

# ALTERNATE HEALTH PLAN DETAILED RATES - CONTINUED

Group Name: PRAIRIE CITY CITY OF  
Group Number: 00045536  
Renewal Effective Date: December 1, 2022



## EnhancedBlue<sup>SM</sup> Primary

AGE	Wellmark Blue HMO Network provides statewide provider access. Wellmark Health Plan of Iowa, Inc. HMO	Wellmark Blue POS Network combines the state-based HMO with access to out-of-network coverage. Wellmark Health Plan of Iowa, Inc. POS	Wellmark Blue PPO Network Offers national care through BlueCard Wellmark Blue Cross and Blue Shield of Iowa. PPO
0-14	\$246.76	\$259.06	\$287.68
15	\$268.70	\$282.08	\$313.26
16	\$277.08	\$290.89	\$323.03
17	\$285.47	\$299.69	\$332.81
18	\$294.50	\$309.18	\$343.34
19	\$303.53	\$318.66	\$353.87
20	\$312.89	\$328.48	\$364.78
21	\$322.57	\$338.64	\$376.06
22	\$322.57	\$338.64	\$376.06
23	\$322.57	\$338.64	\$376.06
24	\$322.57	\$338.64	\$376.06
25	\$323.86	\$339.99	\$377.56
26	\$330.31	\$346.76	\$385.08
27	\$338.05	\$354.89	\$394.11
28	\$350.63	\$368.10	\$408.77
29	\$360.95	\$378.94	\$420.81
30	\$366.11	\$384.35	\$426.83
31	\$373.85	\$392.48	\$435.85
32	\$381.60	\$400.61	\$444.88
33	\$386.43	\$405.69	\$450.52
34	\$391.59	\$411.11	\$456.53
35	\$394.18	\$413.81	\$459.54
36	\$396.76	\$416.52	\$462.55
37	\$399.34	\$419.23	\$465.56
38	\$401.92	\$421.94	\$468.57
39	\$407.08	\$427.36	\$474.58
40	\$412.24	\$432.78	\$480.60
41	\$419.98	\$440.91	\$489.63
42	\$427.40	\$448.69	\$498.28
43	\$437.72	\$459.53	\$510.31
44	\$450.62	\$473.08	\$525.35
45	\$465.78	\$488.99	\$543.03
46	\$483.85	\$507.96	\$564.09
47	\$504.17	\$529.29	\$587.78
48	\$527.39	\$553.67	\$614.85
49	\$550.30	\$577.72	\$641.55
50	\$576.10	\$604.81	\$671.64
51	\$601.58	\$631.56	\$701.35
52	\$629.65	\$661.02	\$734.06
53	\$658.03	\$690.82	\$767.16
54	\$688.68	\$722.99	\$802.88
55	\$719.32	\$755.16	\$838.61
56	\$752.55	\$790.04	\$877.34
57	\$786.09	\$825.26	\$916.45
58	\$821.90	\$862.85	\$958.19
59	\$839.64	\$881.47	\$978.88
60	\$875.44	\$919.06	\$1,020.62
61	\$906.41	\$951.57	\$1,056.72
62	\$926.73	\$972.91	\$1,080.41
63	\$952.21	\$999.66	\$1,110.12
64	\$967.70	\$1,015.91	\$1,128.17
65+	\$967.70	\$1,015.91	\$1,128.17

