



Health · Dental · Vision · Life

## 2-50 Small Group EmployeeChoice Monthly Rates

Updated Rates – Effective April 1, 2012

Complete rates for health, dental, vision and life products,  
including our newest plans

### Offered by Anthem Blue Cross:

#### Health Plans

PPO \$30 Copay  
Premier PPO \$20 Copay  
Saver \$20 HMO  
Lumenos HSA 3500 (80/50)  
Lumenos HSA 3500 (80/50) MHP

#### Dental Plans

Dental Net DHMO  
Voluntary Dental Saver Select DHMO

### Offered by Anthem Blue Cross Life and Health Insurance Company:

#### Health Plans

PPO \$35 Copay GenRx

#### Dental Plans

Dental Blue Silver 100-80  
Dental Blue Silver Plus 100-80  
Dental Blue Gold 100-80  
Dental Blue Gold Plus 100-80  
Dental Blue Platinum 100-80  
Dental Blue Platinum Plus 100-80  
Basic Option Dental PPO  
Standard Option Dental PPO  
High Option Dental PPO  
Voluntary Dental PPO

#### Vision Plans

Blue View<sup>SM</sup>  
Blue View Plus  
Voluntary Blue View  
Voluntary Blue View Plus

#### Life Plans

Basic Term Life and AD&D Coverage  
Optional Dependent Life Coverage  
Supplemental Life Coverage

Health rates are subject to regulatory review.

## Small Group 1.0 RAF health rates

### Medical Rating Area Definitions - PPO

The following indicate rating area by county and ZIP code for the PPO plans. The employee's home address determines the rating area. If there is a question regarding area availability, please call your local agent or Anthem Blue Cross at 800-627-8797.

<b>AREA 1:</b>	Amador (except 95629,95646), Calaveras , Mono, Monterey
<b>AREA 2:</b>	Alpine, Amador (95646 only), Butte (95980 only), Del Norte, El Dorado (ZIP codes beginning with 961), Inyo , Lassen, Marin, Modoc, Nevada, Placer , Plumas, Sacramento (94243,94253,95857,95873), San Benito , San Joaquin , San Mateo, Shasta, Sierra , Siskiyou, Solano, Stanislaus (except 95329), Tehama , Trinity
<b>AREA 3:</b>	Alameda , Amador (95629 only), Butte (except 95980), Colusa, Contra Costa, El Dorado (ZIP codes beginning with 956, 957), Glenn, Humboldt, Lake, Mendocino, Napa , Sacramento (except 94243,94253,95857,95873), San Francisco, Santa Clara, Santa Cruz, Sonoma, Stanislaus (95329 only), Sutter, Tuolumne, Yolo, Yuba
<b>AREA 4:</b>	Orange, Riverside (92883 only)
<b>AREA 5:</b>	Los Angeles (except ZIP codes beginning with 906-912, 915, 917, 918 & 935), Ventura (ZIP codes beginning with 913 only)
<b>AREA 6:</b>	Imperial, Los Angeles (91798 only), Riverside (except 92883), San Bernardino (except 93558), San Diego
<b>AREA 7:</b>	Fresno (except 93628), Kern, Kings, Madera, Mariposa, Merced, San Bernardino (93558 only), Tulare
<b>AREA 8:</b>	San Luis Obispo, Santa Barbara, Ventura (except ZIP codes beginning with 913)
<b>AREA 9:</b>	Los Angeles (ZIP codes beginning with 906-912, 915, 917, 918 & 935)

## Small Group 1.0 RAF health rates

### Medical Rating Area Definitions - HMO (except Select HMO)

The following indicate rating area by county and ZIP code for the HMO plans, except for the Select HMO plans. The employee's home address determines the rating area. If there is a question regarding area availability, please call your local agent or Anthem Blue Cross at 800-627-8797.

AREA 1:	Not Available
AREA 2:	Marin, Nevada (except 95724, 95728, 96111, 96160-96162), Placer (except 96140,96141,96143,96145,96146,96148), Sacramento (94243,94253,95857,95873 only), San Benito (except 95043), San Joaquin, San Mateo, Solano, Stanislaus (except 95329)
AREA 3:	Alameda , Contra Costa, El Dorado (ZIP codes beginning with 956, 957 except 95720, 95721, 95735,96142,96150-96152, 96154-96158), Humboldt, Sacramento (except 94243,94253,95857,95873), San Francisco, Santa Clara, Santa Cruz, Sonoma (except 95412, 95480, 95497), Stanislaus (95329 only), Yolo
AREA 4:	Orange, Riverside (92883 only)
AREA 5:	Los Angeles (except ZIP codes beginning with 906-912, 915, 917, 918 & 935), Ventura (ZIP codes beginning with 913 only)
AREA 6:	Imperial (except 92222, 92266, 92283), Los Angeles (91798 only), Riverside (except 92225, 92226, 92239, 92883), San Bernardino* (except - see note *), San Diego (except 92004)
AREA 7:	Fresno (except 93628), Kern (except 93555,93556), Kings, Madera, Merced, Tulare
AREA 8:	San Luis Obispo, Santa Barbara , Ventura (except ZIP codes beginning with 913)
AREA 9:	Los Angeles (ZIP codes beginning with 906-912, 915, 917, 918 & 935 except 90704)

\* The following San Bernardino zip codes are excluded from HMO coverage: 92242, 92267, 92280, 92304, 92309, 92310, 92317, 92321, 92322, 92323, 92325, 92326, 92327, 92332, 92338, 92352, 92363-92366, 92378, 92385, 92391, 93558, 93562, 93592)

## How to convert these 1.0 RAF rates to other RAFs:

This file includes the Standard Employee Risk Rates (SERR) or 1.00 Risk Adjustment Factor (RAF) rates for all rating areas for small group health plans. The following calculations are provided to assist you in obtaining the monthly rates for RAFs other than 1.00. **TO OBTAIN ANOTHER RAF RATE, MULTIPLY THE 1.00 STANDARD RATE BY THE RAF.**

### Examples:

**To obtain 0.90 RAF rates**, multiply the 1.00 standard rates by 0.90. If the result is not a whole dollar amount, round up to the next higher whole dollar amount.

