20	\$ 539.58
64004DE010006	Clear Silver + Vision + Adult Dental	27	\$ 480.20	\$ 552.23
64004DE010006	Clear Silver + Vision + Adult Dental	28	\$ 498.07	\$ 572.78
64004DE010006	Clear Silver + Vision + Adult Dental	29	\$ 512.73	\$ 589.64
64004DE010006	Clear Silver + Vision + Adult Dental	30	\$ 520.07	\$ 598.08
64004DE010006	Clear Silver + Vision + Adult Dental	31	\$ 531.06	\$ 610.72
64004DE010006	Clear Silver + Vision + Adult Dental	32	\$ 542.06	\$ 623.37
64004DE010006	Clear Silver + Vision + Adult Dental	33	\$ 548.93	\$ 631.27
64004DE010006	Clear Silver + Vision + Adult Dental	34	\$ 556.26	\$ 639.70
64004DE010006	Clear Silver + Vision + Adult Dental	35	\$ 559.93	\$ 643.92
64004DE010006	Clear Silver + Vision + Adult Dental	36	\$ 563.60	\$ 648.13
64004DE010006	Clear Silver + Vision + Adult Dental	37	\$ 567.26	\$ 652.35
64004DE010006	Clear Silver + Vision + Adult Dental	38	\$ 570.93	\$ 656.57
64004DE010006	Clear Silver + Vision + Adult Dental	39	\$ 578.26	\$ 665.00
64004DE010006	Clear Silver + Vision + Adult Dental	40	\$ 585.59	\$ 673.43
64004DE010006	Clear Silver + Vision + Adult Dental	41	\$ 596.59	\$ 686.07
64004DE010006	Clear Silver + Vision + Adult Dental	42	\$ 607.12	\$ 698.19
64004DE010006	Clear Silver + Vision + Adult Dental	43	\$ 621.79	\$ 715.06
64004DE010006	Clear Silver + Vision + Adult Dental	44	\$ 640.12	\$ 736.13
64004DE010006	Clear Silver + Vision + Adult Dental	45	\$ 661.65	\$ 760.90
64004DE010006	Clear Silver + Vision + Adult Dental	46	\$ 687.31	\$ 790.41
64004DE010006	Clear Silver + Vision + Adult Dental	47	\$ 716.18	\$ 823.60
64004DE010006	Clear Silver + Vision + Adult Dental	48	\$ 749.17	\$ 861.54
64004DE010006	Clear Silver + Vision + Adult Dental	49	\$ 781.70	\$ 898.96
64004DE010006	Clear Silver + Vision + Adult Dental	50	\$ 818.36	\$ 941.11
64004DE010006	Clear Silver + Vision + Adult Dental	51	\$ 854.56	\$ 982.74
64004DE010006	Clear Silver + Vision + Adult Dental	52	\$ 894.42	\$ 1,028.58
64004DE010006	Clear Silver + Vision + Adult Dental	53	\$ 934.74	\$ 1,074.95
64004DE010006	Clear Silver + Vision + Adult Dental	54	\$ 978.27	\$ 1,125.01
64004DE010006	Clear Silver + Vision + Adult Dental	55	\$ 1,021.80	\$ 1,175.07
64004DE010006	Clear Silver + Vision + Adult Dental	56	\$ 1,069.00	\$ 1,229.35
64004DE010006	Clear Silver + Vision + Adult Dental	57	\$ 1,116.65	\$ 1,284.15
64004DE010006	Clear Silver + Vision + Adult Dental	58	\$ 1,167.51	\$ 1,342.64
64004DE010006	Clear Silver + Vision + Adult Dental	59	\$ 1,192.71	\$ 1,371.62
64004DE010006	Clear Silver + Vision + Adult Dental	60	\$ 1,243.57	\$ 1,430.11
64004DE010006	Clear Silver + Vision + Adult Dental	61	\$ 1,287.56	\$ 1,480.70
64004DE010006	Clear Silver + Vision + Adult Dental	62	\$ 1,316.43	\$ 1,513.89
64004DE010006	Clear Silver + Vision + Adult Dental	63	\$ 1,352.63	\$ 1,555.52
64004DE010006	Clear Silver + Vision + Adult Dental	64 and over	\$ 1,374.61	\$ 1,580.81

