



2027 HMO MyHPN On Exchange Rates
Rating Area 2 Washoe County

Health Plan of Nevada
A UnitedHealthcare Company

MyHPN Plan/Age	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30
Gold 6	\$653.48	\$711.57	\$733.78	\$755.99	\$779.91	\$803.82	\$828.60	\$854.22	\$854.22	\$854.22	\$854.22	\$857.64	\$874.73	\$895.23	\$928.54	\$955.88	\$969.54
Silver 1.1	\$519.89	\$566.10	\$583.77	\$601.44	\$620.47	\$639.50	\$659.21	\$679.59	\$679.59	\$679.59	\$679.59	\$682.31	\$695.90	\$712.21	\$738.72	\$760.47	\$771.34
Silver 10	\$516.92	\$562.86	\$580.43	\$598.00	\$616.92	\$635.84	\$655.44	\$675.71	\$675.71	\$675.71	\$675.71	\$678.41	\$691.92	\$708.14	\$734.49	\$756.12	\$766.93
Silver 11	\$502.44	\$547.10	\$564.18	\$581.25	\$599.64	\$618.03	\$637.08	\$656.78	\$656.78	\$656.78	\$656.78	\$659.41	\$672.54	\$688.31	\$713.92	\$734.94	\$745.45
Copay Focus Bronze 1	\$404.53	\$440.49	\$454.24	\$467.98	\$482.79	\$497.60	\$512.93	\$528.80	\$528.80	\$528.80	\$528.80	\$530.91	\$541.49	\$554.18	\$574.80	\$591.72	\$600.18
Bronze 3	\$369.22	\$402.04	\$414.59	\$427.14	\$440.65	\$454.17	\$468.17	\$482.64	\$482.64	\$482.64	\$482.64	\$484.58	\$494.23	\$505.81	\$524.64	\$540.08	\$547.80
Plus Bronze 4	\$370.51	\$403.45	\$416.04	\$428.63	\$442.20	\$455.76	\$469.80	\$484.33	\$484.33	\$484.33	\$484.33	\$486.27	\$495.96	\$507.58	\$526.47	\$541.97	\$549.72
Plus Bronze 5	\$388.71	\$423.27	\$436.48	\$449.69	\$463.92	\$478.14	\$492.88	\$508.12	\$508.12	\$508.12	\$508.12	\$510.16	\$520.32	\$532.51	\$552.33	\$568.59	\$576.72
Virtual	\$365.71	\$398.21	\$410.64	\$423.07	\$436.46	\$449.84	\$463.71	\$478.05	\$478.05	\$478.05	\$478.05	\$479.96	\$489.52	\$500.99	\$519.64	\$534.94	\$542.58
Catastrophic	\$306.09	\$333.30	\$343.70	\$354.10	\$365.30	\$376.51	\$388.11	\$400.11	\$400.11	\$400.11	\$400.11	\$401.71	\$409.72	\$419.32	\$434.92	\$447.73	\$454.13
BBSP Gold 1.2	\$623.06	\$678.44	\$699.61	\$720.79	\$743.60	\$766.40	\$790.02	\$814.45	\$814.45	\$814.45	\$814.45	\$817.71	\$834.00	\$853.55	\$885.31	\$911.37	\$924.40
BBSP Silver 1.2	\$403.03	\$438.86	\$452.56	\$466.25	\$481.00	\$495.76	\$511.03	\$526.84	\$526.84	\$526.84	\$526.84	\$528.95	\$539.48	\$552.13	\$572.68	\$589.53	\$597.96
BBSP Bronze 1.2	\$352.20	\$383.51	\$395.48	\$407.45	\$420.34	\$433.23	\$446.58	\$460.39	\$460.39	\$460.39	\$460.39	\$462.23	\$471.44	\$482.49	\$500.45	\$515.18	\$522.54