**Example: 1.00 standard rate is \$206.00.**

**$\$206.00 \times 0.90 = \$185.40$ . The 0.90 RAF rate would be \$186.00.**

**To obtain 1.10 RAF rates**, multiply the 1.00 standard rates by 1.10. If the result is not a whole dollar amount, round down to the next lower whole dollar amount.

**Example: 1.00 standard rate is \$206.00.**

**$\$206.00 \times 1.10 = \$226.60$ . The 1.10 RAF rate would be \$226.00.**

**To obtain all other RAF rates**, multiply the 1.00 standard rates by the particular RAF. If the result is not a whole dollar amount, round to the (amounts with 50 cents or more, round up; amounts with 49 cents or less, round down).

**.93 RAF example: 1.00 standard rate is \$206.00.**

**$\$206.00 \times 0.93 = \$191.58$ . The 0.93 RAF rate would be \$192.00.**

**1.05 RAF example: 1.00 standard rate is \$206.00.**

**$\$206.00 \times 1.05 = \$216.30$ . The 1.05 RAF rate would be \$216.00.**

# Anthem Blue Cross Small Group Employee Choice Health Rates

Rates rounded to whole dollars

## AREA 1 1.0 RAF

		PPO					HMO
		Premier PPO \$20 Copay	PPO \$30 Copay	PPO \$35 Copay GenRx	Lumenos HSA 3500 (80/50)	Lumenos HSA 3500 (80/50) MHP	Saver \$20 HMO
EMPLOYEE ONLY	AGE - under 30	\$905	\$652	\$385	\$385	\$386	n/a
	30 - 39	1,110	827	479	514	518	n/a
	40 - 49	1,485	1,090	645	748	750	n/a
	50 - 54	1,996	1,462	867	900	904	n/a
	55 - 59	2,449	1,807	1,067	1,144	1,148	n/a
	60 - 64	3,130	2,315	1,366	1,436	1,442	n/a
	65+ PRIMARY	3,659	2,696	1,598	1,871	1,877	n/a
	65+ SECONDARY	1,523	1,134	668	1,063	1,066	n/a
EMPLOYEE & SPOUSE	AGE - under 30	\$2,625	\$1,934	\$1,142	\$812	\$815	n/a
	30 - 39	3,087	2,272	1,334	1,104	1,109	n/a
	40 - 49	2,993	2,222	1,313	1,531	1,538	n/a
	50 - 54	4,154	3,069	1,805	1,866	1,875	n/a
	55 - 59	5,140	3,792	2,239	2,368	2,378	n/a
	60 - 64	6,170	4,552	2,683	2,892	2,904	n/a
	65+ PRIMARY	8,679	6,404	3,776	3,560	3,575	n/a
	65+ SECONDARY	4,096	3,011	1,769	2,118	2,128	n/a
EMPLOYEE & CHILD(REN)	AGE - under 30	\$2,053	\$1,498	\$889	\$751	\$754	n/a
	30 - 39	2,208	1,624	958	940	945	n/a
	40 - 49	2,300	1,689	996	1,225	1,231	n/a
	50 - 54	2,733	2,003	1,185	1,349	1,354	n/a
	55 - 59	3,252	2,396	1,409	1,539	1,544	n/a
	60 - 64	3,996	2,945	1,737	1,788	1,796	n/a
	65+ PRIMARY	4,465	3,299	1,933	2,251	2,259	n/a
	65+ SECONDARY	1,752	1,314	769	1,543	1,548	n/a
FAMILY	AGE - under 30	\$3,036	\$2,249	\$1,327	\$1,142	\$1,144	n/a
	30 - 39	3,405	2,520	1,482	1,492	1,496	n/a
	40 - 49	3,880	2,869	1,688	1,918	1,926	n/a
	50 - 54	4,597	3,397	2,001	2,006	2,013	n/a
	55 - 59	5,586	4,117	2,432	2,546	2,555	n/a
	60 - 64	7,029	5,175	3,060	3,003	3,015	n/a
	65+ PRIMARY	9,017	6,660	3,926	3,805	3,819	n/a
	65+ SECONDARY	4,262	3,141	1,850	2,246	2,254	n/a

Monthly rates effective April 1, 2012

## AREA 2 1.0 RAF

		PPO					HMO
		Premier PPO \$20 Copay	PPO \$30 Copay	PPO \$35 Copay GenRx	Lumenos HSA 3500 (80/50)	Lumenos HSA 3500 (80/50) MHP	Saver \$20 HMO
EMPLOYEE ONLY	AGE - under 30	\$681	\$531	\$301	\$308	\$309	\$638
	30 - 39	862	658	380	412	414	814
	40 - 49	1,140	885	519	596	597	869
	50 - 54	1,535	1,188	693	712	715	1,109
	55 - 59	1,876	1,464	845	911	913	1,409
	60 - 64	2,431	1,884	1,094	1,141	1,144	1,846
	65+ PRIMARY	3,111	2,417	1,398	1,486	1,490	2,230
	65+ SECONDARY	1,297	1,008	583	843	846	1,571
EMPLOYEE & SPOUSE	AGE - under 30	\$2,007	\$1,565	\$902	\$644	\$646	\$1,596
	30 - 39	2,358	1,834	1,063	876	879	1,886
	40 - 49	2,350	1,821	1,060	1,214	1,219	2,038
	50 - 54	3,214	2,484	1,433	1,482	1,489	2,134
	55 - 59	3,967	3,078	1,780	1,879	1,886	3,029
	60 - 64	4,848	3,770	2,185	2,299	2,308	3,234
	65+ PRIMARY	7,281	5,667	3,272	2,829	2,842	4,508
	65+ SECONDARY	3,409	2,648	1,538	1,680	1,688	3,734
EMPLOYEE & CHILD(REN)	AGE - under 30	\$1,571	\$1,218	\$704	\$599	\$600	\$1,563
	30 - 39	1,693	1,311	761	749	751	1,728
	40 - 49	1,780	1,376	801	971	974	1,706
	50 - 54	2,104	1,640	937	1,067	1,072	1,715
	55 - 59	2,494	1,933	1,117	1,221	1,225	2,012
	60 - 64	3,084	2,397	1,382	1,421	1,428	2,476
	65+ PRIMARY	3,815	2,959	1,709	1,786	1,791	2,850
	65+ SECONDARY	1,507	1,159	681	1,224	1,231	1,937
FAMILY	AGE - under 30	\$2,334	\$1,809	\$1,053	\$905	\$909	\$2,197
	30 - 39	2,622	2,034	1,181	1,186	1,189	2,559
	40 - 49	2,999	2,329	1,343	1,525	1,531	2,692
	50 - 54	3,551	2,750	1,596	1,593	1,599	3,075
	55 - 59	4,299	3,344	1,936	2,022	2,031	3,407
	60 - 64	5,426	4,221	2,446	2,385	2,392	4,083
	65+ PRIMARY	7,635	5,923	3,434	3,022	3,034	5,355
	65+ SECONDARY	3,591	2,781	1,605	1,780	1,788	4,304

