

Rates per Contract by Benefit Option for Non-mandated HealthChoice Options

I. Age Band <30	One	Two	Two Adults With One or	One or More	One Adult With One or
	<u>Adult</u>	<u>Adults</u>	<u>More Children</u>	<u>Children*</u>	<u>More Children</u>
A. \$150 Deductible/\$1,000 Coinsurance Limit	\$592.27	\$1,184.54	\$1,496.67	\$481.22	\$928.68
B. \$300 Deductible/\$1,000 Coinsurance Limit	\$579.22	\$1,158.45	\$1,463.70	\$470.62	\$908.22
C. \$500 Deductible/\$1,000 Coinsurance Limit	\$561.31	\$1,122.62	\$1,418.43	\$456.07	\$880.14
D. \$750 Deductible/\$1,000 Coinsurance Limit	\$544.76	\$1,089.52	\$1,376.61	\$442.62	\$854.18
E. \$1,000 Deductible/\$1,000 Coinsurance Limit	\$527.84	\$1,055.68	\$1,333.85	\$428.87	\$827.66
F. \$2,000 Deductible/\$1,000 Coinsurance Limit	\$461.62	\$923.25	\$1,166.52	\$375.07	\$723.82
G. \$4,000 Deductible/\$1,000 Coinsurance Limit	\$373.69	\$747.38	\$944.31	\$303.62	\$585.94
H. \$150 Deductible/\$1,000 Coinsurance Limit, \$20K Max.	\$469.20	\$938.40	\$1,185.67	\$381.23	\$735.70
I. \$150 Deductible/\$1,000 Coinsurance Limit, \$10K Max.	\$373.74	\$747.49	\$944.45	\$303.67	\$586.03
J. \$2,250 Deductible	\$494.34	\$988.69	\$1,249.21	\$401.65	\$775.13
K. \$5,000 Deductible	\$338.51	\$677.02	\$855.42	\$275.04	\$530.78
L. \$10,000 Deductible	\$246.87	\$493.74	\$623.85	\$200.58	\$387.10
M. \$15,000 Deductible	\$152.18	\$304.35	\$384.55	\$123.64	\$238.61
II. Age Band 30-39	One	Two	Two Adults With One or	One or More	One Adult With One or
	<u>Adult</u>	<u>Adults</u>	<u>More Children</u>	<u>Children*</u>	<u>More Children</u>
A. \$150 Deductible/\$1,000 Coinsurance Limit	\$610.78	\$1,221.56	\$1,543.44	\$481.22	\$957.70
B. \$300 Deductible/\$1,000 Coinsurance Limit	\$597.32	\$1,194.65	\$1,509.44	\$470.62	\$936.61
C. \$500 Deductible/\$1,000 Coinsurance Limit	\$578.85	\$1,157.71	\$1,462.76	\$456.07	\$907.64
D. \$750 Deductible/\$1,000 Coinsurance Limit	\$561.78	\$1,123.57	\$1,419.63	\$442.62	\$880.88
E. \$1,000 Deductible/\$1,000 Coinsurance Limit	\$544.34	\$1,088.67	\$1,375.53	\$428.87	\$853.52
F. \$2,000 Deductible/\$1,000 Coinsurance Limit	\$476.05	\$952.10	\$1,202.97	\$375.07	\$746.44
G. \$4,000 Deductible/\$1,000 Coinsurance Limit	\$385.37	\$770.73	\$973.82	\$303.62	\$604.25
H. \$150 Deductible/\$1,000 Coinsurance Limit, \$20K Max.	\$483.86	\$967.73	\$1,222.72	\$381.23	\$758.69
I. \$150 Deductible/\$1,000 Coinsurance Limit, \$10K Max.	\$385.42	\$770.85	\$973.96	\$303.67	\$604.35
J. \$2,250 Deductible	\$509.79	\$1,019.58	\$1,288.25	\$401.65	\$799.35
K. \$5,000 Deductible	\$349.09	\$698.18	\$882.15	\$275.04	\$547.37
L. \$10,000 Deductible	\$254.59	\$509.17	\$643.34	\$200.58	\$399.19
M. \$15,000 Deductible	\$156.93	\$313.86	\$396.57	\$123.64	\$246.06
III. Age Band 40-44	One	Two	Two Adults With One or	One or More	One Adult With One or
	<u>Adult</u>	<u>Adults</u>	<u>More Children</u>	<u>Children*</u>	<u>More Children</u>
A. \$150 Deductible/\$1,000 Coinsurance Limit	\$740.34	\$1,480.68	\$1,870.84	\$481.22	\$1,160.85

