



Regence

An Independent Licensee of the
Blue Cross and Blue Shield Association.

**Rates for Contracts Renewing April 1, 2010
to June 30, 2010 for Oregon Residents**

Blue Selections SM										Individual
Age	Premier					Plus				DentaCare
Individual	\$500 Deductible	\$1,000 Deductible	\$2,500 Deductible	\$5,000 Deductible	\$7,500 Deductible	\$500 Deductible	\$1,000 Deductible	\$2,500 Deductible	\$5,000 Deductible	No Deductible
0-17	\$150	\$138	\$110	\$90	\$70	\$132	\$117	\$89	\$69	\$31
18-20	\$198	\$182	\$145	\$118	\$92	\$174	\$154	\$118	\$90	\$31
21-24	\$238	\$218	\$174	\$142	\$111	\$209	\$185	\$141	\$109	\$31
25-29	\$253	\$233	\$185	\$151	\$118	\$223	\$197	\$151	\$116	\$31
30-34	\$289	\$266	\$212	\$173	\$135	\$254	\$225	\$172	\$132	\$31
35-39	\$309	\$284	\$226	\$185	\$144	\$271	\$241	\$184	\$141	\$31
40-44	\$396	\$364	\$290	\$237	\$185	\$348	\$309	\$236	\$181	\$31
45-49	\$468	\$430	\$342	\$280	\$218	\$411	\$364	\$278	\$214	\$31
50-54	\$543	\$499	\$397	\$325	\$254	\$477	\$423	\$323	\$248	\$31
55-59	\$654	\$601	\$479	\$391	\$305	\$575	\$509	\$389	\$299	\$31
60-64	\$753	\$692	\$551	\$450	\$352	\$662	\$587	\$448	\$345	\$31
Married Couple or Domestic Partners										
18-20	\$396	\$364	\$290	\$237	\$185	\$348	\$309	\$236	\$181	\$63
21-24	\$476	\$437	\$348	\$284	\$222	\$418	\$370	\$283	\$218	\$63
25-29	\$507	\$466	\$371	\$303	\$237	\$446	\$395	\$302	\$232	\$63
30-34	\$579	\$532	\$424	\$346	\$270	\$508	\$451	\$344	\$265	\$63
35-39	\$618	\$568	\$453	\$370	\$289	\$543	\$482	\$368	\$283	\$63
40-44	\$793	\$729	\$580	\$474	\$370	\$697	\$618	\$472	\$363	\$63
45-49	\$936	\$860	\$685	\$560	\$437	\$822	\$729	\$557	\$428	\$63
50-54	\$1,087	\$999	\$795	\$650	\$508	\$955	\$846	\$646	\$497	\$63
55-59	\$1,309	\$1,203	\$958	\$783	\$611	\$1,150	\$1,019	\$779	\$599	\$63
60-64	\$1,507	\$1,385	\$1,103	\$901	\$704	\$1,324	\$1,174	\$897	\$690	\$63
One Adult & Child(ren)										
18-20	\$349	\$320	\$255	\$208	\$163	\$306	\$271	\$207	\$159	\$60
21-24	\$388	\$357	\$284	\$232	\$181	\$341	\$302	\$231	\$178	\$60
25-29	\$404	\$371	\$296	\$242	\$189	\$355	\$315	\$240	\$185	\$60
30-34	\$440	\$404	\$322	\$263	\$205	\$386	\$343	\$262	\$201	\$60
35-39	\$460	\$422	\$336	\$275	\$215	\$404	\$358	\$273	\$210	\$60
40-44	\$547	\$503	\$400	\$327	\$255	\$481	\$426	\$325	\$250	\$60
45-49	\$618	\$568	\$453	\$370	\$289	\$543	\$482	\$368	\$283	\$60
50-54	\$694	\$638	\$508	\$415	\$324	\$609	\$540	\$413	\$317	\$60
55-59	\$805	\$740	\$589	\$481	\$376	\$707	\$627	\$479	\$368	\$60
60-64	\$904	\$831	\$662	\$541	\$422	\$794	\$704	\$538	\$414	\$60
Family										
18-20	\$547	\$503	\$400	\$327	\$255	\$481	\$426	\$325	\$250	\$90
21-24	\$626	\$576	\$458	\$374	\$292	\$550	\$488	\$373	\$287	\$90
25-29	\$658	\$605	\$482	\$393	\$307	\$578	\$512	\$391	\$301	\$90
30-34	\$730	\$670	\$534	\$436	\$341	\$641	\$568	\$434	\$334	\$90
35-39	\$769	\$707	\$563	\$460	\$359	\$676	\$599	\$458	\$352	\$90
40-44	\$944	\$867	\$691	\$564	\$441	\$829	\$735	\$561	\$432	\$90
45-49	\$1,087	\$999	\$795	\$650	\$508	\$955	\$846	\$646	\$497	\$90
50-54	\$1,237	\$1,137	\$906	\$740	\$578	\$1,087	\$964	\$736	\$566	\$90
55-59	\$1,460	\$1,341	\$1,068	\$873	\$682	\$1,282	\$1,137	\$868	\$668	\$90
60-64	\$1,658	\$1,524	\$1,214	\$992	\$775	\$1,457	\$1,291	\$986	\$759	\$90

*These Plans are CLOSED to new sales as of 2/1/10 and are no longer available.



