

**Delaware Rates for Aetna Health, Inc. Marketplace QHPs - Individual Marketplace Plan Year 2016**

The table below provides monthly premium (**tobacco**) rates, by age, for Qualified Health Plans (QHPs) available on Delaware's Individual Marketplace at [www.healthcare.gov](http://www.healthcare.gov). A person's premium rate may change depending their circumstances, including adjustments for Advanced Premium Tax Credits (APTCs) available to eligible consumers purchasing plans through the Marketplace. The table also provides a year-over-year rate comparison by plan and age for those Marketplace plans that were available in Coverage years 2014 and/or 2015.

Plan ID	Plan Name	Metal Level	Age	2014 Individual Tobacco Rate	2015 Individual Tobacco Rate	2016 Individual Tobacco Rate	Individual Rate Change (\$)	Individual Rate Change (%)
67190DE0080001	Aetna Bronze \$20 Copay HNOOnly	Bronze	0-20		\$128.07	\$148.81	\$20.74	16.19%
67190DE0080001	Aetna Bronze \$20 Copay HNOOnly	Bronze	21		\$221.85	\$257.78	\$35.93	16.20%
67190DE0080001	Aetna Bronze \$20 Copay HNOOnly	Bronze	22		\$221.85	\$257.78	\$35.93	16.20%
67190DE0080001	Aetna Bronze \$20 Copay HNOOnly	Bronze	23		\$221.85	\$257.78	\$35.93	16.20%
67190DE0080001	Aetna Bronze \$20 Copay HNOOnly	Bronze	24		\$221.85	\$257.78	\$35.93	16.20%
67190DE0080001	Aetna Bronze \$20 Copay HNOOnly	Bronze	25		\$222.66	\$258.81	\$36.15	16.24%
67190DE0080001	Aetna Bronze \$20 Copay HNOOnly	Bronze	26		\$227.10	\$263.96	\$36.86	16.23%
67190DE0080001	Aetna Bronze \$20 Copay HNOOnly	Bronze	27		\$232.54	\$270.15	\$37.61	16.17%
67190DE0080001	Aetna Bronze \$20 Copay HNOOnly	Bronze	28		\$241.22	\$280.20	\$38.98	16.16%
67190DE0080001	Aetna Bronze \$20 Copay HNOOnly	Bronze	29		\$248.28	\$288.45	\$40.17	16.18%
67190DE0080001	Aetna Bronze \$20 Copay HNOOnly	Bronze	30		\$251.91	\$292.58	\$40.67	16.14%
67190DE0080001	Aetna Bronze \$20 Copay HNOOnly	Bronze	31		\$257.15	\$298.76	\$41.61	16.18%
67190DE0080001	Aetna Bronze \$20 Copay HNOOnly	Bronze	32		\$262.39	\$304.95	\$42.56	16.22%
67190DE0080001	Aetna Bronze \$20 Copay HNOOnly	Bronze	33		\$265.82	\$308.82	\$43.00	16.18%
67190DE0080001	Aetna Bronze \$20 Copay HNOOnly	Bronze	34		\$269.25	\$312.94	\$43.69	16.23%
67190DE0080001	Aetna Bronze \$20 Copay HNOOnly	Bronze	35		\$271.07	\$315.00	\$43.93	16.21%
67190DE0080001	Aetna Bronze \$20 Copay HNOOnly	Bronze	36		\$272.88	\$317.07	\$44.19	16.19%
67190DE0080001	Aetna Bronze \$20 Copay HNOOnly	Bronze	37		\$274.70	\$319.13	\$44.43	16.17%
67190DE0080001	Aetna Bronze \$20 Copay HNOOnly	Bronze	38		\$276.51	\$321.19	\$44.68	16.16%
67190DE0080001	Aetna Bronze \$20 Copay HNOOnly	Bronze	39		\$279.94	\$325.32	\$45.38	16.21%
67190DE0080001	Aetna Bronze \$20 Copay HNOOnly	Bronze	40		\$283.57	\$329.44	\$45.87	16.18%
67190DE0080001	Aetna Bronze \$20 Copay HNOOnly	Bronze	41		\$288.81	\$335.63	\$46.82	16.21%
