

New Hampshire Health Plan
Single Policy Monthly Premium Rates
 Effective July 1, 2011 through December 31, 2011
 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	Option B	Option A	Option B	Option C	Option D	Option H	Option A	Option B	Option A	Option B	Option C	Option D	Option H
	\$2,000 Ded	\$3,500 Ded	\$1,000 Ded	\$2,500 Ded	\$5,000 Ded	\$10,000 Ded	\$5,950 Ded	\$2,000 Ded	\$3,500 Ded	\$1,000 Ded	\$2,500 Ded	\$5,000 Ded	\$10,000 Ded	\$5,950 Ded
0-18	\$279	\$233	\$206	\$163	\$134	\$114	\$144	\$419	\$349	\$309	\$244	\$201	\$171	\$216
19	\$307	\$256	\$227	\$179	\$147	\$125	\$158	\$460	\$383	\$340	\$268	\$221	\$188	\$237
20	\$307	\$256	\$227	\$179	\$147	\$125	\$158	\$460	\$383	\$340	\$268	\$221	\$188	\$237
21	\$307	\$256	\$227	\$179	\$147	\$125	\$158	\$460	\$383	\$340	\$268	\$221	\$188	\$237
22	\$307	\$256	\$227	\$179	\$147	\$125	\$158	\$460	\$383	\$340	\$268	\$221	\$188	\$237
23	\$309	\$258	\$229	\$180	\$149	\$126	\$159	\$464	\$387	\$343	\$270	\$223	\$190	\$239
24	\$312	\$260	\$230	\$182	\$150	\$127	\$161	\$468	\$390	\$346	\$273	\$225	\$191	\$241
25	\$315	\$262	\$232	\$183	\$151	\$128	\$162	\$472	\$393	\$349	\$275	\$227	\$193	\$243
26	\$317	\$264	\$234	\$185	\$152	\$130	\$163	\$476	\$396	\$351	\$277	\$229	\$194	\$245
27	\$320	\$267	\$237	\$187	\$154	\$131	\$165	\$480	\$400	\$355	\$280	\$231	\$196	\$248
28	\$322	\$268	\$238	\$187	\$155	\$131	\$166	\$483	\$402	\$357	\$281	\$232	\$197	\$249
29	\$323	\$269	\$239	\$188	\$155	\$132	\$167	\$485	\$404	\$358	\$283	\$233	\$198	\$250
30	\$325	\$271	\$240	\$189	\$156	\$133	\$167	\$488	\$406	\$360	\$284	\$234	\$199	\$251
31	\$327	\$272	\$241	\$190	\$157	\$133	\$168	\$490	\$408	\$362	\$285	\$235	\$200	\$252
32	\$328	\$273	\$242	\$191	\$157	\$134	\$169	\$491	\$409	\$363	\$286	\$236	\$201	\$253
33	\$341	\$284	\$252	\$199	\$164	\$139	\$176	\$512	\$426	\$378	\$298	\$246	\$209	\$264
34	\$355	\$296	\$262	\$207	\$171	\$145	\$183	\$533	\$444	\$394	\$310	\$256	\$218	\$275
35	\$370	\$308	\$273	\$215	\$178	\$151	\$191	\$555	\$462	\$410	\$323	\$267	\$227	\$286
36	\$385	\$321	\$285	\$224	\$185	\$157	\$199	\$578	\$482	\$427	\$337	\$278	\$236	\$298
37	\$402	\$334	\$297	\$234	\$193	\$164	\$207	\$602	\$502	\$445	\$351	\$290	\$246	\$310
38	\$423	\$352	\$312	\$246	\$203	\$173	\$218	\$634	\$528	\$469	\$369	\$305	\$259	\$327
39	\$445	\$371	\$329	\$259	\$214	\$182	\$229	\$668	\$556	\$493	\$389	\$321	\$273	\$344
40	\$469	\$391	\$347	\$273	\$226	\$192	\$242	\$704	\$586	\$520	\$410	\$338	\$287	\$363
41	\$494	\$412	\$365	\$288	\$238	\$202	\$255	\$741	\$618	\$548	\$432	\$356	\$303	\$382
42	\$521	\$434	\$385	\$303	\$250	\$213	\$268	\$781	\$651	\$577	\$455	\$376	\$319	\$403