**Celtic Ins. Co. / Ambetter Health of DE
Individual**

Effective Date 01/01/2024
Expiration Date 12/31/2024

Plan ID	Plan Name	Age	Individual Rate	Individual Tobacco Rate
64004DE0100007	Focused Silver + Vision + Adult Dental	0-14	\$ 357.00	\$ 357.00
64004DE0100007	Focused Silver + Vision + Adult Dental	15	\$ 388.73	\$ 388.73
64004DE0100007	Focused Silver + Vision + Adult Dental	16	\$ 400.86	\$ 400.86
64004DE0100007	Focused Silver + Vision + Adult Dental	17	\$ 413.00	\$ 413.00
64004DE0100007	Focused Silver + Vision + Adult Dental	18	\$ 426.06	\$ 426.06
64004DE0100007	Focused Silver + Vision + Adult Dental	19	\$ 439.13	\$ 439.13
64004DE0100007	Focused Silver + Vision + Adult Dental	20	\$ 452.66	\$ 452.66
64004DE0100007	Focused Silver + Vision + Adult Dental	21	\$ 466.67	\$ 536.67
64004DE0100007	Focused Silver + Vision + Adult Dental	22	\$ 466.67	\$ 536.67
64004DE0100007	Focused Silver + Vision + Adult Dental	23	\$ 466.67	\$ 536.67
64004DE0100007	Focused Silver + Vision + Adult Dental	24	\$ 466.67	\$ 536.67
64004DE0100007	Focused Silver + Vision + Adult Dental	25	\$ 468.53	\$ 538.81
64004DE0100007	Focused Silver + Vision + Adult Dental	26	\$ 477.86	\$ 549.54
64004DE0100007	Focused Silver + Vision + Adult Dental	27	\$ 489.06	\$ 562.42
64004DE0100007	Focused Silver + Vision + Adult Dental	28	\$ 507.26	\$ 583.35
64004DE0100007	Focused Silver + Vision + Adult Dental	29	\$ 522.20	\$ 600.53
64004DE0100007	Focused Silver + Vision + Adult Dental	30	\$ 529.66	\$ 609.11
64004DE0100007	Focused Silver + Vision + Adult Dental	31	\$ 540.86	\$ 621.99
64004DE0100007	Focused Silver + Vision + Adult Dental	32	\$ 552.06	\$ 634.87
64004DE0100007	Focused Silver + Vision + Adult Dental	33	\$ 559.06	\$ 642.92
64004DE0100007	Focused Silver + Vision + Adult Dental	34	\$ 566.53	\$ 651.51
64004DE0100007	Focused Silver + Vision + Adult Dental	35	\$ 570.26	\$ 655.80
64004DE0100007	Focused Silver + Vision + Adult Dental	36	\$ 574.00	\$ 660.09
64004DE0100007	Focused Silver + Vision + Adult Dental	37	\$ 577.73	\$ 664.39
64004DE0100007	Focused Silver + Vision + Adult Dental	38	\$ 581.46	\$ 668.68
64004DE0100007	Focused Silver + Vision + Adult Dental	39	\$ 588.93	\$ 677.27
64004DE0100007	Focused Silver + Vision + Adult Dental	40	\$ 596.40	\$ 685.85
64004DE0100007	Focused Silver + Vision + Adult Dental	41	\$ 607.60	\$ 698.73
64004DE0100007	Focused Silver + Vision + Adult Dental	42	\$ 618.33	\$ 711.08
64004DE0100007	Focused Silver + Vision + Adult Dental	43	\$ 633.26	\$ 728.25
64004DE0100007	Focused Silver + Vision + Adult Dental	44	\$ 651.93	\$ 749.72
64004DE0100007	Focused Silver + Vision + Adult Dental	45	\$ 673.86	\$ 774.94
64004DE0100007	Focused Silver + Vision + Adult Dental	46	\$ 699.99	\$ 804.99
64004DE0100007	Focused Silver + Vision + Adult Dental	47	\$ 729.39	\$ 838.80
64004DE0100007	Focused Silver + Vision + Adult Dental	48	\$ 762.99	\$ 877.44
64004DE0100007	Focused Silver + Vision + Adult Dental	49	\$ 796.13	\$ 915.55
64004DE0100007	Focused Silver + Vision + Adult Dental	50	\$ 833.46	\$ 958.48
64004DE0100007	Focused Silver + Vision + Adult Dental	51	\$ 870.33	\$ 1,000.88
64004DE0100007	Focused Silver + Vision + Adult Dental	52	\$ 910.93	\$ 1,047.56
64004DE0100007	Focused Silver + Vision + Adult Dental	53	\$ 951.99	\$ 1,094.79
64004DE0100007	Focused Silver + Vision + Adult Dental	54	\$ 996.33	\$ 1,145.77
64004DE0100007	Focused Silver + Vision + Adult Dental	55	\$ 1,040.66	\$ 1,196.76
64004DE0100007	Focused Silver + Vision + Adult Dental	56	\$ 1,088.72	\$ 1,252.03
64004DE0100007	Focused Silver + Vision + Adult Dental	57	\$ 1,137.26	\$ 1,307.85
64004DE0100007	Focused Silver + Vision + Adult Dental	58	\$ 1,189.06	\$ 1,367.42
64004DE0100007	Focused Silver + Vision + Adult Dental	59	\$ 1,214.72	\$ 1,396.93
64004DE0100007	Focused Silver + Vision + Adult Dental	60	\$ 1,266.52	\$ 1,456.50
64004DE0100007	Focused Silver + Vision + Adult Dental	61	\$ 1,311.32	\$ 1,508.02
64004DE0100007	Focused Silver + Vision + Adult Dental	62	\$ 1,340.72	\$ 1,541.83
64004DE0100007	Focused Silver + Vision + Adult Dental	63	\$ 1,377.59	\$ 1,584.23
64004DE0100007	Focused Silver + Vision + Adult Dental	64 and over	\$ 1,399.98	\$ 1,609.98

