



2-50 Small Group BeneFits Monthly Rates

Updated Rates - Effective October 1, 2011

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

Offered by Anthem Blue Cross:

Health Plan

Select \$25 HMO
Lumenos HSA 2500 (80/50)

Dental Plan

Dental Net DHMO

Offered by Anthem Blue Cross Life and Health Insurance Company:

Health Plans

Hospital BeneFits
Hospital BeneFits Plus
Hospital BeneFits Preferred
PPO \$35 Copay GenRx

Dental Plans

Dental Blue® BeneFits PPO

Vision Plans

Blue ViewSM
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.

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.

AREA 1:	Amador (except 95629,95646), Calaveras , Mono, Monterey
AREA 2:	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 3:	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 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, Los Angeles (91798 only), Riverside (except 92883), San Bernardino (except 93558), San Diego
AREA 7:	Fresno (except 93628), Kern, Kings, Madera, Mariposa, Merced, San Bernardino (93558 only), 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)

Select HMO health rating area definition

The following indicate rating area by county and ZIP code for the Select \$25 HMO health plan. 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 applicable
AREA 2:	Nevada (except 95724,95728, 96111, 96160-96162), Placer (except 95715, 96140, 96141, 96143, 96145, 96146, 96148), Sacramento (94243,94253, 95857,95873 only), San Joaquin , San Mateo, Stanislaus (except 95329)
AREA 3:	Alameda, Contra Costa, Sacramento (except 94243,94253, 95857,95873), San Francisco, Santa Clara, Santa Cruz, Sonoma (95408 only), Yolo (except 95645)
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 91901, 91905, 91906, 91916, 91917, 91934, 91935, 91948, 91962, 91963, 91980, 92004, 92036, 92059, 92061, 92066, 92086)
AREA 7:	Fresno (except 93628), Kern (except 93555, 93556), Kings (93231 only), Merced, Tulare
AREA 8:	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 Select 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.

Take the hassle out of RAF conversions and use our convenient on-line RAF engine:

Health/dental rates online – All RAFs

- 1) Login to the small group agent website at anthem.com/ca.
- 2) From the small group tab pull down menu, click on "View Materials, Rates, Forms and Tools."
- 3) Select "Rates" from the main menu or visit anthem.com/easyrenew.

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 x 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 x 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 nearest whole dollar amount (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 x 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 x 1.05 = \$216.30. The 1.05 RAF rate would be \$216.00.

* For accuracy on dental and vision rates associated with the Hospital Benefits Preferred plan, please use the BeneFits RAF engine available on the small group agent website at anthem.com/ca or anthem.com/easyrenew

BeneFits 1.00 RAF Health Rates

AREA 1

		Hospital PPO Coverage:			Consumer Driven	Comprehensive Coverage:	
		Hospital BeneFits	Hospital BeneFits Plus	Hospital BeneFits Preferred	Lumenos HSA 2500 (80/50)	PPO \$35 Copay GenRx	Select \$25 HMO
EMPLOYEE ONLY	AGE - under 30	\$140	\$168	\$197	\$319	\$339	n/a
	30 - 39	172	204	240	428	420	n/a
	40 - 49	238	280	318	622	567	n/a
	50 - 54	315	373	416	746	765	n/a
	55 - 59	384	456	510	950	940	n/a
	60 - 64	501	596	658	1,191	1,203	n/a
	65+ Primary	579	691	763	1,547	1,411	n/a
	65+ Secondary	238	280	318	879	592	n/a
EMPLOYEE & SPOUSE	AGE - under 30	414	493	554	674	1,008	n/a
	30 - 39	480	569	640	914	1,176	n/a
	40 - 49	465	553	625	1,269	1,156	n/a
	50 - 54	647	770	858	1,545	1,592	n/a
	55 - 59	797	947	1,051	1,964	1,974	n/a
	60 - 64	957	1,138	1,259	2,398	2,366	n/a
	65+ Primary	1,347	1,603	1,760	2,952	3,331	n/a
	65+ Secondary	627	742	830	1,758	1,560	n/a
EMPLOYEE & CHILD(REN)	AGE - under 30	330	390	455	624	783	n/a
	30 - 39	352	416	484	779	846	n/a
	40 - 49	366	434	502	1,014	878	n/a
	50 - 54	434	516	591	1,115	1,046	n/a
	55 - 59	514	606	693	1,276	1,242	n/a
	60 - 64	631	747	844	1,484	1,533	n/a
	65+ Primary	705	837	940	1,867	1,704	n/a
	65+ Secondary	278	332	391	1,279	678	n/a
FAMILY	AGE - under 30	481	570	667	946	1,174	n/a
	30 - 39	543	647	753	1,237	1,308	n/a
	40 - 49	607	721	831	1,591	1,487	n/a
	50 - 54	729	865	991	1,664	1,765	n/a
	55 - 59	890	1,056	1,199	2,112	2,143	n/a
	60 - 64	1,110	1,320	1,485	2,491	2,696	n/a
	65+ Primary	1,417	1,683	1,877	3,156	3,463	n/a
	65+ Secondary	659	781	898	1,858	1,632	n/a