Monthly rates effective April 1, 2012

Area 1 - Medical Rating Area Definitions - PPO - Amador (except 95629,95646), Calaveras, Mono, Monterey

Area 1 - Medical Rating Area Definitions - HMO (except Select HMO) Not Available

65+ PRIMARY: Anthem Blue Cross is primary to Medicare. 65+ SECONDARY: Anthem Blue Cross is secondary to Medicare.

Area 2 - Medical Rating Area Definitions - PPO - Alpine, Amador (95646 only), Butte (95980 only), Del Norte, El Dorado (ZIP codes beginning with 961), Inyo, Lassen, Marin, Modoc, Nevada, Placer, Plumas, Sacramento (94243,94253,95857,95873), San Benito, San Joaquin, San Mateo, Shasta, Sierra, Siskiyou, Solano, Stanislaus (except 95329), Tehama, Trinity

Area 2 - Medical Rating Area Definitions - HMO (except Select HMO) - Marin, Nevada (except 95724, 95728, 96111, 96160-96162), Placer (except 96140, 96141, 96143, 96145, 96146, 96148), Sacramento (94243, 94253, 95857, 95873 only), San Benito (except 95043), San Joaquin, San Mateo, Solano, Stanislaus (except 95329)

# AREA 3 1.0 RAF

		PPO					HMO
		Premier PPO \$20 Copay	PPO \$30 Copay	PPO \$35 Copay GenRx	Lumenos HSA 3500 (80/50)	Lumenos HSA 3500 (80/50) MHP	Saver \$20 HMO
EMPLOYEE ONLY	AGE - under 30	\$613	\$466	\$273	\$274	\$274	\$584
	30 - 39	755	572	331	365	366	722
	40 - 49	1,009	767	450	526	529	794
	50 - 54	1,358	1,030	595	631	634	991
	55 - 59	1,672	1,268	738	804	808	1,260
	60 - 64	2,179	1,654	960	1,007	1,010	1,693
	65+ PRIMARY	2,702	2,056	1,191	1,313	1,319	2,181
	65+ SECONDARY	1,222	915	535	745	749	1,586
EMPLOYEE & SPOUSE	AGE - under 30	\$1,783	\$1,353	\$784	\$569	\$570	\$1,482
	30 - 39	2,093	1,599	926	774	776	1,769
	40 - 49	2,092	1,599	925	1,076	1,080	1,940
	50 - 54	2,849	2,162	1,252	1,312	1,318	2,005
	55 - 59	3,509	2,668	1,546	1,662	1,666	2,832
	60 - 64	4,354	3,306	1,917	2,031	2,037	3,094
	65+ PRIMARY	6,318	4,800	2,784	2,497	2,508	4,460
	65+ SECONDARY	3,201	2,435	1,412	1,486	1,489	3,794
EMPLOYEE & CHILD(REN)	AGE - under 30	\$1,382	\$1,052	\$608	\$531	\$532	\$1,399
	30 - 39	1,510	1,141	665	659	662	1,566
	40 - 49	1,573	1,203	697	859	864	1,561
	50 - 54	1,868	1,422	820	945	948	1,548
	55 - 59	2,212	1,670	975	1,081	1,086	1,794
	60 - 64	2,771	2,104	1,220	1,255	1,258	2,255
	65+ PRIMARY	3,310	2,507	1,450	1,577	1,582	2,814
	65+ SECONDARY	1,411	1,071	622	1,082	1,087	1,954
FAMILY	AGE - under 30	\$2,069	\$1,570	\$909	\$802	\$805	\$1,969
	30 - 39	2,328	1,765	1,021	1,048	1,053	2,296
	40 - 49	2,667	2,021	1,176	1,347	1,351	2,448
	50 - 54	3,152	2,392	1,388	1,406	1,412	2,777
	55 - 59	3,804	2,894	1,673	1,787	1,792	3,067
	60 - 64	4,874	3,695	2,147	2,107	2,113	3,724
	65+ PRIMARY	6,641	5,039	2,930	2,671	2,682	5,289
	65+ SECONDARY	3,361	2,565	1,474	1,574	1,579	4,388

**Area 3 - Medical Rating Area Definitions - PPO** - Alameda , Amador (95629 only), Butte (except 95980), Colusa, Contra Costa, El Dorado (ZIP codes beginning with 956, 957), Glenn, Humboldt, Lake, Mendocino, Napa , Sacramento (except 94243,94253,95857,95873), San Francisco, Santa Clara, Santa Cruz, Sonoma, Stanislaus (95329 only), Sutter, Tuolumne, Yolo, Yuba

**Area 3 - Medical Rating Area Definitions - HMO (except Select HMO)** - Alameda , Contra Costa, El Dorado (ZIP codes beginning with 956, 957 except 95720, 95721, 95735,96142,96150-96152, 96154-96158), Humboldt, Sacramento (except 94243,94253,95857,95873), San Francisco, Santa Clara, Santa Cruz, Sonoma (except 95412, 95480, 95497), Stanislaus (95329 only), Yolo