67190DE0080001	Aetna Bronze \$20 Copay HNOOnly	Bronze	42		\$294.06	\$341.56	\$47.50	16.15%
67190DE0080001	Aetna Bronze \$20 Copay HNOOnly	Bronze	43		\$301.12	\$349.80	\$48.68	16.17%
67190DE0080001	Aetna Bronze \$20 Copay HNOOnly	Bronze	44		\$309.99	\$360.12	\$50.13	16.17%
67190DE0080001	Aetna Bronze \$20 Copay HNOOnly	Bronze	45		\$320.28	\$372.23	\$51.95	16.22%
67190DE0080001	Aetna Bronze \$20 Copay HNOOnly	Bronze	46		\$332.78	\$386.67	\$53.89	16.19%
67190DE0080001	Aetna Bronze \$20 Copay HNOOnly	Bronze	47		\$346.70	\$402.91	\$56.21	16.21%
67190DE0080001	Aetna Bronze \$20 Copay HNOOnly	Bronze	48		\$362.83	\$421.47	\$58.64	16.16%
67190DE0080001	Aetna Bronze \$20 Copay HNOOnly	Bronze	49		\$378.56	\$439.77	\$61.21	16.17%
67190DE0080001	Aetna Bronze \$20 Copay HNOOnly	Bronze	50		\$396.31	\$460.39	\$64.08	16.17%
67190DE0080001	Aetna Bronze \$20 Copay HNOOnly	Bronze	51		\$413.86	\$480.76	\$66.90	16.16%
67190DE0080001	Aetna Bronze \$20 Copay HNOOnly	Bronze	52		\$433.02	\$503.18	\$70.16	16.20%

**Delaware Rates for Aetna Health, Inc. Marketplace QHPs - Individual Marketplace Plan Year 2016**

The table below provides monthly premium (**tobacco**) rates, by age, for Qualified Health Plans (QHPs) available on Delaware's Individual Marketplace at www.healthcare.gov. A person's premium rate may change depending their circumstances, including adjustments for Advanced Premium Tax Credits (APTCs) available to eligible consumers purchasing plans through the Marketplace. The table also provides a year-over-year rate comparison by plan and age for those Marketplace plans that were available in Coverage years 2014 and/or 2015.

Plan ID	Plan Name	Metal Level	Age	2014 Individual Tobacco Rate	2015 Individual Tobacco Rate	2016 Individual Tobacco Rate	Individual Rate Change (\$)	Individual Rate Change (%)
67190DE0080001	Aetna Bronze \$20 Copay HNOOnly	Bronze	53		\$452.58	\$525.87	\$73.29	16.19%
67190DE0080001	Aetna Bronze \$20 Copay HNOOnly	Bronze	54		\$473.76	\$550.36	\$76.60	16.17%
67190DE0080001	Aetna Bronze \$20 Copay HNOOnly	Bronze	55		\$494.74	\$574.84	\$80.10	16.19%
67190DE0080001	Aetna Bronze \$20 Copay HNOOnly	Bronze	56		\$517.53	\$601.40	\$83.87	16.21%
67190DE0080001	Aetna Bronze \$20 Copay HNOOnly	Bronze	57		\$540.72	\$628.20	\$87.48	16.18%
67190DE0080001	Aetna Bronze \$20 Copay HNOOnly	Bronze	58		\$565.33	\$656.82	\$91.49	16.18%
67190DE0080001	Aetna Bronze \$20 Copay HNOOnly	Bronze	59		\$577.43	\$671.00	\$93.57	16.20%
67190DE0080001	Aetna Bronze \$20 Copay HNOOnly	Bronze	60		\$602.03	\$699.61	\$97.58	16.21%
67190DE0080001	Aetna Bronze \$20 Copay HNOOnly	Bronze	61		\$623.41	\$724.36	\$100.95	16.19%
67190DE0080001	Aetna Bronze \$20 Copay HNOOnly	Bronze	62		\$637.33	\$740.60	\$103.27	16.20%
67190DE0080001	Aetna Bronze \$20 Copay HNOOnly	Bronze	63		\$654.87	\$760.96	\$106.09	16.20%