B. \$300 Deductible/\$1,000 Coinsurance Limit	\$724.03	\$1,448.06	\$1,829.62	\$470.62	\$1,135.28
C. \$500 Deductible/\$1,000 Coinsurance Limit	\$701.64	\$1,403.28	\$1,773.04	\$456.07	\$1,100.17
D. \$750 Deductible/\$1,000 Coinsurance Limit	\$680.95	\$1,361.90	\$1,720.76	\$442.62	\$1,067.73
E. \$1,000 Deductible/\$1,000 Coinsurance Limit	\$659.80	\$1,319.60	\$1,667.31	\$428.87	\$1,034.57
F. \$2,000 Deductible/\$1,000 Coinsurance Limit	\$577.03	\$1,154.06	\$1,458.15	\$375.07	\$904.78
G. \$4,000 Deductible/\$1,000 Coinsurance Limit	\$467.11	\$934.22	\$1,180.39	\$303.62	\$732.43
H. \$150 Deductible/\$1,000 Coinsurance Limit, \$20K Max.	\$586.50	\$1,173.00	\$1,482.09	\$381.23	\$919.63
I. \$150 Deductible/\$1,000 Coinsurance Limit, \$10K Max.	\$467.18	\$934.36	\$1,180.56	\$303.67	\$732.54
J. \$2,250 Deductible	\$617.93	\$1,235.86	\$1,561.51	\$401.65	\$968.91
K. \$5,000 Deductible	\$423.14	\$846.28	\$1,069.27	\$275.04	\$663.48
L. \$10,000 Deductible	\$308.59	\$617.18	\$779.81	\$200.58	\$483.87
M. \$15,000 Deductible	\$190.22	\$380.44	\$480.69	\$123.64	\$298.26

IV. Age Band 45-54 Contract	One	Two	Two Adults	One or	One Adult
	<u>Adult</u>	<u>Adults</u>	<u>With One or</u>	<u>More</u>	<u>With One or</u>
			<u>More Children</u>	<u>Children*</u>	<u>More Children</u>
A. \$150 Deductible/\$1,000 Coinsurance Limit	\$795.87	\$1,591.73	\$2,011.15	\$481.22	\$1,247.91
B. \$300 Deductible/\$1,000 Coinsurance Limit	\$778.33	\$1,556.66	\$1,966.84	\$470.62	\$1,220.43
C. \$500 Deductible/\$1,000 Coinsurance Limit	\$754.26	\$1,508.53	\$1,906.02	\$456.07	\$1,182.68
D. \$750 Deductible/\$1,000 Coinsurance Limit	\$732.02	\$1,464.04	\$1,849.82	\$442.62	\$1,147.81
E. \$1,000 Deductible/\$1,000 Coinsurance Limit	\$709.29	\$1,418.57	\$1,792.36	\$428.87	\$1,112.16
F. \$2,000 Deductible/\$1,000 Coinsurance Limit	\$620.31	\$1,240.61	\$1,567.51	\$375.07	\$972.64
G. \$4,000 Deductible/\$1,000 Coinsurance Limit	\$502.14	\$1,004.29	\$1,268.92	\$303.62	\$787.36
H. \$150 Deductible/\$1,000 Coinsurance Limit, \$20K Max.	\$630.49	\$1,260.98	\$1,593.25	\$381.23	\$988.60
I. \$150 Deductible/\$1,000 Coinsurance Limit, \$10K Max.	\$502.22	\$1,004.44	\$1,269.10	\$303.67	\$787.48
J. \$2,250 Deductible	\$664.27	\$1,328.55	\$1,678.62	\$401.65	\$1,041.58
K. \$5,000 Deductible	\$454.88	\$909.75	\$1,149.47	\$275.04	\$713.24
L. \$10,000 Deductible	\$331.73	\$663.47	\$838.30	\$200.58	\$520.16
M. \$15,000 Deductible	\$204.49	\$408.97	\$516.74	\$123.64	\$320.63

V. Age Band 55-64 Contract	One	Two	Two Adults	One or	One Adult
	<u>Adult</u>	<u>Adults</u>	<u>With One or</u>	<u>More</u>	<u>With One or</u>
			<u>More Children</u>	<u>Children*</u>	<u>More Children</u>
A. \$150 Deductible/\$1,000 Coinsurance Limit	\$888.41	\$1,776.82	\$2,245.01	\$481.22	\$1,393.02
B. \$300 Deductible/\$1,000 Coinsurance Limit	\$868.84	\$1,737.67	\$2,195.54	\$470.62	\$1,362.34
C. \$500 Deductible/\$1,000 Coinsurance Limit	\$841.97	\$1,683.94	\$2,127.65	\$456.07	\$1,320.20
D. \$750 Deductible/\$1,000 Coinsurance Limit	\$817.14	\$1,634.28	\$2,064.91	\$442.62	\$1,281.28
E. \$1,000 Deductible/\$1,000 Coinsurance Limit	\$791.76	\$1,583.52	\$2,000.77	\$428.87	\$1,241.48
F. \$2,000 Deductible/\$1,000 Coinsurance Limit	\$692.44	\$1,384.87	\$1,749.78	\$375.07	\$1,085.74
G. \$4,000 Deductible/\$1,000 Coinsurance Limit	\$560.53	\$1,121.06	\$1,416.47	\$303.62	\$878.92
H. \$150 Deductible/\$1,000 Coinsurance Limit, \$20K Max.	\$703.80	\$1,407.60	\$1,778.51	\$381.23	\$1,103.56