# AREA 4 1.0 RAF

		PPO					HMO
		Premier PPO \$20 Copay	PPO \$30 Copay	PPO \$35 Copay GenRx	Lumenos HSA 3500 (80/50)	Lumenos HSA 3500 (80/50) MHP	Saver \$20 HMO
EMPLOYEE ONLY	AGE - under 30	\$665	\$506	\$286	\$301	\$301	\$453
	30 - 39	838	628	360	401	403	566
	40 - 49	1,125	851	483	578	581	629
	50 - 54	1,516	1,143	653	700	703	786
	55 - 59	1,853	1,411	809	888	892	999
	60 - 64	2,436	1,850	1,057	1,113	1,118	1,338
	65+ PRIMARY	3,200	2,429	1,395	1,447	1,454	1,770
	65+ SECONDARY	1,425	1,085	616	822	825	1,313
EMPLOYEE & SPOUSE	AGE - under 30	\$1,986	\$1,509	\$866	\$630	\$631	\$1,166
	30 - 39	2,339	1,772	1,018	852	856	1,386
	40 - 49	2,338	1,783	1,020	1,186	1,189	1,529
	50 - 54	3,191	2,418	1,385	1,444	1,451	1,586
	55 - 59	3,934	2,988	1,713	1,833	1,841	2,231
	60 - 64	4,896	3,718	2,128	2,238	2,247	2,448
	65+ PRIMARY	7,527	5,720	3,274	2,758	2,767	3,608
	65+ SECONDARY	3,812	2,901	1,657	1,642	1,647	3,112
EMPLOYEE & CHILD(REN)	AGE - under 30	\$1,538	\$1,164	\$671	\$582	\$585	\$1,096
	30 - 39	1,665	1,267	726	733	735	1,234
	40 - 49	1,745	1,332	768	949	953	1,231
	50 - 54	2,078	1,577	903	1,042	1,045	1,225
	55 - 59	2,460	1,866	1,069	1,191	1,196	1,421
	60 - 64	3,106	2,360	1,352	1,388	1,392	1,783
	65+ PRIMARY	3,931	2,979	1,706	1,741	1,748	2,282
	65+ SECONDARY	1,652	1,255	725	1,195	1,199	1,607
FAMILY	AGE - under 30	\$2,298	\$1,746	\$998	\$887	\$891	\$1,550
	30 - 39	2,602	1,970	1,130	1,158	1,164	1,817
	40 - 49	2,973	2,262	1,301	1,488	1,495	1,943
	50 - 54	3,527	2,682	1,531	1,553	1,558	2,181
	55 - 59	4,255	3,231	1,851	1,971	1,978	2,407
	60 - 64	5,466	4,152	2,380	2,323	2,332	2,938
	65+ PRIMARY	7,890	5,993	3,433	2,947	2,959	4,276
	65+ SECONDARY	3,990	3,036	1,734	1,738	1,745	3,593

**Area 4 - Medical Rating Area Definitions - PPO** - Orange, Riverside (92883 only)

**Area 4 - Medical Rating Area Definitions - HMO (except Select HMO)** - Orange, Riverside (92883 only)

65+ PRIMARY: Anthem Blue Cross is primary to Medicare. 65+ SECONDARY: Anthem Blue Cross is secondary to Medicare.

Monthly rates effective April 1, 2012

Monthly rates effective April 1, 2012

# Anthem Blue Cross Small Group Employee Choice Health Rates

Rates rounded to whole dollars

## AREA 5 1.0 RAF

		PPO					HMO
		Premier PPO \$20 Copay	PPO \$30 Copay	PPO \$35 Copay GenRx	Lumenos HSA 3500 (80/50)	Lumenos HSA 3500 (80/50) MHP	Saver \$20 HMO
EMPLOYEE ONLY	AGE - under 30	\$722	\$552	\$320	\$322	\$324	\$430
	30 - 39	907	696	403	436	437	526
	40 - 49	1,221	936	536	628	631	584
	50 - 54	1,654	1,269	726	754	757	728
	55 - 59	2,027	1,542	895	963	965	921
	60 - 64	2,660	2,037	1,178	1,204	1,210	1,238
	65+ PRIMARY	3,195	2,457	1,416	1,563	1,569	1,561
	65+ SECONDARY	1,410	1,076	626	895	897	1,177
EMPLOYEE & SPOUSE	AGE - under 30	\$2,164	\$1,650	\$958	\$682	\$685	\$1,091
	30 - 39	2,547	1,954	1,130	926	929	1,286
	40 - 49	2,547	1,961	1,130	1,285	1,288	1,418
	50 - 54	3,477	2,662	1,536	1,562	1,566	1,459
	55 - 59	4,274	3,273	1,899	1,987	1,996	2,056
	60 - 64	5,330	4,083	2,354	2,430	2,441	2,271
	65+ PRIMARY	7,515	5,759	3,325	2,990	3,002	3,174
	65+ SECONDARY	3,795	2,917	1,681	1,778	1,786	2,764
EMPLOYEE & CHILD(REN)	AGE - under 30	\$1,679	\$1,287	\$743	\$631	\$634	\$1,027
	30 - 39	1,820	1,400	801	788	790	1,134
	40 - 49	1,915	1,463	849	1,025	1,030	1,135
	50 - 54	2,269	1,745	1,013	1,129	1,133	1,124
	55 - 59	2,693	2,054	1,189	1,291	1,296	1,305
	60 - 64	3,380	2,591	1,500	1,500	1,504	1,652
	65+ PRIMARY	3,919	3,000	1,733	1,889	1,896	2,014
	65+ SECONDARY	1,649	1,265	726	1,296	1,301	1,434
FAMILY	AGE - under 30	\$2,516	\$1,920	\$1,108	\$958	\$963	\$1,443
	30 - 39	2,839	2,172	1,256	1,255	1,258	1,672
	40 - 49	3,262	2,501	1,440	1,610	1,618	1,794
	50 - 54	3,863	2,962	1,707	1,687	1,693	2,029
	55 - 59	4,647	3,562	2,060	2,136	2,145	2,235
	60 - 64	5,977	4,579	2,642	2,520	2,529	2,722
	65+ PRIMARY	7,877	6,039	3,489	3,195	3,207	3,776
	65+ SECONDARY	3,976	3,050	1,768	1,881	1,891	3,197

**Area 5 - Medical Rating Area Definitions - PPO** - Los Angeles (except ZIP codes beginning with 906-912, 915, 917, 918 & 935), Ventura (ZIP codes beginning with 913 only)

**Area 5 - Medical Rating Area Definitions - HMO (except Select HMO)** - Los Angeles (except ZIP codes beginning with 906-912, 915, 917, 918 & 935), Ventura (ZIP codes beginning with 913 only)

65+ PRIMARY: Anthem Blue Cross is primary to Medicare. 65+ SECONDARY: Anthem Blue Cross is secondary to Medicare.

