

Horizon Individual Health Benefit Plans: Monthly Rates

The below rates are effective from February 1, 2012 to April 30, 2012. Please call your broker or Horizon Blue Cross Blue Shield of New Jersey representative at **1-800-224-1234**, Monday through Friday, from 8:30 a.m. to 5:00 p.m. Eastern Time (ET), to confirm your rate. The rate you receive on your effective date will be guaranteed for twelve months.

		Basic and Essential-Male (Territories A, B and D)*		Basic and Essential-Female (Territories A, B and D)*		Basic and Essential-Male (Territories C, E and F)*		Basic and Essential-Female (Territories C, E and F)*		Direct Access Plan C 100/70	Direct Access Plan A/50 70/50	Direct Access Plan C 80/70	HMO Coinsurance	HMO 50/70	HMO 30/50	HMO 30	HMO 15
		EPO	EPO Plus	EPO	EPO Plus	EPO	EPO Plus	EPO	EPO Plus								
Single	0-24	\$158.88	\$199.85	\$197.72	\$248.70	\$150.91	\$189.83	\$187.83	\$236.25	\$502.79	\$332.32	\$350.25	\$510.51	\$836.88	\$860.41	\$871.78	\$1,047.58
	25-29	\$158.88	\$199.85	\$233.33	\$293.50	\$150.91	\$189.83	\$221.67	\$278.83	\$562.91	\$372.05	\$392.15					
	30-34	\$185.19	\$232.93	\$277.31	\$348.82	\$175.92	\$221.27	\$263.44	\$331.36	\$665.18	\$439.61	\$463.36					
	35-39	\$221.77	\$278.95	\$283.61	\$356.74	\$210.66	\$264.97	\$269.43	\$338.91	\$714.66	\$472.33	\$497.86					
	40-44	\$233.33	\$293.50	\$287.80	\$362.01	\$221.67	\$278.83	\$273.39	\$343.88	\$734.05	\$485.13	\$511.34					
	45-49	\$273.07	\$343.47	\$277.31	\$348.82	\$259.40	\$326.29	\$263.44	\$331.36	\$758.56	\$501.34	\$528.43					
	50-54	\$318.29	\$400.34	\$308.27	\$387.77	\$302.35	\$380.32	\$292.85	\$368.35	\$858.95	\$567.69	\$598.34					
	55-59	\$402.83	\$506.69	\$328.14	\$412.76	\$382.67	\$481.33	\$311.75	\$392.14	\$982.33	\$649.24	\$684.33					
	60-64	\$496.26	\$624.21	\$375.62	\$472.48	\$471.44	\$593.00	\$356.83	\$448.83	\$1,161.86	\$767.88	\$809.36					
	65+	\$528.18	\$664.38	\$384.78	\$483.99	\$501.84	\$631.24	\$365.55	\$459.80	\$1,352.28	\$893.73	\$942.00					
Two Adults Husband and Wife (or Domestic Partner/Civil Unions) rates will be based off of the older adult	0-24	\$356.60	\$448.54	\$356.60	\$448.54	\$338.78	\$426.12	\$338.78	\$426.12	\$952.45	\$629.51	\$663.50	\$1,091.79	\$1,789.77	\$1,840.12	\$1,864.36	\$2,240.49
	25-29	\$392.22	\$493.33	\$392.22	\$493.33	\$372.60	\$468.68	\$372.60	\$468.68	\$1,047.58	\$692.38	\$729.79					
	30-34	\$462.50	\$581.75	\$462.50	\$581.75	\$439.37	\$552.63	\$439.37	\$552.63	\$1,235.34	\$816.45	\$860.54					
	35-39	\$505.38	\$635.67	\$505.38	\$635.67	\$480.10	\$603.90	\$480.10	\$603.90	\$1,349.82	\$892.10	\$940.30					
	40-44	\$521.12	\$655.47	\$521.12	\$655.47	\$495.08	\$622.73	\$495.08	\$622.73	\$1,391.93	\$919.96	\$969.65					
	45-49	\$550.37	\$692.27	\$550.37	\$692.27	\$522.84	\$657.64	\$522.84	\$657.64	\$1,470.03	\$971.56	\$1,024.05					
	50-54	\$626.56	\$788.11	\$626.56	\$788.11	\$595.22	\$748.68	\$595.22	\$748.68	\$1,673.53	\$1,106.06	\$1,165.78					
	55-59	\$730.97	\$919.44	\$730.97	\$919.44	\$694.41	\$873.46	\$694.41	\$873.46	\$1,952.46	\$1,290.39	\$1,360.11					
	60-64	\$871.88	\$1,096.68	\$871.88	\$1,096.68	\$828.28	\$1,041.84	\$828.28	\$1,041.84	\$2,328.81	\$1,539.15	\$1,622.28					
	65+	\$913.04	\$1,148.45	\$913.04	\$1,148.45	\$867.38	\$1,091.03	\$867.38	\$1,091.03	\$2,840.74	\$1,877.47	\$1,978.88					