**Celtic Ins. Co. / Ambetter Health of DE
Individual**

Effective Date 01/01/2024
Expiration Date 12/31/2024

Plan ID	Plan Name	Age	Individual Rate	Individual Tobacco Rate
64004DE0100008	Standard Silver + Vision + Adult Dental	0-14	\$ 351.55	\$ 351.55
64004DE0100008	Standard Silver + Vision + Adult Dental	15	\$ 382.80	\$ 382.80
64004DE0100008	Standard Silver + Vision + Adult Dental	16	\$ 394.74	\$ 394.74
64004DE0100008	Standard Silver + Vision + Adult Dental	17	\$ 406.69	\$ 406.69
64004DE0100008	Standard Silver + Vision + Adult Dental	18	\$ 419.56	\$ 419.56
64004DE0100008	Standard Silver + Vision + Adult Dental	19	\$ 432.43	\$ 432.43
64004DE0100008	Standard Silver + Vision + Adult Dental	20	\$ 445.75	\$ 445.75
64004DE0100008	Standard Silver + Vision + Adult Dental	21	\$ 459.55	\$ 528.48
64004DE0100008	Standard Silver + Vision + Adult Dental	22	\$ 459.55	\$ 528.48
64004DE0100008	Standard Silver + Vision + Adult Dental	23	\$ 459.55	\$ 528.48
64004DE0100008	Standard Silver + Vision + Adult Dental	24	\$ 459.55	\$ 528.48
64004DE0100008	Standard Silver + Vision + Adult Dental	25	\$ 461.38	\$ 530.58
64004DE0100008	Standard Silver + Vision + Adult Dental	26	\$ 470.57	\$ 541.15
64004DE0100008	Standard Silver + Vision + Adult Dental	27	\$ 481.60	\$ 553.84
64004DE0100008	Standard Silver + Vision + Adult Dental	28	\$ 499.52	\$ 574.45
64004DE0100008	Standard Silver + Vision + Adult Dental	29	\$ 514.23	\$ 591.36
64004DE0100008	Standard Silver + Vision + Adult Dental	30	\$ 521.58	\$ 599.81
64004DE0100008	Standard Silver + Vision + Adult Dental	31	\$ 532.61	\$ 612.50
64004DE0100008	Standard Silver + Vision + Adult Dental	32	\$ 543.64	\$ 625.18
64004DE0100008	Standard Silver + Vision + Adult Dental	33	\$ 550.53	\$ 633.11
64004DE0100008	Standard Silver + Vision + Adult Dental	34	\$ 557.88	\$ 641.56
64004DE0100008	Standard Silver + Vision + Adult Dental	35	\$ 561.56	\$ 645.79
64004DE0100008	Standard Silver + Vision + Adult Dental	36	\$ 565.23	\$ 650.02
64004DE0100008	Standard Silver + Vision + Adult Dental	37	\$ 568.91	\$ 654.25
64004DE0100008	Standard Silver + Vision + Adult Dental	38	\$ 572.59	\$ 658.47
64004DE0100008	Standard Silver + Vision + Adult Dental	39	\$ 579.94	\$ 666.93
64004DE0100008	Standard Silver + Vision + Adult Dental	40	\$ 587.29	\$ 675.39
64004DE0100008	Standard Silver + Vision + Adult Dental	41	\$ 598.32	\$ 688.07
64004DE0100008	Standard Silver + Vision + Adult Dental	42	\$ 608.89	\$ 700.22
64004DE0100008	Standard Silver + Vision + Adult Dental	43	\$ 623.60	\$ 717.14
64004DE0100008	Standard Silver + Vision + Adult Dental	44	\$ 641.98	\$ 738.27
64004DE0100008	Standard Silver + Vision + Adult Dental	45	\$ 663.58	\$ 763.11
64004DE0100008	Standard Silver + Vision + Adult Dental	46	\$ 689.31	\$ 792.71
64004DE0100008	Standard Silver + Vision + Adult Dental	47	\$ 718.26	\$ 826.00
64004DE0100008	Standard Silver + Vision + Adult Dental	48	\$ 751.35	\$ 864.05
64004DE0100008	Standard Silver + Vision + Adult Dental	49	\$ 783.98	\$ 901.57
64004DE0100008	Standard Silver + Vision + Adult Dental	50	\$ 820.74	\$ 943.85
64004DE0100008	Standard Silver + Vision + Adult Dental	51	\$ 857.04	\$ 985.60
64004DE0100008	Standard Silver + Vision + Adult Dental	52	\$ 897.02	\$ 1,031.58
64004DE0100008	Standard Silver + Vision + Adult Dental	53	\$ 937.46	\$ 1,078.08
64004DE0100008	Standard Silver + Vision + Adult Dental	54	\$ 981.12	\$ 1,128.29
64004DE0100008	Standard Silver + Vision + Adult Dental	55	\$ 1,024.77	\$ 1,178.49
64004DE0100008	Standard Silver + Vision + Adult Dental	56	\$ 1,072.11	\$ 1,232.92
64004DE0100008	Standard Silver + Vision + Adult Dental	57	\$ 1,119.90	\$ 1,287.88
64004DE0100008	Standard Silver + Vision + Adult Dental	58	\$ 1,170.91	\$ 1,346.54
64004DE0100008	Standard Silver + Vision + Adult Dental	59	\$ 1,196.18	\$ 1,375.61
64004DE0100008	Standard Silver + Vision + Adult Dental	60	\$ 1,247.19	\$ 1,434.27
64004DE0100008	Standard Silver + Vision + Adult Dental	61	\$ 1,291.31	\$ 1,485.00
64004DE0100008	Standard Silver + Vision + Adult Dental	62	\$ 1,320.26	\$ 1,518.30
64004DE0100008	Standard Silver + Vision + Adult Dental	63	\$ 1,356.56	\$ 1,560.05
64004DE0100008	Standard Silver + Vision + Adult Dental	64 and over	\$ 1,378.61	\$ 1,585.40

