



New Hampshire Health Plan - High Risk Pool

Monthly Premium Rates

Important Notes:

1. These are the initial rates for policies issued effective January 1, 2005 through June 30, 2005
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 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	\$209	\$171	\$178	\$146	\$314	\$257	\$267	\$219
19	\$229	\$188	\$195	\$160	\$344	\$282	\$293	\$240
20	\$229	\$188	\$195	\$160	\$344	\$282	\$293	\$240
21	\$229	\$188	\$195	\$160	\$344	\$282	\$293	\$240
22	\$229	\$188	\$195	\$160	\$344	\$282	\$293	\$240
23	\$231	\$190	\$197	\$162	\$347	\$285	\$296	\$243
24	\$233	\$191	\$198	\$163	\$350	\$287	\$297	\$245
25	\$235	\$193	\$200	\$164	\$353	\$290	\$300	\$246
26	\$237	\$195	\$202	\$166	\$356	\$293	\$303	\$249
27	\$239	\$197	\$204	\$167	\$359	\$296	\$306	\$251
28	\$241	\$198	\$205	\$168	\$362	\$297	\$308	\$252
29	\$242	\$198	\$206	\$169	\$363	\$297	\$309	\$254
30	\$243	\$199	\$207	\$170	\$365	\$299	\$311	\$255
31	\$244	\$200	\$208	\$171	\$366	\$300	\$312	\$257
32	\$245	\$201	\$208	\$171	\$368	\$302	\$312	\$257
33	\$255	\$209	\$217	\$178	\$383	\$314	\$326	\$267
34	\$266	\$218	\$226	\$186	\$399	\$327	\$339	\$279
35	\$276	\$227	\$235	\$193	\$414	\$341	\$353	\$290
36	\$288	\$237	\$245	\$201	\$432	\$356	\$368	\$302
37	\$300	\$246	\$255	\$210	\$450	\$369	\$383	\$315
38	\$316	\$260	\$269	\$221	\$474	\$390	\$404	\$332
39	\$333	\$273	\$283	\$233	\$500	\$410	\$425	\$350
40	\$351	\$288	\$298	\$245	\$527	\$432	\$447	\$368
41	\$370	\$303	\$314	\$258	\$555	\$455	\$471	\$387
42	\$389	\$320	\$331	\$272	\$584	\$480	\$497	\$408
43	\$415	\$341	\$353	\$290	\$623	\$512	\$530	\$435
44	\$443	\$363	\$377	\$309	\$665	\$545	\$566	\$464
45	\$472	\$387	\$401	\$330	\$708	\$581	\$602	\$495
46	\$503	\$413	\$428	\$351	\$755	\$620	\$642	\$527
47	\$537	\$441	\$457	\$375	\$806	\$662	\$686	\$563
48	\$557	\$457	\$474	\$389	\$836	\$686	\$711	\$584
49	\$578	\$474	\$491	\$403	\$867	\$711	\$737	\$605
50	\$599	\$492	\$509	\$418	\$899	\$738	\$764	\$627
51	\$621	\$510	\$528	\$434	\$932	\$765	\$792	\$651
52	\$644	\$529	\$548	\$450	\$966	\$794	\$822	\$675
53	\$689	\$565	\$586	\$481	\$1,034	\$848	\$879	\$722
54	\$735	\$603	\$625	\$514	\$1,103	\$905	\$938	\$771
55	\$785	\$645	\$668	\$549	\$1,178	\$968	\$1,002	\$824
56	\$813	\$667	\$691	\$568	\$1,220	\$1,001	\$1,037	\$852
57	\$841	\$690	\$716	\$588	\$1,262	\$1,035	\$1,074	\$882
58	\$870	\$714	\$740	\$608	\$1,305	\$1,071	\$1,110	\$912
59	\$901	\$739	\$766	\$629	\$1,352	\$1,109	\$1,149	\$944
60	\$903	\$741	\$768	\$631	\$1,355	\$1,112	\$1,152	\$947
61	\$905	\$743	\$770	\$632	\$1,358	\$1,115	\$1,155	\$948
62	\$909	\$746	\$773	\$635	\$1,364	\$1,119	\$1,160	\$953
63	\$912	\$748	\$776	\$637	\$1,368	\$1,122	\$1,164	\$956
64	\$915	\$751	\$778	\$639	\$1,373	\$1,127	\$1,167	\$959
65+	\$915	\$751	\$778	\$639	\$1,373	\$1,127	\$1,167	\$959
Optional Maternity Rider								
(If selected, add these amounts to Option A premium rates above)								
All	\$567	not available	\$482	not available	\$851	not available	\$723	not available



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Class:	Non-Tobacco User	Tobacco User
Attained	Managed Care Plan	Managed Care Plan
Age	Option C	Option C
0-18	\$145	\$218
19	\$160	\$240
20	\$160	\$240
21	\$160	\$240
22	\$160	\$240
23	\$161	\$242
24	\$162	\$243
25	\$164	\$246
26	\$165	\$248
27	\$167	\$251
28	\$168	\$252
29	\$168	\$252
30	\$169	\$254
31	\$170	\$255
32	\$171	\$257
33	\$178	\$267
34	\$185	\$278
35	\$193	\$290
36	\$201	\$302
37	\$209	\$314
38	\$220	\$330
39	\$232	\$348
40	\$244	\$366
41	\$257	\$386
42	\$271	\$407
43	\$289	\$434
44	\$308	\$462
45	\$329	\$494
46	\$350	\$525
47	\$374	\$561
48	\$388	\$582
49	\$402	\$603
50	\$417	\$626
51	\$433	\$650
52	\$449	\$674
53	\$480	\$720
54	\$512	\$768
55	\$547	\$821
56	\$566	\$849
57	\$586	\$879
58	\$606	\$909
59	\$627	\$941
60	\$629	\$944
61	\$631	\$947
62	\$633	\$950
63	\$635	\$953
64	\$637	\$956
65+	\$637	\$956
For Family Plans		
Per Child	\$61	
Optional Maternity Rider		
All	not available	not available

Rating Instructions:

The age 0-18 rate is used only for Individual Option C policies that are issued to persons aged 0-18

For a Family Option C policy with 2 adults, a factor of 0.91 is applied to the rates shown above

For Family Option C policy with one or more children insured, the applicable Child rate times the number of children insured is added to the Adult rate