

New Hampshire Health Plan
Single Policy Monthly Premium Rates
 Effective January 1, 2010 through June 30, 2010
 For 12-month Rate Guarantee

Class: Attained Age	Non-Tobacco User							Tobacco User						
	Indemnity Plan		Managed Care Plan					Indemnity Plan		Managed Care Plan				
	Option A \$1,750 Ded	Option B \$3,500 Ded	Option A \$1,000 Ded	Option B \$2,500 Ded	Option C \$5,000 Ded	Option D \$10,000 Ded	Option H \$5,600 Ded	Option A \$1,750 Ded	Option B \$3,500 Ded	Option A \$1,000 Ded	Option B \$2,500 Ded	Option C \$5,000 Ded	Option D \$10,000 Ded	Option H \$5,600 Ded
0-18	\$301	\$244	\$230	\$187	\$149	\$128	\$161	\$452	\$366	\$345	\$280	\$224	\$191	\$241
19	\$331	\$268	\$253	\$205	\$164	\$140	\$176	\$497	\$402	\$379	\$307	\$246	\$210	\$265
20	\$331	\$268	\$253	\$205	\$164	\$140	\$176	\$497	\$402	\$379	\$307	\$246	\$210	\$265
21	\$331	\$268	\$253	\$205	\$164	\$140	\$176	\$497	\$402	\$379	\$307	\$246	\$210	\$265
22	\$331	\$268	\$253	\$205	\$164	\$140	\$176	\$497	\$402	\$379	\$307	\$246	\$210	\$265
23	\$334	\$270	\$255	\$207	\$165	\$141	\$178	\$501	\$405	\$382	\$310	\$248	\$212	\$267
24	\$337	\$272	\$257	\$208	\$167	\$143	\$179	\$505	\$409	\$385	\$313	\$250	\$214	\$269
25	\$340	\$275	\$259	\$210	\$168	\$144	\$181	\$510	\$412	\$389	\$315	\$252	\$216	\$271
26	\$342	\$277	\$261	\$212	\$170	\$145	\$182	\$514	\$416	\$392	\$318	\$254	\$218	\$274
27	\$346	\$280	\$264	\$214	\$171	\$146	\$184	\$519	\$420	\$396	\$321	\$257	\$220	\$276
28	\$348	\$281	\$265	\$215	\$172	\$147	\$185	\$521	\$422	\$398	\$323	\$258	\$221	\$278
29	\$349	\$282	\$266	\$216	\$173	\$148	\$186	\$524	\$424	\$400	\$324	\$259	\$222	\$279
30	\$351	\$284	\$268	\$217	\$174	\$149	\$187	\$526	\$426	\$402	\$326	\$261	\$223	\$280
31	\$353	\$285	\$269	\$218	\$175	\$149	\$188	\$529	\$428	\$403	\$327	\$262	\$224	\$282
32	\$354	\$286	\$270	\$219	\$175	\$150	\$188	\$531	\$429	\$405	\$328	\$263	\$225	\$283
33	\$368	\$298	\$281	\$228	\$182	\$156	\$196	\$553	\$447	\$422	\$342	\$274	\$234	\$294
34	\$384	\$310	\$293	\$237	\$190	\$162	\$204	\$575	\$465	\$439	\$356	\$285	\$244	\$306
35	\$399	\$323	\$305	\$247	\$198	\$169	\$213	\$599	\$484	\$457	\$371	\$297	\$254	\$319
36	\$416	\$337	\$317	\$257	\$206	\$176	\$222	\$624	\$505	\$476	\$386	\$309	\$264	\$333
37	\$434	\$351	\$331	\$268	\$215	\$184	\$231	\$650	\$526	\$496	\$402	\$322	\$275	\$346
38	\$457	\$369	\$348	\$283	\$226	\$193	\$243	\$685	\$554	\$523	\$424	\$339	\$290	\$365
39	\$481	\$389	\$367	\$298	\$238	\$204	\$256	\$721	\$583	\$550	\$446	\$357	\$305	\$384
40	\$507	\$410	\$387	\$314	\$251	\$215	\$270	\$760	\$615	\$580	\$470	\$376	\$322	\$405
41	\$534	\$432	\$407	\$330	\$264	\$226	\$284	\$801	\$648	\$611	\$495	\$397	\$339	\$426
42	\$562	\$455	\$429	\$348	\$279	\$238	\$300	\$844	\$682	\$644	\$522	\$418	\$357	\$449
43	\$599	\$485	\$457	\$371	\$297	\$254	\$319	\$899	\$727	\$686	\$556	\$445	\$381	\$479
44	\$639	\$517	\$488	\$396	\$317	\$271	\$341	\$959	\$776	\$732	\$593	\$475	\$406	\$511
45	\$682	\$551	\$520	\$422	\$338	\$289	\$363	\$1,022	\$827	\$780	\$633	\$506	\$433	\$545