**Celtic Ins. Co. / Ambetter Health of DE
Individual**

Effective Date 01/01/2024
Expiration Date 12/31/2024

Plan ID	Plan Name	Age	Individual Rate	Individual Tobacco Rate
64004DE010009	Complete Gold + Vision + Adult Dental	0-14	\$ 407.37	\$ 407.37
64004DE010009	Complete Gold + Vision + Adult Dental	15	\$ 443.58	\$ 443.58
64004DE010009	Complete Gold + Vision + Adult Dental	16	\$ 457.43	\$ 457.43
64004DE010009	Complete Gold + Vision + Adult Dental	17	\$ 471.28	\$ 471.28
64004DE010009	Complete Gold + Vision + Adult Dental	18	\$ 486.19	\$ 486.19
64004DE010009	Complete Gold + Vision + Adult Dental	19	\$ 501.10	\$ 501.10
64004DE010009	Complete Gold + Vision + Adult Dental	20	\$ 516.54	\$ 516.54
64004DE010009	Complete Gold + Vision + Adult Dental	21	\$ 532.52	\$ 612.40
64004DE010009	Complete Gold + Vision + Adult Dental	22	\$ 532.52	\$ 612.40
64004DE010009	Complete Gold + Vision + Adult Dental	23	\$ 532.52	\$ 612.40
64004DE010009	Complete Gold + Vision + Adult Dental	24	\$ 532.52	\$ 612.40
64004DE010009	Complete Gold + Vision + Adult Dental	25	\$ 534.65	\$ 614.84
64004DE010009	Complete Gold + Vision + Adult Dental	26	\$ 545.30	\$ 627.09
64004DE010009	Complete Gold + Vision + Adult Dental	27	\$ 558.08	\$ 641.79
64004DE010009	Complete Gold + Vision + Adult Dental	28	\$ 578.84	\$ 665.67
64004DE010009	Complete Gold + Vision + Adult Dental	29	\$ 595.88	\$ 685.27
64004DE010009	Complete Gold + Vision + Adult Dental	30	\$ 604.40	\$ 695.07
64004DE010009	Complete Gold + Vision + Adult Dental	31	\$ 617.18	\$ 709.76
64004DE010009	Complete Gold + Vision + Adult Dental	32	\$ 629.97	\$ 724.46
64004DE010009	Complete Gold + Vision + Adult Dental	33	\$ 637.95	\$ 733.65
64004DE010009	Complete Gold + Vision + Adult Dental	34	\$ 646.47	\$ 743.44
64004DE010009	Complete Gold + Vision + Adult Dental	35	\$ 650.73	\$ 748.34
64004DE010009	Complete Gold + Vision + Adult Dental	36	\$ 654.99	\$ 753.24
64004DE010009	Complete Gold + Vision + Adult Dental	37	\$ 659.25	\$ 758.14
64004DE010009	Complete Gold + Vision + Adult Dental	38	\$ 663.51	\$ 763.04
64004DE010009	Complete Gold + Vision + Adult Dental	39	\$ 672.03	\$ 772.84
64004DE010009	Complete Gold + Vision + Adult Dental	40	\$ 680.55	\$ 782.64
64004DE010009	Complete Gold + Vision + Adult Dental	41	\$ 693.33	\$ 797.33
64004DE010009	Complete Gold + Vision + Adult Dental	42	\$ 705.58	\$ 811.42
64004DE010009	Complete Gold + Vision + Adult Dental	43	\$ 722.62	\$ 831.02
64004DE010009	Complete Gold + Vision + Adult Dental	44	\$ 743.92	\$ 855.51
64004DE010009	Complete Gold + Vision + Adult Dental	45	\$ 768.95	\$ 884.29
64004DE010009	Complete Gold + Vision + Adult Dental	46	\$ 798.77	\$ 918.59
64004DE010009	Complete Gold + Vision + Adult Dental	47	\$ 832.32	\$ 957.17
64004DE010009	Complete Gold + Vision + Adult Dental	48	\$ 870.66	\$ 1,001.26
64004DE010009	Complete Gold + Vision + Adult Dental	49	\$ 908.47	\$ 1,044.74
64004DE010009	Complete Gold + Vision + Adult Dental	50	\$ 951.07	\$ 1,093.73
64004DE010009	Complete Gold + Vision + Adult Dental	51	\$ 993.14	\$ 1,142.11
64004DE010009	Complete Gold + Vision + Adult Dental	52	\$ 1,039.47	\$ 1,195.39
64004DE010009	Complete Gold + Vision + Adult Dental	53	\$ 1,086.33	\$ 1,249.28
64004DE010009	Complete Gold + Vision + Adult Dental	54	\$ 1,136.92	\$ 1,307.46
64004DE010009	Complete Gold + Vision + Adult Dental	55	\$ 1,187.51	\$ 1,365.63
64004DE010009	Complete Gold + Vision + Adult Dental	56	\$ 1,242.36	\$ 1,428.71
64004DE010009	Complete Gold + Vision + Adult Dental	57	\$ 1,297.74	\$ 1,492.40
64004DE010009	Complete Gold + Vision + Adult Dental	58	\$ 1,356.85	\$ 1,560.38
64004DE010009	Complete Gold + Vision + Adult Dental	59	\$ 1,386.14	\$ 1,594.06
64004DE010009	Complete Gold + Vision + Adult Dental	60	\$ 1,445.25	\$ 1,662.03
64004DE010009	Complete Gold + Vision + Adult Dental	61	\$ 1,496.37	\$ 1,720.82
64004DE010009	Complete Gold + Vision + Adult Dental	62	\$ 1,529.92	\$ 1,759.40
64004DE010009	Complete Gold + Vision + Adult Dental	63	\$ 1,571.98	\$ 1,807.78
64004DE010009	Complete Gold + Vision + Adult Dental	64 and over	\$ 1,597.53	\$ 1,837.17

