

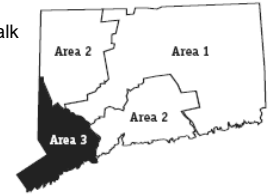
HMO HDHP \$5,000 / \$10,000 Deductible - C

HMO-HSA-5000I-10000F-C-IND

All policyholders may be subject to a rate increase at their renewal date.
 Rates are calculated as of the Applicant's age as of the effective date.

Area 3 (Fairfield County)

Fairfield County: Bethel, Bridgeport, Brookfield, Danbury, Darien, Easton, Fairfield, Greenwich, Monroe, New Canaan, New Fairfield, Newtown, Norwalk, Shelton, Sherman, Stamford, Stratford, Redding, Ridgefield, Trumbull, Weston, Westport, Wilton



After deductible, Unlimited RX

Age	Individual Male	Individual Female	Individual +1 Dep.	Family
19	\$149.82	\$251.16	\$364.46	\$667.63
20	\$149.82	\$251.16	\$364.46	\$667.63
21	\$151.59	\$253.11	\$366.48	\$672.87
22	\$153.39	\$255.06	\$368.51	\$678.07
23	\$155.17	\$257.02	\$370.54	\$683.31
24	\$156.97	\$258.96	\$372.57	\$688.52
25	\$158.73	\$260.92	\$374.60	\$693.75
26	\$160.53	\$262.87	\$376.63	\$698.96
27	\$162.30	\$264.81	\$378.68	\$704.20
28	\$164.10	\$266.77	\$380.71	\$709.41
29	\$165.86	\$268.69	\$382.74	\$714.65
30	\$167.66	\$270.65	\$384.76	\$719.86
31	\$177.62	\$276.94	\$385.89	\$736.96
32	\$187.58	\$283.20	\$387.02	\$754.05
33	\$197.54	\$289.48	\$388.15	\$771.15
34	\$207.50	\$295.75	\$389.28	\$788.24
35	\$211.99	\$298.19	\$393.05	\$793.41
36	\$214.25	\$299.39	\$394.93	\$796.04
37	\$216.49	\$300.60	\$396.80	\$798.64
38	\$218.74	\$301.83	\$398.70	\$801.22
39	\$225.47	\$305.45	\$404.32	\$809.04
40	\$234.45	\$310.33	\$411.87	\$819.40
41	\$243.44	\$315.18	\$419.39	\$829.79
42	\$252.42	\$320.03	\$426.91	\$840.18
43	\$260.36	\$326.50	\$436.34	\$847.38
44	\$268.28	\$332.95	\$445.75	\$854.60
45	\$276.21	\$339.41	\$455.15	\$861.78
46	\$284.14	\$345.85	\$464.56	\$868.99
47	\$292.07	\$352.32	\$473.98	\$876.17
48	\$308.68	\$363.64	\$501.96	\$894.92
49	\$325.26	\$374.93	\$529.93	\$913.68
50	\$341.87	\$386.26	\$557.89	\$932.42
51	\$358.45	\$397.55	\$585.87	\$951.18
52	\$375.05	\$408.87	\$613.85	\$969.91
53	\$399.03	\$430.37	\$651.40	\$1010.81
54	\$423.00	\$451.92	\$688.96	\$1051.69
55	\$447.01	\$473.41	\$726.50	\$1092.61
56	\$470.98	\$494.96	\$764.05	\$1133.50
57	\$494.96	\$516.46	\$801.61	\$1174.39
58	\$526.50	\$536.46	\$844.73	\$1216.44
59	\$558.05	\$556.46	\$887.85	\$1258.50
60	\$589.57	\$576.43	\$930.97	\$1300.55
61	\$621.11	\$596.43	\$974.10	\$1342.62
62	\$652.66	\$616.42	\$1017.22	\$1384.65
63	\$694.24	\$640.30	\$1071.95	\$1434.26
64	\$735.85	\$664.13	\$1126.67	\$1483.85

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20% after Deductible, Unlimited max