## EnhancedBlue<sup>SM</sup> 3000

AGE	Wellmark Blue HMO Network provides statewide provider access. Wellmark Health Plan of Iowa, Inc. HMO	Wellmark Blue POS Network combines the state-based HMO with access to out-of-network coverage. Wellmark Health Plan of Iowa, Inc. POS	Wellmark Blue PPO Network Offers national care through BlueCard Wellmark Blue Cross and Blue Shield of Iowa. PPO
0-14	\$248.79	\$261.38	\$290.12
15	\$270.91	\$284.62	\$315.91
16	\$279.36	\$293.50	\$325.77
17	\$287.82	\$302.39	\$335.63
18	\$296.92	\$311.95	\$346.25
19	\$306.03	\$321.52	\$356.87
20	\$315.46	\$331.43	\$367.87
21	\$325.22	\$341.68	\$379.24
22	\$325.22	\$341.68	\$379.24
23	\$325.22	\$341.68	\$379.24
24	\$325.22	\$341.68	\$379.24
25	\$326.52	\$343.05	\$380.76
26	\$333.02	\$349.88	\$388.35
27	\$340.83	\$358.08	\$397.45
28	\$353.51	\$371.40	\$412.24
29	\$363.92	\$382.34	\$424.37
30	\$369.12	\$387.81	\$430.44
31	\$376.93	\$396.01	\$439.54
32	\$384.73	\$404.21	\$448.65
33	\$389.61	\$409.33	\$454.34
34	\$394.81	\$414.80	\$460.40
35	\$397.42	\$417.53	\$463.44
36	\$400.02	\$420.27	\$466.47
37	\$402.62	\$423.00	\$469.51
38	\$405.22	\$425.73	\$472.54
39	\$410.43	\$431.20	\$478.61
40	\$415.63	\$436.67	\$484.67
41	\$423.43	\$444.87	\$493.78
42	\$430.91	\$452.72	\$502.50
43	\$441.32	\$463.66	\$514.64
44	\$454.33	\$477.33	\$529.80
45	\$469.62	\$493.38	\$547.63
46	\$487.83	\$512.52	\$568.87
47	\$508.32	\$534.04	\$592.76
48	\$531.73	\$558.64	\$620.07
49	\$554.82	\$582.90	\$646.99
50	\$580.84	\$610.24	\$677.33
51	\$606.53	\$637.23	\$707.29
52	\$634.83	\$666.96	\$740.29
53	\$663.45	\$697.02	\$773.66
54	\$694.34	\$729.48	\$809.69
55	\$725.24	\$761.94	\$845.72
56	\$758.73	\$797.14	\$884.78
57	\$792.56	\$832.67	\$924.22
58	\$828.66	\$870.60	\$966.32
59	\$846.54	\$889.39	\$987.17
60	\$882.64	\$927.32	\$1,029.27
61	\$913.86	\$960.12	\$1,065.68
62	\$934.35	\$981.64	\$1,089.57
63	\$960.04	\$1,008.64	\$1,119.53
64	\$975.65	\$1,025.04	\$1,137.72
65+	\$975.65	\$1,025.04	\$1,137.72

## myBlue HDHP<sup>SM</sup> Silver

AGE	Wellmark Blue HMO Network provides statewide provider access. Wellmark Health Plan of Iowa, Inc. HMO	Wellmark Blue POS Network combines the state-based HMO with access to out-of-network coverage. Wellmark Health Plan of Iowa, Inc. POS	Wellmark Blue PPO Network Offers national care through BlueCard Wellmark Blue Cross and Blue Shield of Iowa. PPO
0-14	\$220.28	\$231.82	\$256.60
15	\$239.86	\$252.43	\$279.41
16	\$247.34	\$260.31	\$288.13
17	\$254.83	\$268.19	\$296.85
18	\$262.89	\$276.67	\$306.24
19	\$270.96	\$285.16	\$315.63
20	\$279.31	\$293.94	\$325.36
21	\$287.94	\$303.03	\$335.42
22	\$287.94	\$303.03	\$335.42
23	\$287.94	\$303.03	\$335.42
24	\$287.94	\$303.03	\$335.42
25	\$289.10	\$304.25	\$336.76
26	\$294.85	\$310.31	\$343.47
27	\$301.77	\$317.58	\$351.52
28	\$312.99	\$329.40	\$364.60
29	\$322.21	\$339.10	\$375.34
30	\$326.82	\$343.94	\$380.70
31	\$333.73	\$351.22	\$388.75
32	\$340.64	\$358.49	\$396.80
33	\$344.96	\$363.04	\$401.83
34	\$349.56	\$367.88	\$407.20
35	\$351.87	\$370.31	\$409.88
36	\$354.17	\$372.73	\$412.57
37	\$356.47	\$375.16	\$415.25
38	\$358.78	\$377.58	\$417.93
39	\$363.39	\$382.43	\$423.30
40	\$367.99	\$387.28	\$428.67
41	\$374.90	\$394.55	\$436.72
42	\$381.53	\$401.52	\$444.43
43	\$390.74	\$411.22	\$455.17
44	\$402.26	\$423.34	\$468.58
45	\$415.79	\$437.58	\$484.35
46	\$431.92	\$454.55	\$503.13
47	\$450.06	\$473.64	\$524.26
48	\$470.79	\$495.46	\$548.41
49	\$491.23	\$516.98	\$572.23
50	\$514.27	\$541.22	\$599.06
51	\$537.02	\$565.16	\$625.56
52	\$562.07	\$591.52	\$654.74
53	\$587.41	\$618.19	\$684.26
54	\$614.76	\$646.98	\$716.12
55	\$642.11	\$675.77	\$747.99
56	\$671.77	\$706.98	\$782.54
57	\$701.72	\$738.49	\$817.42
58	\$733.68	\$772.13	\$854.65
59	\$749.52	\$788.80	\$873.10
60	\$781.48	\$822.44	\$910.33
61	\$809.12	\$851.53	\$942.53
62	\$827.26	\$870.62	\$963.66
63	\$850.01	\$894.56	\$990.16
64	\$863.82	\$909.09	\$1,006.26
65+	\$863.82	\$909.09	\$1,006.26

