## **COUPLE COVERAGE 2019 Premium Rates (Standard Plans)**

Plan Name	PLAN TYPE	Platinum	Gold	Silver	Bronze	HSA Compliant Bronze	Catastrophic* (Under age 30, <u>unless otherwise</u> <u>noted</u> , no APTC eligibility)
Emblem	Standard in-network with pediatric dental, dependents up to <b>age 25</b>	\$2612.80	\$2158.10	\$1799.28	\$1364.54		-
	Standard in-network with pediatric dental, dependents up to <b>age 29</b>	\$2691.18	\$2222.84	\$1853.26	\$1405.48		\$881.64
Empire Blue Cross/Blue Shield	Standard In-network with pediatric dental, dependents up to <b>age 25</b>	\$2203.30	\$1811.10	\$1449.12	-	\$1072.70	-
	Standard In-network with pediatric dental, dependents up to <b>age 29</b>	\$2293.36	\$1885.38	\$1508.58	-	\$1116.76	\$472.52
Fidelis	Standard in-network with pediatric dental, dependents up to <b>age 25</b>	\$1626.79	\$1342.66	\$1124.63	\$791.11		-
	Standard in-network with pediatric dental, dependents up to <b>age 29</b>	\$1708.13	\$1409.79	\$1180.86	\$830.66		\$395.82
Health First	Standard In-network with pediatric dental, dependents up to <b>age 25</b>	\$1877.72	\$1491.80	\$1234.98	\$923.96		-
	Standard In-network with pediatric dental, dependents up to <b>age 29</b>	\$1896.50	\$1506.68	\$1247.34	\$933.16		\$569.98
Oscar	Standard In-network with pediatric dental, dependents up to <b>age 25</b>	\$2038.79	\$1633.83	\$1300.62	\$957.16		\$324.17
	Standard In-network with pediatric dental, dependents up to <b>age 29</b>	\$2050.39	\$1643.13	\$1308.06	\$962.65		-
United Healthcare	Standard in-network with pediatric dental, dependents up to <b>age 25</b>	\$2562.36	\$2107.21	\$1722.80	\$1244.15		-
	Standard in-network with pediatric dental, dependents up to <b>age 29</b>	\$3205.51	\$2636.12	\$2155.22	\$1556.43		\$828.21