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

AREA 1 - Select HMO Medical Rating Area Definitions - Not applicable

65+Primary: Anthem Blue Cross is primary to Medicare; 65+ Secondary: Anthem Blue Cross is secondary to Medicare

AREA 2

		Hospital PPO Coverage:			Consumer Driven	Comprehensive Coverage:	
		Hospital BeneFits	Hospital BeneFits Plus	Hospital BeneFits Preferred	Lumenos HSA 2500 (80/50)	PPO \$35 Copay GenRx	Select \$25 HMO
EMPLOYEE ONLY	AGE - under 30	\$128	\$156	\$183	\$254	\$267	\$409
	30 - 39	163	196	225	342	335	521
	40 - 49	223	262	300	495	458	556
	50 - 54	296	351	397	592	610	711
	55 - 59	361	429	482	753	744	903
	60 - 64	469	556	618	946	965	1,177
	65+ Primary	597	708	783	1,227	1,233	1,421
	65+ Secondary	242	289	329	701	513	1,002
EMPLOYEE & SPOUSE	AGE - under 30	383	456	518	534	796	1,021
	30 - 39	445	528	598	727	937	1,203
	40 - 49	452	534	603	1,007	934	1,300
	50 - 54	609	728	809	1,226	1,262	1,363
	55 - 59	747	890	989	1,562	1,568	1,933
	60 - 64	919	1,092	1,208	1,904	1,927	2,062
	65+ Primary	1,378	1,639	1,800	2,343	2,887	2,876
	65+ Secondary	639	765	852	1,397	1,357	2,384
EMPLOYEE & CHILD(REN)	AGE - under 30	293	346	413	497	620	997
	30 - 39	325	388	454	620	673	1,104
	40 - 49	333	399	464	806	706	1,087
	50 - 54	395	467	539	885	827	1,094
	55 - 59	469	556	639	1,011	986	1,284
	60 - 64	584	693	786	1,178	1,220	1,582
	65+ Primary	718	852	959	1,479	1,506	1,821
	65+ Secondary	280	331	393	1,016	599	1,233
FAMILY	AGE - under 30	441	523	622	752	927	1,403
	30 - 39	501	595	700	983	1,041	1,630
	40 - 49	570	677	789	1,264	1,183	1,717
	50 - 54	665	794	910	1,321	1,409	1,963
	55 - 59	811	964	1,098	1,678	1,706	2,174
	60 - 64	1,025	1,217	1,370	1,977	2,157	2,604
	65+ Primary	1,444	1,715	1,913	2,505	3,025	3,418
	65+ Secondary	671	799	920	1,478	1,415	2,746

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 - Select HMO Medical Rating Area Definitions - Nevada (except 95724,95728,96111,96160-96162), Placer (except 95715,96140,96141,96143,96145,96146,96148), Sacramento (94243,94253,95857,95873 only), San Joaquin, San Mateo, Stanislaus (except 95329)