67190DE0080001	Aetna Bronze \$20 Copay HNOOnly	Bronze	64		\$665.56	\$773.08	\$107.52	16.15%
67190DE0080001	Aetna Bronze \$20 Copay HNOOnly	Bronze	65 and over		\$665.56	\$773.08	\$107.52	16.15%
67190DE0080002	Aetna Bronze Deductible Only HSA Eligible HNOOnly	Bronze	0-20		\$120.59	\$139.82	\$19.23	15.95%
67190DE0080002	Aetna Bronze Deductible Only HSA Eligible HNOOnly	Bronze	21		\$208.90	\$242.22	\$33.32	15.95%
67190DE0080002	Aetna Bronze Deductible Only HSA Eligible HNOOnly	Bronze	22		\$208.90	\$242.22	\$33.32	15.95%
67190DE0080002	Aetna Bronze Deductible Only HSA Eligible HNOOnly	Bronze	23		\$208.90	\$242.22	\$33.32	15.95%
67190DE0080002	Aetna Bronze Deductible Only HSA Eligible HNOOnly	Bronze	24		\$208.90	\$242.22	\$33.32	15.95%
67190DE0080002	Aetna Bronze Deductible Only HSA Eligible HNOOnly	Bronze	25		\$209.66	\$243.18	\$33.52	15.99%
67190DE0080002	Aetna Bronze Deductible Only HSA Eligible HNOOnly	Bronze	26		\$213.84	\$248.03	\$34.19	15.99%
67190DE0080002	Aetna Bronze Deductible Only HSA Eligible HNOOnly	Bronze	27		\$218.96	\$253.84	\$34.88	15.93%
67190DE0080002	Aetna Bronze Deductible Only HSA Eligible HNOOnly	Bronze	28		\$227.13	\$263.29	\$36.16	15.92%
67190DE0080002	Aetna Bronze Deductible Only HSA Eligible HNOOnly	Bronze	29		\$233.78	\$271.04	\$37.26	15.94%
67190DE0080002	Aetna Bronze Deductible Only HSA Eligible HNOOnly	Bronze	30		\$237.20	\$274.91	\$37.71	15.90%
67190DE0080002	Aetna Bronze Deductible Only HSA Eligible HNOOnly	Bronze	31		\$242.13	\$280.73	\$38.60	15.94%
67190DE0080002	Aetna Bronze Deductible Only HSA Eligible HNOOnly	Bronze	32		\$247.07	\$286.54	\$39.47	15.98%
67190DE0080002	Aetna Bronze Deductible Only HSA Eligible HNOOnly	Bronze	33		\$250.30	\$290.17	\$39.87	15.93%
67190DE0080002	Aetna Bronze Deductible Only HSA Eligible HNOOnly	Bronze	34		\$253.53	\$294.05	\$40.52	15.98%
67190DE0080002	Aetna Bronze Deductible Only HSA Eligible HNOOnly	Bronze	35		\$255.24	\$295.99	\$40.75	15.97%
67190DE0080002	Aetna Bronze Deductible Only HSA Eligible HNOOnly	Bronze	36		\$256.95	\$297.92	\$40.97	15.94%
67190DE0080002	Aetna Bronze Deductible Only HSA Eligible HNOOnly	Bronze	37		\$258.66	\$299.86	\$41.20	15.93%
67190DE0080002	Aetna Bronze Deductible Only HSA Eligible HNOOnly	Bronze	38		\$260.36	\$301.80	\$41.44	15.92%

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The table below provides monthly premium (**tobacco**) rates, by age, for Qualified Health Plans (QHPs) available on Delaware's Individual Marketplace at www.healthcare.gov. A person's premium rate may change depending their circumstances, including adjustments for Advanced Premium Tax Credits (APTCs) available to eligible consumers purchasing plans through the Marketplace. The table also provides a year-over-year rate comparison by plan and age for those Marketplace plans that were available in Coverage years 2014 and/or 2015.