# ALTERNATE HEALTH PLAN DETAILED RATES - CONTINUED

Group Name: PRAIRIE CITY CITY OF

Group Number: 00045536

Renewal Effective Date: December 1, 2022



## CompleteBlue<sup>SM</sup> Modified

AGE	Wellmark Blue HMO Network provides statewide provider access. Wellmark Health Plan of Iowa, Inc. HMO	Wellmark Blue POS Network combines the state-based HMO with access to out-of-network coverage. Wellmark Health Plan of Iowa, Inc. POS	Wellmark Blue PPO Network Offers national care through BlueCard Wellmark Blue Cross and Blue Shield of Iowa. PPO
0-14	\$221.07	\$231.55	\$257.43
15	\$240.72	\$252.14	\$280.31
16	\$248.24	\$260.01	\$289.06
17	\$255.75	\$267.88	\$297.81
18	\$263.84	\$276.35	\$307.23
19	\$271.93	\$284.83	\$316.66
20	\$280.31	\$293.60	\$326.41
21	\$288.98	\$302.68	\$336.51
22	\$288.98	\$302.68	\$336.51
23	\$288.98	\$302.68	\$336.51
24	\$288.98	\$302.68	\$336.51
25	\$290.14	\$303.90	\$337.86
26	\$295.92	\$309.95	\$344.59
27	\$302.85	\$317.21	\$352.66
28	\$314.13	\$329.02	\$365.79
29	\$323.37	\$338.70	\$376.55
30	\$328.00	\$343.55	\$381.94
31	\$334.93	\$350.81	\$390.01
32	\$341.87	\$358.08	\$398.09
33	\$346.20	\$362.62	\$403.14
34	\$350.83	\$367.46	\$408.52
35	\$353.14	\$369.88	\$411.21
36	\$355.45	\$372.30	\$413.91
37	\$357.76	\$374.72	\$416.60
38	\$360.07	\$377.14	\$419.29
39	\$364.70	\$381.99	\$424.67
40	\$369.32	\$386.83	\$430.06
41	\$376.26	\$394.10	\$438.14
42	\$382.90	\$401.06	\$445.87
43	\$392.15	\$410.74	\$456.64
44	\$403.71	\$422.85	\$470.10
45	\$417.29	\$437.08	\$485.92
46	\$433.48	\$454.03	\$504.76
47	\$451.68	\$473.10	\$525.96
48	\$472.49	\$494.89	\$550.19
49	\$493.01	\$516.38	\$574.09
50	\$516.12	\$540.59	\$601.01
51	\$538.95	\$564.51	\$627.59
52	\$564.10	\$590.84	\$656.87
53	\$589.53	\$617.48	\$686.48
54	\$616.98	\$646.23	\$718.45
55	\$644.43	\$674.99	\$750.42
56	\$674.20	\$706.16	\$785.08
57	\$704.25	\$737.64	\$820.07
58	\$736.33	\$771.24	\$857.43
59	\$752.22	\$787.89	\$875.93
60	\$784.30	\$821.49	\$913.29
61	\$812.04	\$850.54	\$945.59
62	\$830.25	\$869.61	\$966.79
63	\$853.08	\$893.52	\$993.38
64	\$866.94	\$908.04	\$1,009.53
65+	\$866.94	\$908.04	\$1,009.53