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



2027 HMO MyHPN On Exchange Rates
Rating Area 2 Washoe County

Health Plan of Nevada
A UnitedHealthcare Company

MyHPN Plan/Age	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47
Gold 6	\$990.05	\$1,010.55	\$1,023.36	\$1,037.03	\$1,043.86	\$1,050.70	\$1,057.53	\$1,064.36	\$1,078.03	\$1,091.70	\$1,112.20	\$1,131.85	\$1,159.18	\$1,193.35	\$1,233.50	\$1,281.34	\$1,335.15
Silver 1.1	\$787.65	\$803.96	\$814.15	\$825.03	\$830.46	\$835.90	\$841.34	\$846.77	\$857.65	\$868.52	\$884.83	\$900.46	\$922.21	\$949.39	\$981.33	\$1,019.39	\$1,062.21
Silver 10	\$783.15	\$799.36	\$809.50	\$820.31	\$825.71	\$831.12	\$836.53	\$841.93	\$852.74	\$863.55	\$879.77	\$895.31	\$916.94	\$943.96	\$975.72	\$1,013.56	\$1,056.13
Silver 11	\$761.21	\$776.97	\$786.82	\$797.33	\$802.59	\$807.84	\$813.10	\$818.35	\$828.86	\$839.37	\$855.13	\$870.24	\$891.25	\$917.52	\$948.39	\$985.17	\$1,026.55
Copay Focus Bronze 1	\$612.87	\$625.57	\$633.50	\$641.96	\$646.19	\$650.42	\$654.65	\$658.88	\$667.34	\$675.80	\$688.49	\$700.65	\$717.58	\$738.73	\$763.58	\$793.19	\$826.51
Bronze 3	\$559.39	\$570.97	\$578.21	\$585.93	\$589.79	\$593.65	\$597.51	\$601.38	\$609.10	\$616.82	\$628.40	\$639.50	\$654.95	\$674.25	\$696.94	\$723.97	\$754.37
Plus Bronze 4	\$561.34	\$572.97	\$580.23	\$587.98	\$591.85	\$595.73	\$599.60	\$603.48	\$611.23	\$618.98	\$630.60	\$641.74	\$657.24	\$676.61	\$699.38	\$726.50	\$757.01
Plus Bronze 5	\$588.91	\$601.11	\$608.73	\$616.86	\$620.93	\$624.99	\$629.06	\$633.12	\$641.25	\$649.38	\$661.58	\$673.26	\$689.52	\$709.85	\$733.73	\$762.18	\$794.20
Virtual	\$554.06	\$565.53	\$572.70	\$580.35	\$584.17	\$588.00	\$591.82	\$595.65	\$603.30	\$610.94	\$622.42	\$633.41	\$648.71	\$667.83	\$690.30	\$717.07	\$747.19
BBSP Gold 1.2	\$943.95	\$963.50	\$975.71	\$988.75	\$995.26	\$1,001.78	\$1,008.29	\$1,014.81	\$1,027.84	\$1,040.87	\$1,060.42	\$1,079.15	\$1,105.21	\$1,137.79	\$1,176.07	\$1,221.68	\$1,272.99
BBSP Silver 1.2	\$610.61	\$623.25	\$631.15	\$639.58	\$643.80	\$648.01	\$652.23	\$656.44	\$664.87	\$673.30	\$685.95	\$698.06	\$714.92	\$736.00	\$760.76	\$790.26	\$823.45
BBSP Bronze 1.2	\$533.59	\$544.64	\$551.55	\$558.92	\$562.60	\$566.28	\$569.96	\$573.65	\$581.01	\$588.38	\$599.43	\$610.02	\$624.75	\$643.17	\$664.81	\$690.59	\$719.59