**Celtic Ins. Co. / Ambetter Health of DE
Individual**

Effective Date 01/01/2024
Expiration Date 12/31/2024

Plan ID	Plan Name	Age	Individual Rate	Individual Tobacco Rate
64004DE010010	Everyday Gold + Vision + Adult Dental	0-14	\$ 390.68	\$ 390.68
64004DE010010	Everyday Gold + Vision + Adult Dental	15	\$ 425.40	\$ 425.40
64004DE010010	Everyday Gold + Vision + Adult Dental	16	\$ 438.68	\$ 438.68
64004DE010010	Everyday Gold + Vision + Adult Dental	17	\$ 451.96	\$ 451.96
64004DE010010	Everyday Gold + Vision + Adult Dental	18	\$ 466.26	\$ 466.26
64004DE010010	Everyday Gold + Vision + Adult Dental	19	\$ 480.56	\$ 480.56
64004DE010010	Everyday Gold + Vision + Adult Dental	20	\$ 495.37	\$ 495.37
64004DE010010	Everyday Gold + Vision + Adult Dental	21	\$ 510.70	\$ 587.30
64004DE010010	Everyday Gold + Vision + Adult Dental	22	\$ 510.70	\$ 587.30
64004DE010010	Everyday Gold + Vision + Adult Dental	23	\$ 510.70	\$ 587.30
64004DE010010	Everyday Gold + Vision + Adult Dental	24	\$ 510.70	\$ 587.30
64004DE010010	Everyday Gold + Vision + Adult Dental	25	\$ 512.73	\$ 589.64
64004DE010010	Everyday Gold + Vision + Adult Dental	26	\$ 522.94	\$ 601.38
64004DE010010	Everyday Gold + Vision + Adult Dental	27	\$ 535.20	\$ 615.48
64004DE010010	Everyday Gold + Vision + Adult Dental	28	\$ 555.12	\$ 638.38
64004DE010010	Everyday Gold + Vision + Adult Dental	29	\$ 571.46	\$ 657.18
64004DE010010	Everyday Gold + Vision + Adult Dental	30	\$ 579.63	\$ 666.57
64004DE010010	Everyday Gold + Vision + Adult Dental	31	\$ 591.89	\$ 680.67
64004DE010010	Everyday Gold + Vision + Adult Dental	32	\$ 604.14	\$ 694.76
64004DE010010	Everyday Gold + Vision + Adult Dental	33	\$ 611.80	\$ 703.57
64004DE010010	Everyday Gold + Vision + Adult Dental	34	\$ 619.97	\$ 712.97
64004DE010010	Everyday Gold + Vision + Adult Dental	35	\$ 624.06	\$ 717.67
64004DE010010	Everyday Gold + Vision + Adult Dental	36	\$ 628.14	\$ 722.37
64004DE010010	Everyday Gold + Vision + Adult Dental	37	\$ 632.23	\$ 727.06
64004DE010010	Everyday Gold + Vision + Adult Dental	38	\$ 636.32	\$ 731.76
