

# Northeastern Pennsylvania

**HMO Health Insurance Monthly Plan Rates** — (Bradford, Clinton, Columbia, Lackawanna, Luzerne, Lycoming, Northumberland, Pike, Snyder, Sullivan, Susquehanna, Wayne, Wyoming), Effective 10/1/08\*

HMO 20						
Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$340	\$340	N/A	N/A	N/A	N/A
1	\$204	\$204	N/A	N/A	N/A	N/A
2-18	\$109	\$109	\$218	\$327	\$327	\$436
19-24	\$115	\$190	\$305	\$333	\$408	\$523
25-29	\$131	\$230	\$361	\$349	\$448	\$579
30-34	\$152	\$236	\$388	\$370	\$454	\$606
35-39	\$177	\$239	\$416	\$395	\$457	\$634
40-44	\$210	\$244	\$454	\$428	\$462	\$672
45-49	\$260	\$255	\$515	\$478	\$473	\$733
50-54	\$336	\$269	\$605	\$554	\$487	\$823
55-59	\$436	\$317	\$753	\$654	\$535	\$971
60-64	\$615	\$394	\$1,009	\$833	\$612	\$1,227
65+*** Non-Medicare Eligible	\$844	\$451	\$1,295	\$1,062	\$669	\$1,513
65+*** Medicare Eligible	\$633	\$338	\$971	\$851	\$556	\$1,189

HMO 30						
Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$308	\$308	N/A	N/A	N/A	N/A
1	\$184	\$184	N/A	N/A	N/A	N/A
2-18	\$98	\$98	\$196	\$294	\$294	\$392
19-24	\$104	\$171	\$275	\$300	\$367	\$471
25-29	\$118	\$208	\$326	\$314	\$404	\$522
30-34	\$137	\$213	\$350	\$333	\$409	\$546
35-39	\$160	\$217	\$377	\$356	\$413	\$573
40-44	\$190	\$220	\$410	\$386	\$416	\$606
45-49	\$235	\$230	\$465	\$431	\$426	\$661
50-54	\$303	\$244	\$547	\$499	\$440	\$743
55-59	\$394	\$286	\$680	\$590	\$482	\$876
60-64	\$556	\$356	\$912	\$752	\$552	\$1,108
65+*** Non-Medicare Eligible	\$764	\$408	\$1,172	\$960	\$604	\$1,368
65+*** Medicare Eligible	\$572	\$306	\$878	\$768	\$502	\$1,074

Monthly Dental Rates†			
Single	Couple**	Parent & Child(ren)	Family**
\$12	\$23	\$34	\$45

**Your rates are guaranteed not to increase for minimum of 6 months from your effective date once you have been accepted for coverage.**

\* Rates are subject to increase upon underwriting review.

\*\* Couple and Family rates are based on the age of the oldest spouse.

\*\*\*Age 65+ rates are not available to new applicants.

† Dental is offered only if medical coverage is obtained.

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If you need this material translated into another language, please call Member Services at 1-866-565-1236.

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Upon request, we will provide you with rates at a different underwriting level.

This material is for information only. Health/dental benefits plans contain exclusions and limitations. Plans may be subject to medical underwriting or other restrictions. Rates and benefits vary by location.

Rates are subject to change based on rate increases implemented to the whole book of business in accordance with state laws and regulations based on your medical history, Aetna's underwriting guidelines and any optional benefits selected. Information is subject to change.



# Southeastern Pennsylvania

**HMO Health Insurance Monthly Plan Rates** — (Berks, Bucks, Carbon, Chester, Delaware, Lehigh, Monroe, Montgomery, Northampton, Philadelphia), Effective 10/1/08\*

HMO 20						
Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$361	\$361	N/A	N/A	N/A	N/A
1	\$217	\$217	N/A	N/A	N/A	N/A
2-18	\$116	\$116	\$232	\$348	\$348	\$464
19-24	\$122	\$201	\$323	\$354	\$433	\$555
25-29	\$139	\$244	\$383	\$371	\$476	\$615
30-34	\$161	\$250	\$411	\$393	\$482	\$643
35-39	\$188	\$255	\$443	\$420	\$487	\$675
40-44	\$224	\$259	\$483	\$456	\$491	\$715
45-49	\$276	\$270	\$546	\$508	\$502	\$778
50-54	\$356	\$285	\$641	\$588	\$517	\$873
55-59	\$462	\$337	\$799	\$694	\$569	\$1,031
60-64	\$652	\$418	\$1,070	\$884	\$650	\$1,302
65+*** Non-Medicare Eligible	\$895	\$478	\$1,373	\$1,127	\$710	\$1,605
65+*** Medicare Eligible	\$671	\$359	\$1,030	\$903	\$591	\$1,262

HMO 30						
Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$327	\$327	N/A	N/A	N/A	N/A
1	\$196	\$196	N/A	N/A	N/A	N/A
2-18	\$105	\$105	\$210	\$315	\$315	\$420
19-24	\$110	\$182	\$292	\$320	\$392	\$502
25-29	\$125	\$220	\$345	\$335	\$430	\$555
30-34	\$145	\$227	\$372	\$355	\$437	\$582
35-39	\$170	\$230	\$400	\$380	\$440	\$610
40-44	\$202	\$235	\$437	\$412	\$445	\$647
45-49	\$250	\$244	\$494	\$460	\$454	\$704
50-54	\$322	\$258	\$580	\$532	\$468	\$790
55-59	\$418	\$304	\$722	\$628	\$514	\$932
60-64	\$589	\$378	\$967	\$799	\$588	\$1,177
65+*** Non-Medicare Eligible	\$810	\$432	\$1,242	\$1,020	\$642	\$1,452
65+*** Medicare Eligible	\$607	\$324	\$931	\$817	\$534	\$1,141

Monthly Dental Rates†			
Single	Couple**	Parent & Child(ren)	Family**
\$14	\$28	\$41	\$55

**Your rates are guaranteed not to increase for minimum of 6 months from your effective date once you have been accepted for coverage.**

\* Rates are subject to increase upon underwriting review.

\*\* Couple and Family rates are based on the age of the oldest spouse.

\*\*\* Age 65+ rates are not available to new applicants.

