Plan	Plan Code	Coverage Code	Type	2015 Rate	2016 Rate	$ Diff	% Diff	STATE
Aetna Direct All	N6	1	Self	$113.78	$118.33	$4.55	4%	DC MD VA
Aetna Direct All	N6	2	Family	$256.98	$298.42	$41.44	16%	DC MD VA
Aetna Direct All	N6	3	Self+1	NA	$259.50	NA	NA	DC MD VA
Aetna HealthFund CDHP and Value Plan All of Washington DC	F5	1	Self	$151.67	$185.27	$33.60	22%	DC MD VA
Aetna HealthFund CDHP and Value Plan All of Washington DC	F5	2	Family	$366.45	$418.10	$51.65	14%	DC MD VA
Aetna HealthFund CDHP and Value Plan All of Washington DC	F5	3	Self+1	NA	$463.01	NA	NA	DC MD VA
Aetna HealthFund CDHP and Value Plan All of Washington DC	F5	4	Self	$131.89	$135.76	$3.87	3%	DC MD VA
Aetna HealthFund CDHP and Value Plan All of Washington DC	F5	5	Family	$299.52	$310.88	$11.36	4%	DC MD VA
Aetna HealthFund CDHP and Value Plan All of Washington DC	F5	6	Self+1	NA	$304.78	NA	NA	DC MD VA
Aetna HealthFund HDHP All	22	4	Self	$122.88	$130.08	$7.20	6%	DC MD VA
Aetna HealthFund HDHP All	22	5	Family	$269.12	$286.94	$17.82	7%	DC MD VA
Aetna HealthFund HDHP All	22	6	Self+1	NA	$281.31	NA	NA	DC MD VA
Aetna Open Access Washington, DC Area - Basic Option	JN	4	Self	$144.02	$149.48	$5.46	4%	DC MD VA
Aetna Open Access Washington, DC Area - Basic Option	JN	5	Family	$322.03	$336.46	$14.43	4%	DC MD VA
Aetna Open Access Washington, DC Area - Basic Option	JN	6	Self+1	NA	$329.86	NA	NA	DC MD VA
Aetna Open Access Washington, DC Area - High Option	JN	1	Self	$487.00	$497.21	$10.21	2%	DC MD VA
Aetna Open Access Washington, DC Area - High Option	JN	2	Family	$1,099.37	$1,098.71	-$0.66	0%	DC MD VA
Aetna Open Access Washington, DC Area - High Option	JN	3	Self+1	NA	$1,136.91	NA	NA	DC MD VA
Aetna Whole Health Newport News, VA area	J9	1	Self	$116.19	$139.42	$23.23	20%	VA
Aetna Whole Health Newport News, VA area	J9	2	Family	$302.46	$399.88	$97.42	32%	VA
Aetna Whole Health Newport News, VA area	J9	3	Self+1	NA	$444.97	NA	NA	VA
Aetna Whole Health Roanoke, VA area	D9	1	Self	$125.02	$131.19	$6.17	5%	VA
Aetna Whole Health Roanoke, VA area	D9	2	Family	$420.14	$414.39	-$5.75	-1%	VA
Aetna Whole Health Roanoke, VA area	D9	3	Self+1	NA	$459.37	NA	NA	VA
APWU Health Plan Nationwide - CDHP Option	47	4	Self	$100.34	$112.54	$12.20	12%	DC MD VA
APWU Health Plan Nationwide - CDHP Option	47	5	Family	$225.73	$270.08	$44.35	20%	DC MD VA

Plan	Plan Code	Coverage Code	Type	2015 Rate	2016 Rate	$ Diff	% Diff	STATE
APWU Health Plan Nationwide - CDHP Option	47	6	Self+1	NA	$247.58	NA	NA	DC MD VA
APWU Health Plan Nationwide - High Option	47	1	Self	$140.12	$173.34	$33.22	24%	DC MD VA
APWU Health Plan Nationwide - High Option	47	2	Family	$316.83	$467.13	$150.30	47%	DC MD VA
APWU Health Plan Nationwide - High Option	47	3	Self+1	NA	$335.98	NA	NA	DC MD VA
Blue Cross and Blue Shield Service Benefit Plan Nationwide - Basic	11	1	Self	$137.38	$148.38	$11.00	8%	DC MD VA
Blue Cross and Blue Shield Service Benefit Plan Nationwide - Basic	11	2	Family	$321.67	$355.76	$34.09	11%	DC MD VA
Blue Cross and Blue Shield Service Benefit Plan Nationwide - Basic	11	3	Self+1	NA	$348.29	NA	NA	DC MD VA
Blue Cross and Blue Shield Service Benefit Plan Nationwide - Standard	10	4	Self	$197.23	$217.06	$19.83	10%	DC MD VA
Blue Cross and Blue Shield Service Benefit Plan Nationwide - Standard	10	5	Family	$462.17	$516.18	$54.01	12%	DC MD VA