## BlueSimplicity<sup>SM</sup> Silver

AGE	Wellmark Blue HMO Network provides statewide provider access. Wellmark Health Plan of Iowa, Inc. HMO	Wellmark Blue POS Network combines the state-based HMO with access to out-of-network coverage. Wellmark Health Plan of Iowa, Inc. POS	Wellmark Blue PPO Network Offers national care through BlueCard Wellmark Blue Cross and Blue Shield of Iowa. PPO
0-14	\$227.36	\$237.96	\$264.76
15	\$247.57	\$259.11	\$288.29
16	\$255.30	\$267.20	\$297.29
17	\$263.03	\$275.29	\$306.29
18	\$271.35	\$284.00	\$315.98
19	\$279.67	\$292.71	\$325.67
20	\$288.29	\$301.73	\$335.71
21	\$297.20	\$311.06	\$346.09
22	\$297.20	\$311.06	\$346.09
23	\$297.20	\$311.06	\$346.09
24	\$297.20	\$311.06	\$346.09
25	\$298.39	\$312.30	\$347.47
26	\$304.34	\$318.53	\$354.40
27	\$311.47	\$325.99	\$362.70
28	\$323.06	\$338.12	\$376.20
29	\$332.57	\$348.08	\$387.28
30	\$337.33	\$353.05	\$392.81
31	\$344.46	\$360.52	\$401.12
32	\$351.59	\$367.98	\$409.42
33	\$356.05	\$372.65	\$414.62
34	\$360.81	\$377.63	\$420.15
35	\$363.18	\$380.12	\$422.92
36	\$365.56	\$382.60	\$425.69
37	\$367.94	\$385.09	\$428.46
38	\$370.32	\$387.58	\$431.23
39	\$375.07	\$392.56	\$436.77
40	\$379.83	\$397.54	\$442.30
41	\$386.96	\$405.00	\$450.61
42	\$393.80	\$412.16	\$458.57
43	\$403.31	\$422.11	\$469.64
44	\$415.19	\$434.55	\$483.49
45	\$429.16	\$449.17	\$499.75
46	\$445.81	\$466.59	\$519.14
47	\$464.53	\$486.19	\$540.94
48	\$485.93	\$508.58	\$565.86
49	\$507.03	\$530.67	\$590.43
50	\$530.81	\$555.55	\$618.12
51	\$554.29	\$580.13	\$645.46
52	\$580.14	\$607.19	\$675.57
53	\$606.30	\$634.56	\$706.02
54	\$634.53	\$664.11	\$738.90
55	\$662.77	\$693.67	\$771.78
56	\$693.38	\$725.70	\$807.43
57	\$724.29	\$758.05	\$843.42
58	\$757.28	\$792.58	\$881.84
59	\$773.62	\$809.69	\$900.87
60	\$806.61	\$844.22	\$939.29
61	\$835.14	\$874.08	\$972.51
62	\$853.87	\$893.68	\$994.32
63	\$877.35	\$918.25	\$1,021.66
64	\$891.60	\$933.18	\$1,038.27
65+	\$891.60	\$933.18	\$1,038.27

## CompleteBlue<sup>SM</sup> 4000

AGE	Wellmark Blue POS Network combines the state-based HMO with access to out-of-network coverage. Wellmark Health Plan of Iowa, Inc. POS	Wellmark Blue PPO Network Offers national care through BlueCard Wellmark Blue Cross and Blue Shield of Iowa. PPO
0-14	\$241.97	\$269.28
15	\$263.48	\$293.21
16	\$271.70	\$302.37
17	\$279.92	\$311.52
18	\$288.78	\$321.37
19	\$297.64	\$331.23
20	\$306.81	\$341.44
21	\$316.30	\$352.00
22	\$316.30	\$352.00
23	\$316.30	\$352.00
24	\$316.30	\$352.00
25	\$317.56	\$353.41
26	\$323.89	\$360.45
27	\$331.48	\$368.89
28	\$343.82	\$382.62
29	\$353.94	\$393.89
30	\$359.00	\$399.52
31	\$366.59	\$407.97
32	\$374.18	\$416.41
33	\$378.93	\$421.69
34	\$383.99	\$427.33
35	\$386.52	\$430.14
36	\$389.05	\$432.96
37	\$391.58	\$435.77
38	\$394.11	\$438.59
39	\$399.17	\$444.22
40	\$404.23	\$449.85
41	\$411.82	\$456.30
42	\$419.09	\$466.40
43	\$429.22	\$477.66
44	\$441.87	\$491.74
45	\$456.73	\$508.29
46	\$474.45	\$528.00
47	\$494.37	\$550.17
48	\$517.15	\$575.52
49	\$539.60	\$600.51
50	\$564.91	\$628.67
51	\$589.90	\$656.48
52	\$617.41	\$687.10
53	\$645.25	\$718.08
54	\$675.30	\$751.52
55	\$705.34	\$784.96
56	\$737.92	\$821.21
57	\$770.82	\$857.82
58	\$805.93	\$896.89
59	\$823.32	\$916.25
60	\$858.43	\$955.32
61	\$888.80	\$989.12
62	\$908.72	\$1,011.29
63	\$933.71	\$1,039.10
64	\$948.89	\$1,055.99
65+	\$948.89	\$1,055.99