Age	Individual Male	Individual Female	Individual +1 Dep.	Family
19	\$189.10	\$263.93	\$401.47	\$789.78
20	\$189.10	\$263.93	\$401.47	\$789.78
21	\$191.36	\$266.09	\$403.70	\$796.08
22	\$193.62	\$268.26	\$405.96	\$802.39
23	\$195.88	\$270.45	\$408.22	\$808.69
24	\$198.12	\$272.62	\$410.49	\$815.03
25	\$200.38	\$274.83	\$412.72	\$821.33
26	\$202.64	\$276.99	\$414.98	\$827.64
27	\$204.91	\$279.16	\$417.25	\$833.95
28	\$207.13	\$281.36	\$419.51	\$840.29
29	\$209.39	\$283.52	\$421.74	\$846.60
30	\$211.66	\$285.73	\$424.01	\$852.91
31	\$224.27	\$293.61	\$425.43	\$874.47
32	\$236.90	\$301.54	\$426.86	\$896.05
33	\$249.51	\$309.44	\$428.27	\$917.62
34	\$262.12	\$317.35	\$429.70	\$939.19
35	\$267.78	\$320.42	\$434.46	\$945.75
36	\$270.59	\$321.97	\$436.81	\$949.02
37	\$273.44	\$323.49	\$439.21	\$952.32
38	\$276.24	\$325.05	\$441.57	\$955.58
39	\$284.72	\$329.64	\$448.72	\$965.45
40	\$296.04	\$335.82	\$458.19	\$978.54
41	\$307.33	\$341.95	\$467.70	\$991.67
42	\$318.65	\$348.11	\$477.21	\$1004.80
43	\$328.67	\$356.25	\$489.11	\$1013.88
44	\$338.73	\$364.41	\$501.02	\$1022.97
45	\$348.75	\$372.53	\$512.92	\$1032.06
46	\$358.82	\$380.67	\$524.81	\$1041.15
47	\$368.83	\$388.82	\$536.71	\$1050.24
48	\$389.79	\$414.31	\$584.71	\$1085.10
49	\$410.75	\$439.80	\$632.67	\$1119.96
50	\$431.74	\$465.24	\$680.65	\$1154.83
51	\$452.69	\$490.73	\$728.62	\$1189.69
52	\$473.66	\$516.21	\$776.61	\$1224.56
53	\$503.89	\$543.35	\$824.15	\$1276.16
54	\$534.10	\$570.47	\$871.66	\$1327.79
55	\$564.34	\$597.65	\$919.21	\$1379.43
56	\$594.54	\$624.77	\$966.71	\$1431.04
57	\$624.77	\$651.91	\$1014.25	\$1482.66
58	\$664.58	\$677.20	\$1068.77	\$1535.74
59	\$704.43	\$702.48	\$1123.30	\$1588.82
60	\$744.24	\$727.78	\$1177.79	\$1641.90
61	\$784.08	\$753.07	\$1232.32	\$1695.00
62	\$823.89	\$778.35	\$1286.84	\$1748.07
63	\$876.41	\$808.56	\$1356.01	\$1810.66
64	\$928.94	\$838.74	\$1425.19	\$1873.23

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20% after Deductible, Unlimited max