46	\$727	\$588	\$554	\$450	\$360	\$308	\$387	\$1,090	\$882	\$831	\$674	\$540	\$461	\$581
47	\$776	\$627	\$592	\$480	\$384	\$328	\$413	\$1,163	\$941	\$887	\$720	\$576	\$493	\$620
48	\$804	\$650	\$613	\$498	\$398	\$341	\$428	\$1,206	\$976	\$920	\$746	\$598	\$511	\$643
49	\$834	\$675	\$636	\$516	\$413	\$353	\$444	\$1,251	\$1,012	\$954	\$774	\$620	\$530	\$666
50	\$865	\$700	\$660	\$535	\$428	\$366	\$461	\$1,297	\$1,049	\$990	\$803	\$643	\$549	\$691
51	\$897	\$726	\$684	\$555	\$444	\$380	\$478	\$1,345	\$1,088	\$1,026	\$832	\$666	\$570	\$717
52	\$931	\$753	\$710	\$576	\$461	\$394	\$496	\$1,396	\$1,129	\$1,065	\$864	\$692	\$591	\$744
53	\$994	\$804	\$758	\$615	\$493	\$421	\$530	\$1,491	\$1,206	\$1,138	\$923	\$739	\$631	\$794
54	\$1,062	\$859	\$810	\$657	\$526	\$450	\$566	\$1,593	\$1,288	\$1,215	\$985	\$789	\$674	\$848
55	\$1,134	\$917	\$865	\$702	\$562	\$480	\$604	\$1,701	\$1,376	\$1,298	\$1,053	\$843	\$720	\$906
56	\$1,174	\$949	\$895	\$726	\$581	\$497	\$625	\$1,760	\$1,424	\$1,343	\$1,089	\$872	\$745	\$938
57	\$1,215	\$983	\$927	\$752	\$602	\$514	\$647	\$1,822	\$1,474	\$1,390	\$1,127	\$903	\$771	\$971
58	\$1,257	\$1,017	\$959	\$778	\$623	\$532	\$670	\$1,885	\$1,525	\$1,438	\$1,166	\$934	\$798	\$1,004
59	\$1,301	\$1,052	\$992	\$805	\$644	\$551	\$693	\$1,951	\$1,578	\$1,488	\$1,207	\$966	\$826	\$1,039
60	\$1,304	\$1,055	\$995	\$807	\$646	\$552	\$695	\$1,956	\$1,582	\$1,492	\$1,210	\$969	\$828	\$1,042
61	\$1,307	\$1,058	\$997	\$809	\$648	\$554	\$697	\$1,961	\$1,586	\$1,496	\$1,213	\$971	\$830	\$1,045
62	\$1,312	\$1,061	\$1,001	\$812	\$650	\$556	\$699	\$1,968	\$1,592	\$1,501	\$1,218	\$975	\$833	\$1,048
63	\$1,316	\$1,065	\$1,004	\$815	\$652	\$557	\$701	\$1,975	\$1,597	\$1,506	\$1,222	\$978	\$836	\$1,052
64	\$1,321	\$1,069	\$1,008	\$817	\$654	\$559	\$704	\$1,981	\$1,603	\$1,512	\$1,226	\$982	\$839	\$1,056
65+	\$1,321	\$1,069	\$1,008	\$817	\$654	\$559	\$704	\$1,981	\$1,603	\$1,512	\$1,226	\$982	\$839	\$1,056

Optional Maternity Rider

If selected, add the corresponding amount to Managed Care Option A or Indemnity Plan Option A premium rates above.

All	\$983	Not Available	\$750	Not Available	\$1,475	Not Available	\$1,125	Not Available
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The rates above are for single policies only. To figure rates for the Family Option please see instructions below.¹

Please note - Only Managed Care Option H is available for a Family Plan.

¹Managed Care Option H Family Plan Premium Rates

Family Structure	Calculate Premium:
2 Adults	¹ Locate both adult single premiums from Managed Care Option H, add together and multiply the result by 0.91
1 Adult + Children	¹ Locate the adult single premium from Managed Care Option H and add \$67 for each child
2 Adults + Children	¹ Figure premium as outlined above for 2 adults and add \$67 for each child

Please add \$10 to each monthly premium for monthly direct billing. Automatic bank withdrawal (ACH) option has no additional fees.