## AREA 6 1.0 RAF

		PPO					HMO
		Premier PPO \$20 Copay	PPO \$30 Copay	PPO \$35 Copay GenRx	Lumenos HSA 3500 (80/50)	Lumenos HSA 3500 (80/50) MHP	Saver \$20 HMO
EMPLOYEE ONLY	AGE - under 30	\$592	\$452	\$262	\$270	\$271	\$486
	30 - 39	746	566	323	359	360	624
	40 - 49	1,000	772	438	527	529	670
	50 - 54	1,363	1,035	587	631	634	865
	55 - 59	1,663	1,276	727	802	804	1,081
	60 - 64	2,168	1,660	949	1,004	1,007	1,444
	65+ PRIMARY	2,857	2,199	1,259	1,305	1,310	1,792
	65+ SECONDARY	1,262	975	552	742	744	1,335
EMPLOYEE & SPOUSE	AGE - under 30	\$1,773	\$1,358	\$771	\$565	\$567	\$1,263
	30 - 39	2,093	1,596	907	772	774	1,524
	40 - 49	2,094	1,596	915	1,070	1,073	1,644
	50 - 54	2,850	2,181	1,245	1,304	1,309	1,711
	55 - 59	3,516	2,701	1,546	1,656	1,662	2,409
	60 - 64	4,369	3,345	1,916	2,019	2,025	2,636
	65+ PRIMARY	6,711	5,140	2,938	2,487	2,497	3,645
	65+ SECONDARY	3,395	2,601	1,487	1,479	1,486	3,140
EMPLOYEE & CHILD(REN)	AGE - under 30	\$1,382	\$1,066	\$614	\$526	\$527	\$1,208
	30 - 39	1,485	1,142	653	660	662	1,335
	40 - 49	1,565	1,201	688	852	857	1,333
	50 - 54	1,857	1,418	814	940	943	1,321
	55 - 59	2,208	1,687	962	1,073	1,079	1,542
	60 - 64	2,768	2,120	1,212	1,247	1,250	1,928
	65+ PRIMARY	3,499	2,688	1,535	1,571	1,577	2,309
	65+ SECONDARY	1,487	1,137	651	1,074	1,080	1,616
FAMILY	AGE - under 30	\$2,056	\$1,581	\$900	\$799	\$803	\$1,676
	30 - 39	2,316	1,781	1,012	1,042	1,045	1,963
	40 - 49	2,666	2,045	1,172	1,340	1,344	2,117
	50 - 54	3,147	2,416	1,383	1,402	1,408	2,364
	55 - 59	3,800	2,903	1,664	1,777	1,784	2,624
	60 - 64	4,872	3,738	2,133	2,096	2,106	3,177
	65+ PRIMARY	7,042	5,393	3,084	2,657	2,668	4,333
	65+ SECONDARY	3,555	2,716	1,550	1,565	1,571	3,620

**Area 6 - Medical Rating Area Definitions - PPO** - Imperial, Los Angeles (91798 only), Riverside (except 92883), San Bernardino (except 93558), San Diego

**Area 6 - Medical Rating Area Definitions - HMO (except Select HMO)** - Imperial (except 92222, 92266, 92283), Los Angeles (91798 only), Riverside (except 92225, 92226, 92239, 92883), San Bernardino\* (except - see note \*), San Diego (except 92004)

Monthly rates effective April 1, 2012

Monthly rates effective April 1, 2012

# AREA 7 1.0 RAF

		PPO					HMO
		Premier PPO \$20 Copay	PPO \$30 Copay	PPO \$35 Copay GenRx	Lumenos HSA 3500 (80/50)	Lumenos HSA 3500 (80/50) MHP	Saver \$20 HMO
EMPLOYEE ONLY	AGE - under 30	\$545	\$412	\$240	\$243	\$243	\$521
	30 - 39	694	520	295	329	330	657
	40 - 49	919	697	407	477	478	707
	50 - 54	1,222	933	539	569	572	902
	55 - 59	1,512	1,146	665	726	729	1,143
	60 - 64	1,950	1,483	856	909	912	1,510
	65+ PRIMARY	2,504	1,895	1,095	1,187	1,190	1,807
	65+ SECONDARY	1,038	794	458	672	675	1,285
EMPLOYEE & SPOUSE	AGE - under 30	\$1,619	\$1,231	\$706	\$513	\$515	\$1,301
	30 - 39	1,896	1,440	831	699	702	1,538
	40 - 49	1,891	1,436	825	972	975	1,661
	50 - 54	2,577	1,951	1,124	1,186	1,189	1,728
	55 - 59	3,184	2,420	1,394	1,504	1,510	2,455
	60 - 64	3,892	2,955	1,710	1,834	1,841	2,629
	65+ PRIMARY	5,847	4,450	2,564	2,259	2,268	3,662
	65+ SECONDARY	2,738	2,090	1,207	1,346	1,349	3,037
EMPLOYEE & CHILD(REN)	AGE - under 30	\$1,260	\$958	\$552	\$478	\$481	\$1,279
	30 - 39	1,363	1,027	589	596	599	1,406
	40 - 49	1,434	1,082	623	777	780	1,387
	50 - 54	1,693	1,287	741	857	861	1,396
	55 - 59	2,004	1,518	875	978	981	1,643
	60 - 64	2,480	1,891	1,083	1,132	1,135	2,019
	65+ PRIMARY	3,060	2,330	1,336	1,426	1,432	2,327
	65+ SECONDARY	1,211	908	531	978	981	1,580
FAMILY	AGE - under 30	\$1,878	\$1,421	\$825	\$722	\$725	\$1,791
	30 - 39	2,103	1,599	924	946	951	2,085
	40 - 49	2,408	1,830	1,049	1,216	1,220	2,194
	50 - 54	2,846	2,168	1,253	1,273	1,279	2,503
	55 - 59	3,452	2,625	1,510	1,611	1,620	2,776
	60 - 64	4,353	3,312	1,913	1,903	1,911	3,322
	65+ PRIMARY	6,132	4,649	2,691	2,413	2,422	4,363
	65+ SECONDARY	2,892	2,182	1,263	1,423	1,426	3,501

Monthly rates effective April 1, 2012

Area 7 - Medical Rating Area Definitions - PPO - Fresno (except 93628), Kern, Kings, Madera, Mariposa, Merced, San Bernardino (93558 only), Tulare

Area 7 - Medical Rating Area Definitions - HMO (except Select HMO) - Fresno (except 93628), Kern (except 93555, 93556), Kings, Madera, Merced, Tulare

65+ PRIMARY: Anthem Blue Cross is primary to Medicare. 65+ SECONDARY: Anthem Blue Cross is secondary to Medicare.