Blue Cross and Blue Shield Service Benefit Plan Nationwide - Standard	10	6	Self+1	NA	$501.17	NA	NA	DC MD VA
CareFirst BlueChoice Washington, D.C. Metro Area - HDHP Option	B6	1	Self	$145.08	$147.99	$2.91	2%	DC MD VA
CareFirst BlueChoice Washington, D.C. Metro Area - HDHP Option	B6	2	Family	$323.62	$351.62	$28.00	9%	DC MD VA
CareFirst BlueChoice Washington, D.C. Metro Area - HDHP Option	B6	3	Self+1	NA	$295.98	NA	NA	DC MD VA
CareFirst BlueChoice Washington, D.C. Metro Area - High Option	2G	1	Self	$232.66	$234.87	$2.21	1%	DC MD VA
CareFirst BlueChoice Washington, D.C. Metro Area - High Option	2G	2	Family	$536.12	$598.00	$61.88	12%	DC MD VA
CareFirst BlueChoice Washington, D.C. Metro Area - High Option	2G	3	Self+1	NA	$395.44	NA	NA	DC MD VA
CareFirst BlueChoice Washington, D.C. Metro Area - Standard Option	2G	4	Self	$161.55	$160.90	-$0.65	0%	DC MD VA
CareFirst BlueChoice Washington, D.C. Metro Area - Standard Option	2G	5	Family	$376.16	$422.28	$46.12	12%	DC MD VA
CareFirst BlueChoice Washington, D.C. Metro Area - Standard Option	2G	6	Self+1	NA	$311.60	NA	NA	DC MD VA
Compass Rose Health Plan	42	1	Self	$167.81	$169.26	NA	NA	DC MD VA
Compass Rose Health Plan	42	2	Family	$420.21	$457.32	$37.11	9%	DC MD VA
Compass Rose Health Plan	42	3	Self+1	NA	$390.54	NA	NA	DC MD VA
Foreign Service Benefit Plan	40	1	Self	$130.36	$136.88	$6.52	5%	DC MD VA
Foreign Service Benefit Plan	40	2	Family	$321.21	$338.63	$17.42	5%	DC MD VA
Foreign Service Benefit Plan	40	3	Self+1	NA	$342.24	NA	NA	DC MD VA
GEHA Benefit Plan Nationwide - Standard Option	31	4	Self	$106.26	$112.21	$5.95	6%	DC MD VA

Plan	Plan Code	Coverage Code	Type	2015 Rate	2016 Rate	$ Diff	% Diff	STATE
GEHA Benefit Plan Nationwide - Standard Option	31	5	Family	$241.65	$265.37	$23.72	10%	DC MD VA
GEHA Benefit Plan Nationwide - Standard Option	31	6	Self+1	NA	$241.25	NA	NA	DC MD VA
GEHA Benefit Plan Nationwide - High Option	31	2	Family	$488.00	$556.68	$68.68	14%	DC MD VA
GEHA Benefit Plan Nationwide - High Option	31	3	Self+1	NA	$496.51	NA	NA	DC MD VA
GEHA Benefit Plan Nationwide - High Option	31	1	Self	$204.21	$217.43	$13.22	6%	DC MD VA
GEHA High Deductible Health Plan Nationwide	34	1	Self	$110.21	$117.00	$6.79	6%	DC MD VA
GEHA High Deductible Health Plan Nationwide	34	2	Family	$251.72	$276.71	$24.99	10%	DC MD VA
GEHA High Deductible Health Plan Nationwide	34	3	Self+1	NA	$251.56	NA	NA	DC MD VA
Innovation Health Plan Northern Virginia	LQ	1	Self	$130.50	$137.02	$6.52	5%	VA
Innovation Health Plan Northern Virginia	LQ	2	Family	$305.75	$322.46	$16.71	5%	VA
Innovation Health Plan Northern Virginia	LQ	3	Self+1	NA	$319.27	NA	NA	VA
Kaiser Foundation Health Plan Mid-Atlantic States Washington, DC area - High Option	E3	1	Self	$168.85	$156.24	-$12.61	-7%	DC MD VA
Kaiser Foundation Health Plan Mid-Atlantic States Washington, DC area - High Option	E3	2	Family	$423.15	$388.94	-$34.21	-8%	DC MD VA
Kaiser Foundation Health Plan Mid-Atlantic States Washington, DC area - High Option	E3	3	Self+1	NA	$398.99	NA	NA	DC MD VA
Kaiser Foundation Health Plan Mid-Atlantic States Washington, DC area - Standard Option	E3	4	Self	$98.33	$116.44	$18.11	18%	DC MD VA
Kaiser Foundation Health Plan Mid-Atlantic States Washington, DC area - Standard Option	E3	5	Family	$226.14	$272.46	$46.32	20%	DC MD VA
Kaiser Foundation Health Plan Mid-Atlantic States Washington, DC area - Standard Option	E3	6	Self+1	NA	$263.14	NA	NA	DC MD VA
