



Individual & Family Plans | 個人/家庭計劃

2021 Monthly Rates | San Francisco County | 三藩市縣

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- Only the first three of the oldest children under 21 in the family are charged; additional enrolled children will have no premium rate.
- All dependents age 21 and older are charged premiums based on their ages.

- 每位家庭成員的月費是根據年齡及居住地區計算。
- 只有前三名年齡最大的 21 歲以下子女會被計算入投保費用，額外的投保子女則免費。
- 所有 21 歲或以上的子女的月費是根據年齡計算。

	Jade 15 Platinum HMO	Silver 70 Off Exchange HMO	Amber 50 Silver HMO	ActiveChoice PPO
AGE / 年齡	RATE / 月費	RATE / 月費	RATE / 月費	RATE / 月費
0-14	\$432.96	\$333.05	\$318.81	\$307.80
15	\$471.45	\$362.65	\$347.15	\$335.16
16	\$486.16	\$373.97	\$357.99	\$345.62
17	\$500.88	\$385.29	\$368.82	\$356.08
18	\$516.73	\$397.48	\$380.49	\$367.35
19	\$532.57	\$409.67	\$392.16	\$378.62
20	\$548.99	\$422.30	\$404.25	\$390.28
21	\$565.97	\$435.36	\$416.75	\$402.36
22	\$565.97	\$435.36	\$416.75	\$402.36
23	\$565.97	\$435.36	\$416.75	\$402.36
24	\$565.97	\$435.36	\$416.75	\$402.36
25	\$568.23	\$437.10	\$418.42	\$403.96
26	\$579.55	\$445.81	\$426.75	\$412.01
27	\$593.13	\$456.26	\$436.75	\$421.67
28	\$615.20	\$473.23	\$453.01	\$437.36
29	\$633.32	\$487.17	\$466.34	\$450.24
30	\$642.37	\$494.13	\$473.01	\$456.67
31	\$655.95	\$504.58	\$483.01	\$466.33
32	\$669.54	\$515.03	\$493.02	\$475.99
33	\$678.03	\$521.56	\$499.27	\$482.02
34	\$687.08	\$528.53	\$505.93	\$488.46
35	\$691.61	\$532.01	\$509.27	\$491.68
36	\$696.14	\$535.49	\$512.60	\$494.90
37	\$700.67	\$538.97	\$515.94	\$498.12
38	\$705.19	\$542.46	\$519.27	\$501.33
39	\$714.25	\$549.42	\$525.94	\$507.77
40	\$723.30	\$556.39	\$532.61	\$514.21
41	\$736.89	\$566.84	\$542.61	\$523.87
42	\$749.90	\$576.85	\$552.19	\$533.12
43	\$768.02	\$590.78	\$565.53	\$546.00
44	\$790.65	\$608.20	\$582.20	\$562.09
45	\$817.25	\$628.66	\$601.79	\$581.00
46	\$848.95	\$653.04	\$625.13	\$603.53
47	\$884.60	\$680.47	\$651.38	\$628.88
48	\$925.35	\$711.81	\$681.39	\$657.85
49	\$965.54	\$742.72	\$710.98	\$686.42
50	\$1010.82	\$777.55	\$744.32	\$718.61
51	\$1055.53	\$811.94	\$777.24	\$750.39
52	\$1104.77	\$849.82	\$813.50	\$785.40
53	\$1154.57	\$888.13	\$850.17	\$820.81
54	\$1208.34	\$929.49	\$889.76	\$859.03
55	\$1262.10	\$970.85	\$929.35	\$897.25
56	\$1320.40	\$1015.69	\$972.28	\$938.70
57	\$1379.26	\$1060.97	\$1015.62	\$980.54
58	\$1442.08	\$1109.29	\$1061.88	\$1025.2
59	\$1473.21	\$1133.24	\$1084.80	\$1047.33
60	\$1536.03	\$1181.56	\$1131.06	\$1091.99
61	\$1590.36	\$1223.36	\$1171.07	\$1130.62
62	\$1626.02	\$1250.78	\$1197.32	\$1155.97
63	\$1670.73	\$1285.18	\$1230.25	\$1187.75
64+	\$1697.89	\$1306.07	\$1250.24	\$1207.06