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



2027 HMO MyHPN On Exchange Rates
Rating Area 2 Washoe County

Health Plan of Nevada
A UnitedHealthcare Company

MyHPN Plan/Age	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
Gold 6	\$1,396.66	\$1,457.31	\$1,525.64	\$1,593.13	\$1,667.45	\$1,742.62	\$1,823.77	\$1,904.92	\$1,992.90	\$2,081.74	\$2,176.56	\$2,223.54	\$2,318.36	\$2,400.37	\$2,454.19	\$2,521.67	\$2,562.66
Silver 1.1	\$1,111.14	\$1,159.39	\$1,213.76	\$1,267.44	\$1,326.57	\$1,386.37	\$1,450.93	\$1,515.50	\$1,585.49	\$1,656.17	\$1,731.61	\$1,768.98	\$1,844.42	\$1,909.66	\$1,952.47	\$2,006.16	\$2,038.77
Silver 10	\$1,104.78	\$1,152.76	\$1,206.81	\$1,260.20	\$1,318.98	\$1,378.44	\$1,442.64	\$1,506.83	\$1,576.43	\$1,646.70	\$1,721.70	\$1,758.87	\$1,833.87	\$1,898.74	\$1,941.31	\$1,994.69	\$2,027.12
Silver 11	\$1,073.84	\$1,120.47	\$1,173.01	\$1,224.90	\$1,282.04	\$1,339.83	\$1,402.23	\$1,464.62	\$1,532.27	\$1,600.58	\$1,673.48	\$1,709.60	\$1,782.50	\$1,845.56	\$1,886.93	\$1,938.82	\$1,970.34
Copay Focus Bronze 1	\$864.58	\$902.13	\$944.43	\$986.20	\$1,032.21	\$1,078.74	\$1,128.98	\$1,179.21	\$1,233.68	\$1,288.67	\$1,347.37	\$1,376.45	\$1,435.15	\$1,485.92	\$1,519.23	\$1,561.00	\$1,586.39
Bronze 3	\$789.12	\$823.39	\$862.00	\$900.13	\$942.12	\$984.60	\$1,030.45	\$1,076.30	\$1,126.01	\$1,176.21	\$1,229.78	\$1,256.32	\$1,309.90	\$1,356.23	\$1,386.64	\$1,424.77	\$1,447.92
Plus Bronze 4	\$791.88	\$826.27	\$865.02	\$903.28	\$945.42	\$988.04	\$1,034.05	\$1,080.06	\$1,129.95	\$1,180.32	\$1,234.08	\$1,260.72	\$1,314.48	\$1,360.98	\$1,391.49	\$1,429.75	\$1,452.99
Plus Bronze 5	\$830.78	\$866.86	\$907.51	\$947.65	\$991.86	\$1,036.57	\$1,084.84	\$1,133.11	\$1,185.45	\$1,238.30	\$1,294.70	\$1,322.64	\$1,379.05	\$1,427.83	\$1,459.84	\$1,499.98	\$1,524.36
Virtual	\$781.61	\$815.55	\$853.79	\$891.56	\$933.15	\$975.22	\$1,020.63	\$1,066.05	\$1,115.28	\$1,165.00	\$1,218.07	\$1,244.36	\$1,297.42	\$1,343.31	\$1,373.43	\$1,411.20	\$1,434.14
BBSP Gold 1.2	\$1,331.63	\$1,389.46	\$1,454.61	\$1,518.95	\$1,589.81	\$1,661.48	\$1,738.86	\$1,816.23	\$1,900.12	\$1,984.82	\$2,075.23	\$2,120.02	\$2,210.42	\$2,288.61	\$2,339.92	\$2,404.26	\$2,443.35
BBSP Silver 1.2	\$861.38	\$898.79	\$940.94	\$982.56	\$1,028.39	\$1,074.75	\$1,124.80	\$1,174.85	\$1,229.12	\$1,283.91	\$1,342.39	\$1,371.36	\$1,429.84	\$1,480.42	\$1,513.61	\$1,555.23	\$1,580.52
BBSP Bronze 1.2	\$752.74	\$785.43	\$822.26	\$858.63	\$898.68	\$939.20	\$982.94	\$1,026.67	\$1,074.09	\$1,121.97	\$1,173.08	\$1,198.40	\$1,249.50	\$1,293.70	\$1,322.71	\$1,359.08	\$1,381.17