Effective October 1, 2011

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AREA 3

		Hospital PPO Coverage:			Consumer Driven	Comprehensive Coverage:	
		Hospital Benefits	Hospital Benefits Plus	Hospital Benefits Preferred	Lumenos HSA 2500 (80/50)	PPO \$35 Copay GenRx	Select \$25 HMO
EMPLOYEE ONLY	AGE - under 30	\$120	\$142	\$174	\$207	\$234	\$366
	30 - 39	144	172	205	278	286	457
	40 - 49	199	239	274	402	389	501
	50 - 54	267	319	361	482	514	626
	55 - 59	325	388	436	617	636	796
	60 - 64	430	509	567	770	830	1,065
	65+ Primary	528	627	696	1,005	1,027	1,375
	65+ Secondary	234	279	316	569	460	997
	EMPLOYEE & SPOUSE	AGE - under 30	351	417	478	437	678
30 - 39		403	479	545	592	797	1,113
40 - 49		409	486	552	824	795	1,220
50 - 54		551	654	734	1,004	1,080	1,259
55 - 59		674	801	895	1,272	1,334	1,782
60 - 64		844	1,005	1,113	1,555	1,654	1,948
65+ Primary		1,227	1,454	1,606	1,914	2,403	2,808
65+ Secondary		609	726	811	1,139	1,220	2,391
EMPLOYEE & CHILD(REN)		AGE - under 30	274	325	389	405	522
	30 - 39	291	343	410	506	572	988
	40 - 49	306	363	430	658	603	983
	50 - 54	359	430	502	726	710	975
	55 - 59	431	511	591	829	840	1,131
	60 - 64	536	638	730	963	1,054	1,417
	65+ Primary	643	768	867	1,209	1,252	1,770
	65+ Secondary	276	327	392	831	536	1,230
	FAMILY	AGE - under 30	402	477	580	615	786
30 - 39		454	539	647	802	882	1,446
40 - 49		517	613	728	1,031	1,013	1,536
50 - 54		608	721	841	1,077	1,197	1,748
55 - 59		739	876	1,012	1,367	1,445	1,931
60 - 64		945	1,121	1,275	1,611	1,853	2,342
65+ Primary		1,289	1,529	1,719	2,045	2,529	3,330
65+ Secondary		634	758	886	1,206	1,273	2,762

Effective October 1, 2011

AREA 4

		Hospital PPO Coverage:			Consumer Driven	Comprehensive Coverage:	
		Hospital Benefits	Hospital Benefits Plus	Hospital Benefits Preferred	Lumenos HSA 2500 (80/50)	PPO \$35 Copay GenRx	Select \$25 HMO
EMPLOYEE ONLY	AGE - under 30	\$120	\$144	\$171	\$234	\$247	\$239
	30 - 39	152	183	215	314	310	294
	40 - 49	208	246	283	453	417	329
	50 - 54	282	337	385	544	566	412
	55 - 59	338	404	456	695	700	521
	60 - 64	445	530	592	870	911	702
	65+ Primary	592	701	779	1,129	1,204	930
	65+ Secondary	264	312	357	644	530	687
	EMPLOYEE & SPOUSE	AGE - under 30	364	432	499	493	747
30 - 39		427	503	578	668	879	728
40 - 49		431	509	582	928	879	803
50 - 54		579	689	776	1,127	1,197	833
55 - 59		714	846	951	1,433	1,476	1,172
60 - 64		891	1,060	1,181	1,750	1,837	1,284
65+ Primary		1,372	1,632	1,801	2,155	2,824	1,893
65+ Secondary		692	821	921	1,282	1,429	1,629
EMPLOYEE & CHILD(REN)		AGE - under 30	283	336	407	455	578
	30 - 39	306	362	437	569	626	649
	40 - 49	317	373	451	740	662	648
	50 - 54	381	452	528	815	779	645
	55 - 59	443	526	616	931	924	745
	60 - 64	562	670	768	1,083	1,167	937
	65+ Primary	716	852	967	1,361	1,471	1,200
	65+ Secondary	302	360	435	935	626	840
	FAMILY	AGE - under 30	418	498	608	690	863
30 - 39		470	557	673	905	977	951
40 - 49		540	641	760	1,160	1,123	1,021
50 - 54		641	761	893	1,215	1,323	1,145
55 - 59		774	921	1,064	1,540	1,599	1,264
60 - 64		994	1,178	1,345	1,816	2,054	1,539
65+ Primary		1,438	1,711	1,922	2,303	2,961	2,243
65+ Secondary		733	870	1,008	1,357	1,498	1,886

