

## 2021 INDIVIDUAL & FAMILY PLAN MONTHLY RATE SHEET

For NON- TOBACCO users

Health Plan, Inc.

ABQ & Santa Fe:	Includes Bernalillo, Torrance, Sandoval, Valencia & Santa Fe Counties. Plus zip code 87015 (Edgewood).
Las Cruces & Farmington:	Includes San Juan and Dona Ana counties.

The monthly premium is based on **non-tobacco** use, age, zip code and number of family members covered under the plan. Tobacco rates apply if within the last six months tobacco was used 4 or more times per week on average excluding religious or ceremonial uses and e-cigarettes.

Area	ABQ & Santa Fe	Las Cruces & Farmington	All other NM counties
Age	Silver 1	Silver 1	Silver 1
0-14	\$279.02	\$390.63	\$334.83
15	\$303.83	\$425.36	\$364.59
16	\$313.31	\$438.63	\$375.97
17	\$322.79	\$451.91	\$387.35
18	\$333.01	\$466.21	\$399.61
19	\$343.22	\$480.51	\$411.86
20	\$353.80	\$495.31	\$424.56
21-24	\$364.74	\$510.63	\$437.69
25	\$366.20	\$512.68	\$439.44
26	\$373.49	\$522.89	\$448.19
27	\$382.25	\$535.14	\$458.69
28	\$396.47	\$555.06	\$475.76
29	\$408.14	\$571.40	\$489.77
30	\$413.98	\$579.57	\$496.77
31	\$422.73	\$591.82	\$507.28
32	\$431.49	\$604.08	\$517.78
33	\$436.96	\$611.74	\$524.35
34	\$442.79	\$619.91	\$531.35
35	\$445.71	\$623.99	\$534.85
36	\$448.63	\$628.08	\$538.35
37	\$451.55	\$632.16	\$541.85
38	\$454.46	\$636.25	\$545.36
39	\$460.30	\$644.42	\$552.36
40	\$466.14	\$652.59	\$559.36
41	\$474.89	\$664.84	\$569.87
42	\$483.28	\$676.59	\$579.93
43	\$494.95	\$692.93	\$593.94
44	\$509.54	\$713.35	\$611.45
44 45	\$526.68	\$737.35	\$632.02
46	·		
	\$547.11 \$570.00	\$765.95	\$656.53
47	\$570.09 \$500.35	\$798.12	\$684.10
48	\$596.35	\$834.89 \$871.14	\$715.62
49	\$622.24	·	\$746.69
50	\$651.42 \$600.04	\$911.99	\$781.71
51	\$680.24	\$952.33	\$816.28
52	\$711.97	\$996.76	\$854.36
53	\$744.07	\$1,041.69	\$892.88
54	\$778.72	\$1,090.20	\$934.46
55	\$813.37	\$1,138.71	\$976.04
56	\$850.93	\$1,191.31	\$1,021.12
57	\$888.87	\$1,244.41	\$1,066.64
58	\$929.35	\$1,301.09	\$1,115.22
59	\$949.41	\$1,329.18	\$1,139.30
60	\$989.90	\$1,385.86	\$1,187.88
61	\$1,024.91	\$1,434.88	\$1,229.90
62	\$1,047.89	\$1,467.05	\$1,257.47
63	\$1,076.71	\$1,507.39	\$1,292.05
64+	\$1,094.21	\$1,531.89	\$1,313.06



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18	\$333.01	\$466.21	\$399.61
19	\$343.22	\$480.51	\$411.86
20	\$353.80	\$495.31	\$424.56
21-24	\$401.21	\$561.70	\$481.45
25	\$402.82	\$563.94	\$483.38
26	\$410.84	\$575.18	\$493.01
27	\$420.47	\$588.66	\$504.56
28	\$436.12	\$610.56	\$523.34
29	\$448.96	\$628.54	\$538.75
30	\$476.07	\$666.50	\$571.29
31	\$486.14	\$680.60	\$583.37
32	\$496.21	\$694.69	\$595.45
33	\$502.50	\$703.50	\$603.00
34	\$509.21	\$712.90	\$611.05
35	\$512.57	\$717.59	\$615.08
36	\$515.92	\$722.29	\$619.11
37	\$519.28	\$726.99	\$623.13
38	\$522.63	\$731.69	\$627.16
39	\$529.34	\$741.08	\$635.21
40	\$536.06	\$750.48	\$643.27
41	\$546.12	\$764.57	\$655.35
42	\$555.77	\$778.08	\$666.92
43	\$569.19	\$796.87	\$683.03
44	\$585.97	\$820.36	\$703.16
45	\$632.02	\$884.83	\$758.42
46	\$656.53	\$919.14	\$787.83
47	\$684.10	\$957.74	\$820.92
48	\$715.62	\$1,001.86	\$858.74
49	\$746.69	\$1,045.37	\$896.03
50	\$781.71	\$1,094.39	\$938.05
51	\$816.28	\$1,142.80	\$979.54
52	\$854.36	\$1,196.11	\$1,025.24
53	\$892.88	\$1,250.03	\$1,071.45
54	\$934.46	\$1,308.24	\$1,121.35
55	\$976.04	\$1,366.45	\$1,171.25
56	\$1,021.12	\$1,429.57	\$1,225.35
57	\$1,066.64	\$1,493.30	\$1,279.97
58	\$1,115.22	\$1,561.31	\$1,338.27
59	\$1,139.30	\$1,595.01	\$1,367.16
60	\$1,187.88	\$1,663.03	\$1,425.45
61	\$1,229.90	\$1,721.86	\$1,475.88
62	\$1,257.47	\$1,760.46	\$1,508.97
63	\$1,292.05	\$1,808.87	\$1,550.46
64+	\$1,313.06	\$1,838.28	\$1,575.67
		ian Medicare Plans at (505) 923-8458 or 1-800	