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



2027 HMO MyHPN On Exchange Rates
Rating Area 2 Washoe County

Health Plan of Nevada
A UnitedHealthcare Company

MyHPN Plan/Age	0-14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30
Gold 6	\$653.48	\$711.57	\$733.78	\$755.99	\$779.91	\$803.82	\$828.60	\$854.22	\$888.39	\$922.56	\$956.73	\$994.86	\$1,049.68	\$1,083.23	\$1,132.82	\$1,175.73	\$1,202.23
Silver 1.1	\$519.89	\$566.10	\$583.77	\$601.44	\$620.47	\$639.50	\$659.21	\$679.59	\$706.77	\$733.96	\$761.14	\$791.48	\$835.08	\$861.77	\$901.24	\$935.38	\$956.46
Silver 10	\$516.92	\$562.86	\$580.43	\$598.00	\$616.92	\$635.84	\$655.44	\$675.71	\$702.74	\$729.77	\$756.80	\$786.96	\$830.30	\$856.85	\$896.08	\$930.03	\$950.99
Silver 11	\$502.44	\$547.10	\$564.18	\$581.25	\$599.64	\$618.03	\$637.08	\$656.78	\$683.05	\$709.32	\$735.59	\$764.92	\$807.05	\$832.86	\$870.98	\$903.98	\$924.36
Copay Focus Bronze 1	\$404.53	\$440.49	\$454.24	\$467.98	\$482.79	\$497.60	\$512.93	\$528.80	\$549.95	\$571.10	\$592.26	\$615.86	\$649.79	\$670.56	\$701.26	\$727.82	\$744.22
Bronze 3	\$369.22	\$402.04	\$414.59	\$427.14	\$440.65	\$454.17	\$468.17	\$482.64	\$501.95	\$521.25	\$540.56	\$562.11	\$593.08	\$612.03	\$640.06	\$664.30	\$679.27
Plus Bronze 4	\$370.51	\$403.45	\$416.04	\$428.63	\$442.20	\$455.76	\$469.80	\$484.33	\$503.70	\$523.08	\$542.45	\$564.07	\$595.15	\$614.17	\$642.29	\$666.62	\$681.65
Plus Bronze 5	\$388.71	\$423.27	\$436.48	\$449.69	\$463.92	\$478.14	\$492.88	\$508.12	\$528.44	\$548.77	\$569.09	\$591.79	\$624.38	\$644.34	\$673.84	\$699.37	\$715.13
Virtual	\$365.71	\$398.21	\$410.64	\$423.07	\$436.46	\$449.84	\$463.71	\$478.05	\$497.17	\$516.29	\$535.42	\$556.75	\$587.42	\$606.20	\$633.96	\$657.98	\$672.80
Catastrophic	\$306.09	\$333.30	\$343.70	\$354.10	\$365.30	\$376.51	\$388.11	\$400.11	\$416.11	\$432.12	\$448.12	\$465.98	\$491.66	\$507.38	\$530.60	\$550.71	\$563.12
BBSP Gold 1.2	\$623.06	\$678.44	\$699.61	\$720.79	\$743.60	\$766.40	\$790.02	\$814.45	\$847.03	\$879.61	\$912.18	\$948.54	\$1,000.80	\$1,032.80	\$1,080.08	\$1,120.99	\$1,146.26
BBSP Silver 1.2	\$403.03	\$438.86	\$452.56	\$466.25	\$481.00	\$495.76	\$511.03	\$526.84	\$547.91	\$568.99	\$590.06	\$613.58	\$647.38	\$668.08	\$698.67	\$725.12	\$741.47
BBSP Bronze 1.2	\$352.20	\$383.51	\$395.48	\$407.45	\$420.34	\$433.23	\$446.58	\$460.39	\$478.81	\$497.22	\$515.64	\$536.19	\$565.73	\$583.81	\$610.55	\$633.67	\$647.95