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AGE / 年齡	PLANS AVAILABLE OUTSIDE AND INSIDE COVERED CALIFORNIA 可通過或不通過投保加州市場選擇這些醫療計劃					ONLY AVAILABLE INSIDE COVERED CALIFORNIA 僅可透過 Covered CA 投保加州選擇此醫療計劃
	Platinum ⁹⁰ HMO	Gold ⁸⁰ HMO	Bronze ⁶⁰ HMO	Bronze ⁶⁰ HDHP	Minimum Coverage HMO 最低保障 HMO	Silver ⁷⁰ HMO
	RATE / 月費	RATE / 月費	RATE / 月費	RATE / 月費	RATE / 月費	RATE / 月費
0-14	\$444.78	\$401.54	\$268.59	\$268.05	\$258.92	\$359.91
15	\$484.32	\$437.23	\$292.46	\$291.88	\$281.93	\$391.90
16	\$499.43	\$450.88	\$301.59	\$300.99	\$290.73	\$404.13
17	\$514.55	\$464.53	\$310.72	\$310.10	\$299.53	\$416.36
18	\$530.83	\$479.22	\$320.55	\$319.91	\$309.01	\$429.54
19	\$547.11	\$493.92	\$330.38	\$329.72	\$318.49	\$442.71
20	\$563.97	\$509.14	\$340.56	\$339.88	\$328.30	\$456.35
21	\$581.41	\$524.89	\$351.10	\$350.39	\$338.46	\$470.47
22	\$581.41	\$524.89	\$351.10	\$350.39	\$338.46	\$470.47
23	\$581.41	\$524.89	\$351.10	\$350.39	\$338.46	\$470.47
24	\$581.41	\$524.89	\$351.10	\$350.39	\$338.46	\$470.47
25	\$583.74	\$526.99	\$352.50	\$351.79	\$339.81	\$472.35
26	\$595.37	\$537.49	\$359.52	\$358.80	\$346.58	\$481.76
27	\$609.32	\$550.08	\$367.95	\$367.21	\$354.70	\$493.05
28	\$632.00	\$570.55	\$381.64	\$380.88	\$367.90	\$511.40
29	\$650.60	\$587.35	\$392.88	\$392.09	\$378.73	\$526.45
30	\$659.91	\$595.75	\$398.49	\$397.70	\$384.15	\$533.98
31	\$673.86	\$608.34	\$406.92	\$406.11	\$392.27	\$545.27
32	\$687.81	\$620.94	\$415.35	\$414.52	\$400.39	\$556.56
33	\$696.53	\$628.82	\$420.61	\$419.77	\$405.47	\$563.62
34	\$705.84	\$637.21	\$426.23	\$425.38	\$410.89	\$571.15
35	\$710.49	\$641.41	\$429.04	\$428.18	\$413.59	\$574.91
36	\$715.14	\$645.61	\$431.85	\$430.98	\$416.30	\$578.68
37	\$719.79	\$649.81	\$434.66	\$433.79	\$419.01	\$582.44
38	\$724.44	\$654.01	\$437.46	\$436.59	\$421.72	\$586.20
39	\$733.74	\$662.41	\$443.08	\$442.20	\$427.13	\$593.73
40	\$743.05	\$670.81	\$448.70	\$447.80	\$432.55	\$601.26
41	\$757.00	\$683.40	\$457.13	\$456.21	\$440.67	\$612.55
42	\$770.37	\$695.48	\$465.20	\$464.27	\$448.45	\$623.37
43	\$788.98	\$712.27	\$476.44	\$475.48	\$459.28	\$638.43
44	\$812.24	\$733.27	\$490.48	\$489.50	\$472.82	\$657.24
45	\$839.56	\$757.94	\$506.98	\$505.97	\$488.73	\$679.36
46	\$872.12	\$787.33	\$526.64	\$525.59	\$507.68	\$705.70
47	\$908.75	\$820.40	\$548.76	\$547.66	\$529.01	\$735.34
48	\$950.61	\$858.19	\$574.04	\$572.89	\$553.38	\$769.22
49	\$991.89	\$895.46	\$598.97	\$597.77	\$577.41	\$802.62
50	\$1038.41	\$937.45	\$627.06	\$625.80	\$604.48	\$840.26
51	\$1084.34	\$978.92	\$654.79	\$653.48	\$631.22	\$877.42
52	\$1134.92	\$1024.58	\$685.34	\$683.97	\$660.67	\$918.35
53	\$1186.08	\$1070.77	\$716.23	\$714.80	\$690.45	\$959.75
54	\$1241.32	\$1120.64	\$749.59	\$748.09	\$722.60	\$1004.45
55	\$1296.55	\$1170.5	\$782.94	\$781.38	\$754.76	\$1049.14
56	\$1356.44	\$1224.56	\$819.11	\$817.47	\$789.62	\$1097.60
57	\$1416.91	\$1279.15	\$855.62	\$853.91	\$824.82	\$1146.53
58	\$1481.44	\$1337.41	\$894.59	\$892.80	\$862.39	\$1198.75
59	\$1513.42	\$1366.28	\$913.90	\$912.07	\$881.00	\$1224.63
60	\$1577.96	\$1424.55	\$952.87	\$950.97	\$918.57	\$1276.85
61	\$1633.77	\$1474.93	\$986.58	\$984.61	\$951.06	\$1322.01
62	\$1670.40	\$1508.00	\$1008.70	\$1006.68	\$972.38	\$1351.65
63	\$1716.33	\$1549.47	\$1036.43	\$1034.36	\$999.12	\$1388.82
64+	\$1744.23	\$1574.65	\$1053.28	\$1051.17	\$1015.36	\$1411.39