

**12-1-2021 Burr Plumbing Medical Rates**

<b>Age on 2021 effective date</b>	<b>Platinum 90 PPO 0/15 + Child Dental</b>	<b>Platinum 90 HMO 0/20* + Child Dental</b>	<b>Gold 80 HMO 250/35* + Child Dental</b>
0-14†	\$654.77	\$357.49	\$322.71
15†	\$712.97	\$388.03	\$350.15
16†	\$735.22	\$399.70	\$360.64
17†	\$757.47	\$411.38	\$371.14
18†	\$781.44	\$423.95	\$382.44
19	\$805.41	\$422.53	\$379.75
20	\$830.23	\$435.55	\$391.45
21	\$855.90	\$449.02	\$403.56
22	\$855.90	\$449.02	\$403.56
23	\$855.90	\$449.02	\$403.56
24	\$855.90	\$449.02	\$403.56
25	\$859.33	\$450.82	\$405.17
26	\$876.45	\$459.80	\$413.24
27	\$896.99	\$470.58	\$422.93
28	\$930.37	\$488.09	\$438.67
29	\$957.76	\$502.46	\$451.58
30	\$971.45	\$509.64	\$458.04
31	\$991.99	\$520.42	\$467.72
32	\$1,012.53	\$531.20	\$477.41
33	\$1,025.37	\$537.93	\$483.46
34	\$1,039.07	\$545.12	\$489.92
35	\$1,045.91	\$548.71	\$493.15
36	\$1,052.76	\$552.30	\$496.37
37	\$1,059.61	\$555.89	\$499.60
38	\$1,066.46	\$559.48	\$502.83
39	\$1,080.15	\$566.67	\$509.29
40	\$1,093.84	\$573.85	\$515.75
41	\$1,114.39	\$584.63	\$525.43
42	\$1,134.07	\$594.96	\$534.71
43	\$1,161.46	\$609.33	\$547.63
44	\$1,195.70	\$627.29	\$563.77
45	\$1,235.92	\$648.39	\$582.74
46	\$1,283.86	\$673.54	\$605.33
47	\$1,337.78	\$701.83	\$630.76
48	\$1,399.40	\$734.16	\$659.81
49	\$1,460.17	\$766.04	\$688.47
50	\$1,528.64	\$801.96	\$720.75
51	\$1,596.26	\$837.43	\$752.63
52	\$1,670.72	\$876.50	\$787.74
53	\$1,746.04	\$916.01	\$823.26
54	\$1,827.35	\$958.67	\$861.59
55	\$1,908.66	\$1,001.33	\$899.93
56	\$1,996.82	\$1,047.57	\$941.50
57	\$2,085.84	\$1,094.27	\$983.47
58	\$2,180.84	\$1,144.11	\$1,028.26
59	\$2,227.92	\$1,168.81	\$1,050.46
60	\$2,322.92	\$1,218.65	\$1,095.25
61	\$2,405.09	\$1,261.76	\$1,133.99
62	\$2,459.01	\$1,290.05	\$1,159.42
63	\$2,526.63	\$1,325.52	\$1,191.30
64+	\$2,567.70	\$1,347.06	\$1,210.68



BURR PLUMBING AND PUMPING, INC  
 Group ID: 92136  
 Renewal Effective Date: December 01, 2021  
 Medical Rate Area: 7  
 Dental Rate Area: A

**Your Grandfathered (Nonmetal) Medical Plan Rates**

\$30/\$1,500 Deductible HMO Plan				
Age	EE only	EE+S	EE+C	EE+S+C
<30	\$319.00	\$873.00	\$722.00	\$1,052.00
30-39	\$376.00	\$1,005.00	\$759.00	\$1,177.00
40-49	\$509.00	\$1,039.00	\$796.00	\$1,320.00
50-54	\$680.00	\$1,411.00	\$931.00	\$1,562.00
55-59	\$844.00	\$1,755.00	\$1,094.00	\$1,924.00
60-64	\$1,081.00	\$2,164.00	\$1,336.00	\$2,394.00
65+	\$1,312.00	\$2,991.00	\$1,557.00	\$3,138.00

\$15 Copayment Plan				
Age	EE only	EE+S	EE+C	EE+S+C
<30	\$511.00	\$1,427.00	\$1,403.00	\$1,986.00
30-39	\$564.00	\$1,533.00	\$1,442.00	\$2,194.00
40-49	\$728.00	\$1,675.00	\$1,383.00	\$2,210.00
50-54	\$947.00	\$1,969.00	\$1,562.00	\$2,517.00
55-59	\$1,197.00	\$2,514.00	\$1,789.00	\$2,891.00
60-64	\$1,476.00	\$2,804.00	\$1,974.00	\$3,273.00
65+	\$1,674.00	\$3,618.00	\$2,517.00	\$3,977.00

**Your Grandfathered (Nonmetal) Medical Plan Rates (continued)**

\$30 Copayment Plan				
Age	EE only	EE+S	EE+C	EE+S+C
<30	\$433.00	\$1,209.00	\$1,189.00	\$1,682.00
30-39	\$478.00	\$1,299.00	\$1,222.00	\$1,860.00
40-49	\$617.00	\$1,420.00	\$1,172.00	\$1,874.00
50-54	\$803.00	\$1,669.00	\$1,324.00	\$2,133.00
55-59	\$1,015.00	\$2,131.00	\$1,517.00	\$2,451.00
60-64	\$1,252.00	\$2,378.00	\$1,674.00	\$2,776.00
65+	\$1,420.00	\$3,068.00	\$2,135.00	\$3,373.00