



Regence BlueCross BlueShield of Oregon is an independent licensee of the Blue Cross and Blue Shield Association

Rates for Contracts Effective October 1, 2009 to December 31, 2009 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	\$138	\$127	\$101	\$82	\$64	\$121	\$107	\$82	\$63	\$31	
18-20	\$182	\$167	\$133	\$109	\$85	\$160	\$142	\$108	\$83	\$31	
21-24	\$218	\$201	\$160	\$130	\$102	\$192	\$170	\$130	\$100	\$31	
25-29	\$233	\$214	\$170	\$139	\$109	\$205	\$181	\$138	\$106	\$31	
30-34	\$266	\$244	\$194	\$159	\$124	\$233	\$207	\$158	\$121	\$31	
35-39	\$284	\$261	\$208	\$170	\$132	\$249	\$221	\$169	\$130	\$31	
40-44	\$364	\$335	\$267	\$218	\$170	\$320	\$284	\$217	\$167	\$31	
45-49	\$430	\$395	\$315	\$257	\$201	\$378	\$335	\$256	\$197	\$31	
50-54	\$499	\$459	\$365	\$298	\$233	\$439	\$389	\$297	\$228	\$31	
55-59	\$601	\$553	\$440	\$360	\$281	\$528	\$468	\$358	\$275	\$31	
60-64	\$693	\$636	\$507	\$414	\$323	\$608	\$539	\$412	\$317	\$31	
Married Couple or Domestic Partners											
18-20	\$364	\$335	\$267	\$218	\$170	\$320	\$284	\$217	\$167	\$63	
21-24	\$437	\$402	\$320	\$261	\$204	\$384	\$340	\$260	\$200	\$63	
25-29	\$466	\$429	\$341	\$279	\$218	\$410	\$363	\$277	\$213	\$63	
30-34	\$532	\$489	\$389	\$318	\$248	\$467	\$414	\$316	\$243	\$63	
35-39	\$569	\$522	\$416	\$340	\$265	\$499	\$443	\$338	\$260	\$63	
40-44	\$729	\$670	\$534	\$436	\$340	\$640	\$568	\$434	\$334	\$63	
45-49	\$860	\$791	\$630	\$514	\$402	\$756	\$670	\$512	\$394	\$63	
50-54	\$999	\$918	\$731	\$597	\$467	\$878	\$778	\$594	\$457	\$63	
55-59	\$1,203	\$1,106	\$881	\$720	\$562	\$1,057	\$937	\$716	\$551	\$63	
60-64	\$1,386	\$1,273	\$1,014	\$829	\$647	\$1,217	\$1,079	\$824	\$634	\$63	
One Adult & Child(ren)											
18-20	\$321	\$295	\$235	\$192	\$150	\$282	\$250	\$191	\$147	\$60	
21-24	\$357	\$328	\$261	\$213	\$167	\$314	\$278	\$212	\$163	\$60	
25-29	\$372	\$341	\$272	\$222	\$173	\$326	\$289	\$221	\$170	\$60	
30-34	\$404	\$372	\$296	\$242	\$189	\$355	\$315	\$240	\$185	\$60	
35-39	\$423	\$388	\$309	\$253	\$197	\$371	\$329	\$251	\$193	\$60	
40-44	\$503	\$462	\$368	\$301	\$235	\$442	\$392	\$299	\$230	\$60	
45-49	\$569	\$522	\$416	\$340	\$265	\$499	\$443	\$338	\$260	\$60	
50-54	\$638	\$586	\$467	\$381	\$298	\$560	\$497	\$379	\$292	\$60	
55-59	\$740	\$680	\$542	\$442	\$346	\$650	\$576	\$440	\$339	\$60	
60-64	\$831	\$764	\$608	\$497	\$388	\$730	\$647	\$494	\$380	\$60	
Family											
18-20	\$503	\$462	\$368	\$301	\$235	\$442	\$392	\$299	\$230	\$90	
21-24	\$576	\$529	\$421	\$344	\$269	\$506	\$448	\$342	\$263	\$90	
25-29	\$605	\$556	\$443	\$362	\$282	\$532	\$471	\$360	\$277	\$90	
30-34	\$671	\$616	\$491	\$401	\$313	\$589	\$522	\$399	\$307	\$90	
35-39	\$707	\$650	\$518	\$423	\$330	\$621	\$551	\$421	\$324	\$90	
40-44	\$868	\$797	\$635	\$519	\$405	\$762	\$676	\$516	\$397	\$90	
45-49	\$999	\$918	\$731	\$597	\$467	\$878	\$778	\$594	\$457	\$90	
50-54	\$1,138	\$1,045	\$833	\$680	\$531	\$999	\$886	\$677	\$521	\$90	
55-59	\$1,342	\$1,233	\$982	\$803	\$627	\$1,179	\$1,045	\$798	\$614	\$90	
60-64	\$1,524	\$1,401	\$1,116	\$912	\$712	\$1,339	\$1,187	\$907	\$698	\$90	

Contracts can be purchased for children 0-17. Only one child per contract.
Age of eldest applicant determines rate.

Individual DentaCare available with any Blue Selections or HSA product (see over).

