

Effective 1/1/2018

Non-Tobacco Rates

Area 1 (Clark/Nye Cnty)

## 2018 MyHPN HMO On Exchange Rates - Southern NV



HEALTH PLAN OF NEVADA  
A UnitedHealthcare Company

Age	MyHPN HMO Gold 5	MyHPN HMO Silver 1.1	MyHPN HMO Silver 3.1	MyHPN HMO Silver 4.1	MyHPN HMO Silver 5	MyHPN HMO Silver 6 Medicaid Transition	MyHPN HMO Bronze 7	MyHPN HMO Bronze 8	MyHPN HMO Bronze 10	MyHPN Catastrophic 1	How to calculate premium*																																
0-14	\$248.76	\$235.67	\$234.63	\$236.14	\$233.93	\$234.26	\$186.17	\$174.20	\$180.54	\$153.71	<p><i>*Prices are Per Person based upon age as of 1/1/2018</i></p> <p style="text-align: center;"><i>Adults on policy who are age 21+</i></p> <table style="width: 100%; border-collapse: collapse;"> <tr><td>Adult #1 medical</td><td style="text-align: right;">\$</td></tr> <tr><td>Adult #2 medical</td><td style="text-align: right;">\$</td></tr> <tr><td>Adult #3 medical</td><td style="text-align: right;">\$</td></tr> <tr><td>Adult #4 medical</td><td style="text-align: right;">\$</td></tr> <tr><td>Adult #5 medical</td><td style="text-align: right;">\$</td></tr> <tr><td>add'l adult premiums:</td><td style="text-align: right;">\$</td></tr> <tr><td colspan="2"><hr/></td></tr> <tr><td>Total Adult Medical \$:</td><td style="text-align: right;">\$</td></tr> <tr><td colspan="2"><hr/></td></tr> <tr><td colspan="2" style="text-align: center;"><i>Children on policy who are age 20 &amp; younger (max. of 3)*</i></td></tr> <tr><td>Child #1</td><td style="text-align: right;">\$</td></tr> <tr><td>Child #2</td><td style="text-align: right;">\$</td></tr> <tr><td>Child #3</td><td style="text-align: right;">\$</td></tr> <tr><td>Total Children Medical \$:</td><td style="text-align: right;">\$</td></tr> <tr><td colspan="2"><hr/></td></tr> <tr><td>Total Monthly Premium:</td><td style="text-align: right;">\$</td></tr> </table> <p style="text-align: center; margin-top: 20px;"><b>All premiums include state and federal taxes, fees and assessments under the Affordable Care Act.</b></p> <div style="text-align: right; margin-top: 20px;"> </div>	Adult #1 medical	\$	Adult #2 medical	\$	Adult #3 medical	\$	Adult #4 medical	\$	Adult #5 medical	\$	add'l adult premiums:	\$	<hr/>		Total Adult Medical \$:	\$	<hr/>		<i>Children on policy who are age 20 &amp; younger (max. of 3)*</i>		Child #1	\$	Child #2	\$	Child #3	\$	Total Children Medical \$:	\$	<hr/>		Total Monthly Premium:	\$
Adult #1 medical	\$																																										
Adult #2 medical	\$																																										
Adult #3 medical	\$																																										
Adult #4 medical	\$																																										
Adult #5 medical	\$																																										
add'l adult premiums:	\$																																										
<hr/>																																											
Total Adult Medical \$:	\$																																										
<hr/>																																											
<i>Children on policy who are age 20 &amp; younger (max. of 3)*</i>																																											
Child #1	\$																																										