Effective October 1, 2011

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 - Select HMO Medical Rating Area Definitions - Alameda, Contra Costa, Sacramento (except 94243,94253, 95857,95873), San Francisco, Santa Clara, Santa Cruz, Sonoma (95408 only), Yolo (except 95645)

65+Primary: Anthem Blue Cross is primary to Medicare; 65+ Secondary: Anthem Blue Cross is secondary to Medicare

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

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

BeneFits 1.00 RAF Health Rates

AREA 5		Hospital PPO Coverage:			Consumer Driven	Comprehensive Coverage:	
		Hospital Benefits	Hospital BeneFits Plus	Hospital BeneFits Preferred	Lumenos HSA 2500 (80/50)	PPO \$35 Copay GenRx	Select \$25 HMO
EMPLOYEE ONLY	AGE - under 30	\$135	\$163	\$192	\$257	\$277	\$241
	30 - 39	170	204	237	345	349	300
	40 - 49	228	273	314	498	463	328
	50 - 54	306	362	411	599	627	411
	55 - 59	380	453	510	764	771	520
	60 - 64	500	594	661	957	1,016	698
	65+ Primary	606	722	798	1,241	1,222	883
	65+ Secondary	273	324	368	709	541	663
EMPLOYEE & SPOUSE	AGE - under 30	402	477	550	542	826	616
	30 - 39	479	570	648	735	975	725
	40 - 49	479	570	648	1,020	975	802
	50 - 54	655	775	878	1,240	1,327	826
	55 - 59	796	945	1,055	1,575	1,637	1,160
	60 - 64	998	1,184	1,316	1,926	2,033	1,279
	65+ Primary	1,406	1,670	1,841	2,371	2,869	1,793
	65+ Secondary	711	846	948	1,413	1,453	1,559
EMPLOYEE & CHILD(REN)	AGE - under 30	315	374	448	502	641	580
	30 - 39	344	406	486	625	690	640
	40 - 49	357	427	504	815	731	644
	50 - 54	430	513	594	896	872	634
	55 - 59	500	593	686	1,024	1,027	737
	60 - 64	633	753	858	1,189	1,293	936
	65+ Primary	734	871	988	1,499	1,499	1,138
	65+ Secondary	306	362	435	1,027	626	810
FAMILY	AGE - under 30	472	557	673	761	959	814
	30 - 39	534	634	754	997	1,082	945
	40 - 49	613	725	851	1,276	1,244	1,017
	50 - 54	715	850	989	1,337	1,473	1,144
	55 - 59	870	1,034	1,187	1,695	1,780	1,265
	60 - 64	1,121	1,331	1,509	1,997	2,284	1,537
	65+ Primary	1,476	1,753	1,968	2,536	3,012	2,131
	65+ Secondary	744	881	1,024	1,492	1,526	1,806