64004DE010010	Everyday Gold + Vision + Adult Dental	39	\$ 644.49	\$ 741.16
64004DE010010	Everyday Gold + Vision + Adult Dental	40	\$ 652.66	\$ 750.56
64004DE010010	Everyday Gold + Vision + Adult Dental	41	\$ 664.91	\$ 764.65
64004DE010010	Everyday Gold + Vision + Adult Dental	42	\$ 676.66	\$ 778.16
64004DE010010	Everyday Gold + Vision + Adult Dental	43	\$ 693.00	\$ 796.95
64004DE010010	Everyday Gold + Vision + Adult Dental	44	\$ 713.43	\$ 820.44
64004DE010010	Everyday Gold + Vision + Adult Dental	45	\$ 737.43	\$ 848.05
64004DE010010	Everyday Gold + Vision + Adult Dental	46	\$ 766.03	\$ 880.93
64004DE010010	Everyday Gold + Vision + Adult Dental	47	\$ 798.20	\$ 917.93
64004DE010010	Everyday Gold + Vision + Adult Dental	48	\$ 834.97	\$ 960.22
64004DE010010	Everyday Gold + Vision + Adult Dental	49	\$ 871.23	\$ 1,001.92
64004DE010010	Everyday Gold + Vision + Adult Dental	50	\$ 912.09	\$ 1,048.90
64004DE010010	Everyday Gold + Vision + Adult Dental	51	\$ 952.43	\$ 1,095.30
64004DE010010	Everyday Gold + Vision + Adult Dental	52	\$ 996.86	\$ 1,146.39
64004DE010010	Everyday Gold + Vision + Adult Dental	53	\$ 1,041.80	\$ 1,198.07
64004DE010010	Everyday Gold + Vision + Adult Dental	54	\$ 1,090.32	\$ 1,253.86
64004DE010010	Everyday Gold + Vision + Adult Dental	55	\$ 1,138.83	\$ 1,309.66
64004DE010010	Everyday Gold + Vision + Adult Dental	56	\$ 1,191.43	\$ 1,370.15
64004DE010010	Everyday Gold + Vision + Adult Dental	57	\$ 1,244.54	\$ 1,431.23
64004DE010010	Everyday Gold + Vision + Adult Dental	58	\$ 1,301.23	\$ 1,496.41
64004DE010010	Everyday Gold + Vision + Adult Dental	59	\$ 1,329.32	\$ 1,528.72
64004DE010010	Everyday Gold + Vision + Adult Dental	60	\$ 1,386.00	\$ 1,593.90
64004DE010010	Everyday Gold + Vision + Adult Dental	61	\$ 1,435.03	\$ 1,650.28
64004DE010010	Everyday Gold + Vision + Adult Dental	62	\$ 1,467.20	\$ 1,687.28
64004DE010010	Everyday Gold + Vision + Adult Dental	63	\$ 1,507.55	\$ 1,733.68
64004DE010010	Everyday Gold + Vision + Adult Dental	64 and over	\$ 1,532.05	\$ 1,761.86

