

Individual On-Exchange Bronze Plan and Factors

Bronze Plan Benefits	MCHO PPO-0030001	Anthem HMO - 710004	Anthem POS - 720004	Age Factors		
Deductible	\$5,000	\$5,750	\$6,000	0-20	0.635	
OOP	\$6,350			21-24	1.000	
Coinsurance	50%	10%	0%	25	1.004	
ER Co-pay	\$825	\$200 + Ded/Co	\$200 + Ded	26	1.024	
Office Visit	\$45	\$40/2 + Ded/Co	\$40/2 + Ded	27	1.048	
Outpatient	\$45	Ded/Co	Deductible	28	1.087	
Sp Office visit	\$140	Ded/Co	Deductible	29	1.119	
Urgent Care	\$140	\$50+ Ded/Co	\$50 + Deductible	30	1.135	
Hearing/Physical	Ded/Co		Deductible	31	1.159	
Rx Tier 1	\$30	Ded/Co	Deductible	32	1.183	
Rx Tier 2	Ded/Co		Deductible	33	1.198	
Rx Tier 3	Ded/Co		Deductible	34	1.214	
Rx Tier 4	Ded/Co		Deductible	35	1.222	
Pediatric Dental	No	No	No	36	1.230	
				37	1.238	
				38	1.246	
				39	1.262	
				40	1.278	
				41	1.302	
				42	1.325	
				43	1.357	
				44	1.397	
				45	1.444	
				46	1.500	
				47	1.563	
				48	1.635	
				49	1.706	
				50	1.786	
				51	1.865	
				52	1.952	
				53	2.040	
				54	2.135	
				55	2.230	
				56	2.333	
				57	2.437	
				58	2.548	
				59	2.603	
				60	2.714	
				61	2.810	
				62	2.873	
				63	2.952	
				64 +	3.000	

Base Rate * Plan Rate		Tobacco Factors	
Anthem HMO	\$199.43	Anthem	1.3
Anthem PPO	\$266.51	MCHO	None
MCHO	\$213.96		

Area Factors	Anthem HMO	Anthem PPO	MCHO
1	0.9206	0	0.9
2	1.1077	0	0.975
3	1.1287	0.9487	1.05
4	0	1.0317	1.2

Area	Counties					
1	Cumberland	Sagadahoc	York			
2	Knox	Kennebec	Lincoln	Oxford		
3	Androscoggin	Waldo	Franklin	Penobscot	Somerset	Piscataquis
4	Hancock	Aroostook	Washington			

Monthly Premium =(Base Rate* Plan Rate*Area Factor*Age Factor*Tobacco Factor)						
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