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# Western Pennsylvania

**HMO Health Insurance Monthly Plan Rates** — (Allegheny, Armstrong, Beaver, Blair, Butler, Cambria, Clarion, Erie, Fayette, Greene, Jefferson, Lawrence, Mercer, Somerset, Washington, Westmoreland), Effective 10/1/08\*

HMO 20						
Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$440	\$440	N/A	N/A	N/A	N/A
1	\$264	\$264	N/A	N/A	N/A	N/A
2-18	\$141	\$141	\$282	\$423	\$423	\$564
19-24	\$149	\$245	\$394	\$431	\$527	\$676
25-29	\$170	\$298	\$468	\$452	\$580	\$750
30-34	\$197	\$306	\$503	\$479	\$588	\$785
35-39	\$229	\$310	\$539	\$511	\$592	\$821
40-44	\$273	\$316	\$589	\$555	\$598	\$871
45-49	\$338	\$330	\$668	\$620	\$612	\$950
50-54	\$435	\$348	\$783	\$717	\$630	\$1,065
55-59	\$565	\$411	\$976	\$847	\$693	\$1,258
60-64	\$796	\$511	\$1,307	\$1,078	\$793	\$1,589
65+*** Non-Medicare Eligible	\$1,093	\$585	\$1,678	\$1,375	\$867	\$1,960
65+*** Medicare Eligible	\$820	\$439	\$1,259	\$1,102	\$721	\$1,541

HMO 30						
Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$398	\$398	N/A	N/A	N/A	N/A
1	\$239	\$239	N/A	N/A	N/A	N/A
2-18	\$127	\$127	\$254	\$381	\$381	\$508
19-24	\$134	\$222	\$356	\$388	\$476	\$610
25-29	\$153	\$269	\$422	\$407	\$523	\$676
30-34	\$178	\$277	\$455	\$432	\$531	\$709
35-39	\$208	\$281	\$489	\$462	\$535	\$743
40-44	\$247	\$286	\$533	\$501	\$540	\$787
45-49	\$305	\$299	\$604	\$559	\$553	\$858
50-54	\$393	\$315	\$708	\$647	\$569	\$962
55-59	\$511	\$372	\$883	\$765	\$626	\$1,137
60-64	\$720	\$462	\$1,182	\$974	\$716	\$1,436
65+*** Non-Medicare Eligible	\$988	\$529	\$1,517	\$1,242	\$783	\$1,771
65+*** Medicare Eligible	\$741	\$397	\$1,138	\$995	\$651	\$1,392

Monthly Dental Rates†			
Single	Couple**	Parent & Child(ren)	Family**
\$12	\$23	\$34	\$45

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# Central Pennsylvania

**HMO Health Insurance Monthly Plan Rates** — (Adams, Cumberland, Dauphin, Franklin, Fulton, Lancaster, Lebanon, Perry, Schuylkill, York), Effective 10/1/08\*

HMO 20						
Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$340	\$340	N/A	N/A	N/A	N/A
1	\$204	\$204	N/A	N/A	N/A	N/A
2-18	\$109	\$109	\$218	\$327	\$327	\$436
19-24	\$115	\$190	\$305	\$333	\$408	\$523
25-29	\$131	\$230	\$361	\$349	\$448	\$579
30-34	\$152	\$236	\$388	\$370	\$454	\$606
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45-49	\$260	\$255	\$515	\$478	\$473	\$733
50-54	\$336	\$269	\$605	\$554	\$487	\$823
55-59	\$436	\$317	\$753	\$654	\$535	\$971
60-64	\$615	\$394	\$1,009	\$833	\$612	\$1,227
65+*** Non-Medicare Eligible	\$844	\$451	\$1,295	\$1,062	\$669	\$1,513
65+*** Medicare Eligible	\$633	\$338	\$971	\$851	\$556	\$1,189

HMO 30						
Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$308	\$308	N/A	N/A	N/A	N/A
1	\$184	\$184	N/A	N/A	N/A	N/A
2-18	\$98	\$98	\$196	\$294	\$294	\$392
19-24	\$104	\$171	\$275	\$300	\$367	\$471
25-29	\$118	\$208	\$326	\$314	\$404	\$522
30-34	\$137	\$213	\$350	\$333	\$409	\$546
35-39	\$160	\$217	\$377	\$356	\$413	\$573
40-44	\$190	\$220	\$410	\$386	\$416	\$606
45-49	\$235	\$230	\$465	\$431	\$426	\$661
50-54	\$303	\$244	\$547	\$499	\$440	\$743
55-59	\$394	\$286	\$680	\$590	\$482	\$876
60-64	\$556	\$356	\$912	\$752	\$552	\$1,108
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65+*** Medicare Eligible	\$572	\$306	\$878	\$768	\$502	\$1,074

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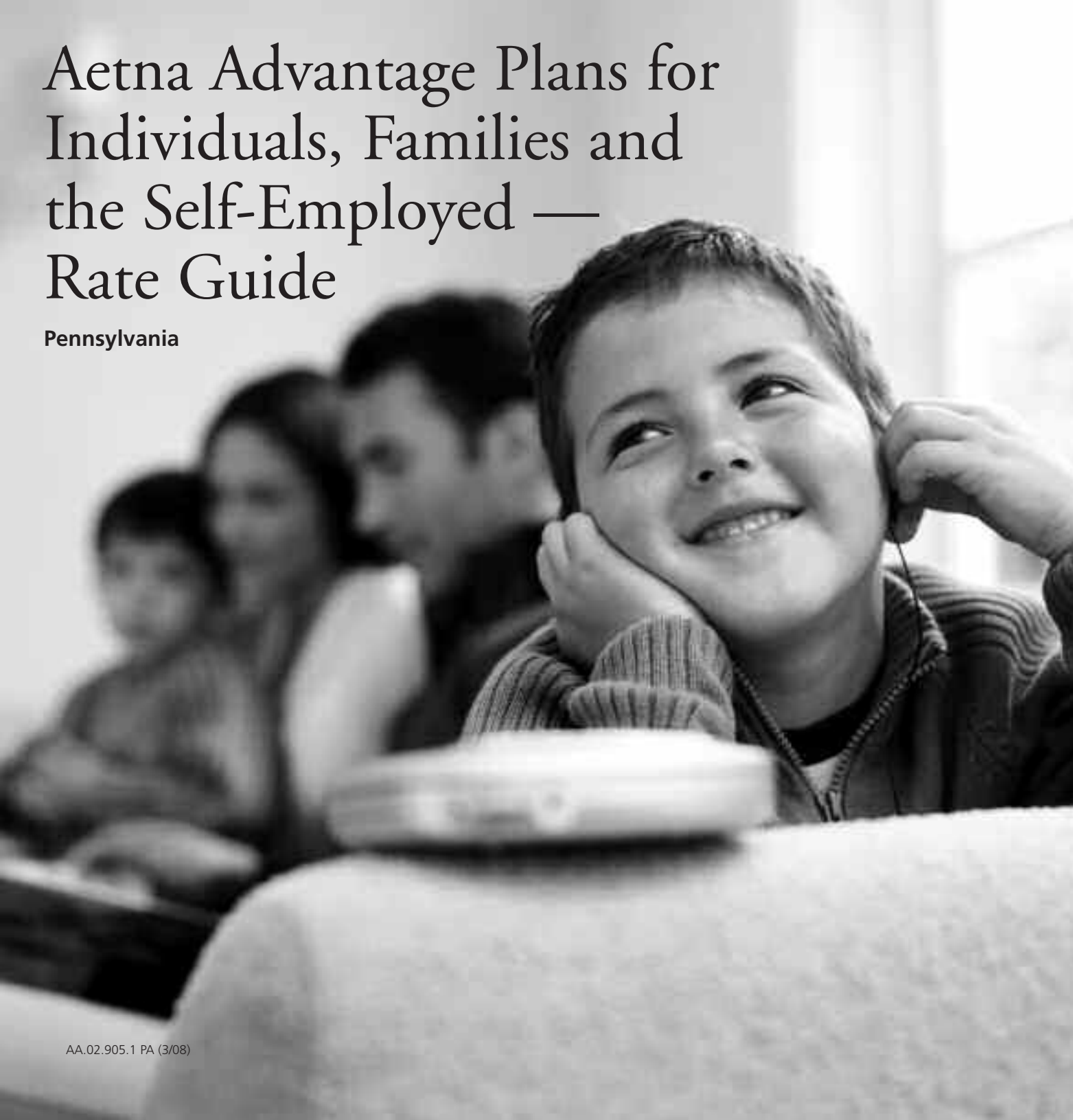
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# Aetna Advantage Plans for Individuals, Families and the Self-Employed — Rate Guide