43	\$555	\$462	\$410	\$323	\$267	\$227	\$286	\$833	\$694	\$615	\$485	\$400	\$340	\$429
44	\$592	\$493	\$437	\$345	\$285	\$242	\$305	\$888	\$740	\$656	\$517	\$427	\$363	\$458
45	\$631	\$526	\$466	\$368	\$303	\$258	\$325	\$947	\$789	\$699	\$551	\$455	\$387	\$488
46	\$673	\$560	\$497	\$392	\$323	\$275	\$347	\$1,009	\$841	\$746	\$588	\$485	\$412	\$520
47	\$718	\$598	\$530	\$418	\$345	\$293	\$370	\$1,077	\$897	\$796	\$627	\$518	\$440	\$555
48	\$745	\$620	\$550	\$434	\$358	\$304	\$384	\$1,117	\$931	\$825	\$651	\$537	\$456	\$576
49	\$772	\$643	\$570	\$450	\$371	\$315	\$398	\$1,159	\$965	\$856	\$675	\$557	\$473	\$597
50	\$801	\$667	\$592	\$467	\$385	\$327	\$413	\$1,202	\$1,001	\$887	\$700	\$578	\$491	\$619
51	\$831	\$692	\$614	\$484	\$399	\$339	\$428	\$1,246	\$1,038	\$920	\$726	\$599	\$509	\$642
52	\$862	\$718	\$637	\$502	\$414	\$352	\$444	\$1,293	\$1,077	\$955	\$753	\$621	\$528	\$666
53	\$921	\$767	\$680	\$536	\$443	\$376	\$475	\$1,381	\$1,150	\$1,020	\$804	\$664	\$564	\$712
54	\$983	\$819	\$726	\$573	\$473	\$402	\$507	\$1,475	\$1,229	\$1,089	\$859	\$709	\$602	\$760
55	\$1,051	\$875	\$776	\$612	\$505	\$429	\$541	\$1,576	\$1,313	\$1,164	\$918	\$757	\$644	\$812
56	\$1,087	\$905	\$803	\$633	\$522	\$444	\$560	\$1,631	\$1,358	\$1,204	\$950	\$784	\$666	\$840
57	\$1,125	\$937	\$831	\$655	\$541	\$459	\$580	\$1,688	\$1,406	\$1,246	\$983	\$811	\$689	\$870
58	\$1,164	\$970	\$860	\$678	\$560	\$475	\$600	\$1,746	\$1,454	\$1,290	\$1,017	\$839	\$713	\$900
59	\$1,205	\$1,003	\$890	\$702	\$579	\$492	\$621	\$1,807	\$1,505	\$1,335	\$1,052	\$869	\$738	\$931
60	\$1,208	\$1,006	\$892	\$703	\$581	\$493	\$622	\$1,812	\$1,509	\$1,338	\$1,055	\$871	\$740	\$934
61	\$1,211	\$1,009	\$894	\$705	\$582	\$495	\$624	\$1,817	\$1,513	\$1,342	\$1,058	\$873	\$742	\$936
62	\$1,215	\$1,012	\$897	\$708	\$584	\$496	\$626	\$1,823	\$1,518	\$1,346	\$1,061	\$876	\$744	\$939
63	\$1,219	\$1,016	\$901	\$710	\$586	\$498	\$628	\$1,829	\$1,523	\$1,351	\$1,065	\$879	\$747	\$942
64	\$1,224	\$1,019	\$904	\$712	\$588	\$500	\$630	\$1,835	\$1,529	\$1,355	\$1,069	\$882	\$750	\$946
65+	\$1,224	\$1,019	\$904	\$712	\$588	\$500	\$630	\$1,835	\$1,529	\$1,355	\$1,069	\$882	\$750	\$946

Optional Maternity Rider												
If selected, add the corresponding amount to Managed Care Option A or Indemnity Plan Option A premium rates above.												
All	\$911	Not available	\$673	Not Available				\$1,366	Not Available	\$1,009	Not Available	

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	To 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 \$60 for each child
2 Adults + Children	¹ Figure premium as outlined above for 2 adults and add \$60 for each child

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