Plan ID	Plan Name	Metal Level	Age	2014 Individual Tobacco Rate	2015 Individual Tobacco Rate	2016 Individual Tobacco Rate	Individual Rate Change (\$)	Individual Rate Change (%)
67190DE0080002	Aetna Bronze Deductible Only HSA Eligible HNOOnly	Bronze	39		\$263.59	\$305.68	\$42.09	15.97%
67190DE0080002	Aetna Bronze Deductible Only HSA Eligible HNOOnly	Bronze	40		\$267.01	\$309.55	\$42.54	15.93%
67190DE0080002	Aetna Bronze Deductible Only HSA Eligible HNOOnly	Bronze	41		\$271.95	\$315.36	\$43.41	15.96%
67190DE0080002	Aetna Bronze Deductible Only HSA Eligible HNOOnly	Bronze	42		\$276.89	\$320.94	\$44.05	15.91%
67190DE0080002	Aetna Bronze Deductible Only HSA Eligible HNOOnly	Bronze	43		\$283.53	\$328.69	\$45.16	15.93%
67190DE0080002	Aetna Bronze Deductible Only HSA Eligible HNOOnly	Bronze	44		\$291.89	\$338.37	\$46.48	15.92%
67190DE0080002	Aetna Bronze Deductible Only HSA Eligible HNOOnly	Bronze	45		\$301.57	\$349.76	\$48.19	15.98%
67190DE0080002	Aetna Bronze Deductible Only HSA Eligible HNOOnly	Bronze	46		\$313.35	\$363.32	\$49.97	15.95%
67190DE0080002	Aetna Bronze Deductible Only HSA Eligible HNOOnly	Bronze	47		\$326.45	\$378.58	\$52.13	15.97%
67190DE0080002	Aetna Bronze Deductible Only HSA Eligible HNOOnly	Bronze	48		\$341.65	\$396.02	\$54.37	15.91%
67190DE0080002	Aetna Bronze Deductible Only HSA Eligible HNOOnly	Bronze	49		\$356.46	\$413.22	\$56.76	15.92%
67190DE0080002	Aetna Bronze Deductible Only HSA Eligible HNOOnly	Bronze	50		\$373.17	\$432.60	\$59.43	15.93%
67190DE0080002	Aetna Bronze Deductible Only HSA Eligible HNOOnly	Bronze	51		\$389.69	\$451.73	\$62.04	15.92%
67190DE0080002	Aetna Bronze Deductible Only HSA Eligible HNOOnly	Bronze	52		\$407.73	\$472.80	\$65.07	15.96%
67190DE0080002	Aetna Bronze Deductible Only HSA Eligible HNOOnly	Bronze	53		\$426.15	\$494.12	\$67.97	15.95%
67190DE0080002	Aetna Bronze Deductible Only HSA Eligible HNOOnly	Bronze	54		\$446.10	\$517.13	\$71.03	15.92%
67190DE0080002	Aetna Bronze Deductible Only HSA Eligible HNOOnly	Bronze	55		\$465.85	\$540.14	\$74.29	15.95%
67190DE0080002	Aetna Bronze Deductible Only HSA Eligible HNOOnly	Bronze	56		\$487.31	\$565.09	\$77.78	15.96%
67190DE0080002	Aetna Bronze Deductible Only HSA Eligible HNOOnly	Bronze	57		\$509.15	\$590.28	\$81.13	15.93%
67190DE0080002	Aetna Bronze Deductible Only HSA Eligible HNOOnly	Bronze	58		\$532.31	\$617.16	\$84.85	15.94%
67190DE0080002	Aetna Bronze Deductible Only HSA Eligible HNOOnly	Bronze	59		\$543.71	\$630.49	\$86.78	15.96%
67190DE0080002	Aetna Bronze Deductible Only HSA Eligible HNOOnly	Bronze	60		\$566.88	\$657.37	\$90.49	15.96%