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



2027 HMO MyHPN On Exchange Rates
Rating Area 2 Washoe County

Health Plan of Nevada
A UnitedHealthcare Company

MyHPN Plan/Age	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47
Gold 6	\$1,237.56	\$1,273.29	\$1,299.67	\$1,327.40	\$1,346.58	\$1,365.91	\$1,385.36	\$1,404.96	\$1,433.78	\$1,462.88	\$1,490.35	\$1,516.68	\$1,553.30	\$1,599.09	\$1,652.89	\$1,717.00	\$1,815.80
Silver 1.1	\$984.56	\$1,012.99	\$1,033.97	\$1,056.04	\$1,071.29	\$1,086.67	\$1,102.16	\$1,117.74	\$1,140.67	\$1,163.82	\$1,185.67	\$1,206.62	\$1,235.76	\$1,272.18	\$1,314.98	\$1,365.98	\$1,444.61
Silver 10	\$978.94	\$1,007.19	\$1,028.07	\$1,050.00	\$1,065.17	\$1,080.46	\$1,095.85	\$1,111.35	\$1,134.14	\$1,157.16	\$1,178.89	\$1,199.72	\$1,228.70	\$1,264.91	\$1,307.46	\$1,358.17	\$1,436.34
Silver 11	\$951.51	\$978.98	\$999.26	\$1,020.58	\$1,035.34	\$1,050.19	\$1,065.16	\$1,080.22	\$1,102.38	\$1,124.76	\$1,145.87	\$1,166.12	\$1,194.28	\$1,229.48	\$1,270.84	\$1,320.13	\$1,396.11
Copay Focus Bronze 1	\$766.09	\$788.22	\$804.55	\$821.71	\$833.59	\$845.55	\$857.59	\$869.72	\$887.56	\$905.57	\$922.58	\$938.87	\$961.56	\$989.90	\$1,023.20	\$1,062.87	\$1,124.05
Bronze 3	\$699.24	\$719.42	\$734.33	\$749.99	\$760.83	\$771.75	\$782.74	\$793.82	\$810.10	\$826.54	\$842.06	\$856.93	\$877.63	\$903.50	\$933.90	\$970.12	\$1,025.94
Plus Bronze 4	\$701.68	\$721.94	\$736.89	\$752.61	\$763.49	\$774.45	\$785.48	\$796.59	\$812.94	\$829.43	\$845.00	\$859.93	\$880.70	\$906.66	\$937.17	\$973.51	\$1,029.53
Plus Bronze 5	\$736.14	\$757.40	\$773.09	\$789.58	\$801.00	\$812.49	\$824.07	\$835.72	\$852.86	\$870.17	\$886.52	\$902.17	\$923.96	\$951.20	\$983.20	\$1,021.32	\$1,080.11
Virtual	\$692.58	\$712.57	\$727.33	\$742.85	\$753.58	\$764.40	\$775.28	\$786.26	\$802.39	\$818.66	\$834.04	\$848.77	\$869.27	\$894.89	\$925.00	\$960.87	\$1,016.18
BBSP Gold 1.2	\$1,179.94	\$1,214.01	\$1,239.15	\$1,265.60	\$1,283.89	\$1,302.31	\$1,320.86	\$1,339.55	\$1,367.03	\$1,394.77	\$1,420.96	\$1,446.06	\$1,480.98	\$1,524.64	\$1,575.93	\$1,637.05	\$1,731.27
BBSP Silver 1.2	\$763.26	\$785.30	\$801.56	\$818.66	\$830.50	\$842.41	\$854.42	\$866.50	\$884.28	\$902.22	\$919.17	\$935.40	\$957.99	\$986.24	\$1,019.42	\$1,058.95	\$1,119.89
BBSP Bronze 1.2	\$666.99	\$686.25	\$700.47	\$715.42	\$725.75	\$736.16	\$746.65	\$757.22	\$772.74	\$788.43	\$803.24	\$817.43	\$837.17	\$861.85	\$890.85	\$925.39	\$978.64