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Rates for Contracts Renewing April 1, 2010 to June 30, 2010 for Oregon Residents

	Blue Selections SM				Regence (HSA)			HSA Qualified Plan		
Age	Basic				Health Savings Account					
Individual	\$1,000 Deductible	\$2,500 Deductible	\$5,000 Deductible	\$10,000 Deductible	\$1,500 Deductible	\$2,500 Deductible	\$3,500 Deductible	\$1,500 Deductible	\$2,500 Deductible	\$3,500 Deductible
0-17	\$104	\$81	\$61	\$36	\$116	\$98	\$87	\$111	\$93	\$82
18-20	\$137	\$106	\$80	\$47	\$152	\$129	\$114	\$147	\$123	\$108
21-24	\$164	\$128	\$97	\$57	\$183	\$155	\$137	\$176	\$148	\$130
25-29	\$175	\$136	\$103	\$60	\$195	\$165	\$147	\$188	\$158	\$139
30-34	\$200	\$156	\$118	\$69	\$222	\$188	\$167	\$214	\$180	\$158
35-39	\$214	\$166	\$126	\$74	\$238	\$201	\$179	\$229	\$192	\$169
40-44	\$274	\$213	\$161	\$95	\$305	\$258	\$229	\$294	\$247	\$217
45-49	\$323	\$252	\$191	\$112	\$360	\$304	\$271	\$347	\$291	\$256
50-54	\$375	\$292	\$221	\$130	\$418	\$353	\$314	\$403	\$338	\$298
55-59	\$452	\$352	\$267	\$157	\$503	\$426	\$379	\$485	\$407	\$358
60-64	\$521	\$406	\$307	\$180	\$580	\$490	\$436	\$558	\$469	\$413
Married Couple or Domestic Partners					\$3,000 Deductible	\$5,000 Deductible	\$7,000 Deductible	\$3,000 Deductible	\$5,000 Deductible	\$7,000 Deductible
18-20	\$274	\$213	\$161	\$95	\$305	\$258	\$229	\$294	\$247	\$217
21-24	\$329	\$256	\$194	\$114	\$366	\$310	\$275	\$353	\$296	\$261
25-29	\$351	\$273	\$207	\$121	\$390	\$330	\$294	\$376	\$316	\$278
30-34	\$400	\$312	\$236	\$138	\$445	\$377	\$335	\$429	\$360	\$317
35-39	\$428	\$333	\$252	\$148	\$476	\$403	\$358	\$458	\$385	\$339
40-44	\$548	\$427	\$323	\$190	\$610	\$516	\$459	\$588	\$494	\$435
45-49	\$647	\$504	\$382	\$224	\$720	\$609	\$542	\$694	\$583	\$513
50-54	\$751	\$585	\$443	\$260	\$836	\$707	\$629	\$806	\$677	\$596
55-59	\$905	\$705	\$534	\$314	\$1,007	\$852	\$758	\$970	\$815	\$717
60-64	\$1,042	\$812	\$615	\$361	\$1,160	\$981	\$873	\$1,117	\$939	\$826
One Adult & Child(ren)					\$3,000 Deductible	\$5,000 Deductible	\$7,000 Deductible	\$3,000 Deductible	\$5,000 Deductible	\$7,000 Deductible
18-20	\$241	\$188	\$142	\$83	\$268	\$227	\$202	\$258	\$217	\$191
21-24	\$268	\$209	\$158	\$93	\$299	\$253	\$225	\$288	\$242	\$213
25-29	\$279	\$218	\$165	\$97	\$311	\$263	\$234	\$300	\$252	\$221
30-34	\$304	\$237	\$179	\$105	\$338	\$286	\$255	\$326	\$274	\$241
35-39	\$318	\$248	\$187	\$110	\$354	\$299	\$266	\$341	\$286	\$252
40-44	\$378	\$295	\$223	\$131	\$421	\$356	\$317	\$405	\$341	\$300
45-49	\$428	\$333	\$252	\$148	\$476	\$403	\$358	\$458	\$385	\$339
50-54	\$480	\$374	\$283	\$166	\$534	\$452	\$402	\$514	\$432	\$380
55-59	\$557	\$434	\$328	\$193	\$619	\$524	\$466	\$597	\$501	\$441
60-64	\$625	\$487	\$369	\$217	\$696	\$589	\$524	\$670	\$563	\$496
Family					\$3,000 Deductible	\$5,000 Deductible	\$7,000 Deductible	\$3,000 Deductible	\$5,000 Deductible	\$7,000 Deductible
18-20	\$378	\$295	\$223	\$131	\$421	\$356	\$317	\$405	\$341	\$300
21-24	\$433	\$337	\$255	\$150	\$482	\$408	\$363	\$464	\$390	\$343
25-29	\$455	\$354	\$268	\$158	\$506	\$428	\$381	\$488	\$410	\$361
30-34	\$504	\$393	\$297	\$175	\$561	\$475	\$422	\$541	\$454	\$400
35-39	\$532	\$414	\$314	\$184	\$592	\$501	\$445	\$570	\$479	\$422
40-44	\$653	\$508	\$385	\$226	\$726	\$614	\$547	\$700	\$588	\$517
45-49	\$751	\$585	\$443	\$260	\$836	\$707	\$629	\$806	\$677	\$596
50-54	\$856	\$667	\$505	\$296	\$952	\$806	\$717	\$917	\$771	\$678
55-59	\$1,009	\$786	\$595	\$350	\$1,123	\$950	\$845	\$1,082	\$909	\$800
60-64	\$1,146	\$893	\$676	\$397	\$1,276	\$1,079	\$960	\$1,229	\$1,033	\$909

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