Pennsylvania

PPO  
Rate Guide



We want you to know<sup>®</sup>



# Southeastern Pennsylvania

**PPO Health Insurance Monthly Plan Rates** — Berks, Bucks, Carbon, Chester, Delaware, Lehigh, Monroe, Montgomery, Northampton, Philadelphia; Effective 4/1/08\*

## PPO 1500

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$233	\$233	N/A	N/A	N/A	N/A
1	\$140	\$140	N/A	N/A	N/A	N/A
2-18	\$93	\$93	\$186	\$279	\$279	\$372
19-24	\$98	\$140	\$238	\$284	\$326	\$424
25-29	\$114	\$163	\$277	\$300	\$349	\$463
30-34	\$135	\$179	\$314	\$321	\$365	\$500
35-39	\$160	\$194	\$354	\$346	\$380	\$540
40-44	\$193	\$236	\$429	\$379	\$422	\$615
45-49	\$240	\$256	\$496	\$426	\$442	\$682
50-54	\$315	\$294	\$609	\$501	\$480	\$795
55-59	\$413	\$356	\$769	\$599	\$542	\$955
60-64	\$586	\$456	\$1,042	\$772	\$642	\$1,228
65+***	\$627	\$511	\$1,138	\$813	\$697	\$1,324

## PPO 2500

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$164	\$164	N/A	N/A	N/A	N/A
1	\$99	\$99	N/A	N/A	N/A	N/A
2-18	\$66	\$66	\$132	\$198	\$198	\$264
19-24	\$70	\$100	\$170	\$202	\$232	\$302
25-29	\$83	\$118	\$201	\$215	\$250	\$333
30-34	\$99	\$131	\$230	\$231	\$263	\$362
35-39	\$118	\$144	\$262	\$250	\$276	\$394
40-44	\$144	\$177	\$321	\$276	\$309	\$453
45-49	\$182	\$194	\$376	\$314	\$326	\$508
50-54	\$241	\$225	\$466	\$373	\$357	\$598
55-59	\$318	\$275	\$593	\$450	\$407	\$725
60-64	\$454	\$354	\$808	\$586	\$486	\$940
65+***	\$486	\$396	\$882	\$618	\$528	\$1,014

## PPO 5000

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$104	\$104	N/A	N/A	N/A	N/A
1	\$63	\$63	N/A	N/A	N/A	N/A
2-18	\$42	\$42	\$84	\$126	\$126	\$168
19-24	\$45	\$64	\$109	\$129	\$148	\$193
25-29	\$54	\$77	\$131	\$138	\$161	\$215
30-34	\$66	\$88	\$154	\$150	\$172	\$238
35-39	\$81	\$98	\$179	\$165	\$182	\$263
40-44	\$100	\$123	\$223	\$184	\$207	\$307
45-49	\$128	\$137	\$265	\$212	\$221	\$349
50-54	\$172	\$161	\$333	\$256	\$245	\$417
55-59	\$229	\$198	\$427	\$313	\$282	\$511
60-64	\$330	\$257	\$587	\$414	\$341	\$671
65+***	\$354	\$288	\$642	\$438	\$372	\$726

## PPO High Deductible 3000 (HSA Compatible)

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$148	\$148	N/A	N/A	N/A	N/A
1	\$89	\$89	N/A	N/A	N/A	N/A
2-18	\$59	\$59	\$118	\$177	\$177	\$236
19-24	\$63	\$90	\$153	\$181	\$208	\$271
25-29	\$74	\$106	\$180	\$192	\$224	\$298
30-34	\$89	\$118	\$207	\$207	\$236	\$325
35-39	\$108	\$129	\$237	\$226	\$247	\$355
40-44	\$130	\$160	\$290	\$248	\$278	\$408
45-49	\$164	\$175	\$339	\$282	\$293	\$457
50-54	\$217	\$203	\$420	\$335	\$321	\$538
55-59	\$287	\$247	\$534	\$405	\$365	\$652
60-64	\$409	\$319	\$728	\$527	\$437	\$846
65+***	\$438	\$357	\$795	\$556	\$475	\$913

## PPO High Deductible 5000 (HSA Compatible)

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$108	\$108	N/A	N/A	N/A	N/A
1	\$65	\$65	N/A	N/A	N/A	N/A
2-18	\$43	\$43	\$86	\$129	\$129	\$172
19-24	\$46	\$66	\$112	\$132	\$152	\$198
25-29	\$56	\$80	\$136	\$142	\$166	\$222
30-34	\$69	\$91	\$160	\$155	\$177	\$246
35-39	\$84	\$102	\$186	\$170	\$188	\$272
40-44	\$104	\$128	\$232	\$190	\$214	\$318
45-49	\$133	\$142	\$275	\$219	\$228	\$361
50-54	\$178	\$167	\$345	\$264	\$253	\$431
55-59	\$238	\$205	\$443	\$324	\$291	\$529
60-64	\$343	\$267	\$610	\$429	\$353	\$696
65+***	\$367	\$299	\$666	\$453	\$385	\$752