Age	Individual Male	Individual Female	Individual +1 Dep.	Family
19	\$168.27	\$234.86	\$357.26	\$702.81
20	\$168.27	\$234.86	\$357.26	\$702.81
21	\$170.28	\$236.79	\$359.25	\$708.42
22	\$172.31	\$238.73	\$361.26	\$714.04
23	\$174.31	\$240.68	\$363.28	\$719.64
24	\$176.31	\$242.62	\$365.29	\$725.29
25	\$178.31	\$244.57	\$367.28	\$730.90
26	\$180.33	\$246.49	\$369.29	\$736.51
27	\$182.34	\$248.42	\$371.31	\$742.12
28	\$184.34	\$250.38	\$373.32	\$747.77
29	\$186.34	\$252.31	\$375.31	\$753.38
30	\$188.36	\$254.27	\$377.32	\$758.98
31	\$199.58	\$261.28	\$378.59	\$778.19
32	\$210.81	\$268.34	\$379.86	\$797.38
33	\$222.04	\$275.36	\$381.12	\$816.57
34	\$233.25	\$282.41	\$382.39	\$835.78
35	\$238.29	\$285.15	\$386.62	\$841.61
36	\$240.79	\$286.52	\$388.71	\$844.52
37	\$243.33	\$287.88	\$390.85	\$847.45
38	\$245.83	\$289.25	\$392.95	\$850.36
39	\$253.37	\$293.34	\$399.31	\$859.14
40	\$263.44	\$298.85	\$407.75	\$870.80
41	\$273.49	\$304.32	\$416.20	\$882.47
42	\$283.56	\$309.78	\$424.66	\$894.17
43	\$292.48	\$317.03	\$435.26	\$902.25
44	\$301.44	\$324.28	\$445.84	\$910.34
45	\$310.35	\$331.51	\$456.44	\$918.42
46	\$319.30	\$338.76	\$467.02	\$926.51
47	\$328.22	\$346.02	\$477.61	\$934.60
48	\$346.87	\$368.69	\$520.33	\$965.62
49	\$365.53	\$391.37	\$563.00	\$996.65
50	\$384.19	\$414.02	\$605.71	\$1027.67
51	\$402.84	\$436.69	\$648.39	\$1058.69
52	\$421.50	\$459.37	\$691.09	\$1089.71
53	\$448.41	\$483.52	\$733.40	\$1135.64
54	\$475.29	\$507.66	\$775.67	\$1181.58
55	\$502.20	\$531.84	\$817.98	\$1227.54
56	\$529.08	\$555.98	\$860.26	\$1273.47
57	\$555.98	\$580.13	\$902.56	\$1319.40
58	\$591.41	\$602.64	\$951.08	\$1366.63
59	\$626.86	\$625.14	\$999.60	\$1413.88
60	\$662.29	\$647.64	\$1048.10	\$1461.11
61	\$697.75	\$670.15	\$1096.62	\$1508.37
62	\$733.18	\$692.65	\$1145.15	\$1555.59
63	\$779.91	\$719.53	\$1206.70	\$1611.28
64	\$826.65	\$746.38	\$1268.26	\$1666.96

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20% after Deductible, Unlimited max

Age	Individual Male	Individual Female	Individual +1 Dep.	Family
19	\$153.82	\$214.69	\$326.58	\$642.44
20	\$153.82	\$214.69	\$326.58	\$642.44
21	\$155.66	\$216.46	\$328.40	\$647.57
22	\$157.50	\$218.22	\$330.23	\$652.70
23	\$159.34	\$220.00	\$332.07	\$657.83
24	\$161.16	\$221.77	\$333.91	\$662.99
25	\$162.99	\$223.55	\$335.73	\$668.12
26	\$164.84	\$225.32	\$337.57	\$673.25
27	\$166.69	\$227.08	\$339.42	\$678.38
28	\$168.50	\$228.87	\$341.25	\$683.53
29	\$170.34	\$230.64	\$343.07	\$688.66
30	\$172.17	\$232.42	\$344.91	\$693.79
31	\$182.44	\$238.84	\$346.07	\$711.35
32	\$192.70	\$245.29	\$347.23	\$728.90
33	\$202.96	\$251.70	\$348.39	\$746.43
34	\$213.22	\$258.15	\$349.55	\$763.98
35	\$217.82	\$260.65	\$353.41	\$769.32
36	\$220.11	\$261.91	\$355.33	\$771.98
37	\$222.43	\$263.15	\$357.27	\$774.67
38	\$224.71	\$264.41	\$359.20	\$777.32
39	\$231.60	\$268.14	\$365.02	\$785.34
40	\$240.81	\$273.17	\$372.72	\$796.00
41	\$249.99	\$278.17	\$380.45	\$806.68
42	\$259.21	\$283.18	\$388.18	\$817.35
43	\$267.36	\$289.80	\$397.86	\$824.75
44	\$275.54	\$296.43	\$407.55	\$832.14
45	\$283.69	\$303.03	\$417.23	\$839.53
46	\$291.88	\$309.67	\$426.91	\$846.92
47	\$300.03	\$316.30	\$436.59	\$854.31
48	\$317.08	\$337.02	\$475.63	\$882.68
49	\$334.13	\$357.75	\$514.65	\$911.03
50	\$351.20	\$378.45	\$553.69	\$939.39
51	\$368.24	\$399.19	\$592.70	\$967.76
52	\$385.29	\$419.91	\$631.74	\$996.11
53	\$409.88	\$441.98	\$670.41	\$1038.11
54	\$434.46	\$464.05	\$709.05	\$1080.08
55	\$459.06	\$486.16	\$747.73	\$1122.11
56	\$483.62	\$508.22	\$786.36	\$1164.08
57	\$508.22	\$530.30	\$825.04	\$1206.07
58	\$540.61	\$550.87	\$869.39	\$1249.24
59	\$573.02	\$571.44	\$913.75	\$1292.43
60	\$605.40	\$592.01	\$958.08	\$1335.61
61	\$637.81	\$612.59	\$1002.42	\$1378.80
62	\$670.20	\$633.16	\$1046.78	\$1421.97
63	\$712.93	\$657.73	\$1103.05	\$1472.88
64	\$755.63	\$682.27	\$1159.33	\$1523.79