# AREA 8 1.0 RAF

		PPO					HMO
		Premier PPO \$20 Copay	PPO \$30 Copay	PPO \$35 Copay GenRx	Lumenos HSA 3500 (80/50)	Lumenos HSA 3500 (80/50) MHP	Saver \$20 HMO
EMPLOYEE ONLY	AGE - under 30	\$592	\$447	\$256	\$258	\$259	\$509
	30 - 39	758	551	321	348	351	650
	40 - 49	1,004	743	432	501	503	704
	50 - 54	1,334	992	578	607	608	901
	55 - 59	1,639	1,221	709	769	772	1,124
	60 - 64	2,121	1,580	915	964	967	1,504
	65+ PRIMARY	2,722	2,023	1,172	1,256	1,262	1,868
	65+ SECONDARY	1,125	848	488	712	714	1,390
EMPLOYEE & SPOUSE	AGE - under 30	\$1,760	\$1,309	\$761	\$547	\$549	\$1,319
	30 - 39	2,071	1,536	895	741	743	1,581
	40 - 49	2,058	1,535	883	1,032	1,034	1,720
	50 - 54	2,802	2,083	1,204	1,252	1,256	1,790
	55 - 59	3,462	2,584	1,491	1,592	1,599	2,510
	60 - 64	4,238	3,151	1,832	1,944	1,952	2,757
	65+ PRIMARY	6,368	4,751	2,743	2,392	2,404	3,803
	65+ SECONDARY	2,984	2,228	1,292	1,424	1,428	3,281
EMPLOYEE & CHILD(REN)	AGE - under 30	\$1,377	\$1,025	\$592	\$508	\$511	\$1,263
	30 - 39	1,486	1,099	636	634	635	1,390
	40 - 49	1,555	1,149	666	822	825	1,382
	50 - 54	1,839	1,377	788	903	907	1,381
	55 - 59	2,179	1,625	936	1,033	1,036	1,607
	60 - 64	2,699	2,015	1,158	1,198	1,203	2,013
	65+ PRIMARY	3,341	2,489	1,431	1,510	1,518	2,406
	65+ SECONDARY	1,316	969	569	1,036	1,042	1,686
FAMILY	AGE - under 30	\$2,045	\$1,518	\$878	\$769	\$772	\$1,744
	30 - 39	2,296	1,710	992	1,004	1,010	2,049
	40 - 49	2,619	1,952	1,125	1,289	1,293	2,199
	50 - 54	3,099	2,308	1,340	1,348	1,354	2,455
	55 - 59	3,754	2,798	1,613	1,709	1,715	2,738
	60 - 64	4,741	3,537	2,046	2,017	2,026	3,310
	65+ PRIMARY	6,673	4,969	2,877	2,556	2,566	4,517
	65+ SECONDARY	3,144	2,334	1,349	1,510	1,518	3,774

Monthly rates effective April 1, 2012

Area 8 - Medical Rating Area Definitions - PPO - San Luis Obispo, Santa Barbara, Ventura (except ZIP codes beginning with 913)

Area 8 - Medical Rating Area Definitions - HMO (except Select HMO) - San Luis Obispo, Santa Barbara, Ventura (except ZIP codes beginning with 913)

# Anthem Blue Cross Small Group Employee Choice Health Rates

Rates rounded to whole dollars

## AREA 9 1.0 RAF

		PPO					HMO
		Premier PPO \$20 Copay	PPO \$30 Copay	PPO \$35 Copay GenRx	Lumenos HSA 3500 (80/50)	Lumenos HSA 3500 (80/50) MHP	Saver \$20 HMO
EMPLOYEE ONLY	AGE - under 30	\$550	\$416	\$245	\$248	\$250	\$404
	30 - 39	695	523	308	337	338	501
	40 - 49	945	708	410	482	485	555
	50 - 54	1,262	954	552	582	583	696
	55 - 59	1,559	1,167	681	744	746	872
	60 - 64	2,049	1,535	897	928	934	1,176
	65+ PRIMARY	2,455	1,851	1,077	1,206	1,212	1,484
	65+ SECONDARY	1,089	826	482	688	690	1,113
EMPLOYEE & SPOUSE	AGE - under 30	\$1,653	\$1,239	\$725	\$527	\$529	\$1,035
	30 - 39	1,958	1,471	855	714	716	1,225
	40 - 49	1,958	1,471	856	988	991	1,345
	50 - 54	2,672	2,007	1,171	1,205	1,211	1,392
	55 - 59	3,285	2,468	1,445	1,531	1,536	1,956
	60 - 64	4,102	3,073	1,793	1,869	1,876	2,155
	65+ PRIMARY	5,771	4,334	2,528	2,301	2,309	3,017
	65+ SECONDARY	2,955	2,222	1,294	1,372	1,377	2,626
EMPLOYEE & CHILD(REN)	AGE - under 30	\$1,295	\$977	\$572	\$484	\$486	\$974
	30 - 39	1,401	1,053	608	606	608	1,074
	40 - 49	1,472	1,096	642	790	794	1,077
	50 - 54	1,746	1,316	767	869	872	1,065
	55 - 59	2,064	1,550	901	995	1,001	1,251
	60 - 64	2,595	1,953	1,138	1,157	1,162	1,571
	65+ PRIMARY	3,010	2,260	1,317	1,450	1,455	1,915
	65+ SECONDARY	1,282	950	561	999	1,003	1,369
FAMILY	AGE - under 30	\$1,930	\$1,447	\$843	\$738	\$739	\$1,368
	30 - 39	2,177	1,629	953	965	968	1,585
	40 - 49	2,506	1,884	1,093	1,240	1,243	1,704
	50 - 54	2,963	2,228	1,297	1,297	1,302	1,924
	55 - 59	3,566	2,684	1,566	1,645	1,650	2,122
	60 - 64	4,593	3,442	2,012	1,942	1,949	2,589
	65+ PRIMARY	6,050	4,541	2,649	2,460	2,470	3,576
	65+ SECONDARY	3,091	2,331	1,359	1,450	1,455	3,038