## First Dollar PPO 25

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$304	\$304	N/A	N/A	N/A	N/A
1	\$182	\$182	N/A	N/A	N/A	N/A
2-18	\$122	\$122	\$244	\$366	\$366	\$488
19-24	\$128	\$183	\$311	\$372	\$427	\$555
25-29	\$148	\$209	\$357	\$392	\$453	\$601
30-34	\$169	\$227	\$396	\$413	\$471	\$640
35-39	\$199	\$241	\$440	\$443	\$485	\$684
40-44	\$237	\$292	\$529	\$481	\$536	\$773
45-49	\$293	\$311	\$604	\$537	\$555	\$848
50-54	\$379	\$354	\$733	\$623	\$598	\$977
55-59	\$493	\$425	\$918	\$737	\$669	\$1,162
60-64	\$692	\$539	\$1,231	\$936	\$783	\$1,475
65+***	\$740	\$604	\$1,344	\$984	\$848	\$1,588

## First Dollar PPO 35

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$220	\$220	N/A	N/A	N/A	N/A
1	\$132	\$132	N/A	N/A	N/A	N/A
2-18	\$88	\$88	\$176	\$264	\$264	\$352
19-24	\$93	\$133	\$226	\$269	\$309	\$402
25-29	\$108	\$153	\$261	\$284	\$329	\$437
30-34	\$125	\$167	\$292	\$301	\$343	\$468
35-39	\$148	\$179	\$327	\$324	\$355	\$503
40-44	\$177	\$217	\$394	\$353	\$393	\$570
45-49	\$220	\$234	\$454	\$396	\$410	\$630
50-54	\$286	\$267	\$553	\$462	\$443	\$729
55-59	\$373	\$322	\$695	\$549	\$498	\$871
60-64	\$527	\$411	\$938	\$703	\$587	\$1,114
65+***	\$564	\$460	\$1,024	\$740	\$636	\$1,200

## Monthly Dental Rates<sup>††</sup>

Single	Couple	Parent & Child(ren)	Family
\$14	\$28	\$41	\$55

**Your rates are guaranteed not to increase for 12 months from your effective date once you've been accepted for coverage. \***

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\*\*\* Age 65+ rates are not available to new applicants.

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# Central Pennsylvania

**PPO Health Insurance Monthly Plan Rates** — Adams, Bedford, Centre, Cumberland, Dauphin, Franklin, Fulton, Huntingdon, Juniata, Lancaster, Lebanon, Mifflin, Montour, Perry, Potter, Schuylkill, Tioga, Union, York; Effective 4/1/08\*

## PPO 1500

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$233	\$233	N/A	N/A	N/A	N/A
1	\$140	\$140	N/A	N/A	N/A	N/A
2-18	\$93	\$93	\$186	\$279	\$279	\$372
19-24	\$98	\$140	\$238	\$284	\$326	\$424
25-29	\$114	\$163	\$277	\$300	\$349	\$463
30-34	\$135	\$179	\$314	\$321	\$365	\$500
35-39	\$160	\$194	\$354	\$346	\$380	\$540
40-44	\$193	\$236	\$429	\$379	\$422	\$615
45-49	\$240	\$256	\$496	\$426	\$442	\$682
50-54	\$315	\$294	\$609	\$501	\$480	\$795
55-59	\$413	\$356	\$769	\$599	\$542	\$955
60-64	\$586	\$456	\$1,042	\$772	\$642	\$1,228
65+***	\$627	\$511	\$1,138	\$813	\$697	\$1,324

## PPO 2500

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$164	\$164	N/A	N/A	N/A	N/A
1	\$99	\$99	N/A	N/A	N/A	N/A
2-18	\$66	\$66	\$132	\$198	\$198	\$264
19-24	\$70	\$100	\$170	\$202	\$232	\$302
25-29	\$83	\$118	\$201	\$215	\$250	\$333
30-34	\$99	\$131	\$230	\$231	\$263	\$362
35-39	\$118	\$144	\$262	\$250	\$276	\$394
40-44	\$144	\$177	\$321	\$276	\$309	\$453
45-49	\$182	\$194	\$376	\$314	\$326	\$508
50-54	\$241	\$225	\$466	\$373	\$357	\$598
55-59	\$318	\$275	\$593	\$450	\$407	\$725
60-64	\$454	\$354	\$808	\$586	\$486	\$940
65+***	\$486	\$396	\$882	\$618	\$528	\$1,014

## PPO 5000

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$104	\$104	N/A	N/A	N/A	N/A
1	\$63	\$63	N/A	N/A	N/A	N/A
2-18	\$42	\$42	\$84	\$126	\$126	\$168
19-24	\$45	\$64	\$109	\$129	\$148	\$193
25-29	\$54	\$77	\$131	\$138	\$161	\$215
30-34	\$66	\$88	\$154	\$150	\$172	\$238
35-39	\$81	\$98	\$179	\$165	\$182	\$263
40-44	\$100	\$123	\$223	\$184	\$207	\$307
45-49	\$128	\$137	\$265	\$212	\$221	\$349
50-54	\$172	\$161	\$333	\$256	\$245	\$417
55-59	\$229	\$198	\$427	\$313	\$282	\$511
60-64	\$330	\$257	\$587	\$414	\$341	\$671
65+***	\$354	\$288	\$642	\$438	\$372	\$726

## PPO High Deductible 3000 (HSA Compatible)

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$148	\$148	N/A	N/A	N/A	N/A
1	\$89	\$89	N/A	N/A	N/A	N/A
2-18	\$59	\$59	\$118	\$177	\$177	\$236
19-24	\$63	\$90	\$153	\$181	\$208	\$271
25-29	\$74	\$106	\$180	\$192	\$224	\$298
30-34	\$89	\$118	\$207	\$207	\$236	\$325
35-39	\$108	\$129	\$237	\$226	\$247	\$355
40-44	\$130	\$160	\$290	\$248	\$278	\$408
45-49	\$164	\$175	\$339	\$282	\$293	\$457
50-54	\$217	\$203	\$420	\$335	\$321	\$538
55-59	\$287	\$247	\$534	\$405	\$365	\$652
60-64	\$409	\$319	\$728	\$527	\$437	\$846
65+***	\$438	\$357	\$795	\$556	\$475	\$913

