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- 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。
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	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	\$467.57	\$359.67	\$344.30	\$332.40
15	\$509.13	\$391.64	\$374.90	\$361.95
16	\$525.02	\$403.86	\$386.60	\$373.25
17	\$540.92	\$416.09	\$398.30	\$384.55
18	\$558.03	\$429.25	\$410.91	\$396.71
19	\$575.14	\$442.42	\$423.51	\$408.88
20	\$592.87	\$456.05	\$436.56	\$421.48
21	\$611.20	\$470.16	\$450.06	\$434.52
22	\$611.20	\$470.16	\$450.06	\$434.52
23	\$611.20	\$470.16	\$450.06	\$434.52
24	\$611.20	\$470.16	\$450.06	\$434.52
25	\$613.65	\$472.04	\$451.86	\$436.25
26	\$625.87	\$481.44	\$460.86	\$444.94
27	\$640.54	\$492.72	\$471.66	\$455.37
28	\$664.38	\$511.06	\$489.22	\$472.32
29	\$683.94	\$526.11	\$503.62	\$486.22
30	\$693.72	\$533.63	\$510.82	\$493.18
31	\$708.39	\$544.91	\$521.62	\$503.60
32	\$723.05	\$556.20	\$532.42	\$514.03
33	\$732.22	\$563.25	\$539.17	\$520.55
34	\$742.00	\$570.77	\$546.37	\$527.50
35	\$746.89	\$574.53	\$549.98	\$530.98
36	\$751.78	\$578.29	\$553.58	\$534.45
37	\$756.67	\$582.05	\$557.18	\$537.93
38	\$761.56	\$585.82	\$560.78	\$541.41
39	\$771.34	\$593.34	\$567.98	\$548.36
40	\$781.12	\$600.86	\$575.18	\$555.31
41	\$795.79	\$612.14	\$585.98	\$565.74
42	\$809.85	\$622.96	\$596.33	\$575.73
43	\$829.40	\$638.00	\$610.73	\$589.64
44	\$853.85	\$656.81	\$628.74	\$607.02
45	\$882.58	\$678.91	\$649.89	\$627.44
46	\$916.81	\$705.24	\$675.09	\$651.77
47	\$955.31	\$734.86	\$703.45	\$679.15
48	\$999.32	\$768.71	\$735.85	\$710.43
49	\$1042.71	\$802.09	\$767.81	\$741.28
50	\$1091.61	\$839.70	\$803.81	\$776.05
51	\$1139.90	\$876.84	\$839.37	\$810.37
52	\$1193.07	\$917.75	\$878.52	\$848.18
53	\$1246.86	\$959.12	\$918.13	\$886.41
54	\$1304.92	\$1003.79	\$960.88	\$927.69
55	\$1362.99	\$1048.45	\$1003.64	\$968.97
56	\$1425.94	\$1096.88	\$1049.99	\$1013.73
57	\$1489.5	\$1145.77	\$1096.80	\$1058.92
58	\$1557.35	\$1197.96	\$1146.76	\$1107.15
59	\$1590.96	\$1223.82	\$1171.51	\$1131.05
60	\$1658.81	\$1276.01	\$1221.47	\$1179.28
61	\$1717.48	\$1321.14	\$1264.67	\$1220.99
62	\$1755.99	\$1350.76	\$1293.03	\$1248.36
63	\$1804.27	\$1387.90	\$1328.58	\$1282.69
64+	\$1833.60	\$1410.46	\$1350.18	\$1303.54