Services and products provided by Horizon Blue Cross Blue Shield of New Jersey, an independent licensee of the Blue Cross and Blue Shield Association.

© Registered marks of the Blue Cross and Blue Shield Association.

®/ SM Registered and service marks of Horizon Blue Cross Blue Shield of New Jersey.

© 2010 Horizon Blue Cross Blue Shield of New Jersey, Three Penn Plaza East, Newark, New Jersey 07105

*Territory A: Essex, Hudson, and Union

Territory B: Bergen and Passaic

Territory C: Monmouth, Morris, Sussex and Warren

Territory D: Hunterdon, Middlesex, Somerset

Territory E: Burlington, Camden and Mercer

Territory F: Atlantic, Cape May, Ocean, Salem, Cumberland and Gloucester

HOR2198 (W1211)

Horizon Individual Health Benefit Plans: Monthly Rates

The below rates are effective from February 1, 2012 to April 30, 2012. Please call your broker or Horizon Blue Cross Blue Shield of New Jersey representative at **1-800-224-1234**, Monday through Friday, from 8:30 a.m. to 5:00 p.m. Eastern Time (ET), to confirm your rate. The rate you receive on your effective date will be guaranteed for twelve months.

		Basic and Essential-Male (Territories A, B and D)*		Basic and Essential-Female (Territories A, B and D)*		Basic and Essential-Male (Territories C, E and F)*		Basic and Essential-Female (Territories C, E and F)*		Direct Access Plan C 100/70	Direct Access Plan A/50 70/50	Direct Access Plan C 80/70	HMO Coinsurance	HMO 50/70	HMO 30/50	HMO 30	HMO 15
		EPO	EPO Plus	EPO	EPO Plus	EPO	EPO Plus	EPO	EPO Plus								
Family Husband and Wife (or Domestic Partner/Civil Unions) rates will be based off of the older adult	0-24	\$688.98	\$866.63	\$688.98	\$866.63	\$654.54	\$823.30	\$654.54	\$823.30	\$2,117.25	\$1,399.30	\$1,474.89	\$1,546.08	\$2,534.52	\$2,605.80	\$2,640.12	\$3,172.75
	25-29	\$724.61	\$911.43	\$724.61	\$911.43	\$688.37	\$865.86	\$688.37	\$865.86	\$2,226.65	\$1,471.64	\$1,551.14					
	30-34	\$794.89	\$999.84	\$794.89	\$999.84	\$755.13	\$949.83	\$755.13	\$949.83	\$2,442.70	\$1,614.43	\$1,701.61					
	35-39	\$837.77	\$1,053.77	\$837.77	\$1,053.77	\$795.89	\$1,001.10	\$795.89	\$1,001.10	\$2,574.48	\$1,701.49	\$1,793.40					
	40-44	\$853.51	\$1,073.59	\$853.51	\$1,073.59	\$810.85	\$1,019.93	\$810.85	\$1,019.93	\$2,622.90	\$1,733.49	\$1,827.14					
	45-49	\$882.73	\$1,110.34	\$882.73	\$1,110.34	\$838.63	\$1,054.85	\$838.63	\$1,054.85	\$2,712.68	\$1,792.84	\$1,889.71					