## PPO High Deductible 5000 (HSA Compatible)

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$108	\$108	N/A	N/A	N/A	N/A
1	\$65	\$65	N/A	N/A	N/A	N/A
2-18	\$43	\$43	\$86	\$129	\$129	\$172
19-24	\$46	\$66	\$112	\$132	\$152	\$198
25-29	\$56	\$80	\$136	\$142	\$166	\$222
30-34	\$69	\$91	\$160	\$155	\$177	\$246
35-39	\$84	\$102	\$186	\$170	\$188	\$272
40-44	\$104	\$128	\$232	\$190	\$214	\$318
45-49	\$133	\$142	\$275	\$219	\$228	\$361
50-54	\$178	\$167	\$345	\$264	\$253	\$431
55-59	\$238	\$205	\$443	\$324	\$291	\$529
60-64	\$343	\$267	\$610	\$429	\$353	\$696
65+***	\$367	\$299	\$666	\$453	\$385	\$752

## First Dollar PPO 25

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$304	\$304	N/A	N/A	N/A	N/A
1	\$182	\$182	N/A	N/A	N/A	N/A
2-18	\$122	\$122	\$244	\$366	\$366	\$488
19-24	\$128	\$183	\$311	\$372	\$427	\$555
25-29	\$148	\$209	\$357	\$392	\$453	\$601
30-34	\$169	\$227	\$396	\$413	\$471	\$640
35-39	\$199	\$241	\$440	\$443	\$485	\$684
40-44	\$237	\$292	\$529	\$481	\$536	\$773
45-49	\$293	\$311	\$604	\$537	\$555	\$848
50-54	\$379	\$354	\$733	\$623	\$598	\$977
55-59	\$493	\$425	\$918	\$737	\$669	\$1,162
60-64	\$692	\$539	\$1,231	\$936	\$783	\$1,475
65+***	\$740	\$604	\$1,344	\$984	\$848	\$1,588

## First Dollar PPO 35

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$220	\$220	N/A	N/A	N/A	N/A
1	\$132	\$132	N/A	N/A	N/A	N/A
2-18	\$88	\$88	\$176	\$264	\$264	\$352
19-24	\$93	\$133	\$226	\$269	\$309	\$402
25-29	\$108	\$153	\$261	\$284	\$329	\$437
30-34	\$125	\$167	\$292	\$301	\$343	\$468
35-39	\$148	\$179	\$327	\$324	\$355	\$503
40-44	\$177	\$217	\$394	\$353	\$393	\$570
45-49	\$220	\$234	\$454	\$396	\$410	\$630
50-54	\$286	\$267	\$553	\$462	\$443	\$729
55-59	\$373	\$322	\$695	\$549	\$498	\$871
60-64	\$527	\$411	\$938	\$703	\$587	\$1,114
65+***	\$564	\$460	\$1,024	\$740	\$636	\$1,200

## Monthly Dental Rates††

Single	Couple	Parent & Child(ren)	Family
\$14	\$28	\$41	\$55

**Your rates are guaranteed not to increase for 12 months from your effective date once you've been accepted for coverage. \***

- \* Rates are subject to increase upon underwriting review.
- \*\* Couple and Family rates are based on the age of the oldest spouse.
- \*\*\* Age 65+ rates are not available to new applicants.
- † Dental is offered only if medical coverage is obtained.

# Western Pennsylvania

**PPO Health Insurance Monthly Plan Rates** — Cameron, Clearfield, Crawford, Elk, Erie, Forest, Jefferson, McKean, Mercer, Venango, Warren; Effective 4/1/08\*

## PPO 1500

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$256	\$256	N/A	N/A	N/A	N/A
1	\$154	\$154	N/A	N/A	N/A	N/A
2-18	\$102	\$102	\$204	\$306	\$306	\$408
19-24	\$108	\$154	\$262	\$312	\$358	\$466
25-29	\$126	\$179	\$305	\$330	\$383	\$509
30-34	\$148	\$197	\$345	\$352	\$401	\$549
35-39	\$176	\$213	\$389	\$380	\$417	\$593
40-44	\$212	\$260	\$472	\$416	\$464	\$676
45-49	\$264	\$282	\$546	\$468	\$486	\$750
50-54	\$346	\$324	\$670	\$550	\$528	\$874
55-59	\$454	\$392	\$846	\$658	\$596	\$1,050
60-64	\$644	\$502	\$1,146	\$848	\$706	\$1,350
65+***	\$689	\$562	\$1,251	\$893	\$766	\$1,455

## PPO 2500

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$181	\$181	N/A	N/A	N/A	N/A
1	\$108	\$108	N/A	N/A	N/A	N/A
2-18	\$72	\$72	\$144	\$216	\$216	\$288
19-24	\$77	\$110	\$187	\$221	\$254	\$331
25-29	\$91	\$129	\$220	\$235	\$273	\$364
30-34	\$108	\$144	\$252	\$252	\$288	\$396
35-39	\$130	\$158	\$288	\$274	\$302	\$432
40-44	\$159	\$195	\$354	\$303	\$339	\$498
45-49	\$200	\$214	\$414	\$344	\$358	\$558
50-54	\$265	\$248	\$513	\$409	\$392	\$657
55-59	\$350	\$302	\$652	\$494	\$446	\$796
60-64	\$500	\$389	\$889	\$644	\$533	\$1,033
65+***	\$535	\$436	\$971	\$679	\$580	\$1,115

## PPO 5000

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$115	\$115	N/A	N/A	N/A	N/A
1	\$69	\$69	N/A	N/A	N/A	N/A
2-18	\$46	\$46	\$92	\$138	\$138	\$184
19-24	\$49	\$70	\$119	\$141	\$162	\$211
25-29	\$60	\$85	\$145	\$152	\$177	\$237
30-34	\$73	\$97	\$170	\$165	\$189	\$262
35-39	\$89	\$108	\$197	\$181	\$200	\$289
40-44	\$110	\$135	\$245	\$202	\$227	\$337
45-49	\$141	\$150	\$291	\$233	\$242	\$383
50-54	\$189	\$177	\$366	\$281	\$269	\$458
55-59	\$252	\$218	\$470	\$344	\$310	\$562
60-64	\$363	\$283	\$646	\$455	\$375	\$738
65+***	\$389	\$317	\$706	\$481	\$409	\$798