# ALTERNATE HEALTH PLAN DETAILED RATES - CONTINUED

Group Name: PRAIRIE CITY CITY OF

Group Number: 00045536

Renewal Effective Date: December 1, 2022



## CompleteBlue<sup>SM</sup> Primary

AGE	Wellmark Blue HMO Network provides statewide provider access. Wellmark Health Plan of Iowa, Inc. HMO	Wellmark Blue POS Network combines the state-based HMO with access to out-of-network coverage. Wellmark Health Plan of Iowa, Inc. POS	Wellmark Blue PPO Network Offers national care through BlueCard. Wellmark Blue Cross and Blue Shield of Iowa. PPO
0-14	\$213.98	\$224.16	\$249.10
15	\$233.00	\$244.09	\$271.24
16	\$240.27	\$251.71	\$279.70
17	\$247.55	\$259.33	\$288.17
18	\$255.38	\$267.53	\$297.29
19	\$263.21	\$275.74	\$306.41
20	\$271.32	\$284.24	\$315.85
21	\$279.71	\$293.03	\$325.62
22	\$279.71	\$293.03	\$325.62
23	\$279.71	\$293.03	\$325.62
24	\$279.71	\$293.03	\$325.62
25	\$280.83	\$294.20	\$326.92
26	\$286.43	\$300.06	\$333.43
27	\$293.14	\$307.09	\$341.25
28	\$304.05	\$318.52	\$353.95
29	\$313.00	\$327.90	\$364.37
30	\$317.47	\$332.58	\$369.57
31	\$324.19	\$339.62	\$377.39
32	\$330.90	\$346.65	\$385.20
33	\$335.10	\$351.04	\$390.09
34	\$339.57	\$355.73	\$395.30
35	\$341.81	\$358.08	\$397.90
36	\$344.05	\$360.42	\$400.51
37	\$346.29	\$362.77	\$403.11
38	\$348.52	\$365.11	\$405.72
39	\$353.00	\$369.80	\$410.93
40	\$357.47	\$374.49	\$416.14
41	\$364.19	\$381.52	\$423.95
42	\$370.62	\$388.26	\$431.44
43	\$379.57	\$397.64	\$441.86
44	\$390.76	\$409.36	\$454.89
45	\$403.91	\$423.13	\$470.19
46	\$419.57	\$439.54	\$488.43
47	\$437.19	\$458.00	\$508.94
48	\$457.33	\$479.10	\$532.38
49	\$477.19	\$499.90	\$555.50
50	\$499.57	\$523.34	\$581.55
51	\$521.67	\$546.49	\$607.28
52	\$546.00	\$571.99	\$635.60
53	\$570.62	\$597.77	\$664.26
54	\$597.19	\$625.61	\$695.19
55	\$623.76	\$653.45	\$726.13
56	\$652.57	\$683.63	\$759.66
57	\$681.66	\$714.10	\$793.53
58	\$712.71	\$746.63	\$829.67
59	\$728.09	\$762.75	\$847.58
60	\$759.14	\$795.27	\$883.72
61	\$786.00	\$823.40	\$914.98
62	\$803.62	\$841.86	\$935.50
63	\$825.71	\$865.01	\$961.22
64	\$839.13	\$879.08	\$976.85
65+	\$839.13	\$879.08	\$976.85