**Celtic Ins. Co. / Ambetter Health of DE
Individual**

Effective Date 01/01/2024
Expiration Date 12/31/2024

Plan ID	Plan Name	Age	Individual Rate	Individual Tobacco Rate
64004DE010011	Clear Gold + Vision + Adult Dental	0-14	\$ 386.28	\$ 386.28
64004DE010011	Clear Gold + Vision + Adult Dental	15	\$ 420.62	\$ 420.62
64004DE010011	Clear Gold + Vision + Adult Dental	16	\$ 433.75	\$ 433.75
64004DE010011	Clear Gold + Vision + Adult Dental	17	\$ 446.87	\$ 446.87
64004DE010011	Clear Gold + Vision + Adult Dental	18	\$ 461.01	\$ 461.01
64004DE010011	Clear Gold + Vision + Adult Dental	19	\$ 475.15	\$ 475.15
64004DE010011	Clear Gold + Vision + Adult Dental	20	\$ 489.79	\$ 489.79
64004DE010011	Clear Gold + Vision + Adult Dental	21	\$ 504.95	\$ 580.69
64004DE010011	Clear Gold + Vision + Adult Dental	22	\$ 504.95	\$ 580.69
64004DE010011	Clear Gold + Vision + Adult Dental	23	\$ 504.95	\$ 580.69
64004DE010011	Clear Gold + Vision + Adult Dental	24	\$ 504.95	\$ 580.69
64004DE010011	Clear Gold + Vision + Adult Dental	25	\$ 506.96	\$ 583.01
64004DE010011	Clear Gold + Vision + Adult Dental	26	\$ 517.06	\$ 594.62
64004DE010011	Clear Gold + Vision + Adult Dental	27	\$ 529.18	\$ 608.56
64004DE010011	Clear Gold + Vision + Adult Dental	28	\$ 548.87	\$ 631.20
64004DE010011	Clear Gold + Vision + Adult Dental	29	\$ 565.03	\$ 649.79
64004DE010011	Clear Gold + Vision + Adult Dental	30	\$ 573.11	\$ 659.08
64004DE010011	Clear Gold + Vision + Adult Dental	31	\$ 585.23	\$ 673.01
64004DE010011	Clear Gold + Vision + Adult Dental	32	\$ 597.35	\$ 686.95
64004DE010011	Clear Gold + Vision + Adult Dental	33	\$ 604.92	\$ 695.66
64004DE010011	Clear Gold + Vision + Adult Dental	34	\$ 613.00	\$ 704.95
64004DE010011	Clear Gold + Vision + Adult Dental	35	\$ 617.04	\$ 709.60
64004DE010011	Clear Gold + Vision + Adult Dental	36	\$ 621.08	\$ 714.24
64004DE010011	Clear Gold + Vision + Adult Dental	37	\$ 625.12	\$ 718.89
64004DE010011	Clear Gold + Vision + Adult Dental	38	\$ 629.16	\$ 723.53
64004DE010011	Clear Gold + Vision + Adult Dental	39	\$ 637.24	\$ 732.82
64004DE010011	Clear Gold + Vision + Adult Dental	40	\$ 645.32	\$ 742.11
64004DE010011	Clear Gold + Vision + Adult Dental	41	\$ 657.44	\$ 756.05
64004DE010011	Clear Gold + Vision + Adult Dental	42	\$ 669.05	\$ 769.41
64004DE010011	Clear Gold + Vision + Adult Dental	43	\$ 685.21	\$ 787.99
64004DE010011	Clear Gold + Vision + Adult Dental	44	\$ 705.40	\$ 811.22
64004DE010011	Clear Gold + Vision + Adult Dental	45	\$ 729.14	\$ 838.51
64004DE010011	Clear Gold + Vision + Adult Dental	46	\$ 757.41	\$ 871.03
64004DE010011	Clear Gold + Vision + Adult Dental	47	\$ 789.23	\$ 907.61
64004DE010011	Clear Gold + Vision + Adult Dental	48	\$ 825.58	\$ 949.42
64004DE010011	Clear Gold + Vision + Adult Dental	49	\$ 861.43	\$ 990.65
64004DE010011	Clear Gold + Vision + Adult Dental	50	\$ 901.83	\$ 1,037.10
64004DE010011	Clear Gold + Vision + Adult Dental	51	\$ 941.72	\$ 1,082.98
64004DE010011	Clear Gold + Vision + Adult Dental	52	\$ 985.65	\$ 1,133.50
64004DE010011	Clear Gold + Vision + Adult Dental	53	\$ 1,030.08	\$ 1,184.60
64004DE010011	Clear Gold + Vision + Adult Dental	54	\$ 1,078.05	\$ 1,239.76
64004DE010011	Clear Gold + Vision + Adult Dental	55	\$ 1,126.02	\$ 1,294.93
64004DE010011	Clear Gold + Vision + Adult Dental	56	\$ 1,178.03	\$ 1,354.74
64004DE010011	Clear Gold + Vision + Adult Dental	57	\$ 1,230.54	\$ 1,415.13
64004DE010011	Clear Gold + Vision + Adult Dental	58	\$ 1,286.59	\$ 1,479.58
64004DE010011	Clear Gold + Vision + Adult Dental	59	\$ 1,314.37	\$ 1,511.52
64004DE010011	Clear Gold + Vision + Adult Dental	60	\$ 1,370.41	\$ 1,575.98
64004DE010011	Clear Gold + Vision + Adult Dental	61	\$ 1,418.89	\$ 1,631.72
64004DE010011	Clear Gold + Vision + Adult Dental	62	\$ 1,450.70	\$ 1,668.30
64004DE010011	Clear Gold + Vision + Adult Dental	63	\$ 1,490.59	\$ 1,714.18
64004DE010011	Clear Gold + Vision + Adult Dental	64 and over	\$ 1,514.82	\$ 1,742.04