I. \$150 Deductible/\$1,000 Coinsurance Limit, \$10K Max.	\$560.62	\$1,121.23	\$1,416.67	\$303.67	\$879.05
J. \$2,250 Deductible	\$741.52	\$1,483.03	\$1,873.81	\$401.65	\$1,162.69
K. \$5,000 Deductible	\$507.77	\$1,015.54	\$1,283.12	\$275.04	\$796.18
L. \$10,000 Deductible	\$370.31	\$740.62	\$935.77	\$200.58	\$580.64
M. \$15,000 Deductible	\$228.26	\$456.53	\$576.83	\$123.64	\$357.91

VI. Age 65+ Medicare Eligible	One <u>Adult</u>	Two <u>Adults</u>	Two Adults With One or <u>More Children</u>	One or More <u>Children*</u>	One Adult With One or <u>More Children</u>
A. \$150 Deductible/\$1,000 Coinsurance Limit	\$888.41	\$1,776.82	\$2,245.01	\$481.22	\$1,393.02
B. \$300 Deductible/\$1,000 Coinsurance Limit	\$868.84	\$1,737.67	\$2,195.54	\$470.62	\$1,362.34
C. \$500 Deductible/\$1,000 Coinsurance Limit	\$841.97	\$1,683.94	\$2,127.65	\$456.07	\$1,320.20
D. \$750 Deductible/\$1,000 Coinsurance Limit	\$817.14	\$1,634.28	\$2,064.91	\$442.62	\$1,281.28
E. \$1,000 Deductible/\$1,000 Coinsurance Limit	\$791.76	\$1,583.52	\$2,000.77	\$428.87	\$1,241.48
F. \$2,000 Deductible/\$1,000 Coinsurance Limit	\$692.44	\$1,384.87	\$1,749.78	\$375.07	\$1,085.74
G. \$4,000 Deductible/\$1,000 Coinsurance Limit	\$560.53	\$1,121.06	\$1,416.47	\$303.62	\$878.92
H. \$150 Deductible/\$1,000 Coinsurance Limit, \$20K Max.	\$703.80	\$1,407.60	\$1,778.51	\$381.23	\$1,103.56
I. \$150 Deductible/\$1,000 Coinsurance Limit, \$10K Max.	\$560.62	\$1,121.23	\$1,416.67	\$303.67	\$879.05
J. \$2,250 Deductible	\$741.52	\$1,483.03	\$1,873.81	\$401.65	\$1,162.69
K. \$5,000 Deductible	\$507.77	\$1,015.54	\$1,283.12	\$275.04	\$796.18
L. \$10,000 Deductible	\$370.31	\$740.62	\$935.77	\$200.58	\$580.64
M. \$15,000 Deductible	\$228.26	\$456.53	\$576.83	\$123.64	\$357.91

* These rates do not vary by age

I. Age Band <30	One	Two	Two Adults	One Adult
	<u>Adult</u>	<u>Adults</u>	<u>With One or More Children</u>	<u>With One or More Children</u>
A. Lumenos HIA \$5,000/\$10,000*	\$300.85	\$541.88	\$759.28	\$472.51
B. Lumenos HIA+ \$10,000/\$20,000*	\$222.25	\$403.02	\$553.80	\$354.90
C. Lumenos HIA+ \$5,000/\$10,000*	\$313.89	\$567.96	\$785.36	\$498.59
D. Lumenos HSA \$2,500/\$5,000*	\$408.96	\$736.14	\$1,033.45	\$641.26
E. Lumenos HSA \$5,000/\$10,000*	\$299.04	\$538.26	\$755.66	\$468.89

II. Age Band 30-39	One	Two	Two Adults	One Adult
	<u>Adult</u>	<u>Adults</u>	<u>With One or More Children</u>	<u>With One or More Children</u>
A. Lumenos HIA \$5,000/\$10,000*	\$310.20	\$558.70	\$782.90	\$487.16
B. Lumenos HIA+ \$10,000/\$20,000*	\$228.73	\$414.69	\$570.17	\$365.06
C. Lumenos HIA+ \$5,000/\$10,000*	\$323.24	\$584.78	\$808.98	\$513.24
D. Lumenos HSA \$2,500/\$5,000*	\$421.74	\$759.14	\$1,065.74	\$661.30
E. Lumenos HSA \$5,000/\$10,000*	\$308.39	\$555.08	\$779.28	\$483.54

