

**Monthly Premium Rates**

**Important Notes:**

1. These are the initial rates for policies issued effective January 1, 2004 through June 30, 2004
2. These rates are for EFT payment only. Add \$10 monthly for direct billed policies.
3. Rates on all NHHP in-force policies are expected to increase every 6 months.  
(see [www.nhhealthplan.org](http://www.nhhealthplan.org) for updates)

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 A	Option B	Option A	Option B
0-18	\$174	\$143	\$150	\$124	\$259	\$213	\$224	\$185
19	\$192	\$158	\$165	\$136	\$286	\$235	\$246	\$203
20	\$192	\$158	\$165	\$136	\$286	\$235	\$246	\$203
21	\$192	\$158	\$165	\$136	\$286	\$235	\$246	\$203
22	\$192	\$158	\$165	\$136	\$286	\$235	\$246	\$203
23	\$193	\$159	\$166	\$137	\$288	\$237	\$247	\$204
24	\$195	\$160	\$168	\$138	\$291	\$238	\$250	\$206
25	\$197	\$162	\$169	\$140	\$294	\$241	\$252	\$209
26	\$198	\$163	\$170	\$141	\$295	\$243	\$253	\$210
27	\$200	\$165	\$172	\$142	\$298	\$246	\$256	\$212
28	\$201	\$165	\$173	\$143	\$299	\$246	\$258	\$213
29	\$202	\$166	\$174	\$144	\$301	\$247	\$259	\$215
30	\$203	\$167	\$175	\$144	\$302	\$249	\$261	\$215
31	\$204	\$168	\$176	\$145	\$304	\$250	\$262	\$216
32	\$205	\$168	\$176	\$145	\$305	\$250	\$262	\$216
33	\$213	\$175	\$183	\$151	\$317	\$261	\$273	\$225
34	\$222	\$183	\$191	\$158	\$331	\$273	\$285	\$235
35	\$231	\$190	\$199	\$164	\$344	\$283	\$297	\$244
36	\$241	\$198	\$207	\$171	\$359	\$295	\$308	\$255
37	\$251	\$206	\$216	\$178	\$374	\$307	\$322	\$265
38	\$264	\$217	\$227	\$188	\$393	\$323	\$338	\$280
39	\$278	\$229	\$239	\$198	\$414	\$341	\$356	\$295
40	\$293	\$241	\$252	\$208	\$437	\$359	\$375	\$310
41	\$309	\$254	\$266	\$219	\$460	\$378	\$396	\$326
42	\$326	\$268	\$280	\$231	\$486	\$399	\$417	\$344
43	\$347	\$285	\$298	\$246	\$517	\$425	\$444	\$367
44	\$370	\$304	\$318	\$263	\$551	\$453	\$474	\$392
45	\$395	\$324	\$339	\$280	\$589	\$483	\$505	\$417
46	\$421	\$346	\$362	\$299	\$627	\$516	\$539	\$446
47	\$449	\$369	\$386	\$319	\$669	\$550	\$575	\$475
48	\$465	\$383	\$400	\$330	\$693	\$571	\$596	\$492
49	\$483	\$397	\$415	\$343	\$720	\$592	\$618	\$511
50	\$501	\$412	\$431	\$355	\$746	\$614	\$642	\$529
51	\$519	\$427	\$446	\$369	\$773	\$636	\$665	\$550
52	\$539	\$443	\$463	\$382	\$803	\$660	\$690	\$569
53	\$575	\$473	\$495	\$409	\$857	\$705	\$738	\$609
54	\$615	\$505	\$528	\$436	\$916	\$752	\$787	\$650
55	\$657	\$540	\$565	\$466	\$979	\$805	\$842	\$694
56	\$679	\$559	\$584	\$482	\$1,012	\$833	\$870	\$718
57	\$703	\$578	\$605	\$499	\$1,047	\$861	\$901	\$744
58	\$727	\$598	\$626	\$516	\$1,083	\$891	\$933	\$769
59	\$753	\$619	\$647	\$534	\$1,122	\$922	\$964	\$796
60	\$755	\$621	\$649	\$536	\$1,125	\$925	\$967	\$799
61	\$757	\$622	\$651	\$537	\$1,128	\$927	\$970	\$800
62	\$759	\$624	\$653	\$539	\$1,131	\$930	\$973	\$803
63	\$762	\$627	\$655	\$541	\$1,135	\$934	\$976	\$806
64	\$765	\$629	\$658	\$543	\$1,140	\$937	\$980	\$809
65+	\$765	\$629	\$658	\$543	\$1,140	\$937	\$980	\$809
<b>Optional Maternity Rider</b>								
<b>(If selected, add these amounts to Option A premium rates above)</b>								
All	\$509	not available	\$438	not available	\$758	not available	\$653	not available