## myBlue HDHP<sup>SM</sup> Bronze

AGE	Wellmark Blue HMO Network provides statewide provider access. Wellmark Health Plan of Iowa, Inc. HMO	Wellmark Blue POS Network combines the state-based HMO with access to out-of-network coverage. Wellmark Health Plan of Iowa, Inc. POS	Wellmark Blue PPO Network Offers national care through BlueCard. Wellmark Blue Cross and Blue Shield of Iowa. PPO
0-14	\$185.24	\$194.63	\$215.94
15	\$201.70	\$211.93	\$235.13
16	\$208.00	\$218.55	\$242.47
17	\$214.29	\$225.16	\$249.81
18	\$221.07	\$232.29	\$257.71
19	\$227.85	\$239.41	\$265.62
20	\$234.87	\$246.79	\$273.80
21	\$242.14	\$254.42	\$282.27
22	\$242.14	\$254.42	\$282.27
23	\$242.14	\$254.42	\$282.27
24	\$242.14	\$254.42	\$282.27
25	\$243.11	\$255.44	\$283.40
26	\$247.95	\$260.53	\$289.04
27	\$253.76	\$266.63	\$295.82
28	\$263.20	\$276.55	\$306.83
29	\$270.95	\$284.70	\$315.86
30	\$274.83	\$288.77	\$320.38
31	\$280.64	\$294.87	\$327.15
32	\$286.45	\$300.98	\$333.92
33	\$290.08	\$304.80	\$338.16
34	\$293.96	\$308.87	\$342.67
35	\$295.89	\$310.90	\$344.93
36	\$297.83	\$312.94	\$347.19
37	\$299.77	\$314.97	\$349.45
38	\$301.70	\$317.01	\$351.71
39	\$305.58	\$321.08	\$356.22
40	\$309.45	\$325.15	\$360.74
41	\$315.26	\$331.26	\$367.51
42	\$320.83	\$337.11	\$374.01
43	\$328.58	\$345.25	\$383.04
44	\$338.27	\$355.43	\$394.33
45	\$349.65	\$367.38	\$407.60
46	\$363.21	\$381.63	\$423.40
47	\$378.46	\$397.66	\$441.19
48	\$395.90	\$415.98	\$461.51
49	\$413.09	\$434.04	\$481.55
50	\$432.46	\$454.39	\$504.13
51	\$451.59	\$474.49	\$526.43
52	\$472.65	\$496.63	\$550.99
53	\$493.96	\$519.02	\$575.83
54	\$516.96	\$543.19	\$602.64
55	\$539.97	\$567.36	\$629.46
56	\$564.91	\$593.56	\$658.53
57	\$590.09	\$620.02	\$687.89
58	\$616.97	\$648.26	\$719.22
59	\$630.29	\$662.26	\$734.75
60	\$657.16	\$690.50	\$766.08
61	\$680.41	\$714.92	\$793.18
62	\$695.66	\$730.95	\$810.96
63	\$714.79	\$751.05	\$833.26
64	\$726.41	\$763.26	\$846.81
65+	\$726.41	\$763.26	\$846.81