Effective October 1, 2011

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 - Select HMO Medical Rating Area Definitions - 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		Hospital PPO Coverage:			Consumer Driven	Comprehensive Coverage:	
		Hospital BeneFits	Hospital BeneFits Plus	Hospital BeneFits Preferred	Lumenos HSA 2500 (80/50)	PPO \$35 Copay GenRx	Select \$25 HMO
EMPLOYEE ONLY	AGE - under 30	\$122	\$146	\$174	\$212	\$225	\$283
	30 - 39	149	180	210	282	278	360
	40 - 49	212	251	287	410	378	389
	50 - 54	281	335	378	493	506	500
	55 - 59	345	411	463	625	629	624
	60 - 64	457	545	605	782	821	838
	65+ Primary	608	719	796	1,019	1,086	1,041
	65+ Secondary	262	310	355	579	477	775
EMPLOYEE & SPOUSE	AGE - under 30	373	442	509	441	664	732
	30 - 39	438	519	588	601	785	881
	40 - 49	431	510	583	836	790	952
	50 - 54	597	706	796	1,018	1,076	990
	55 - 59	734	874	972	1,290	1,335	1,394
	60 - 64	909	1,083	1,201	1,578	1,655	1,525
	65+ Primary	1,398	1,662	1,829	1,944	2,536	2,109
	65+ Secondary	678	802	902	1,156	1,283	1,822
EMPLOYEE & CHILD(REN)	AGE - under 30	289	345	410	412	527	701
	30 - 39	318	378	448	515	565	773
	40 - 49	322	381	453	666	592	771
	50 - 54	388	459	535	734	701	769
	55 - 59	458	541	626	838	831	890
	60 - 64	573	682	780	977	1,045	1,116
	65+ Primary	731	868	979	1,225	1,323	1,338
	65+ Secondary	300	356	425	843	562	936
FAMILY	AGE - under 30	429	510	616	624	775	969
	30 - 39	484	577	686	815	873	1,139
	40 - 49	561	666	783	1,048	1,011	1,227
	50 - 54	664	787	910	1,097	1,195	1,367
	55 - 59	797	944	1,087	1,389	1,435	1,520
	60 - 64	1,013	1,202	1,367	1,637	1,838	1,839
	65+ Primary	1,475	1,746	1,959	2,077	2,662	2,509
	65+ Secondary	714	848	979	1,225	1,340	2,099

Effective October 1, 2011

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

AREA 6 - Select HMO Medical Rating Area Definitions - Imperial (except 92222, 92266, 92283), Los Angeles (91798 only), Riverside (except 92225, 92226, 92239, 92883), San Bernardino* (except - see note *), San Diego (except 91901, 91905, 91906, 91916, 91917, 91934, 91935, 91948, 91962, 91963, 91980, 92004, 92036, 92059, 92061, 92066, 92086)

BeneFits 1.00 RAF Health Rates

AREA 7

		Hospital PPO Coverage:			Consumer Driven	Comprehensive Coverage:	
		Hospital BeneFits	Hospital BeneFits Plus	Hospital BeneFits Preferred	Lumenos HSA 2500 (80/50)	PPO \$35 Copay GenRx	Select \$25 HMO
EMPLOYEE ONLY	AGE - under 30	\$104	\$126	\$151	\$195	\$208	\$350
	30 - 39	132	157	187	260	254	445
	40 - 49	179	211	244	379	352	476
	50 - 54	237	281	320	452	465	607
	55 - 59	289	344	387	578	576	768
	60 - 64	366	438	488	720	738	1,017
	65+ Primary	475	564	626	941	946	1,216
	65+ Secondary	193	228	265	535	397	867
EMPLOYEE & SPOUSE	AGE - under 30	307	362	419	408	610	877
	30 - 39	354	420	479	556	718	1,035
	40 - 49	356	422	482	769	711	1,120
	50 - 54	479	571	644	939	971	1,165
	55 - 59	595	708	794	1,193	1,202	1,654
	60 - 64	732	869	968	1,453	1,478	1,770
	65+ Primary	1,099	1,305	1,440	1,793	2,213	2,474
	65+ Secondary	509	604	680	1,067	1,040	2,047
EMPLOYEE & CHILD(REN)	AGE - under 30	237	281	339	381	476	861
	30 - 39	258	307	367	472	511	946
	40 - 49	268	317	379	618	539	933
	50 - 54	310	368	436	678	639	943
	55 - 59	374	443	513	776	757	1,107
	60 - 64	465	553	636	899	935	1,361
	65+ Primary	570	678	771	1,131	1,152	1,573
	65+ Secondary	218	261	317	776	459	1,065
FAMILY	AGE - under 30	350	414	507	574	711	1,207
	30 - 39	399	471	566	753	796	1,406
	40 - 49	453	536	636	967	904	1,479
	50 - 54	532	631	740	1,011	1,081	1,687
	55 - 59	647	764	885	1,280	1,305	1,870
	60 - 64	809	967	1,101	1,510	1,652	2,239
	65+ Primary	1,147	1,362	1,535	1,916	2,320	2,940
	65+ Secondary	541	637	748	1,127	1,089	2,361

Effective October 1, 2011

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

AREA 7 - Select HMO Medical Rating Area Definitions - Fresno (except 93628), Kern (except 93555, 93556), Kings (93231 only), Merced, Tulare