* Regence Premier \$500, Plus \$500 and HSA Qualified Plans are not available for new sales.



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Rates for Contracts Effective October 1, 2009 to December 31, 2009 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	\$95	\$74	\$56	\$33	\$106	\$90	\$80	\$102	\$86	\$76
18-20	\$126	\$98	\$74	\$43	\$140	\$118	\$105	\$135	\$113	\$100
21-24	\$151	\$117	\$89	\$52	\$168	\$142	\$126	\$162	\$136	\$120
25-29	\$161	\$125	\$95	\$56	\$179	\$152	\$135	\$173	\$145	\$128
30-34	\$184	\$143	\$108	\$63	\$204	\$173	\$154	\$197	\$165	\$146
35-39	\$196	\$153	\$116	\$68	\$218	\$185	\$164	\$210	\$177	\$156
40-44	\$252	\$196	\$148	\$87	\$280	\$237	\$211	\$270	\$227	\$200
45-49	\$297	\$231	\$175	\$103	\$331	\$280	\$249	\$319	\$268	\$236
50-54	\$345	\$269	\$203	\$119	\$384	\$325	\$289	\$370	\$311	\$274
55-59	\$416	\$324	\$245	\$144	\$463	\$391	\$348	\$446	\$375	\$330
60-64	\$479	\$373	\$282	\$166	\$533	\$451	\$401	\$513	\$431	\$380
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	\$252	\$196	\$148	\$87	\$280	\$237	\$211	\$270	\$227	\$200
21-24	\$302	\$235	\$178	\$105	\$336	\$285	\$253	\$324	\$272	\$240
25-29	\$322	\$251	\$190	\$112	\$359	\$304	\$270	\$346	\$290	\$256
30-34	\$368	\$287	\$217	\$127	\$409	\$346	\$308	\$394	\$331	\$292
35-39	\$393	\$306	\$232	\$136	\$437	\$370	\$329	\$421	\$354	\$312
40-44	\$504	\$393	\$297	\$175	\$561	\$475	\$422	\$540	\$454	\$400
45-49	\$595	\$463	\$351	\$206	\$662	\$560	\$498	\$638	\$536	\$472
50-54	\$691	\$538	\$407	\$239	\$769	\$650	\$579	\$741	\$622	\$548
55-59	\$832	\$648	\$491	\$288	\$926	\$783	\$697	\$892	\$750	\$660
60-64	\$958	\$747	\$565	\$332	\$1,066	\$902	\$803	\$1,027	\$863	\$760
One Adult & Child(ren)					\$3,000 Deductible	\$5,000 Deductible	\$7,000 Deductible	\$3,000 Deductible	\$5,000 Deductible	\$7,000 Deductible
18-20	\$222	\$173	\$131	\$77	\$247	\$209	\$186	\$238	\$200	\$176
21-24	\$247	\$192	\$145	\$85	\$275	\$232	\$207	\$265	\$222	\$196
25-29	\$257	\$200	\$151	\$89	\$286	\$242	\$215	\$275	\$231	\$204
30-34	\$280	\$218	\$165	\$97	\$311	\$263	\$234	\$300	\$252	\$222
35-39	\$292	\$228	\$172	\$101	\$325	\$275	\$245	\$313	\$263	\$232
40-44	\$348	\$271	\$205	\$120	\$387	\$327	\$291	\$373	\$313	\$276
45-49	\$393	\$306	\$232	\$136	\$437	\$370	\$329	\$421	\$354	\$312
50-54	\$441	\$344	\$260	\$153	\$491	\$415	\$369	\$473	\$397	\$350
55-59	\$512	\$399	\$302	\$177	\$569	\$482	\$429	\$549	\$461	\$406
60-64	\$575	\$448	\$339	\$199	\$639	\$541	\$481	\$616	\$518	\$456
Family					\$3,000 Deductible	\$5,000 Deductible	\$7,000 Deductible	\$3,000 Deductible	\$5,000 Deductible	\$7,000 Deductible
18-20	\$348	\$271	\$205	\$120	\$387	\$327	\$291	\$373	\$313	\$276
21-24	\$398	\$310	\$235	\$138	\$443	\$375	\$333	\$427	\$359	\$316
25-29	\$418	\$326	\$247	\$145	\$465	\$394	\$350	\$449	\$377	\$332
30-34	\$464	\$361	\$273	\$161	\$516	\$437	\$388	\$497	\$418	\$368
35-39	\$489	\$381	\$288	\$169	\$544	\$460	\$410	\$524	\$440	\$388
40-44	\$600	\$467	\$354	\$208	\$668	\$565	\$503	\$643	\$540	\$476
45-49	\$691	\$538	\$407	\$239	\$769	\$650	\$579	\$741	\$622	\$548
50-54	\$787	\$613	\$464	\$273	\$875	\$741	\$659	\$843	\$709	\$624
55-59	\$928	\$723	\$547	\$322	\$1,032	\$874	\$777	\$995	\$836	\$736
60-64	\$1,054	\$821	\$622	\$365	\$1,173	\$992	\$883	\$1,130	\$950	\$836

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