67190DE0080002	Aetna Bronze Deductible Only HSA Eligible HNOOnly	Bronze	61		\$587.01	\$680.62	\$93.61	15.95%
67190DE0080002	Aetna Bronze Deductible Only HSA Eligible HNOOnly	Bronze	62		\$600.11	\$695.88	\$95.77	15.96%
67190DE0080002	Aetna Bronze Deductible Only HSA Eligible HNOOnly	Bronze	63		\$616.63	\$715.02	\$98.39	15.96%
67190DE0080002	Aetna Bronze Deductible Only HSA Eligible HNOOnly	Bronze	64		\$626.70	\$726.40	\$99.70	15.91%
67190DE0080002	Aetna Bronze Deductible Only HSA Eligible HNOOnly	Bronze	65 and over		\$626.70	\$726.40	\$99.70	15.91%
67190DE0080003	Aetna Gold \$5 Copay HNOOnly	Gold	0-20		\$186.03	\$216.23	\$30.20	16.23%
67190DE0080003	Aetna Gold \$5 Copay HNOOnly	Gold	21		\$322.26	\$374.57	\$52.31	16.23%
67190DE0080003	Aetna Gold \$5 Copay HNOOnly	Gold	22		\$322.26	\$374.57	\$52.31	16.23%
67190DE0080003	Aetna Gold \$5 Copay HNOOnly	Gold	23		\$322.26	\$374.57	\$52.31	16.23%
67190DE0080003	Aetna Gold \$5 Copay HNOOnly	Gold	24		\$322.26	\$374.57	\$52.31	16.23%

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Plan ID	Plan Name	Metal Level	Age	2014 Individual Tobacco Rate	2015 Individual Tobacco Rate	2016 Individual Tobacco Rate	Individual Rate Change (\$)	Individual Rate Change (%)
67190DE0080003	Aetna Gold \$5 Copay HNOOnly	Gold	25		\$323.43	\$376.07	\$52.64	16.28%
67190DE0080003	Aetna Gold \$5 Copay HNOOnly	Gold	26		\$329.87	\$383.56	\$53.69	16.28%
67190DE0080003	Aetna Gold \$5 Copay HNOOnly	Gold	27		\$337.78	\$392.55	\$54.77	16.21%
67190DE0080003	Aetna Gold \$5 Copay HNOOnly	Gold	28		\$350.38	\$407.15	\$56.77	16.20%
67190DE0080003	Aetna Gold \$5 Copay HNOOnly	Gold	29		\$360.63	\$419.14	\$58.51	16.22%
67190DE0080003	Aetna Gold \$5 Copay HNOOnly	Gold	30		\$365.91	\$425.13	\$59.22	16.18%
67190DE0080003	Aetna Gold \$5 Copay HNOOnly	Gold	31		\$373.52	\$434.12	\$60.60	16.22%
67190DE0080003	Aetna Gold \$5 Copay HNOOnly	Gold	32		\$381.14	\$443.11	\$61.97	16.26%
67190DE0080003	Aetna Gold \$5 Copay HNOOnly	Gold	33		\$386.12	\$448.73	\$62.61	16.22%
67190DE0080003	Aetna Gold \$5 Copay HNOOnly	Gold	34		\$391.10	\$454.73	\$63.63	16.27%
67190DE0080003	Aetna Gold \$5 Copay HNOOnly	Gold	35		\$393.74	\$457.72	\$63.98	16.25%
67190DE0080003	Aetna Gold \$5 Copay HNOOnly	Gold	36		\$396.37	\$460.72	\$64.35	16.23%
67190DE0080003	Aetna Gold \$5 Copay HNOOnly	Gold	37		\$399.01	\$463.71	\$64.70	16.22%
67190DE0080003	Aetna Gold \$5 Copay HNOOnly	Gold	38		\$401.65	\$466.71	\$65.06	16.20%
67190DE0080003	Aetna Gold \$5 Copay HNOOnly	Gold	39		\$406.63	\$472.70	\$66.07	16.25%
67190DE0080003	Aetna Gold \$5 Copay HNOOnly	Gold	40		\$411.90	\$478.70	\$66.80	16.22%
67190DE0080003	Aetna Gold \$5 Copay HNOOnly	Gold	41		\$419.52	\$487.69	\$68.17	16.25%
