

**FORCE Detroit**

Group ID:00625237 Subgroup:0001 Class:0001

Subgroup Name: Class Name:ACTIVE

Rating Area: A

Your benefit package has been renewed at the following rates and is effective from **04/01/2024** through **03/31/2025**.

Age	Total	Medical + Pharmacy	Dental	Vision
0	\$ 305.36	\$ 287.19	\$ 18.17	\$ 0.00
1	\$ 305.36	\$ 287.19	\$ 18.17	\$ 0.00
2	\$ 305.36	\$ 287.19	\$ 18.17	\$ 0.00
3	\$ 305.36	\$ 287.19	\$ 18.17	\$ 0.00
4	\$ 305.36	\$ 287.19	\$ 18.17	\$ 0.00
5	\$ 305.36	\$ 287.19	\$ 18.17	\$ 0.00
6	\$ 305.36	\$ 287.19	\$ 18.17	\$ 0.00
7	\$ 305.36	\$ 287.19	\$ 18.17	\$ 0.00
8	\$ 305.36	\$ 287.19	\$ 18.17	\$ 0.00
9	\$ 305.36	\$ 287.19	\$ 18.17	\$ 0.00
10	\$ 305.36	\$ 287.19	\$ 18.17	\$ 0.00
11	\$ 305.36	\$ 287.19	\$ 18.17	\$ 0.00
12	\$ 305.36	\$ 287.19	\$ 18.17	\$ 0.00
13	\$ 305.36	\$ 287.19	\$ 18.17	\$ 0.00
14	\$ 305.36	\$ 287.19	\$ 18.17	\$ 0.00
15	\$ 330.89	\$ 312.72	\$ 18.17	\$ 0.00
16	\$ 340.65	\$ 322.48	\$ 18.17	\$ 0.00
17	\$ 350.41	\$ 332.24	\$ 18.17	\$ 0.00
18	\$ 360.92	\$ 342.75	\$ 18.17	\$ 0.00
19	\$ 353.26	\$ 353.26	\$ 0.00	\$ 0.00
20	\$ 364.15	\$ 364.15	\$ 0.00	\$ 0.00
21	\$ 375.41	\$ 375.41	\$ 0.00	\$ 0.00
22	\$ 375.41	\$ 375.41	\$ 0.00	\$ 0.00
23	\$ 375.41	\$ 375.41	\$ 0.00	\$ 0.00
24	\$ 375.41	\$ 375.41	\$ 0.00	\$ 0.00
25	\$ 376.91	\$ 376.91	\$ 0.00	\$ 0.00
26	\$ 384.42	\$ 384.42	\$ 0.00	\$ 0.00
27	\$ 393.43	\$ 393.43	\$ 0.00	\$ 0.00
28	\$ 408.07	\$ 408.07	\$ 0.00	\$ 0.00
29	\$ 420.08	\$ 420.08	\$ 0.00	\$ 0.00
30	\$ 426.09	\$ 426.09	\$ 0.00	\$ 0.00
31	\$ 435.10	\$ 435.10	\$ 0.00	\$ 0.00
32	\$ 444.11	\$ 444.11	\$ 0.00	\$ 0.00
33	\$ 449.74	\$ 449.74	\$ 0.00	\$ 0.00
34	\$ 455.75	\$ 455.75	\$ 0.00	\$ 0.00

Age	Total	Medical + Pharmacy	Dental	Vision
35	\$ 458.75	\$ 458.75	\$ 0.00	\$ 0.00
36	\$ 461.75	\$ 461.75	\$ 0.00	\$ 0.00
37	\$ 464.76	\$ 464.76	\$ 0.00	\$ 0.00
38	\$ 467.76	\$ 467.76	\$ 0.00	\$ 0.00
39	\$ 473.77	\$ 473.77	\$ 0.00	\$ 0.00
40	\$ 479.77	\$ 479.77	\$ 0.00	\$ 0.00
41	\$ 488.78	\$ 488.78	\$ 0.00	\$ 0.00
42	\$ 497.42	\$ 497.42	\$ 0.00	\$ 0.00
43	\$ 509.43	\$ 509.43	\$ 0.00	\$ 0.00
44	\$ 524.45	\$ 524.45	\$ 0.00	\$ 0.00
45	\$ 542.09	\$ 542.09	\$ 0.00	\$ 0.00
46	\$ 563.12	\$ 563.12	\$ 0.00	\$ 0.00
47	\$ 586.77	\$ 586.77	\$ 0.00	\$ 0.00
48	\$ 613.80	\$ 613.80	\$ 0.00	\$ 0.00
49	\$ 640.45	\$ 640.45	\$ 0.00	\$ 0.00
50	\$ 670.48	\$ 670.48	\$ 0.00	\$ 0.00
51	\$ 700.14	\$ 700.14	\$ 0.00	\$ 0.00
52	\$ 732.80	\$ 732.80	\$ 0.00	\$ 0.00
53	\$ 765.84	\$ 765.84	\$ 0.00	\$ 0.00
54	\$ 801.50	\$ 801.50	\$ 0.00	\$ 0.00
55	\$ 837.16	\$ 837.16	\$ 0.00	\$ 0.00
56	\$ 875.83	\$ 875.83	\$ 0.00	\$ 0.00
57	\$ 914.87	\$ 914.87	\$ 0.00	\$ 0.00
58	\$ 956.54	\$ 956.54	\$ 0.00	\$ 0.00
59	\$ 977.19	\$ 977.19	\$ 0.00	\$ 0.00
60	\$ 1018.86	\$ 1018.86	\$ 0.00	\$ 0.00
61	\$ 1054.90	\$ 1054.90	\$ 0.00	\$ 0.00
62	\$ 1078.55	\$ 1078.55	\$ 0.00	\$ 0.00
63	\$ 1108.21	\$ 1108.21	\$ 0.00	\$ 0.00
64	\$ 1126.23	\$ 1126.23	\$ 0.00	\$ 0.00
65+	\$ 1126.23	\$ 1126.23	\$ 0.00	\$ 0.00

Medicare Supplemental Benefit Rates				
Age	Total	Medical + Pharmacy	Dental	Vision
All	\$ 527.54	\$ 527.54	\$ 0.00	\$ 0.00

**\*\*\*\*RATES ARE SUBJECT TO CHANGE BASED ON DEPT. OF INSURANCE & FINANCIAL SERVICES APPROVAL\*\*\*\***

To comply with new requirements in the Patient Protection and Affordable Care Act (PPACA) (also referred to as health care reform) groups may be required to make changes to their health insurance coverage. If necessary, this may result in an adjustment to the rates. To learn more about the PPACA, please visit our webpage, [www.bcbm.com/healthcarereform/](http://www.bcbm.com/healthcarereform/). You should also consult with your legal counsel for any legal advice on how you may comply with the law and regulations and the applicability to your plan.  
 BCN of Michigan rates are guaranteed for the period stated above; however, BCN reserves the right to adjust rates if any of the assumptions or calculations used to calculate the rates are incorrect.  
 Please remember that BCN is a prepaid health plan and payment is due on or before the date noted on your billing statement. If you have questions or wish to discuss other BCN benefit plans, please contact your BCBSM Regional Sales Office or Agent. We at BCN appreciate your business and look forward to providing your continuing health benefit needs.