Monthly rates effective April 1, 2012

Area 9 - Medical Rating Area Definitions - PPO - Los Angeles (ZIP codes beginning with 906-912, 915, 917, 918 & 935)

Area 9 - Medical Rating Area Definitions - HMO (except Select HMO) - Los Angeles (ZIP codes beginning with 906-912, 915, 917, 918 & 935 except 90704)

# Dental Blue<sup>®</sup> PPO Plan Rates

Monthly rates effective January 1, 2012

Out-of-network (OON) reimbursement for Dental Blue plans is at the 80th percentile.

Rating areas are the same as all other Anthem Blue Cross and Anthem Blue Cross Life and Health Insurance Company small group products.

		Dental Blue Silver 100 - 80			Dental Blue Silver Plus 100 - 80			Dental Blue Gold 100 - 80		
Areas:		1, 2, 7	3, 6, 8	4, 5, 9	1, 2, 7	3, 6, 8	4, 5, 9	1, 2, 7	3, 6, 8	4, 5, 9
Employee Only	Group Size 2-9	\$48	\$55	\$61	\$53	\$63	\$69	\$53	\$62	\$70
	10-24	43	49	54	48	57	63	48	56	63
	25-50	40	45	50	43	51	57	44	51	58
Employee & Spouse	Group Size 2-9	94	107	117	104	122	137	105	123	139
	10-24	84	96	105	95	111	125	95	111	125
	25-50	77	88	96	86	100	113	87	102	114
Employee & Child	Group Size 2-9	92	104	114	92	109	121	100	119	132
	10-24	82	93	103	84	99	110	90	108	119
	25-50	75	85	94	76	90	99	83	99	109
Employee & Children	Group Size 2-9	137	154	172	137	161	180	151	178	200
	10-24	123	138	154	125	147	164	136	160	180
	25-50	113	126	141	113	132	148	125	147	165
Employee & Family	Group Size 2-9	165	187	208	167	197	219	183	217	242
	10-24	148	168	187	152	179	199	165	195	218
	25-50	136	153	171	137	162	180	151	179	200

		Dental Blue Gold Plus 100 - 80			Dental Blue Platinum 100 - 80			Dental Blue Platinum Plus 100 - 80		
Areas:		1, 2, 7	3, 6, 8	4, 5, 9	1, 2, 7	3, 6, 8	4, 5, 9	1, 2, 7	3, 6, 8	4, 5, 9
Employee Only	Group Size 2-9	\$55	\$65	\$72	\$74	\$80	\$88	\$87	\$97	\$106
	10-24	50	59	65	66	71	78	77	86	94
	25-50	45	53	59	63	68	75	73	81	89
Employee & Spouse	Group Size 2-9	108	127	143	146	158	176	174	193	211
	10-24	98	116	130	130	140	157	154	171	187
	25-50	89	104	117	124	134	150	146	162	177
Employee & Child	Group Size 2-9	104	123	136	140	155	170	166	185	202
	10-24	95	112	124	124	138	151	147	164	179
	25-50	85	101	112	119	132	144	139	155	169
Employee & Children	Group Size 2-9	155	182	204	208	231	253	250	277	302
	10-24	141	166	186	185	205	225	222	245	268
	25-50	127	150	168	177	197	215	210	232	253
Employee & Family	Group Size 2-9	188	222	247	255	282	308	302	334	367
	10-24	172	203	225	226	250	273	268	296	325
	25-50	155	183	203	217	240	262	253	280	308

# Dental PPO and Dental HMO Plan Rates Monthly rates effective January 1, 2012

Areas:	Basic Option Dental PPO			Standard Option Dental PPO			High Option Dental PPO		
	1, 2, 7	3, 6, 8	4, 5, 9	1, 2, 7	3, 6, 8	4, 5, 9	1, 2, 7	3, 6, 8	4, 5, 9
Employee Only	\$38	\$40	\$45	\$51	\$59	\$64	\$75	\$80	\$84
Employee & Spouse	71	80	86	104	113	124	146	157	171
Employee & Child	60	65	68	87	99	108	143	153	162
Employee & Children	85	94	101	137	146	162	211	228	244
Employee & Family	119	130	143	169	190	207	257	275	296

Areas:	Dental Net		
	1, 2, 3, 7	4, 5, 6, 9	8
Employee Only	\$25	\$20	\$23
Employee & Spouse	38	29	35
Employee & Child	38	29	35
Employee & Children	58	44	53
Employee & Family	58	44	53

Areas:	Voluntary Dental PPO
All Areas	
Employee Only	\$40
Employee & Spouse	82
Employee & Child	64
Employee & Children	89
Employee & Family	126

Areas:	Voluntary Dental Saver SelectDHMO Plan
All Areas	
Single	\$13
Two-party	24
Three-party*	35

\*Employee, spouse and child(ren), or employee and child(ren).

# Blue View Vision Plan Rates

<b>Blue View</b>	<b>Employee Only</b>	<b>Employee &amp; Spouse</b>	<b>Employee &amp; Child(ren)</b>	<b>Employee &amp; Family</b>
<b>Rate</b>	\$7	\$12	\$13	\$19

<b>Blue View Plus</b>	<b>Employee Only</b>	<b>Employee &amp; Spouse</b>	<b>Employee &amp; Child(ren)</b>	<b>Employee &amp; Family</b>
<b>Rate</b>	\$14	\$23	\$25	\$37

<b>Voluntary Vision Rates*</b>	<b>Blue View</b>	<b>Blue View Plus</b>
<b>Rate Structure - 4 Tier</b>	<b>Monthly Premium</b>	<b>Monthly Premium</b>
Employee Only	\$9	\$17
Employee + Spouse	15	29
Employee + Child(ren)	16	31
Employee + Family	24	47

\*Voluntary vision rates effective October 1, 2011.