67190DE0080003	Aetna Gold \$5 Copay HNOOnly	Gold	42		\$427.14	\$496.30	\$69.16	16.19%
67190DE0080003	Aetna Gold \$5 Copay HNOOnly	Gold	43		\$437.39	\$508.29	\$70.90	16.21%
67190DE0080003	Aetna Gold \$5 Copay HNOOnly	Gold	44		\$450.28	\$523.27	\$72.99	16.21%
67190DE0080003	Aetna Gold \$5 Copay HNOOnly	Gold	45		\$465.22	\$540.88	\$75.66	16.26%
67190DE0080003	Aetna Gold \$5 Copay HNOOnly	Gold	46		\$483.38	\$561.85	\$78.47	16.23%
67190DE0080003	Aetna Gold \$5 Copay HNOOnly	Gold	47		\$503.60	\$585.45	\$81.85	16.25%
67190DE0080003	Aetna Gold \$5 Copay HNOOnly	Gold	48		\$527.03	\$612.42	\$85.39	16.20%
67190DE0080003	Aetna Gold \$5 Copay HNOOnly	Gold	49		\$549.89	\$639.01	\$89.12	16.21%
67190DE0080003	Aetna Gold \$5 Copay HNOOnly	Gold	50		\$575.67	\$668.98	\$93.31	16.21%
67190DE0080003	Aetna Gold \$5 Copay HNOOnly	Gold	51		\$601.15	\$698.57	\$97.42	16.21%
67190DE0080003	Aetna Gold \$5 Copay HNOOnly	Gold	52		\$628.98	\$731.16	\$102.18	16.25%
67190DE0080003	Aetna Gold \$5 Copay HNOOnly	Gold	53		\$657.40	\$764.12	\$106.72	16.23%
67190DE0080003	Aetna Gold \$5 Copay HNOOnly	Gold	54		\$688.16	\$799.70	\$111.54	16.21%
67190DE0080003	Aetna Gold \$5 Copay HNOOnly	Gold	55		\$718.63	\$835.29	\$116.66	16.23%
67190DE0080003	Aetna Gold \$5 Copay HNOOnly	Gold	56		\$751.73	\$873.87	\$122.14	16.25%
67190DE0080003	Aetna Gold \$5 Copay HNOOnly	Gold	57		\$785.43	\$912.82	\$127.39	16.22%

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Plan ID	Plan Name	Metal Level	Age	2014 Individual Tobacco Rate	2015 Individual Tobacco Rate	2016 Individual Tobacco Rate	Individual Rate Change (\$)	Individual Rate Change (%)
67190DE0080003	Aetna Gold \$5 Copay HNOOnly	Gold	58		\$821.17	\$954.40	\$133.23	16.22%
67190DE0080003	Aetna Gold \$5 Copay HNOOnly	Gold	59		\$838.74	\$975.00	\$136.26	16.25%
67190DE0080003	Aetna Gold \$5 Copay HNOOnly	Gold	60		\$874.49	\$1,016.58	\$142.09	16.25%
67190DE0080003	Aetna Gold \$5 Copay HNOOnly	Gold	61		\$905.54	\$1,052.53	\$146.99	16.23%
67190DE0080003	Aetna Gold \$5 Copay HNOOnly	Gold	62		\$925.75	\$1,076.13	\$150.38	16.24%
67190DE0080003	Aetna Gold \$5 Copay HNOOnly	Gold	63		\$951.24	\$1,105.72	\$154.48	16.24%
67190DE0080003	Aetna Gold \$5 Copay HNOOnly	Gold	64		\$966.77	\$1,123.33	\$156.56	16.19%
67190DE0080003	Aetna Gold \$5 Copay HNOOnly	Gold	65 and over		\$966.77	\$1,123.33	\$156.56	16.19%
67190DE0080004	Aetna Silver \$10 Copay HNOOnly	Silver	0-20		\$162.43	\$188.74	\$26.31	16.20%
67190DE0080004	Aetna Silver \$10 Copay HNOOnly	Silver	21		\$281.37	\$326.96	\$45.59	16.20%
67190DE0080004	Aetna Silver \$10 Copay HNOOnly	Silver	22		\$281.37	\$326.96	\$45.59	16.20%