Child #2	\$																																										
Child #3	\$																																										
Total Children Medical \$:	\$																																										
<hr/>																																											
Total Monthly Premium:	\$																																										
15	\$270.87	\$256.62	\$255.48	\$257.13	\$254.73	\$255.08	\$202.71	\$189.69	\$196.59	\$167.37																																	
16	\$279.32	\$264.63	\$263.46	\$265.16	\$262.68	\$263.05	\$209.04	\$195.61	\$202.73	\$172.59																																	
17	\$287.78	\$272.64	\$271.43	\$273.19	\$270.63	\$271.01	\$215.37	\$201.53	\$208.86	\$177.82																																	
18	\$296.88	\$281.26	\$280.02	\$281.83	\$279.19	\$279.58	\$222.18	\$207.90	\$215.47	\$183.44																																	
19	\$305.99	\$289.89	\$288.61	\$290.47	\$287.75	\$288.16	\$229.00	\$214.28	\$222.08	\$189.07																																	
20	\$315.42	\$298.82	\$297.50	\$299.42	\$296.62	\$297.04	\$236.05	\$220.88	\$228.92	\$194.90																																	
21	\$325.18	\$308.07	\$306.71	\$308.69	\$305.80	\$306.23	\$243.36	\$227.72	\$236.01	\$200.93																																	
22	\$325.18	\$308.07	\$306.71	\$308.69	\$305.80	\$306.23	\$243.36	\$227.72	\$236.01	\$200.93																																	
23	\$325.18	\$308.07	\$306.71	\$308.69	\$305.80	\$306.23	\$243.36	\$227.72	\$236.01	\$200.93																																	
24	\$325.18	\$308.07	\$306.71	\$308.69	\$305.80	\$306.23	\$243.36	\$227.72	\$236.01	\$200.93																																	
25	\$326.48	\$309.30	\$307.93	\$309.92	\$307.02	\$307.45	\$244.33	\$228.63	\$236.95	\$201.73																																	
26	\$332.98	\$315.46	\$314.07	\$316.09	\$313.13	\$313.57	\$249.20	\$233.18	\$241.67	\$205.75																																	
27	\$340.78	\$322.85	\$321.43	\$323.50	\$320.47	\$320.92	\$255.04	\$238.65	\$247.33	\$210.57																																	
28	\$353.47	\$334.87	\$333.39	\$335.54	\$332.40	\$332.87	\$264.53	\$247.53	\$256.54	\$218.41																																	
29	\$363.87	\$344.73	\$343.20	\$345.42	\$342.19	\$342.67	\$272.31	\$254.81	\$264.09	\$224.84																																	
30	\$369.07	\$349.65	\$348.11	\$350.36	\$347.08	\$347.57	\$276.21	\$258.46	\$267.87																																		
31	\$376.88	\$357.05	\$355.47	\$357.77	\$354.42	\$354.92	\$282.05	\$263.92	\$273.53																																		
32	\$384.68	\$364.44	\$362.83	\$365.18	\$361.76	\$362.27	\$287.89	\$269.39	\$279.19																																		
33	\$389.56	\$369.06	\$367.43	\$369.81	\$366.34	\$366.86	\$291.54	\$272.80	\$282.73																																		
34	\$394.76	\$373.99	\$372.34	\$374.74	\$371.24	\$371.76	\$295.43	\$276.45	\$286.51																																		
35	\$397.36	\$376.46	\$374.79	\$377.21	\$373.68	\$374.21	\$297.38	\$278.27	\$288.40																																		
36	\$399.97	\$378.92	\$377.25	\$379.68	\$376.13	\$376.66	\$299.33	\$280.09	\$290.29																																		
37	\$402.57	\$381.39	\$379.70	\$382.15	\$378.58	\$379.11	\$301.27	\$281.91	\$292.18																																		