## PPO High Deductible 3000 (HSA Compatible)

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$163	\$163	N/A	N/A	N/A	N/A
1	\$98	\$98	N/A	N/A	N/A	N/A
2-18	\$65	\$65	\$130	\$195	\$195	\$260
19-24	\$69	\$99	\$168	\$199	\$229	\$298
25-29	\$82	\$117	\$199	\$212	\$247	\$329
30-34	\$98	\$130	\$228	\$228	\$260	\$358
35-39	\$119	\$142	\$261	\$249	\$272	\$391
40-44	\$143	\$176	\$319	\$273	\$306	\$449
45-49	\$180	\$192	\$372	\$310	\$322	\$502
50-54	\$238	\$223	\$461	\$368	\$353	\$591
55-59	\$315	\$272	\$587	\$445	\$402	\$717
60-64	\$450	\$351	\$801	\$580	\$481	\$931
65+***	\$482	\$393	\$875	\$612	\$523	\$1,005

## PPO High Deductible 5000 (HSA Compatible)

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$119	\$119	N/A	N/A	N/A	N/A
1	\$72	\$72	N/A	N/A	N/A	N/A
2-18	\$48	\$48	\$96	\$144	\$144	\$192
19-24	\$51	\$73	\$124	\$147	\$169	\$220
25-29	\$62	\$88	\$150	\$158	\$184	\$246
30-34	\$76	\$101	\$177	\$172	\$197	\$273
35-39	\$92	\$112	\$204	\$188	\$208	\$300
40-44	\$114	\$140	\$254	\$210	\$236	\$350
45-49	\$146	\$156	\$302	\$242	\$252	\$398
50-54	\$196	\$183	\$379	\$292	\$279	\$475
55-59	\$262	\$226	\$488	\$358	\$322	\$584
60-64	\$377	\$294	\$671	\$473	\$390	\$767
65+***	\$404	\$329	\$733	\$500	\$425	\$829

## First Dollar PPO 25

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$335	\$335	N/A	N/A	N/A	N/A
1	\$201	\$201	N/A	N/A	N/A	N/A
2-18	\$134	\$134	\$268	\$402	\$402	\$536
19-24	\$140	\$202	\$342	\$408	\$470	\$610
25-29	\$162	\$230	\$392	\$430	\$498	\$660
30-34	\$186	\$250	\$436	\$454	\$518	\$704
35-39	\$219	\$265	\$484	\$487	\$533	\$752
40-44	\$261	\$321	\$582	\$529	\$589	\$850
45-49	\$322	\$342	\$664	\$590	\$610	\$932
50-54	\$417	\$390	\$807	\$685	\$658	\$1,075
55-59	\$542	\$468	\$1,010	\$810	\$736	\$1,278
60-64	\$761	\$593	\$1,354	\$1,029	\$861	\$1,622
65+***	\$814	\$664	\$1,478	\$1,082	\$932	\$1,746

## First Dollar PPO 35

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$242	\$242	N/A	N/A	N/A	N/A
1	\$145	\$145	N/A	N/A	N/A	N/A
2-18	\$97	\$97	\$194	\$291	\$291	\$388
19-24	\$102	\$146	\$248	\$296	\$340	\$442
25-29	\$118	\$168	\$286	\$312	\$362	\$480
30-34	\$138	\$184	\$322	\$332	\$378	\$516
35-39	\$163	\$197	\$360	\$357	\$391	\$554
40-44	\$195	\$239	\$434	\$389	\$433	\$628
45-49	\$242	\$257	\$499	\$436	\$451	\$693
50-54	\$314	\$294	\$608	\$508	\$488	\$802
55-59	\$411	\$354	\$765	\$605	\$548	\$959
60-64	\$580	\$452	\$1,032	\$774	\$646	\$1,226
65+***	\$620	\$506	\$1,126	\$814	\$700	\$1,320

## Monthly Dental Rates<sup>††</sup>

Single	Couple	Parent & Child(ren)	Family
\$14	\$28	\$41	\$55

**Your rates are guaranteed not to increase for 12 months from your effective date once you've been accepted for coverage. \***

\* Rates are subject to increase upon underwriting review.

\*\* Couple and Family rates are based on the age of the oldest spouse.

\*\*\* Age 65+ rates are not available to new applicants.

† Dental is offered only if medical coverage is obtained.

# Northeastern Pennsylvania

**PPO Health Insurance Monthly Plan Rates** — Bradford, Clinton, Columbia, Lackawanna, Luzerne, Lycoming, Northumberland, Pike, Snyder, Sullivan, Susquehanna, Wayne, Wyoming; Effective 4/1/08\*

## PPO 1500

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$233	\$233	N/A	N/A	N/A	N/A
1	\$140	\$140	N/A	N/A	N/A	N/A
2-18	\$93	\$93	\$186	\$279	\$279	\$372
19-24	\$98	\$140	\$238	\$284	\$326	\$424
25-29	\$114	\$163	\$277	\$300	\$349	\$463
30-34	\$135	\$179	\$314	\$321	\$365	\$500
35-39	\$160	\$194	\$354	\$346	\$380	\$540
40-44	\$193	\$236	\$429	\$379	\$422	\$615
45-49	\$240	\$256	\$496	\$426	\$442	\$682
50-54	\$315	\$294	\$609	\$501	\$480	\$795
55-59	\$413	\$356	\$769	\$599	\$542	\$955
60-64	\$586	\$456	\$1,042	\$772	\$642	\$1,228
65+***	\$627	\$511	\$1,138	\$813	\$697	\$1,324

## PPO 2500

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$164	\$164	N/A	N/A	N/A	N/A
1	\$99	\$99	N/A	N/A	N/A	N/A
2-18	\$66	\$66	\$132	\$198	\$198	\$264
19-24	\$70	\$100	\$170	\$202	\$232	\$302
25-29	\$83	\$118	\$201	\$215	\$250	\$333
30-34	\$99	\$131	\$230	\$231	\$263	\$362
35-39	\$118	\$144	\$262	\$250	\$276	\$394
40-44	\$144	\$177	\$321	\$276	\$309	\$453
45-49	\$182	\$194	\$376	\$314	\$326	\$508
50-54	\$241	\$225	\$466	\$373	\$357	\$598
55-59	\$318	\$275	\$593	\$450	\$407	\$725
60-64	\$454	\$354	\$808	\$586	\$486	\$940
65+***	\$486	\$396	\$882	\$618	\$528	\$1,014