M.D. IPA Washington, DC area	JP	1	Self	$243.84	$178.75	-$65.09	-27%	DC MD VA
M.D. IPA Washington, DC area	JP	2	Family	$599.58	$739.09	$139.51	23%	DC MD VA
M.D. IPA Washington, DC area	JP	3	Self+1	NA	$312.99	NA	NA	DC MD VA
MHBP - Consumer Option Nationwide	48	3	Self+1	NA	$311.03	NA	NA	DC MD VA
MHBP - Consumer Option Nationwide	48	4	Self	$139.15	$140.55	$1.40	1%	DC MD VA
MHBP - Consumer Option Nationwide	48	5	Family	$315.30	$326.58	$11.28	4%	DC MD VA
MHBP - Std Nationwide	45	4	Self	$200.74	$151.63	-$49.11	-24%	DC MD VA
MHBP - Std Nationwide	45	5	Family	$489.21	$352.38	-$136.83	-28%	DC MD VA
MHBP - Std Nationwide	45	6	Self+1	NA	$383.00	NA	NA	DC MD VA

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MHBP - Value Plan Nationwide	41	4	Self	$123.20	$128.16	$4.96	4%	DC MD VA
MHBP - Value Plan Nationwide	41	5	Family	$293.71	$309.72	$16.01	5%	DC MD VA
MHBP - Value Plan Nationwide	41	6	Self+1	NA	$303.65	NA	NA	DC MD VA
NALC Nationwide - CDHP Option	32	4	Self	$108.46	$108.46	$0.00	0%	DC MD VA
NALC Nationwide - CDHP Option	32	5	Family	$235.51	$235.52	$0.01	0%	DC MD VA
NALC Nationwide - CDHP Option	32	6	Self+1	NA	$235.51	NA	NA	DC MD VA
NALC Nationwide - High Option	32	1	Self	$166.70	$157.19	-$9.51	-6%	DC MD VA
NALC Nationwide - High Option	32	2	Family	$337.35	$343.82	$6.47	2%	DC MD VA
NALC Nationwide - High Option	32	3	Self+1	NA	$351.60	NA	NA	DC MD VA
NALC Value Option Nationwide	KM	1	Self	$93.38	$93.38	$0.00	0%	DC MD VA
NALC Value Option Nationwide	KM	2	Family	$202.79	$202.79	$0.00	0%	DC MD VA
NALC Value Option Nationwide	KM	3	Self+1	NA	$202.79	NA	NA	DC MD VA
Optima Health Plan Hampton Roads Region	PG	1	Self	NA	$130.46	NA	NA	VA
Optima Health Plan Hampton Roads Region	PG	2	Family	NA	$341.02	NA	NA	VA
Optima Health Plan Hampton Roads Region	PG	3	Self+1	NA	$323.96	NA	NA	VA
Panama Canal Area Benefit Plan	43	1	Self	$120.64	$129.27	$8.63	7%	DC MD VA
Panama Canal Area Benefit Plan	43	2	Family	$251.81	$269.85	$18.04	7%	DC MD VA
Panama Canal Area Benefit Plan	43	3	Self+1	NA	$258.02	NA	NA	DC MD VA
Rural Carrier Benefit Plan	38	1	Self	$196.04	$184.10	-$11.94	-6%	DC MD VA
Rural Carrier Benefit Plan	38	2	Family	$302.10	$312.93	$10.83	4%	DC MD VA
Rural Carrier Benefit Plan	38	3	Self+1	NA	$306.78	NA	NA	DC MD VA
SAMBA Nationwide - High Option	44	1	Self	$298.74	$289.88	-$8.86	-3%	DC MD VA
SAMBA Nationwide - High Option	44	2	Family	$762.43	$746.83	-$15.60	-2%	DC MD VA
SAMBA Nationwide - High Option	44	3	Self+1	NA	$655.93	NA	NA	DC MD VA
SAMBA Nationwide - Standard Option	44	4	Self	$131.71	$137.45	$5.74	4%	DC MD VA
SAMBA Nationwide - Standard Option	44	5	Family	$300.81	$316.14	$15.33	5%	DC MD VA

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SAMBA Nationwide - Standard Option	44	6	Self+1	NA	$302.40	NA	NA	DC MD VA
United Healthcare Insurance Company, Inc. Northeast Region	LR	1	Self	NA	$132.78	NA	NA	DC MD VA
United Healthcare Insurance Company, Inc. Northeast Region	LR	2	Family	NA	$430.84	NA	NA	DC MD VA
United Healthcare Insurance Company, Inc. Northeast Region	LR	3	Self+1	NA	$259.32	NA	NA	DC MD VA
UnitedHealthcare Insurance Company DC area	L9	1	Self	$132.34	$115.22	-$17.12	-13%	DC MD VA
UnitedHealthcare Insurance Company DC area	L9	2	Family	$294.45	$323.08	$28.63	10%	DC MD VA
UnitedHealthcare Insurance Company DC area	L9	3	Self+1	NA	$225.02	NA	NA	DC MD VA