38	\$405.17	\$383.85	\$382.16	\$384.62	\$381.02	\$381.56	\$303.22	\$283.73	\$294.06																																		
39	\$410.37	\$388.78	\$387.06	\$389.56	\$385.91	\$386.46	\$307.12	\$287.38	\$297.84																																		
40	\$415.58	\$393.71	\$391.97	\$394.50	\$390.81	\$391.36	\$311.01	\$291.02	\$301.62																																		
41	\$423.38	\$401.10	\$399.33	\$401.91	\$398.15	\$398.71	\$316.85	\$296.49	\$307.28																																		
42	\$430.86	\$408.19	\$406.39	\$409.01	\$405.18	\$405.75	\$322.45	\$301.72	\$312.71																																		
43	\$441.26	\$418.05	\$416.20	\$418.89	\$414.97	\$415.55	\$330.23	\$309.01	\$320.26																																		
44	\$454.27	\$430.37	\$428.47	\$431.23	\$427.20	\$427.80	\$339.97	\$318.12	\$329.70																																		
45	\$469.55	\$444.85	\$442.88	\$445.74	\$441.57	\$442.19	\$351.41	\$328.82	\$340.79																																		
46	\$487.77	\$462.10	\$460.06	\$463.03	\$458.70	\$459.34	\$365.04	\$341.58	\$354.01																																		
47	\$508.25	\$481.51	\$479.38	\$482.48	\$477.96	\$478.63	\$380.37	\$355.92	\$368.88																																		
48	\$531.66	\$503.69	\$501.47	\$504.70	\$499.98	\$500.68	\$397.89	\$372.32	\$385.87																																		
49	\$554.75	\$525.56	\$523.24	\$526.62	\$521.69	\$522.42	\$415.17	\$388.49	\$402.63																																		
50	\$580.77	\$550.21	\$547.78	\$551.32	\$546.15	\$546.92	\$434.64	\$406.70	\$421.51																																		
51	\$606.46	\$574.55	\$572.01	\$575.70	\$570.31	\$571.11	\$453.86	\$424.69	\$440.15																																		
52	\$634.75	\$601.35	\$598.69	\$602.56	\$596.92	\$597.76	\$475.03	\$444.50	\$460.69																																		
53	\$663.36	\$628.46	\$625.68	\$629.72	\$623.83	\$624.70	\$496.45	\$464.54	\$481.46																																		
54	\$694.25	\$657.72	\$654.82	\$659.05	\$652.88	\$653.80	\$519.57	\$486.18	\$503.88																																		
55	\$725.15	\$686.99	\$683.96	\$688.37	\$681.93	\$682.89	\$542.69	\$507.81	\$526.30																																		
56	\$758.64	\$718.72	\$715.55	\$720.17	\$713.43	\$714.43	\$567.75	\$531.27	\$550.61																																		
57	\$792.46	\$750.76	\$747.45	\$752.27	\$745.23	\$746.28	\$593.06	\$554.95	\$575.15																																		
58	\$828.55	\$784.96	\$781.49	\$786.54	\$779.17	\$780.27	\$620.08	\$580.23	\$601.35																																		
59	\$846.44	\$801.90	\$798.36	\$803.52	\$795.99	\$797.11	\$633.46	\$592.75	\$614.33																																		
60	\$882.53	\$836.10	\$832.41	\$837.78	\$829.94	\$831.10	\$660.47	\$618.03	\$640.53																																		
61	\$913.75	\$865.67	\$861.85	\$867.41	\$859.29	\$860.50	\$683.84	\$639.89	\$663.18																																		
62	\$934.24	\$885.08	\$881.17	\$886.86	\$878.56	\$879.79	\$699.17	\$654.23	\$678.05																																		
63	\$959.93	\$909.42	\$905.40	\$911.25	\$902.72	\$903.99	\$718.39	\$672.22	\$696.70																																		
64+	\$975.54	\$924.21	\$920.13	\$926.07	\$917.40	\$918.69	\$730.08	\$683.16	\$708.03																																		