III. Age Band 40-44	One	Two	Two Adults	One Adult
	<u>Adult</u>	<u>Adults</u>	<u>With One or More Children</u>	<u>With One or More Children</u>
A. Lumenos HIA \$5,000/\$10,000*	\$375.61	\$676.45	\$948.20	\$589.73
B. Lumenos HIA+ \$10,000/\$20,000*	\$274.10	\$496.35	\$684.82	\$436.20
C. Lumenos HIA+ \$5,000/\$10,000*	\$388.65	\$702.53	\$974.28	\$615.81
D. Lumenos HSA \$2,500/\$5,000*	\$511.20	\$920.17	\$1,291.81	\$801.57
E. Lumenos HSA \$5,000/\$10,000*	\$373.80	\$672.83	\$944.58	\$586.11

IV. Age Band 45-54 Contract	One	Two	Two Adults	One Adult
	<u>Adult</u>	<u>Adults</u>	<u>With One or More Children</u>	<u>With One or More Children</u>
A. Lumenos HIA \$5,000/\$10,000*	\$403.65	\$726.91	\$1,019.04	\$633.69
B. Lumenos HIA+ \$10,000/\$20,000*	\$293.54	\$531.35	\$733.95	\$466.69
C. Lumenos HIA+ \$5,000/\$10,000*	\$416.69	\$752.99	\$1,045.12	\$659.77
D. Lumenos HSA \$2,500/\$5,000*	\$549.54	\$989.18	\$1,388.70	\$861.69
E. Lumenos HSA \$5,000/\$10,000*	\$401.84	\$723.29	\$1,015.42	\$630.07

V. Age Band 55-64 Contract	One	Two	Two Adults	One Adult
	<u>Adult</u>	<u>Adults</u>	<u>With One or More Children</u>	<u>With One or More Children</u>
A. Lumenos HIA \$5,000/\$10,000*	\$450.37	\$811.02	\$1,137.12	\$706.95

B. Lumenos HIA+ \$10,000/\$20,000*	\$325.95	\$589.68	\$815.84	\$517.50
C. Lumenos HIA+ \$5,000/\$10,000*	\$463.41	\$837.10	\$1,163.20	\$733.03
D. Lumenos HSA \$2,500/\$5,000*	\$613.44	\$1,104.20	\$1,550.17	\$961.88
E. Lumenos HSA \$5,000/\$10,000*	\$448.56	\$807.40	\$1,133.50	\$703.33

VI. Age 65+ Medicare Eligible	One	Two	Two Adults	One Adult
	<u>Adult</u>	<u>Adults</u>	<u>With One or More Children</u>	<u>With One or More Children</u>
A. Lumenos HIA \$5,000/\$10,000*	\$450.37	\$811.02	\$1,137.12	\$706.95
B. Lumenos HIA+ \$10,000/\$20,000*	\$325.95	\$589.68	\$815.84	\$517.50
C. Lumenos HIA+ \$5,000/\$10,000*	\$463.41	\$837.10	\$1,163.20	\$733.03
D. Lumenos HSA \$2,500/\$5,000*	\$613.44	\$1,104.20	\$1,550.17	\$961.88
E. Lumenos HSA \$5,000/\$10,000*	\$448.56	\$807.40	\$1,133.50	\$703.33

* Lower deductible applies to One Adult Plan; Higher Deductible applies to all other plans.

**Preventive Care and Supplemental Accident Rider Rates
for Plans with \$2,250, \$5,000, \$10,000, and \$15,000 Deductibles**

<u>Proposed Rates</u>	<u>One Adult</u>	<u>Two Adults</u>	<u>Two Adults With One or More Children</u>	<u>One or More Children (no age variance)</u>	<u>One Adult With One or More Children</u>
Age Band <30	\$18.90	\$37.81	\$47.77	\$15.36	\$29.64
Age Band 30-39	\$19.49	\$38.99	\$49.26	\$15.36	\$30.57
Age Band 40-44	\$23.63	\$47.26	\$59.71	\$15.36	\$37.05
Age Band 45-54	\$25.40	\$50.80	\$64.19	\$15.36	\$39.83
Age Band 55-64	\$28.36	\$56.71	\$71.65	\$15.36	\$44.46
Age Band >64	\$28.36	\$56.71	\$71.65	\$15.36	\$44.46

Rating Factors for Listed Mental Illness Buy-up Rider

<u>Rider Rating Factor</u>	<u>One Adult</u>	<u>Two Adults</u>	<u>Two Adults With One or More Children</u>	<u>One or More Children (no age variance)</u>	<u>One Adult With One or More Children</u>
	0.377	0.377	0.377	0.377	0.377