## PPO 5000

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$104	\$104	N/A	N/A	N/A	N/A
1	\$63	\$63	N/A	N/A	N/A	N/A
2-18	\$42	\$42	\$84	\$126	\$126	\$168
19-24	\$45	\$64	\$109	\$129	\$148	\$193
25-29	\$54	\$77	\$131	\$138	\$161	\$215
30-34	\$66	\$88	\$154	\$150	\$172	\$238
35-39	\$81	\$98	\$179	\$165	\$182	\$263
40-44	\$100	\$123	\$223	\$184	\$207	\$307
45-49	\$128	\$137	\$265	\$212	\$221	\$349
50-54	\$172	\$161	\$333	\$256	\$245	\$417
55-59	\$229	\$198	\$427	\$313	\$282	\$511
60-64	\$330	\$257	\$587	\$414	\$341	\$671
65+***	\$354	\$288	\$642	\$438	\$372	\$726

## PPO High Deductible 3000 (HSA Compatible)

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$148	\$148	N/A	N/A	N/A	N/A
1	\$89	\$89	N/A	N/A	N/A	N/A
2-18	\$59	\$59	\$118	\$177	\$177	\$236
19-24	\$63	\$90	\$153	\$181	\$208	\$271
25-29	\$74	\$106	\$180	\$192	\$224	\$298
30-34	\$89	\$118	\$207	\$207	\$236	\$325
35-39	\$108	\$129	\$237	\$226	\$247	\$355
40-44	\$130	\$160	\$290	\$248	\$278	\$408
45-49	\$164	\$175	\$339	\$282	\$293	\$457
50-54	\$217	\$203	\$420	\$335	\$321	\$538
55-59	\$287	\$247	\$534	\$405	\$365	\$652
60-64	\$409	\$319	\$728	\$527	\$437	\$846
65+***	\$438	\$357	\$795	\$556	\$475	\$913

## PPO High Deductible 5000 (HSA Compatible)

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$108	\$108	N/A	N/A	N/A	N/A
1	\$65	\$65	N/A	N/A	N/A	N/A
2-18	\$43	\$43	\$86	\$129	\$129	\$172
19-24	\$46	\$66	\$112	\$132	\$152	\$198
25-29	\$56	\$80	\$136	\$142	\$166	\$222
30-34	\$69	\$91	\$160	\$155	\$177	\$246
35-39	\$84	\$102	\$186	\$170	\$188	\$272
40-44	\$104	\$128	\$232	\$190	\$214	\$318
45-49	\$133	\$142	\$275	\$219	\$228	\$361
50-54	\$178	\$167	\$345	\$264	\$253	\$431
55-59	\$238	\$205	\$443	\$324	\$291	\$529
60-64	\$343	\$267	\$610	\$429	\$353	\$696
65+***	\$367	\$299	\$666	\$453	\$385	\$752

## First Dollar PPO 25

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$304	\$304	N/A	N/A	N/A	N/A
1	\$182	\$182	N/A	N/A	N/A	N/A
2-18	\$122	\$122	\$244	\$366	\$366	\$488
19-24	\$128	\$183	\$311	\$372	\$427	\$555
25-29	\$148	\$209	\$357	\$392	\$453	\$601
30-34	\$169	\$227	\$396	\$413	\$471	\$640
35-39	\$199	\$241	\$440	\$443	\$485	\$684
40-44	\$237	\$292	\$529	\$481	\$536	\$773
45-49	\$293	\$311	\$604	\$537	\$555	\$848
50-54	\$379	\$354	\$733	\$623	\$598	\$977
55-59	\$493	\$425	\$918	\$737	\$669	\$1,162
60-64	\$692	\$539	\$1,231	\$936	\$783	\$1,475
65+***	\$740	\$604	\$1,344	\$984	\$848	\$1,588

## First Dollar PPO 35

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$220	\$220	N/A	N/A	N/A	N/A
1	\$132	\$132	N/A	N/A	N/A	N/A
2-18	\$88	\$88	\$176	\$264	\$264	\$352
19-24	\$93	\$133	\$226	\$269	\$309	\$402
25-29	\$108	\$153	\$261	\$284	\$329	\$437
30-34	\$125	\$167	\$292	\$301	\$343	\$468
35-39	\$148	\$179	\$327	\$324	\$355	\$503
40-44	\$177	\$217	\$394	\$353	\$393	\$570
45-49	\$220	\$234	\$454	\$396	\$410	\$630
50-54	\$286	\$267	\$553	\$462	\$443	\$729
55-59	\$373	\$322	\$695	\$549	\$498	\$871
60-64	\$527	\$411	\$938	\$703	\$587	\$1,114
65+***	\$564	\$460	\$1,024	\$740	\$636	\$1,200

## Monthly Dental Rates<sup>††</sup>

Single	Couple	Parent & Child(ren)	Family
\$14	\$28	\$41	\$55

**Your rates are guaranteed not to increase for 12 months from your effective date once you've been accepted for coverage. \***

- \* Rates are subject to increase upon underwriting review.
- \*\* Couple and Family rates are based on the age of the oldest spouse.
- \*\*\* Age 65+ rates are not available to new applicants.
- † Dental is offered only if medical coverage is obtained.

# Western Pennsylvania Aexcel Network

**PPO Health Insurance Monthly Plan Rates** — Allegheny, Armstrong, Beaver, Blair, Butler, Cambria, Clarion, Fayette, Greene, Indiana, Lawrence, Somerset, Washington, Westmoreland; Effective 4/1/08\*

## PPO 1500

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$253	\$253	N/A	N/A	N/A	N/A
1	\$152	\$152	N/A	N/A	N/A	N/A
2-18	\$101	\$101	\$202	\$303	\$303	\$404
19-24	\$107	\$153	\$260	\$309	\$355	\$462
25-29	\$125	\$177	\$302	\$327	\$379	\$504
30-34	\$147	\$195	\$342	\$349	\$397	\$544
35-39	\$174	\$211	\$385	\$376	\$413	\$587
40-44	\$210	\$258	\$468	\$412	\$460	\$670
45-49	\$262	\$279	\$541	\$464	\$481	\$743
50-54	\$343	\$320	\$663	\$545	\$522	\$865
55-59	\$450	\$388	\$838	\$652	\$590	\$1,040
60-64	\$638	\$497	\$1,135	\$840	\$699	\$1,337
65+***	\$682	\$556	\$1,238	\$884	\$758	\$1,440