67190DE0080004	Aetna Silver \$10 Copay HNOOnly	Silver	23		\$281.37	\$326.96	\$45.59	16.20%
67190DE0080004	Aetna Silver \$10 Copay HNOOnly	Silver	24		\$281.37	\$326.96	\$45.59	16.20%
67190DE0080004	Aetna Silver \$10 Copay HNOOnly	Silver	25		\$282.39	\$328.26	\$45.87	16.24%
67190DE0080004	Aetna Silver \$10 Copay HNOOnly	Silver	26		\$288.02	\$334.80	\$46.78	16.24%
67190DE0080004	Aetna Silver \$10 Copay HNOOnly	Silver	27		\$294.92	\$342.65	\$47.73	16.18%
67190DE0080004	Aetna Silver \$10 Copay HNOOnly	Silver	28		\$305.92	\$355.40	\$49.48	16.17%
67190DE0080004	Aetna Silver \$10 Copay HNOOnly	Silver	29		\$314.87	\$365.86	\$50.99	16.19%
67190DE0080004	Aetna Silver \$10 Copay HNOOnly	Silver	30		\$319.48	\$371.09	\$51.61	16.15%
67190DE0080004	Aetna Silver \$10 Copay HNOOnly	Silver	31		\$326.13	\$378.94	\$52.81	16.19%
67190DE0080004	Aetna Silver \$10 Copay HNOOnly	Silver	32		\$332.78	\$386.79	\$54.01	16.23%
67190DE0080004	Aetna Silver \$10 Copay HNOOnly	Silver	33		\$337.13	\$391.69	\$54.56	16.18%
67190DE0080004	Aetna Silver \$10 Copay HNOOnly	Silver	34		\$341.48	\$396.92	\$55.44	16.24%
67190DE0080004	Aetna Silver \$10 Copay HNOOnly	Silver	35		\$343.78	\$399.54	\$55.76	16.22%
67190DE0080004	Aetna Silver \$10 Copay HNOOnly	Silver	36		\$346.08	\$402.16	\$56.08	16.20%
67190DE0080004	Aetna Silver \$10 Copay HNOOnly	Silver	37		\$348.38	\$404.77	\$56.39	16.19%
67190DE0080004	Aetna Silver \$10 Copay HNOOnly	Silver	38		\$350.69	\$407.39	\$56.70	16.17%
67190DE0080004	Aetna Silver \$10 Copay HNOOnly	Silver	39		\$355.03	\$412.62	\$57.59	16.22%
67190DE0080004	Aetna Silver \$10 Copay HNOOnly	Silver	40		\$359.64	\$417.85	\$58.21	16.19%
67190DE0080004	Aetna Silver \$10 Copay HNOOnly	Silver	41		\$366.29	\$425.70	\$59.41	16.22%
67190DE0080004	Aetna Silver \$10 Copay HNOOnly	Silver	42		\$372.94	\$433.22	\$60.28	16.16%
67190DE0080004	Aetna Silver \$10 Copay HNOOnly	Silver	43		\$381.89	\$443.68	\$61.79	16.18%

**Delaware Rates for Aetna Health, Inc. Marketplace QHPs - Individual Marketplace Plan Year 2016**

The table below provides monthly premium (**tobacco**) rates, by age, for Qualified Health Plans (QHPs) available on Delaware's Individual Marketplace at [www.healthcare.gov](http://www.healthcare.gov). A person's premium rate may change depending their circumstances, including adjustments for Advanced Premium Tax Credits (APTCs) available to eligible consumers purchasing plans through the Marketplace. The table also provides a year-over-year rate comparison by plan and age for those Marketplace plans that were available in Coverage years 2014 and/or 2015.