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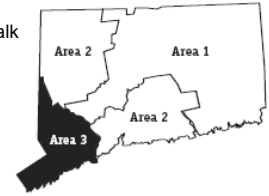
POS HDHP \$5,000 / \$10,000 Combined Deductible - C

POS-HSA-5000I-10000F-C-IND

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After deductible, Unlimited RX

Age	Individual			Family
	Male	Female	+1 Dep.	
19	\$124.95	\$174.39	\$265.27	\$521.85
20	\$124.95	\$174.39	\$265.27	\$521.85
21	\$126.44	\$175.83	\$266.75	\$526.02
22	\$127.94	\$177.26	\$268.24	\$530.19
23	\$129.44	\$178.71	\$269.74	\$534.35
24	\$130.91	\$180.13	\$271.24	\$538.53
25	\$132.41	\$181.60	\$272.71	\$542.71
26	\$133.90	\$183.02	\$274.21	\$546.88
27	\$135.40	\$184.46	\$275.70	\$551.04
28	\$136.88	\$185.90	\$277.20	\$555.23
29	\$138.37	\$187.35	\$278.68	\$559.40
30	\$139.87	\$188.79	\$280.17	\$563.57
31	\$148.19	\$194.01	\$281.11	\$577.81
32	\$156.53	\$199.24	\$282.05	\$592.07
33	\$164.87	\$204.46	\$282.99	\$606.32
34	\$173.19	\$209.69	\$283.93	\$620.58
35	\$176.94	\$211.73	\$287.07	\$624.92
36	\$178.80	\$212.75	\$288.63	\$627.06
37	\$180.67	\$213.75	\$290.22	\$629.25
38	\$182.53	\$214.78	\$291.77	\$631.41
39	\$188.13	\$217.81	\$296.50	\$637.93
40	\$195.61	\$221.89	\$302.76	\$646.59
41	\$203.06	\$225.95	\$309.05	\$655.26
42	\$210.55	\$230.02	\$315.32	\$663.94
43	\$217.18	\$235.40	\$323.19	\$669.93
44	\$223.82	\$240.79	\$331.05	\$675.94
45	\$230.44	\$246.15	\$338.91	\$681.95
46	\$237.09	\$251.53	\$346.78	\$687.95
47	\$243.71	\$256.93	\$354.64	\$693.96
48	\$257.57	\$273.76	\$386.35	\$717.00
49	\$271.41	\$290.60	\$418.04	\$740.03
50	\$285.28	\$307.41	\$449.75	\$763.07
51	\$299.12	\$324.25	\$481.45	\$786.11
52	\$312.98	\$341.09	\$513.15	\$809.14
53	\$332.95	\$359.01	\$544.57	\$843.24
54	\$352.91	\$376.96	\$575.95	\$877.34
55	\$372.89	\$394.90	\$607.37	\$911.47
56	\$392.84	\$412.82	\$638.77	\$945.59
57	\$412.82	\$430.76	\$670.18	\$979.68
58	\$439.12	\$447.47	\$706.20	\$1014.75
59	\$465.47	\$464.18	\$742.23	\$1049.83
60	\$491.77	\$480.89	\$778.24	\$1084.90
61	\$518.09	\$497.60	\$814.27	\$1120.00
62	\$544.40	\$514.30	\$850.29	\$1155.06
63	\$579.09	\$534.26	\$896.00	\$1196.41
64	\$613.80	\$554.20	\$941.71	\$1237.75

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