# Basic Term Life and AD&D Plan Rates

For groups with 11-50 eligible employees, the employee basic term life rate is based on the group's composite rate. The composite rate is determined by the characteristics of the group and is calculated by rating systems.

LIFE AND AD&D

Basic Term Life and AD&D rates per \$1,000 of coverage for groups of 2-10 enrolling employees:	
Age	\$25,000 or more
Under 30	\$0.16
30-39	\$0.20
40-44	\$0.33
45-49	\$0.46
50-54	\$0.70
55-59	\$1.22
60-64	\$1.82
65-69	\$3.02
70-74	\$4.29
75-79	\$6.75
80-84	\$9.70
85-89	\$14.51

Supplemental Life Rates per:			
Age	\$25,000	\$50,000	\$100,000
Under 30	\$5.00	\$10.00	\$20.00
30-39	\$6.25	\$12.50	\$25.00
40-44	\$10.25	\$20.50	\$41.00
45-49	\$14.50	\$29.00	\$58.00
50-54	\$21.50	\$43.00	\$86.00
55-59	\$38.26	\$76.50	\$153.00
60-64	\$56.75	\$113.50	\$227.00
65-69	\$94.26	\$188.50	\$377.00

For groups with 2-10 employees, the maximum amount of supplemental life employees can only elect is \$50,000.

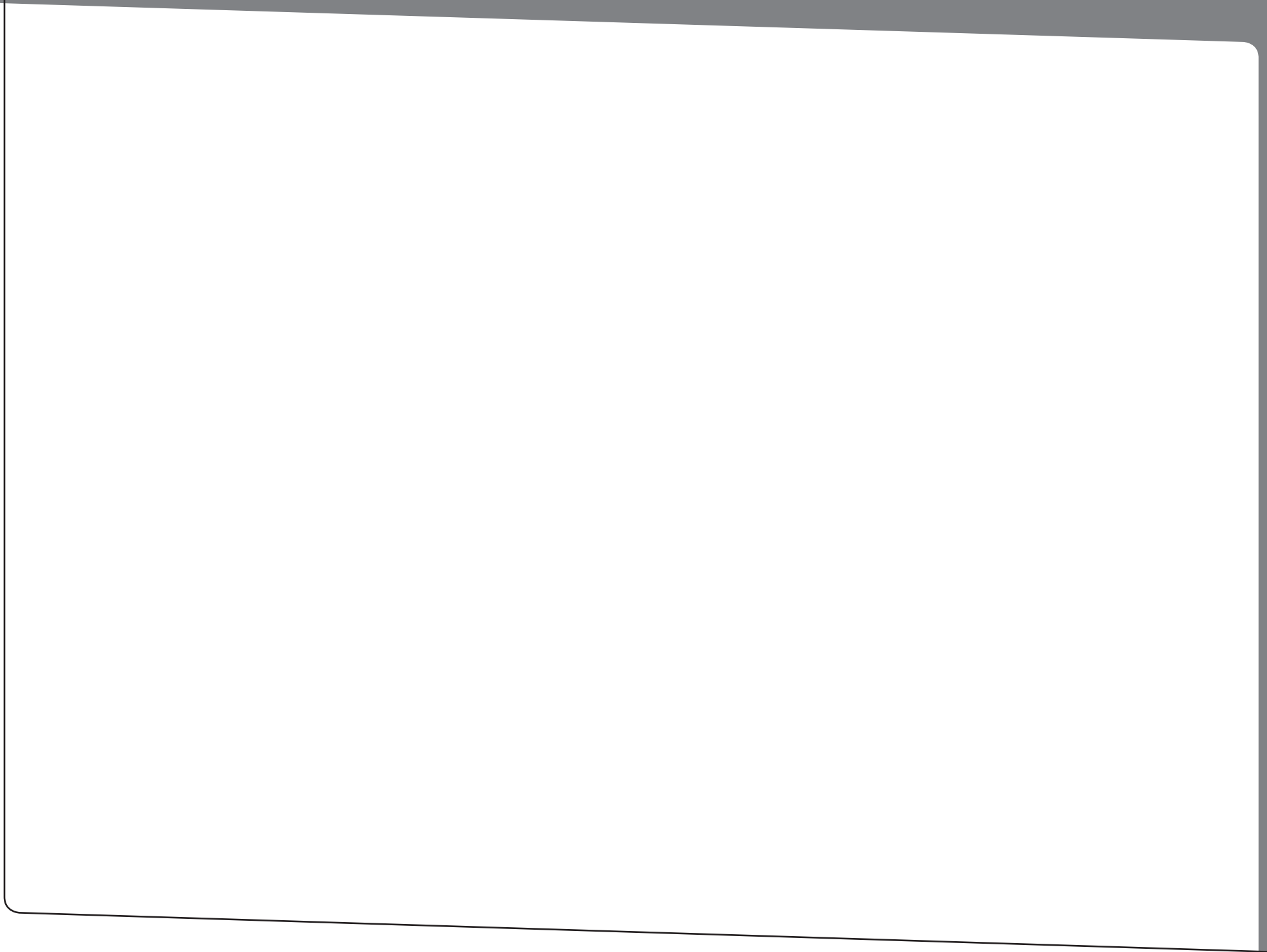
## Rates for Optional Dependent Life coverage

\$5,000 spouse, \$5,000 children 6 months to 26 years; \$500 children under 6 months	\$2 per family
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This option only available if employee life benefits is \$20,000 or more:

\$10,000 spouse, \$10,000 children 6 months to 26 years; \$1,000 children under 6 months	\$4 per family
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**Please Note:** Life and AD&D benefits are reduced by 35% at age 65 and further reduced by 50% of the original benefit amount at age 70. Benefits terminate upon retirement. Availability of group life Insurance is subject to underwriting.









Health · Dental · Vision · Life

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