## SimplyBlue<sup>SM</sup> Modified

AGE	Wellmark Blue HMO Network provides statewide provider access. Wellmark Health Plan of Iowa, Inc. HMO	Wellmark Blue POS Network combines the state-based HMO with access to out-of-network coverage. Wellmark Health Plan of Iowa, Inc. POS	Wellmark Blue PPO Network Offers national care through BlueCard. Wellmark Blue Cross and Blue Shield of Iowa. PPO
0-14	\$192.30	\$201.10	\$223.63
15	\$209.39	\$218.97	\$243.51
16	\$215.93	\$225.81	\$251.11
17	\$222.46	\$232.64	\$258.71
18	\$229.50	\$240.00	\$266.89
19	\$236.54	\$247.36	\$275.08
20	\$243.83	\$254.99	\$283.56
21	\$251.37	\$262.87	\$292.33
22	\$251.37	\$262.87	\$292.33
23	\$251.37	\$262.87	\$292.33
24	\$251.37	\$262.87	\$292.33
25	\$252.37	\$263.93	\$293.50
26	\$257.40	\$269.18	\$299.34
27	\$263.43	\$275.49	\$306.36
28	\$273.24	\$285.74	\$317.76
29	\$281.28	\$294.16	\$327.11
30	\$285.30	\$298.36	\$331.79
31	\$291.34	\$304.67	\$338.81
32	\$297.37	\$310.98	\$345.82
33	\$301.14	\$314.92	\$350.21
34	\$305.16	\$319.13	\$354.88
35	\$307.17	\$321.23	\$357.22
36	\$309.18	\$323.34	\$359.56
37	\$311.19	\$325.44	\$361.90
38	\$313.21	\$327.54	\$364.24
39	\$317.23	\$331.75	\$368.92
40	\$321.25	\$335.95	\$373.59
41	\$327.28	\$342.26	\$380.61
42	\$333.06	\$348.31	\$387.33
43	\$341.11	\$356.72	\$396.69
44	\$351.16	\$367.23	\$408.38
45	\$362.98	\$379.59	\$422.12
46	\$377.05	\$394.31	\$438.49
47	\$392.89	\$410.87	\$456.91
48	\$410.99	\$429.80	\$477.95
49	\$428.84	\$448.46	\$498.71
50	\$448.95	\$469.49	\$522.09
51	\$468.80	\$490.26	\$545.19
52	\$490.67	\$513.13	\$570.62
53	\$512.79	\$536.26	\$596.35
54	\$536.67	\$561.24	\$624.12
55	\$560.55	\$586.21	\$651.89
56	\$586.44	\$613.29	\$682.00
57	\$612.59	\$640.62	\$712.40
58	\$640.49	\$669.80	\$744.85
59	\$654.31	\$684.26	\$760.93
60	\$682.22	\$713.44	\$793.37
61	\$706.35	\$738.68	\$821.44
62	\$722.18	\$755.24	\$839.85
63	\$742.04	\$776.00	\$862.95
64	\$754.11	\$788.61	\$876.98
65+	\$754.11	\$788.61	\$876.98

# ALTERNATE HEALTH PLAN DETAILED RATES - CONTINUED

Group Name: PRAIRIE CITY CITY OF

Group Number: 00045536

Renewal Effective Date: December 1, 2022



## SimplyBlue<sup>SM</sup> 6000

AGE	Wellmark Blue HMO Network provides statewide provider access. Wellmark Health Plan of Iowa, Inc. HMO	Wellmark Blue POS Network combines the state-based HMO with access to out-of-network coverage. Wellmark Health Plan of Iowa, Inc. POS	Wellmark Blue PPO Network Offers national care through BlueCard Wellmark Blue Cross and Blue Shield of Iowa. PPO
0-14	\$189.62	\$197.58	\$220.52
15	\$206.48	\$215.15	\$240.12
16	\$212.92	\$221.86	\$247.62
17	\$219.37	\$228.58	\$255.11
18	\$226.31	\$235.81	\$263.19
19	\$233.25	\$243.04	\$271.26
20	\$240.43	\$250.53	\$279.62
21	\$247.87	\$258.28	\$288.26
22	\$247.87	\$258.28	\$288.26
23	\$247.87	\$258.28	\$288.26
24	\$247.87	\$258.28	\$288.26
25	\$248.86	\$259.31	\$289.42
26	\$253.82	\$264.48	\$295.18
27	\$259.77	\$270.68	\$302.10
28	\$269.44	\$280.75	\$313.34
29	\$277.37	\$289.01	\$322.57
30	\$281.33	\$293.15	\$327.18
31	\$287.28	\$299.34	\$334.10
32	\$293.23	\$305.54	\$341.02
33	\$298.95	\$309.42	\$345.34
34	\$300.92	\$313.55	\$349.95
35	\$302.90	\$315.62	\$352.26
36	\$304.88	\$317.68	\$354.57
37	\$306.86	\$319.75	\$356.87
38	\$308.85	\$321.81	\$359.18
39	\$312.81	\$325.95	\$363.79
40	\$316.78	\$330.08	\$368.40
41	\$322.73	\$336.28	\$375.32
42	\$328.43	\$342.22	\$381.95
43	\$336.36	\$350.48	\$391.17
44	\$346.28	\$360.81	\$402.71
45	\$357.93	\$372.95	\$416.25
46	\$371.81	\$387.42	\$432.40
47	\$387.42	\$403.69	\$450.56
48	\$405.27	\$422.28	\$471.31
49	\$422.87	\$440.62	\$491.78
50	\$442.70	\$461.28	\$514.84
51	\$462.28	\$481.69	\$537.61
52	\$483.84	\$504.16	\$562.69
53	\$505.66	\$526.89	\$588.06
54	\$529.20	\$551.42	\$615.44
55	\$552.75	\$575.96	\$642.83
56	\$578.28	\$602.56	\$672.52
57	\$604.06	\$629.42	\$702.50
58	\$631.58	\$658.09	\$734.50
59	\$645.21	\$672.30	\$750.35
60	\$672.72	\$700.97	\$782.35
61	\$696.52	\$725.76	\$810.02
62	\$712.13	\$742.03	\$828.18
63	\$731.72	\$762.44	\$850.96
64	\$743.61	\$774.83	\$864.78
65+	\$743.61	\$774.83	\$864.78