**Celtic Ins. Co. / Ambetter Health of DE
Individual**

Effective Date 01/01/2024
Expiration Date 12/31/2024

Plan ID	Plan Name	Age	Individual Rate	Individual Tobacco Rate
64004DE010012	Standard Gold + Vision + Adult Dental	0-14	\$ 392.54	\$ 392.54
64004DE010012	Standard Gold + Vision + Adult Dental	15	\$ 427.43	\$ 427.43
64004DE010012	Standard Gold + Vision + Adult Dental	16	\$ 440.77	\$ 440.77
64004DE010012	Standard Gold + Vision + Adult Dental	17	\$ 454.11	\$ 454.11
64004DE010012	Standard Gold + Vision + Adult Dental	18	\$ 468.48	\$ 468.48
64004DE010012	Standard Gold + Vision + Adult Dental	19	\$ 482.85	\$ 482.85
64004DE010012	Standard Gold + Vision + Adult Dental	20	\$ 497.73	\$ 497.73
64004DE010012	Standard Gold + Vision + Adult Dental	21	\$ 513.13	\$ 590.10
64004DE010012	Standard Gold + Vision + Adult Dental	22	\$ 513.13	\$ 590.10
64004DE010012	Standard Gold + Vision + Adult Dental	23	\$ 513.13	\$ 590.10
64004DE010012	Standard Gold + Vision + Adult Dental	24	\$ 513.13	\$ 590.10
64004DE010012	Standard Gold + Vision + Adult Dental	25	\$ 515.17	\$ 592.45
64004DE010012	Standard Gold + Vision + Adult Dental	26	\$ 525.44	\$ 604.25
64004DE010012	Standard Gold + Vision + Adult Dental	27	\$ 537.75	\$ 618.42
64004DE010012	Standard Gold + Vision + Adult Dental	28	\$ 557.76	\$ 641.43
64004DE010012	Standard Gold + Vision + Adult Dental	29	\$ 574.18	\$ 660.31
64004DE010012	Standard Gold + Vision + Adult Dental	30	\$ 582.39	\$ 669.75
64004DE010012	Standard Gold + Vision + Adult Dental	31	\$ 594.71	\$ 683.92
64004DE010012	Standard Gold + Vision + Adult Dental	32	\$ 607.02	\$ 698.08
64004DE010012	Standard Gold + Vision + Adult Dental	33	\$ 614.72	\$ 706.93
64004DE010012	Standard Gold + Vision + Adult Dental	34	\$ 622.93	\$ 716.37
64004DE010012	Standard Gold + Vision + Adult Dental	35	\$ 627.04	\$ 721.09
64004DE010012	Standard Gold + Vision + Adult Dental	36	\$ 631.14	\$ 725.81
64004DE010012	Standard Gold + Vision + Adult Dental	37	\$ 635.25	\$ 730.53
64004DE010012	Standard Gold + Vision + Adult Dental	38	\$ 639.35	\$ 735.25
64004DE010012	Standard Gold + Vision + Adult Dental	39	\$ 647.56	\$ 744.69
64004DE010012	Standard Gold + Vision + Adult Dental	40	\$ 655.77	\$ 754.14
64004DE010012	Standard Gold + Vision + Adult Dental	41	\$ 668.09	\$ 768.30
64004DE010012	Standard Gold + Vision + Adult Dental	42	\$ 679.89	\$ 781.87
64004DE010012	Standard Gold + Vision + Adult Dental	43	\$ 696.31	\$ 800.75
64004DE010012	Standard Gold + Vision + Adult Dental	44	\$ 716.83	\$ 824.36
64004DE010012	Standard Gold + Vision + Adult Dental	45	\$ 740.95	\$ 852.09
64004DE010012	Standard Gold + Vision + Adult Dental	46	\$ 769.68	\$ 885.14
64004DE010012	Standard Gold + Vision + Adult Dental	47	\$ 802.01	\$ 922.31
64004DE010012	Standard Gold + Vision + Adult Dental	48	\$ 838.96	\$ 964.80
64004DE010012	Standard Gold + Vision + Adult Dental	49	\$ 875.39	\$ 1,006.69
64004DE010012	Standard Gold + Vision + Adult Dental	50	\$ 916.44	\$ 1,053.90
64004DE010012	Standard Gold + Vision + Adult Dental	51	\$ 956.97	\$ 1,100.52
64004DE010012	Standard Gold + Vision + Adult Dental	52	\$ 1,001.61	\$ 1,151.86
64004DE010012	Standard Gold + Vision + Adult Dental	53	\$ 1,046.77	\$ 1,203.79
64004DE010012	Standard Gold + Vision + Adult Dental	54	\$ 1,095.52	\$ 1,259.84
64004DE010012	Standard Gold + Vision + Adult Dental	55	\$ 1,144.26	\$ 1,315.90
64004DE010012	Standard Gold + Vision + Adult Dental	56	\$ 1,197.11	\$ 1,376.68
64004DE010012	Standard Gold + Vision + Adult Dental	57	\$ 1,250.48	\$ 1,438.05
64004DE010012	Standard Gold + Vision + Adult Dental	58	\$ 1,307.44	\$ 1,503.55
64004DE010012	Standard Gold + Vision + Adult Dental	59	\$ 1,335.66	\$ 1,536.01
64004DE010012	Standard Gold + Vision + Adult Dental	60	\$ 1,392.61	\$ 1,601.51
64004DE010012	Standard Gold + Vision + Adult Dental	61	\$ 1,441.87	\$ 1,658.15
64004DE010012	Standard Gold + Vision + Adult Dental	62	\$ 1,474.20	\$ 1,695.33
64004DE010012	Standard Gold + Vision + Adult Dental	63	\$ 1,514.74	\$ 1,741.95
64004DE010012	Standard Gold + Vision + Adult Dental	64 and over	\$ 1,539.36	\$ 1,770.26