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



2027 HMO MyHPN On Exchange Rates
Rating Area 2 Washoe County

Health Plan of Nevada
A UnitedHealthcare Company 

MyHPN Plan/Age	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64+
Gold 6	\$1,927.39	\$2,040.23	\$2,166.41	\$2,310.04	\$2,451.15	\$2,596.50	\$2,735.65	\$2,857.38	\$2,989.35	\$3,122.61	\$3,264.84	\$3,335.31	\$3,477.54	\$3,600.55	\$3,681.28	\$3,782.50	\$3,843.99
Silver 1.1	\$1,533.37	\$1,623.15	\$1,723.54	\$1,837.79	\$1,950.06	\$2,065.69	\$2,176.39	\$2,273.25	\$2,378.23	\$2,484.25	\$2,597.41	\$2,653.47	\$2,766.63	\$2,864.49	\$2,928.70	\$3,009.24	\$3,058.15
Silver 10	\$1,524.60	\$1,613.86	\$1,713.67	\$1,827.29	\$1,938.90	\$2,053.88	\$2,163.96	\$2,260.24	\$2,364.64	\$2,470.05	\$2,582.55	\$2,638.30	\$2,750.80	\$2,848.11	\$2,911.96	\$2,992.03	\$3,040.68
Silver 11	\$1,481.90	\$1,568.66	\$1,665.67	\$1,776.11	\$1,884.60	\$1,996.35	\$2,103.34	\$2,196.93	\$2,298.40	\$2,400.87	\$2,510.22	\$2,564.40	\$2,673.75	\$2,768.34	\$2,830.39	\$2,908.23	\$2,955.51
Copay Focus Bronze 1	\$1,193.12	\$1,262.98	\$1,341.09	\$1,429.99	\$1,517.35	\$1,607.32	\$1,693.47	\$1,768.81	\$1,850.52	\$1,933.00	\$2,021.05	\$2,064.67	\$2,152.72	\$2,228.88	\$2,278.84	\$2,341.50	\$2,379.58
Bronze 3	\$1,088.99	\$1,152.75	\$1,224.04	\$1,305.19	\$1,384.92	\$1,467.05	\$1,545.67	\$1,614.45	\$1,689.01	\$1,764.31	\$1,844.67	\$1,884.48	\$1,964.85	\$2,034.34	\$2,079.96	\$2,137.15	\$2,171.88
Plus Bronze 4	\$1,092.79	\$1,156.78	\$1,228.33	\$1,309.76	\$1,389.77	\$1,472.18	\$1,551.07	\$1,620.09	\$1,694.92	\$1,770.48	\$1,851.12	\$1,891.08	\$1,971.72	\$2,041.47	\$2,087.23	\$2,144.62	\$2,179.48
Plus Bronze 5	\$1,146.48	\$1,213.60	\$1,288.66	\$1,374.09	\$1,458.03	\$1,544.49	\$1,627.26	\$1,699.66	\$1,778.17	\$1,857.45	\$1,942.05	\$1,983.96	\$2,068.57	\$2,141.74	\$2,189.76	\$2,249.97	\$2,286.54
Virtual	\$1,078.62	\$1,141.77	\$1,212.38	\$1,292.76	\$1,371.73	\$1,453.08	\$1,530.94	\$1,599.07	\$1,672.92	\$1,747.50	\$1,827.10	\$1,866.54	\$1,946.13	\$2,014.96	\$2,060.14	\$2,116.80	\$2,151.21
BBSP Gold 1.2	\$1,837.65	\$1,945.24	\$2,065.55	\$2,202.48	\$2,337.02	\$2,475.61	\$2,608.29	\$2,724.34	\$2,850.18	\$2,977.23	\$3,112.84	\$3,180.03	\$3,315.63	\$3,432.91	\$3,509.88	\$3,606.39	\$3,665.02
BBSP Silver 1.2	\$1,188.70	\$1,258.31	\$1,336.13	\$1,424.71	\$1,511.73	\$1,601.38	\$1,687.20	\$1,762.27	\$1,843.68	\$1,925.86	\$2,013.58	\$2,057.04	\$2,144.76	\$2,220.63	\$2,270.41	\$2,332.84	\$2,370.78
BBSP Bronze 1.2	\$1,038.78	\$1,099.60	\$1,167.61	\$1,245.01	\$1,321.06	\$1,399.41	\$1,474.41	\$1,540.00	\$1,611.13	\$1,682.95	\$1,759.62	\$1,797.60	\$1,874.25	\$1,940.55	\$1,984.06	\$2,038.62	\$2,071.75

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