65+Primary: Anthem Blue Cross is primary to Medicare; 65+ Secondary: Anthem Blue Cross is secondary to Medicare

AREA 8

		Hospital PPO Coverage:			Consumer Driven	Comprehensive Coverage:	
		Hospital BeneFits	Hospital BeneFits Plus	Hospital BeneFits Preferred	Lumenos HSA 2500 (80/50)	PPO \$35 Copay GenRx	Select \$25 HMO
EMPLOYEE ONLY	AGE - under 30	\$111	\$134	\$162	\$203	\$220	\$312
	30 - 39	142	169	201	272	278	398
	40 - 49	191	226	264	391	373	430
	50 - 54	253	303	343	472	498	551
	55 - 59	309	370	416	602	611	687
	60 - 64	394	470	523	752	789	920
	65+ Primary	513	606	673	981	1,011	1,146
	65+ Secondary	207	245	284	557	420	850
EMPLOYEE & SPOUSE	AGE - under 30	329	389	452	426	657	807
	30 - 39	382	454	515	581	773	969
	40 - 49	384	455	520	806	764	1,051
	50 - 54	518	616	691	979	1,041	1,096
	55 - 59	641	760	853	1,244	1,289	1,537
	60 - 64	788	934	1,040	1,519	1,582	1,687
	65+ Primary	1,182	1,403	1,547	1,869	2,369	2,326
	65+ Secondary	547	650	731	1,114	1,115	2,007
EMPLOYEE & CHILD(REN)	AGE - under 30	253	302	365	396	511	771
	30 - 39	277	330	395	495	547	852
	40 - 49	288	339	409	644	576	845
	50 - 54	335	398	469	707	679	843
	55 - 59	402	477	552	807	812	983
	60 - 64	499	596	683	937	1,000	1,230
	65+ Primary	612	730	829	1,181	1,233	1,470
	65+ Secondary	236	280	341	810	491	1,031
FAMILY	AGE - under 30	376	445	547	600	759	1,067
	30 - 39	428	507	610	782	856	1,254
	40 - 49	488	577	685	1,009	974	1,345
	50 - 54	573	679	799	1,054	1,155	1,506
	55 - 59	695	823	956	1,338	1,392	1,674
	60 - 64	872	1,038	1,184	1,576	1,766	2,023
	65+ Primary	1,233	1,466	1,652	1,997	2,484	2,763
	65+ Secondary	579	686	805	1,179	1,164	2,310

Effective October 1, 2011

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

AREA 8 - Select HMO Medical Rating Area Definitions - Ventura (except ZIP codes beginning with 913)

Benefits 1.00 RAF Health Rates

AREA 9		Hospital PPO Coverage:			Consumer Driven	Comprehensive Coverage:	
		Hospital Benefits	Hospital Benefits Plus	Hospital Benefits Preferred	Lumenos HSA 2500 (80/50)	PPO \$35 Copay GenRx	Select \$25 HMO
EMPLOYEE ONLY	AGE - under 30	\$104	\$124	\$153	\$199	\$212	\$231
	30 - 39	133	161	190	265	264	283
	40 - 49	181	213	248	382	353	312
	50 - 54	240	281	326	463	475	394
	55 - 59	295	353	399	587	589	492
	60 - 64	386	461	515	737	775	666
	65+ Primary	468	556	620	957	930	840
	65+ Secondary	213	254	294	546	415	627
EMPLOYEE & SPOUSE	AGE - under 30	312	372	436	416	626	585
	30 - 39	373	442	510	566	738	691
	40 - 49	373	442	510	786	740	759
	50 - 54	504	601	681	956	1,011	785
	55 - 59	619	733	825	1,215	1,247	1,109
	60 - 64	772	916	1,026	1,483	1,548	1,218
	65+ Primary	1,088	1,290	1,432	1,823	2,182	1,706
	65+ Secondary	562	665	754	1,089	1,117	1,486
EMPLOYEE & CHILD(REN)	AGE - under 30	244	289	357	386	496	551
	30 - 39	264	313	384	481	526	609
	40 - 49	278	330	402	628	554	611
	50 - 54	331	395	470	691	660	603
	55 - 59	389	461	543	788	780	707
	60 - 64	491	584	675	918	982	891
	65+ Primary	570	678	777	1,153	1,139	1,084
	65+ Secondary	237	280	349	790	486	770
FAMILY	AGE - under 30	367	437	539	585	727	773
	30 - 39	413	490	600	766	822	896
	40 - 49	472	561	676	984	945	963
	50 - 54	556	660	785	1,030	1,121	1,089
	55 - 59	674	798	931	1,305	1,353	1,200
	60 - 64	870	1,033	1,184	1,540	1,736	1,465
	65+ Primary	1,145	1,360	1,541	1,953	2,287	2,024
	65+ Secondary	588	695	823	1,150	1,173	1,719