## SimplyBlue<sup>SM</sup> Primary

AGE	Wellmark Blue HMO Network provides statewide provider access. Wellmark Health Plan of Iowa, Inc. HMO	Wellmark Blue POS Network combines the state-based HMO with access to out-of-network coverage. Wellmark Health Plan of Iowa, Inc. POS	Wellmark Blue PPO Network Offers national care through BlueCard Wellmark Blue Cross and Blue Shield of Iowa. PPO
0-14	\$200.67	\$210.70	\$234.24
15	\$218.50	\$229.42	\$255.06
16	\$225.32	\$236.58	\$263.02
17	\$232.14	\$243.75	\$270.98
18	\$239.49	\$251.46	\$279.55
19	\$246.83	\$259.17	\$288.13
20	\$254.44	\$267.16	\$297.01
21	\$262.31	\$275.42	\$306.19
22	\$262.31	\$275.42	\$306.19
23	\$262.31	\$275.42	\$306.19
24	\$262.31	\$275.42	\$306.19
25	\$263.36	\$276.52	\$307.42
26	\$268.61	\$282.03	\$313.54
27	\$274.90	\$288.64	\$320.89
28	\$285.13	\$299.38	\$332.83
29	\$293.53	\$308.19	\$342.63
30	\$297.72	\$312.60	\$347.53
31	\$304.02	\$319.21	\$354.88
32	\$310.31	\$325.82	\$362.23
33	\$314.25	\$329.95	\$366.82
34	\$318.44	\$334.36	\$371.72
35	\$320.54	\$336.56	\$374.17
36	\$322.64	\$338.76	\$376.62
37	\$324.74	\$340.97	\$379.07
38	\$326.84	\$343.17	\$381.52
39	\$331.04	\$347.58	\$386.41
40	\$335.23	\$351.99	\$391.31
41	\$341.53	\$358.60	\$398.66
42	\$347.56	\$364.93	\$405.70
43	\$355.96	\$373.74	\$415.50
44	\$366.45	\$384.76	\$427.75
45	\$378.78	\$397.70	\$442.14
46	\$393.47	\$413.13	\$459.29
47	\$409.99	\$430.48	\$478.58
48	\$428.88	\$450.31	\$500.62
49	\$447.50	\$469.86	\$522.36
50	\$468.49	\$491.90	\$546.86
51	\$489.21	\$513.66	\$571.05
52	\$512.03	\$537.62	\$597.69
53	\$535.11	\$561.85	\$624.63
54	\$560.03	\$588.02	\$653.72
55	\$584.95	\$614.18	\$682.81
56	\$611.97	\$642.55	\$714.35
57	\$639.25	\$671.20	\$746.19
58	\$668.37	\$701.77	\$780.18
59	\$682.79	\$716.91	\$797.02
60	\$711.91	\$747.49	\$831.01
61	\$737.09	\$773.93	\$860.40
62	\$753.62	\$791.28	\$879.69
63	\$774.34	\$813.04	\$903.88
64	\$786.93	\$826.26	\$918.57
65+	\$786.93	\$826.26	\$918.57

Premium rates shown are subject to change based on enrollment and plan selection. Wellmark Blue Cross and Blue Shield of Iowa and Wellmark Health Plan of Iowa, Inc. are independent licensees of the Blue Cross and Blue Shield Association.