Plan ID	Plan Name	Metal Level	Age	2014 Individual Tobacco Rate	2015 Individual Tobacco Rate	2016 Individual Tobacco Rate	Individual Rate Change (\$)	Individual Rate Change (%)
67190DE0080004	Aetna Silver \$10 Copay HNOOnly	Silver	44		\$393.15	\$456.76	\$63.61	16.18%
67190DE0080004	Aetna Silver \$10 Copay HNOOnly	Silver	45		\$406.19	\$472.12	\$65.93	16.23%
67190DE0080004	Aetna Silver \$10 Copay HNOOnly	Silver	46		\$422.05	\$490.43	\$68.38	16.20%
67190DE0080004	Aetna Silver \$10 Copay HNOOnly	Silver	47		\$439.70	\$511.03	\$71.33	16.22%
67190DE0080004	Aetna Silver \$10 Copay HNOOnly	Silver	48		\$460.16	\$534.57	\$74.41	16.17%
67190DE0080004	Aetna Silver \$10 Copay HNOOnly	Silver	49		\$480.11	\$557.79	\$77.68	16.18%
67190DE0080004	Aetna Silver \$10 Copay HNOOnly	Silver	50		\$502.62	\$583.94	\$81.32	16.18%
67190DE0080004	Aetna Silver \$10 Copay HNOOnly	Silver	51		\$524.88	\$609.77	\$84.89	16.17%
67190DE0080004	Aetna Silver \$10 Copay HNOOnly	Silver	52		\$549.18	\$638.22	\$89.04	16.21%
67190DE0080004	Aetna Silver \$10 Copay HNOOnly	Silver	53		\$573.99	\$666.99	\$93.00	16.20%
67190DE0080004	Aetna Silver \$10 Copay HNOOnly	Silver	54		\$600.85	\$698.05	\$97.20	16.18%
67190DE0080004	Aetna Silver \$10 Copay HNOOnly	Silver	55		\$627.45	\$729.11	\$101.66	16.20%
67190DE0080004	Aetna Silver \$10 Copay HNOOnly	Silver	56		\$656.35	\$762.79	\$106.44	16.22%
67190DE0080004	Aetna Silver \$10 Copay HNOOnly	Silver	57		\$685.77	\$796.79	\$111.02	16.19%
67190DE0080004	Aetna Silver \$10 Copay HNOOnly	Silver	58		\$716.97	\$833.08	\$116.11	16.19%
67190DE0080004	Aetna Silver \$10 Copay HNOOnly	Silver	59		\$732.32	\$851.07	\$118.75	16.22%
67190DE0080004	Aetna Silver \$10 Copay HNOOnly	Silver	60		\$763.53	\$887.36	\$123.83	16.22%
67190DE0080004	Aetna Silver \$10 Copay HNOOnly	Silver	61		\$790.64	\$918.75	\$128.11	16.20%
67190DE0080004	Aetna Silver \$10 Copay HNOOnly	Silver	62		\$808.29	\$939.34	\$131.05	16.21%
67190DE0080004	Aetna Silver \$10 Copay HNOOnly	Silver	63		\$830.54	\$965.17	\$134.63	16.21%
67190DE0080004	Aetna Silver \$10 Copay HNOOnly	Silver	64		\$844.10	\$980.54	\$136.44	16.16%
67190DE0080004	Aetna Silver \$10 Copay HNOOnly	Silver	65 and over		\$844.10	\$980.54	\$136.44	16.16%