Effective October 1, 2011

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

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

65+Primary: Anthem Blue Cross is primary to Medicare; 65+ Secondary: Anthem Blue Cross is secondary to Medicare

Dental Plan Rates Effective April 1, 2011

Dental Blue® Benefits	Dental PPO coverage from Anthem Blue Cross Life and Health Insurance Company		
	Areas 1, 2 & 7	Areas 3, 6 & 8	Areas 4, 5 & 9
Employee only	\$15	\$17	\$20
Employee & Spouse	28	32	38
Employee & Child	38	43	51
Employee & Children	38	43	51
Employee & Family	59	69	79

Dental Net DHMO	DHMO coverage from Anthem Blue Cross		
	Areas 1, 2, 3 & 7	Areas 4, 5, 6 & 9	Area 8
Employee only	\$24	\$19	\$22
Employee & Spouse	37	28	34
Employee & Child	37	28	34
Employee & Children	56	43	51
Employee & Family	56	43	51

* Rates apply to groups offering at least \$25,000 of basic life coverage to all enrolled employees. Monthly rates for optional dependent life insurance coverage \$2 or \$4 per family. Life and AD&D benefits reduce by 35% at age 65 and further reduce to 50% at age 70. Benefits terminate upon retirement. Availability of group life insurance is subject to underwriting.

Underwritten by Anthem Blue Cross Life and Health Insurance Company.

Blue View Vision Plan Rates

Blue View	EMPLOYEE	EMPLOYEE AND SPOUSE	EMPLOYEE AND CHILD(REN)	FAMILY
RATE	\$7	\$12	\$13	\$19

Blue View Plus	EMPLOYEE	EMPLOYEE AND SPOUSE	EMPLOYEE AND CHILD(REN)	FAMILY
RATE	\$14	\$23	\$25	\$37

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

*Voluntary vision rates effective October 1, 2011

Life and Accidental Death & Dismemberment (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.

Anthem Blue Cross Life and Health Insurance Company Basic Term Life and AD&D Rate per \$1,000 of Coverage		
Age	Less than \$25,000	\$25,000 or More*
Under 30	\$0.20	\$0.16
30-39	0.25	0.20
40-44	0.41	0.33
45-49	0.58	0.46
50-54	0.86	0.70
55-59	1.53	1.22
60-64	2.27	1.82
65-69	3.77	3.02
70-74	5.36	4.29
75-79	8.44	6.75
80-84	12.12	9.70
85-89	18.14	14.51

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

This option only available if employee life benefit 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

Supplemental Life Rates per:				
Age	\$15,000	\$25,000	\$50,000	\$100,000
Under 30	\$3.00	\$5.00	\$10.00	\$20.00
30-39	\$3.75	\$6.25	\$12.50	\$25.00
40-44	\$6.15	\$10.25	\$20.50	\$41.00
45-49	\$8.70	\$14.50	\$29.00	\$58.00
60-54	\$12.90	\$21.50	\$43.00	\$86.00
55-59	\$22.95	\$38.25	\$76.50	\$153.00
60-64	\$34.05	\$56.75	\$113.50	\$227.00
65-69	\$56.55	\$94.25	\$188.50	\$377.00

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

* Rates apply to groups offering at least \$25,000 of basic term life coverage to all enrolled employees. Life and AD&D benefits 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. Underwritten by Anthem Blue Cross Life and Health Insurance Company.



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