

## Qualified High Deductible Plans For Individuals

The premium rates for the PreferredOne Insurance Company (PIC) Individual plans are determined by the age and health history of the individuals seeking medical coverage. There is a range of rates by age category for each PIC individual plan. Final rates may be up to 66.7% higher than the preferred rates listed to the right, based on health status and history. Coverage acceptance and final premium will be determined according to the results of medical risk factors and health underwriting for each individual to be covered.

Please use the worksheet below to estimate monthly premiums. The total will provide an estimated monthly premium based on the rates from the preferred table to the right.

### Family Coverage

Family coverage consists of an adult subscriber and spouse or an adult subscriber and one or more dependent children. To qualify for family coverage, dependent children must be under age 25. Premiums will be charged for a maximum of three children on a family contract.

### Dependent Children Coverage

Dependent children must be under age 25. To estimate the premium when covering dependent children only, use the 0-24 Age Band rate for the first child. Any additional children will be charged the dependent children rates. Premiums will be charged for a maximum of three additional children.

## Premium Estimate Worksheet

**Select a Plan/Deductible Option** \_\_\_\_\_

Applicant Rate *(adult subscriber for Family Coverage or first child for Dependent Children Coverage)* \$ \_\_\_\_\_

Spouse Rate \$ \_\_\_\_\_

**Dependent Children Rate:**

One Child \$ \_\_\_\_\_

*or*

Two Children \$ \_\_\_\_\_

*or*

Three or more Children \$ \_\_\_\_\_

**Total Monthly Premium Estimate** \$ \_\_\_\_\_

Area 1 Preferred Rates				
Age Band	PIC 5180	PIC 5200	PIC 5250	PIC 5510
	\$1500 Single Contract Deductible	\$2000 Single Contract Deductible	\$2850 Single Contract Deductible	\$5500 Single Contract Deductible
<b>Area 1 Preferred Rates without Chemical Dependency Coverage</b>				
0-24	\$117.52	\$125.96	\$105.91	\$81.95
25-29	\$117.52	\$125.96	\$105.91	\$81.95
30-34	\$117.52	\$125.96	\$105.91	\$81.95
35-39	\$130.58	\$139.96	\$117.68	\$91.06
40-44	\$150.16	\$160.95	\$135.33	\$104.71
45-49	\$189.34	\$202.94	\$170.63	\$132.03
50-54	\$248.10	\$265.92	\$223.59	\$173.01
55-59	\$319.92	\$342.90	\$288.31	\$223.08
60-64	\$352.55	\$377.88	\$317.72	\$245.84
<b>Area 1 Preferred Rates with Chemical Dependency Coverage</b>				
0-24	\$121.05	\$129.74	\$109.09	\$84.41
25-29	\$121.05	\$129.74	\$109.09	\$84.41
30-34	\$121.05	\$129.74	\$109.09	\$84.41
35-39	\$134.50	\$144.16	\$121.21	\$93.79
40-44	\$154.67	\$165.78	\$139.39	\$107.85
45-49	\$195.02	\$209.02	\$175.75	\$135.99
50-54	\$255.54	\$273.90	\$230.30	\$178.20
55-59	\$329.52	\$353.18	\$296.96	\$229.78
60-64	\$363.13	\$389.21	\$327.26	\$253.22
<b>Area 1 Preferred Rates with Chemical Dependency Coverage</b>				
1 Child	\$80.20	\$85.96	\$72.28	\$55.93
2 Children	\$160.40	\$171.92	\$144.56	\$111.86
3+ Children	\$240.60	\$257.88	\$216.84	\$167.79

Note: Please keep this information for future reference. When a member has a birthday that places him/her in a new age band, the member's rate will be adjusted accordingly and the member will not receive additional notification.

RATES ARE SUBJECT TO CHANGE.

\*Area 1 Preferred Rates include all Minnesota counties **except** Big Stone, Chippewa, Douglas, Kandiyohi, Lac Qui Parle, Lyon, Otter Tail, Pipestone, Pope, Redwood, Renville, Stevens, Swift, Traverse, Brown.

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Dependent children must be under age 25. To estimate the premium when covering dependent children only, use the 0-24 Age Band rate for the first child. Any additional children will be charged the dependent children rates. Premiums will be charged for a maximum of three additional children.

## Premium Estimate Worksheet

### Select a Plan/Deductible Option \_\_\_\_\_

Applicant Rate *(adult subscriber for Family Coverage or first child for Dependent Children Coverage)* \$ \_\_\_\_\_

Spouse Rate \$ \_\_\_\_\_

**Dependent Children Rate:** One Child \$ \_\_\_\_\_

or

Two Children \$ \_\_\_\_\_

or

Three or more Children \$ \_\_\_\_\_

**Total Monthly Premium Estimate** \$ \_\_\_\_\_

\*Area 2 Preferred Rates include the Minnesota counties of Big Stone, Chippewa, Douglas, Kandiyohi, Lac Qui Parle, Lyon, Otter Tail, Pipestone, Pope, Redwood, Renville, Stevens, Swift, Traverse, Brown.

Area 2 Preferred Rates				
Age Band	PIC 5180	PIC 5200	PIC 5250	PIC 5510
	\$1500 Single Contract Deductible	\$2000 Single Contract Deductible	\$2850 Single Contract Deductible	\$5500 Single Contract Deductible
<b>Area 2 Preferred Rates without Chemical Dependency Coverage</b>				
0-24	\$111.64	\$119.66	\$100.62	\$77.85
25-29	\$111.64	\$119.66	\$100.62	\$77.85
30-34	\$111.64	\$119.66	\$100.62	\$77.85
35-39	\$124.05	\$132.96	\$111.80	\$86.50
40-44	\$142.65	\$152.90	\$128.56	\$99.48
45-49	\$179.87	\$192.79	\$162.10	\$125.43
50-54	\$235.70	\$252.62	\$212.41	\$164.35
55-59	\$303.92	\$325.75	\$273.90	\$211.93
60-64	\$334.93	\$358.98	\$301.84	\$233.55
<b>Area 2 Preferred Rates with Chemical Dependency Coverage</b>				
0-24	\$115.00	\$123.25	\$103.63	\$80.19
25-29	\$115.00	\$123.25	\$103.63	\$80.19
30-34	\$115.00	\$123.25	\$103.63	\$80.19
35-39	\$127.77	\$136.95	\$115.15	\$89.10
40-44	\$146.93	\$157.49	\$132.42	\$102.46
45-49	\$185.26	\$198.57	\$166.96	\$129.19
50-54	\$242.77	\$260.20	\$218.78	\$169.29
55-59	\$313.04	\$335.52	\$282.11	\$218.29
60-64	\$344.97	\$369.75	\$310.89	\$240.56
<b>Area 2 Preferred Rates with Chemical Dependency Coverage (Continued)</b>				
1 Child	\$76.19	\$81.67	\$68.67	\$53.13
2 Children	\$152.38	\$163.34	\$137.34	\$106.26
3+ Children	\$228.57	\$245.01	\$206.01	\$159.39

Note: Please keep this information for future reference. When a member has a birthday that places him/her in a new age band, the member's rate will be adjusted accordingly and the member will not receive additional notification.

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