## PPO 2500

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$179	\$179	N/A	N/A	N/A	N/A
1	\$107	\$107	N/A	N/A	N/A	N/A
2-18	\$72	\$72	\$144	\$216	\$216	\$288
19-24	\$76	\$109	\$185	\$220	\$253	\$329
25-29	\$90	\$128	\$218	\$234	\$272	\$362
30-34	\$107	\$143	\$250	\$251	\$287	\$394
35-39	\$129	\$156	\$285	\$273	\$300	\$429
40-44	\$157	\$193	\$350	\$301	\$337	\$494
45-49	\$198	\$211	\$409	\$342	\$355	\$553
50-54	\$262	\$245	\$507	\$406	\$389	\$651
55-59	\$347	\$299	\$646	\$491	\$443	\$790
60-64	\$495	\$385	\$880	\$639	\$529	\$1,024
65+***	\$529	\$432	\$961	\$673	\$576	\$1,105

## PPO 5000

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$114	\$114	N/A	N/A	N/A	N/A
1	\$68	\$68	N/A	N/A	N/A	N/A
2-18	\$46	\$46	\$92	\$138	\$138	\$184
19-24	\$49	\$70	\$119	\$141	\$162	\$211
25-29	\$59	\$84	\$143	\$151	\$176	\$235
30-34	\$72	\$96	\$168	\$164	\$188	\$260
35-39	\$88	\$107	\$195	\$180	\$199	\$287
40-44	\$109	\$134	\$243	\$201	\$226	\$335
45-49	\$140	\$149	\$289	\$232	\$241	\$381
50-54	\$187	\$175	\$362	\$279	\$267	\$454
55-59	\$250	\$216	\$466	\$342	\$308	\$558
60-64	\$360	\$280	\$640	\$452	\$372	\$732
65+***	\$385	\$314	\$699	\$477	\$406	\$791

## PPO High Deductible 3000 (HSA Compatible)

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$161	\$161	N/A	N/A	N/A	N/A
1	\$97	\$97	N/A	N/A	N/A	N/A
2-18	\$64	\$64	\$128	\$192	\$192	\$256
19-24	\$68	\$98	\$166	\$196	\$226	\$294
25-29	\$81	\$115	\$196	\$209	\$243	\$324
30-34	\$97	\$129	\$226	\$225	\$257	\$354
35-39	\$117	\$141	\$258	\$245	\$269	\$386
40-44	\$142	\$174	\$316	\$270	\$302	\$444
45-49	\$179	\$190	\$369	\$307	\$318	\$497
50-54	\$236	\$221	\$457	\$364	\$349	\$585
55-59	\$312	\$269	\$581	\$440	\$397	\$709
60-64	\$446	\$347	\$793	\$574	\$475	\$921
65+***	\$477	\$389	\$866	\$605	\$517	\$994

## PPO High Deductible 5000 (HSA Compatible)

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$118	\$118	N/A	N/A	N/A	N/A
1	\$71	\$71	N/A	N/A	N/A	N/A
2-18	\$47	\$47	\$94	\$141	\$141	\$188
19-24	\$51	\$72	\$123	\$145	\$166	\$217
25-29	\$61	\$87	\$148	\$155	\$181	\$242
30-34	\$75	\$100	\$175	\$169	\$194	\$269
35-39	\$91	\$111	\$202	\$185	\$205	\$296
40-44	\$113	\$139	\$252	\$207	\$233	\$346
45-49	\$145	\$155	\$300	\$239	\$249	\$394
50-54	\$194	\$182	\$376	\$288	\$276	\$470
55-59	\$259	\$224	\$483	\$353	\$318	\$577
60-64	\$374	\$291	\$665	\$468	\$385	\$759
65+***	\$400	\$326	\$726	\$494	\$420	\$820

## First Dollar PPO 25

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$331	\$331	N/A	N/A	N/A	N/A
1	\$199	\$199	N/A	N/A	N/A	N/A
2-18	\$132	\$132	\$264	\$396	\$396	\$528
19-24	\$139	\$200	\$339	\$403	\$464	\$603
25-29	\$161	\$228	\$389	\$425	\$492	\$653
30-34	\$185	\$248	\$433	\$449	\$512	\$697
35-39	\$217	\$263	\$480	\$481	\$527	\$744
40-44	\$258	\$317	\$575	\$522	\$581	\$839
45-49	\$319	\$339	\$658	\$583	\$603	\$922
50-54	\$413	\$386	\$799	\$677	\$650	\$1,063
55-59	\$536	\$463	\$999	\$800	\$727	\$1,263
60-64	\$754	\$587	\$1,341	\$1,018	\$851	\$1,605
65+***	\$806	\$658	\$1,464	\$1,070	\$922	\$1,728

## First Dollar PPO 35

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$240	\$240	N/A	N/A	N/A	N/A
1	\$144	\$144	N/A	N/A	N/A	N/A
2-18	\$96	\$96	\$192	\$288	\$288	\$384
19-24	\$101	\$145	\$246	\$293	\$337	\$438
25-29	\$117	\$167	\$284	\$309	\$359	\$476
30-34	\$136	\$182	\$318	\$328	\$374	\$510
35-39	\$161	\$195	\$356	\$353	\$387	\$548
40-44	\$193	\$237	\$430	\$385	\$429	\$622
45-49	\$239	\$255	\$494	\$431	\$447	\$686
50-54	\$311	\$291	\$602	\$503	\$483	\$794
55-59	\$407	\$351	\$758	\$599	\$543	\$950
60-64	\$574	\$447	\$1,021	\$766	\$639	\$1,213
65+***	\$614	\$501	\$1,115	\$806	\$693	\$1,307

## Monthly Dental Rates<sup>††</sup>

Single	Couple	Parent & Child(ren)	Family
\$14	\$28	\$41	\$55

**Your rates are guaranteed not to increase for 12 months from your effective date once you've been accepted for coverage. \***

- \* Rates are subject to increase upon underwriting review.
- \*\* Couple and Family rates are based on the age of the oldest spouse.
- \*\*\* Age 65+ rates are not available to new applicants.
- † Dental is offered only if medical coverage is obtained.



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Si usted necesita este material en otro lenguaje, por favor llame a Servicios al Miembro al 1-866-565-1236.

Upon request, we will provide you with rates at a different underwriting level.

This material is for information only. Plans may be subject to medical underwriting or other restrictions. Rates and benefits vary by location.

Rates are subject to change based on rate increases implemented to the whole book of business in accordance with state laws and regulations based on your medical history, Aetna's underwriting guidelines and any optional benefits selected. Information is subject to change. Health insurance plans contain exclusions and limitations.