	50-54	\$958.95	\$1,206.21	\$958.95	\$1,206.21	\$911.01	\$1,145.88	\$911.01	\$1,145.88	\$2,946.83	\$1,947.60	\$2,052.78					
	55-59	\$1,063.36	\$1,337.54	\$1,063.36	\$1,337.54	\$1,010.21	\$1,270.68	\$1,010.21	\$1,270.68	\$3,552.38	\$2,347.80	\$2,474.64					
	60-64	\$1,204.27	\$1,514.78	\$1,204.27	\$1,514.78	\$1,144.05	\$1,439.02	\$1,144.05	\$1,439.02	\$4,269.98	\$2,822.07	\$2,974.51					
	65+	\$1,245.42	\$1,566.52	\$1,245.42	\$1,566.52	\$1,183.15	\$1,488.22	\$1,183.15	\$1,488.22	\$4,965.76	\$3,281.93	\$3,459.19					
Adult/Child(ren)	0-24	\$423.66	\$532.89	\$462.50	\$581.75	\$402.48	\$506.25	\$439.38	\$552.64	\$1,140.41	\$753.69	\$794.42	\$783.05	\$1,283.69	\$1,319.78	\$1,337.17	\$1,606.91
	25-29	\$423.66	\$532.89	\$498.13	\$626.57	\$402.48	\$506.25	\$473.21	\$595.22	\$1,195.88	\$790.37	\$833.07					
	30-34	\$449.97	\$566.01	\$542.09	\$681.86	\$427.47	\$537.69	\$514.98	\$647.75	\$1,290.43	\$852.87	\$898.92					
	35-39	\$486.55	\$612.00	\$548.40	\$689.80	\$462.22	\$581.40	\$520.99	\$655.32	\$1,336.55	\$883.32	\$931.05					
	40-44	\$498.13	\$626.57	\$552.58	\$695.03	\$473.21	\$595.22	\$524.96	\$660.31	\$1,354.53	\$895.21	\$943.57					
	45-49	\$537.85	\$676.53	\$542.09	\$681.86	\$510.95	\$642.68	\$514.98	\$647.75	\$1,377.59	\$910.45	\$959.64					
	50-54	\$583.06	\$733.40	\$573.06	\$720.81	\$553.93	\$696.76	\$544.39	\$684.78	\$1,470.66	\$971.98	\$1,024.49					
	55-59	\$667.61	\$839.74	\$592.95	\$745.83	\$634.24	\$797.77	\$563.29	\$708.53	\$1,585.47	\$1,047.89	\$1,104.48					
	60-64	\$761.02	\$957.24	\$640.41	\$805.52	\$722.98	\$909.41	\$608.37	\$765.23	\$1,752.07	\$1,157.96	\$1,220.51					
	65+	\$793.04	\$997.52	\$649.57	\$817.06	\$753.39	\$947.65	\$617.09	\$776.21	\$2,230.54	\$1,474.22	\$1,553.84					

Services and products provided by Horizon Blue Cross Blue Shield of New Jersey, an independent licensee of the Blue Cross and Blue Shield Association.

© Registered marks of the Blue Cross and Blue Shield Association.

®/ SM Registered and service marks of Horizon Blue Cross Blue Shield of New Jersey.

© 2010 Horizon Blue Cross Blue Shield of New Jersey, Three Penn Plaza East, Newark, New Jersey 07105

*Territory A: Essex, Hudson, and Union

Territory B: Bergen and Passaic

Territory C: Monmouth, Morris, Sussex and Warren

Territory D: Hunterdon, Middlesex, Somerset

Territory E: Burlington, Camden and Mercer

Territory F: Atlantic, Cape May, Ocean, Salem, Cumberland and Gloucester

HOR2198 (W1211)