Effective 1/1/2018

**Tobacco Rates**

Area 1 (Clark/Nye Cnty)

**2018 MyHPN HMO  
On Exchange Rates - Southern NV**



HEALTH PLAN OF NEVADA  
A UnitedHealthcare Company

Age	MyHPN HMO Gold 5	MyHPN HMO Silver 1.1	MyHPN HMO Silver 3.1	MyHPN HMO Silver 4.1	MyHPN HMO Silver 5	MyHPN HMO Silver 6 Medicaid Transition	MyHPN HMO Bronze 7	MyHPN HMO Bronze 8	MyHPN HMO Bronze 10	MyHPN Catastrophic 1	How to calculate premium*
0-14	\$248.76	\$235.67	\$234.63	\$236.14	\$233.93	\$234.26	\$186.17	\$174.20	\$180.54	\$153.71	<p><i>*Prices are Per Person based upon age as of 1/1/2018</i></p> <p><i>Adults on policy who are age 21+</i></p> <p>Adult #1 medical \$</p> <p>Adult #2 medical \$</p> <p>Adult #3 medical \$</p> <p>Adult #4 medical \$</p> <p>Adult #5 medical \$</p> <p>add'l adult premiums: \$</p> <p>Total Adult Medical \$: \$</p> <p>Children on policy who are age 20 &amp; younger (max. of 3)*</p> <p>Child #1 \$</p> <p>Child #2 \$</p> <p>Child #3 \$</p> <p>Total Children Medical \$:</p> <p>Total Monthly Premium: \$</p>
15	\$270.87	\$256.62	\$255.48	\$257.13	\$254.73	\$255.08	\$202.71	\$189.69	\$196.59	\$167.37	
16	\$279.32	\$264.63	\$263.46	\$265.16	\$262.68	\$263.05	\$209.04	\$195.61	\$202.73	\$172.59	
17	\$287.78	\$272.64	\$271.43	\$273.19	\$270.63	\$271.01	\$215.37	\$201.53	\$208.86	\$177.82	
18	\$296.88	\$281.26	\$280.02	\$281.83	\$279.19	\$279.58	\$222.18	\$207.90	\$215.47	\$183.44	
19	\$305.99	\$289.89	\$288.61	\$290.47	\$287.75	\$288.16	\$229.00	\$214.28	\$222.08	\$189.07	
20	\$315.42	\$298.82	\$297.50	\$299.42	\$296.62	\$297.04	\$236.05	\$220.88	\$228.92	\$194.90	
21	\$325.18	\$308.07	\$306.71	\$308.69	\$305.80	\$306.23	\$243.36	\$227.72	\$236.01	\$200.93	
22	\$338.18	\$320.39	\$318.97	\$321.03	\$318.03	\$318.47	\$253.09	\$236.82	\$245.45	\$208.96	
23	\$351.19	\$332.71	\$331.24	\$333.38	\$330.26	\$330.72	\$262.82	\$245.93	\$254.89	\$217.00	
24	\$364.20	\$345.03	\$343.51	\$345.73	\$342.49	\$342.97	\$272.56	\$255.04	\$264.33	\$225.04	
25	\$378.71	\$358.78	\$357.19	\$359.50	\$356.14	\$356.64	\$283.42	\$265.21	\$274.86	\$234.00	
26	\$399.57	\$378.55	\$376.88	\$379.30	\$375.75	\$376.28	\$299.04	\$279.81	\$290.00	\$246.90	
27	\$412.34	\$390.64	\$388.93	\$391.43	\$387.76	\$388.31	\$308.59	\$288.76	\$299.26	\$254.78	
28	\$431.23	\$408.54	\$406.73	\$409.35	\$405.52	\$406.10	\$322.72	\$301.98	\$312.97	\$266.46	
29	\$447.56	\$424.01	\$422.13	\$424.86	\$420.89	\$421.48	\$334.94	\$313.41	\$324.83	\$276.55	
30	\$457.64	\$433.56	\$431.65	\$434.44	\$430.37	\$430.98	\$342.50	\$320.49	\$332.15		
31	\$471.10	\$446.31	\$444.33	\$447.21	\$443.02	\$443.65	\$352.56	\$329.90	\$341.91		
32	\$484.69	\$459.19	\$457.16	\$460.12	\$455.81	\$456.46	\$362.74	\$339.43	\$351.77		
33	\$494.74	\$468.70	\$466.63	\$469.65	\$465.25	\$465.91	\$370.25	\$346.45	\$359.06		
34	\$505.29	\$478.70	\$476.59	\$479.66	\$475.18	\$475.85	\$378.15	\$353.85	\$366.73		