Individual & Family Plans | 個人/家庭計劃

2021 Monthly Rates | San Mateo County | 聖馬刁縣

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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	\$480.33	\$433.63	\$290.06	\$289.48	\$279.61	\$388.68
15	\$523.03	\$472.18	\$315.84	\$315.21	\$304.47	\$423.22
16	\$539.36	\$486.92	\$325.70	\$325.05	\$313.97	\$436.43
17	\$555.68	\$501.66	\$335.56	\$334.88	\$323.48	\$449.64
18	\$573.26	\$517.53	\$346.17	\$345.48	\$333.71	\$463.87
19	\$590.84	\$533.40	\$356.79	\$356.07	\$343.94	\$478.10
20	\$609.05	\$549.84	\$367.78	\$367.05	\$354.54	\$492.83
21	\$627.89	\$566.84	\$379.16	\$378.40	\$365.51	\$508.07
22	\$627.89	\$566.84	\$379.16	\$378.40	\$365.51	\$508.07
23	\$627.89	\$566.84	\$379.16	\$378.40	\$365.51	\$508.07
24	\$627.89	\$566.84	\$379.16	\$378.40	\$365.51	\$508.07
25	\$630.40	\$569.11	\$380.68	\$379.91	\$366.97	\$510.11
26	\$642.96	\$580.45	\$388.26	\$387.48	\$374.28	\$520.27
27	\$658.03	\$594.05	\$397.36	\$396.56	\$383.05	\$532.46
28	\$682.51	\$616.16	\$412.15	\$411.32	\$397.31	\$552.28
29	\$702.61	\$634.30	\$424.28	\$423.43	\$409.00	\$568.53
30	\$712.65	\$643.37	\$430.35	\$429.48	\$414.85	\$576.66
31	\$727.72	\$656.97	\$439.45	\$438.57	\$423.63	\$588.86
32	\$742.79	\$670.57	\$448.55	\$447.65	\$432.40	\$601.05
33	\$752.21	\$679.08	\$454.23	\$453.32	\$437.88	\$608.67
34	\$762.26	\$688.15	\$460.30	\$459.38	\$443.73	\$616.80
35	\$767.28	\$692.68	\$463.33	\$462.41	\$446.65	\$620.87
36	\$772.30	\$697.22	\$466.37	\$465.43	\$449.58	\$624.93
37	\$777.32	\$701.75	\$469.40	\$468.46	\$452.50	\$628.99
38	\$782.35	\$706.29	\$472.43	\$471.49	\$455.42	\$633.06
39	\$792.39	\$715.36	\$478.50	\$477.54	\$461.27	\$641.19
40	\$802.44	\$724.42	\$484.57	\$483.60	\$467.12	\$649.32
41	\$817.51	\$738.03	\$493.66	\$492.68	\$475.89	\$661.51
42	\$831.95	\$751.07	\$502.39	\$501.38	\$484.30	\$673.20
43	\$852.04	\$769.21	\$514.52	\$513.49	\$496.00	\$689.46
44	\$877.16	\$791.88	\$529.69	\$528.63	\$510.62	\$709.78
45	\$906.67	\$818.52	\$547.51	\$546.41	\$527.80	\$733.66
46	\$941.83	\$850.26	\$568.74	\$567.60	\$548.26	\$762.11
47	\$981.39	\$885.98	\$592.63	\$591.44	\$571.29	\$794.12
48	\$1026.60	\$926.79	\$619.92	\$618.69	\$597.61	\$830.70
49	\$1071.18	\$967.03	\$646.85	\$645.55	\$623.56	\$866.77
50	\$1121.41	\$1012.38	\$677.18	\$675.82	\$652.80	\$907.42
51	\$1171.01	\$1057.16	\$707.13	\$705.72	\$681.67	\$947.56
52	\$1225.64	\$1106.48	\$740.12	\$738.64	\$713.47	\$991.76
53	\$1280.89	\$1156.36	\$773.48	\$771.94	\$745.64	\$1036.47
54	\$1340.54	\$1210.21	\$809.50	\$807.89	\$780.36	\$1084.74
55	\$1400.19	\$1264.06	\$845.52	\$843.83	\$815.09	\$1133.00
56	\$1464.86	\$1322.44	\$884.58	\$882.81	\$852.73	\$1185.33
57	\$1530.16	\$1381.40	\$924.01	\$922.16	\$890.75	\$1238.17
58	\$1599.86	\$1444.32	\$966.10	\$964.16	\$931.32	\$1294.57
59	\$1634.39	\$1475.49	\$986.95	\$984.98	\$951.42	\$1322.51
60	\$1704.09	\$1538.41	\$1029.04	\$1026.98	\$991.99	\$1378.91
61	\$1764.36	\$1592.83	\$1065.44	\$1063.31	\$1027.08	\$1427.69
62	\$1803.92	\$1628.54	\$1089.32	\$1087.15	\$1050.11	\$1459.69
63	\$1853.52	\$1673.32	\$1119.28	\$1117.04	\$1078.98	\$1499.83
64+	\$1883.65	\$1700.52	\$1137.47	\$1135.19	\$1096.52	\$1524.21