35	\$512.59	\$485.63	\$483.47	\$486.60	\$482.04	\$482.73	\$383.62	\$358.96	\$372.03		
36	\$519.96	\$492.59	\$490.42	\$493.58	\$488.96	\$489.65	\$389.12	\$364.11	\$377.37		
37	\$527.36	\$499.62	\$497.40	\$500.61	\$495.93	\$496.63	\$394.66	\$369.30	\$382.75		
38	\$534.82	\$506.68	\$504.45	\$507.69	\$502.94	\$503.65	\$400.25	\$374.52	\$388.15		
39	\$545.79	\$517.07	\$514.78	\$518.11	\$513.26	\$513.99	\$408.46	\$382.21	\$396.12		
40	\$556.87	\$527.57	\$525.23	\$528.63	\$523.68	\$524.42	\$416.75	\$389.96	\$404.17		
41	\$567.32	\$537.47	\$535.10	\$538.55	\$533.52	\$534.27	\$424.57	\$397.29	\$411.75		
42	\$577.35	\$546.97	\$544.56	\$548.07	\$542.94	\$543.70	\$432.08	\$404.30	\$419.03		
43	\$591.28	\$560.18	\$557.70	\$561.31	\$556.05	\$556.83	\$442.50	\$414.07	\$429.14		
44	\$608.72	\$576.69	\$574.14	\$577.84	\$572.44	\$573.25	\$455.55	\$426.28	\$441.79		
45	\$629.19	\$596.09	\$593.45	\$597.29	\$591.70	\$592.53	\$470.88	\$440.61	\$456.65		
46	\$653.61	\$619.21	\$616.48	\$620.46	\$614.65	\$615.51	\$489.15	\$457.71	\$474.37		
47	\$691.22	\$654.85	\$651.95	\$656.17	\$650.02	\$650.93	\$517.30	\$484.05	\$501.67		
48	\$733.69	\$695.09	\$692.02	\$696.48	\$689.97	\$690.93	\$549.08	\$513.80	\$532.50		
49	\$776.65	\$735.78	\$732.53	\$737.26	\$730.36	\$731.38	\$581.23	\$543.88	\$563.68		
50	\$824.69	\$781.29	\$777.84	\$782.87	\$775.53	\$776.62	\$617.18	\$577.51	\$598.54		
51	\$879.36	\$833.09	\$829.41	\$834.76	\$826.94	\$828.10	\$658.09	\$615.80	\$638.21		
52	\$933.08	\$883.98	\$880.07	\$885.76	\$877.47	\$878.70	\$698.29	\$653.41	\$677.21		
53	\$988.40	\$936.40	\$932.26	\$938.28	\$929.50	\$930.80	\$739.71	\$692.16	\$717.37		
54	\$1,041.37	\$986.58	\$982.23	\$988.57	\$979.32	\$980.70	\$779.35	\$729.27	\$755.82		
55	\$1,087.72	\$1,030.48	\$1,025.94	\$1,032.55	\$1,022.89	\$1,024.33	\$814.03	\$761.71	\$789.45		
56	\$1,137.96	\$1,078.08	\$1,073.32	\$1,080.25	\$1,070.14	\$1,071.64	\$851.62	\$796.90	\$825.91		
57	\$1,188.69	\$1,126.14	\$1,121.17	\$1,128.40	\$1,117.84	\$1,119.42	\$889.59	\$832.42	\$862.72		
58	\$1,242.82	\$1,177.44	\$1,172.23	\$1,179.81	\$1,168.75	\$1,170.40	\$930.12	\$870.34	\$902.02		
59	\$1,269.66	\$1,202.85	\$1,197.54	\$1,205.28	\$1,193.98	\$1,195.66	\$950.19	\$889.12	\$921.49		
60	\$1,323.79	\$1,254.15	\$1,248.61	\$1,256.67	\$1,244.91	\$1,246.65	\$990.70	\$927.04	\$960.79		
61	\$1,370.62	\$1,298.50	\$1,292.77	\$1,301.11	\$1,288.93	\$1,290.75	\$1,025.76	\$959.83	\$994.77		
62	\$1,401.36	\$1,327.62	\$1,321.75	\$1,330.29	\$1,317.84	\$1,319.68	\$1,048.75	\$981.34	\$1,017.07		
63	\$1,439.89	\$1,364.13	\$1,358.10	\$1,366.87	\$1,354.08	\$1,355.98	\$1,077.58	\$1,008.33	\$1,045.05		
64+	\$1,463.31	\$1,386.31	\$1,380.19	\$1,389.10	\$1,376.10	\$1,378.03	\$1,095.12	\$1,024.74	\$1,062.04		

All premiums include state and federal taxes, fees and assessments under the Affordable Care Act.

