

**New Hampshire Health Plan**  
**Single Policy Monthly Premium Rates**  
 Effective July 1, 2009 through December 31, 2009  
 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	
0-18	\$288	\$233	\$221	\$179	\$144	\$123	\$154	\$432	\$350	\$332	\$269	\$216	\$185	\$231	
19	\$316	\$256	\$243	\$197	\$158	\$135	\$169	\$475	\$384	\$364	\$296	\$237	\$203	\$253	
20	\$316	\$256	\$243	\$197	\$158	\$135	\$169	\$475	\$384	\$364	\$296	\$237	\$203	\$253	
21	\$316	\$256	\$243	\$197	\$158	\$135	\$169	\$475	\$384	\$364	\$296	\$237	\$203	\$253	
22	\$316	\$256	\$243	\$197	\$158	\$135	\$169	\$475	\$384	\$364	\$296	\$237	\$203	\$253	
23	\$319	\$258	\$245	\$199	\$159	\$136	\$170	\$479	\$388	\$368	\$298	\$239	\$205	\$256	
24	\$322	\$261	\$247	\$201	\$161	\$138	\$172	\$483	\$391	\$371	\$301	\$241	\$206	\$258	
25	\$325	\$263	\$249	\$202	\$162	\$139	\$173	\$487	\$394	\$374	\$303	\$243	\$208	\$260	
26	\$327	\$265	\$251	\$204	\$163	\$140	\$175	\$491	\$397	\$377	\$306	\$245	\$210	\$262	
27	\$330	\$267	\$254	\$206	\$165	\$141	\$176	\$496	\$401	\$380	\$309	\$248	\$212	\$265	
28	\$332	\$269	\$255	\$207	\$166	\$142	\$177	\$498	\$403	\$382	\$310	\$249	\$213	\$266	
29	\$334	\$270	\$256	\$208	\$167	\$143	\$178	\$501	\$405	\$384	\$312	\$250	\$214	\$267	
30	\$335	\$271	\$257	\$209	\$167	\$143	\$179	\$503	\$407	\$386	\$313	\$251	\$215	\$268	
31	\$337	\$273	\$259	\$210	\$168	\$144	\$180	\$505	\$409	\$388	\$315	\$252	\$216	\$270	
32	\$338	\$274	\$259	\$211	\$169	\$144	\$180	\$507	\$410	\$389	\$316	\$253	\$217	\$271	
33	\$352	\$285	\$270	\$219	\$176	\$150	\$188	\$528	\$427	\$405	\$329	\$264	\$226	\$282	
34	\$366	\$297	\$281	\$228	\$183	\$157	\$196	\$550	\$445	\$422	\$343	\$275	\$235	\$293	
35	\$381	\$309	\$293	\$238	\$191	\$163	\$204	\$572	\$463	\$439	\$357	\$286	\$245	\$305	
36	\$398	\$322	\$305	\$248	\$199	\$170	\$212	\$596	\$483	\$458	\$372	\$298	\$255	\$318	
37	\$414	\$335	\$318	\$258	\$207	\$177	\$221	\$621	\$503	\$477	\$387	\$310	\$266	\$332	
38	\$436	\$353	\$335	\$272	\$218	\$186	\$233	\$654	\$530	\$502	\$408	\$327	\$280	\$349	
39	\$459	\$372	\$353	\$286	\$229	\$196	\$245	\$689	\$558	\$529	\$429	\$344	\$294	\$368	
40	\$484	\$392	\$372	\$302	\$242	\$207	\$258	\$726	\$588	\$557	\$453	\$363	\$310	\$388	
41	\$510	\$413	\$391	\$318	\$255	\$218	\$272	\$765	\$619	\$587	\$477	\$382	\$327	\$408	
42	\$537	\$435	\$412	\$335	\$268	\$230	\$287	\$806	\$652	\$619	\$502	\$403	\$344	\$430	
43	\$573	\$464	\$440	\$357	\$286	\$245	\$306	\$859	\$695	\$660	\$535	\$429	\$367	\$459	
44	\$611	\$495	\$469	\$381	\$305	\$261	\$326	\$916	\$742	\$703	\$571	\$458	\$392	\$489	
45	\$651	\$527	\$500	\$406	\$325	\$278	\$348	\$977	\$791	\$750	\$609	\$488	\$417	\$521	
46	\$694	\$562	\$533	\$433	\$347	\$297	\$371	\$1,041	\$843	\$799	\$649	\$520	\$445	\$556	
47	\$741	\$600	\$569	\$462	\$370	\$317	\$396	\$1,111	\$900	\$853	\$693	\$555	\$475	\$593	
48	\$768	\$622	\$590	\$479	\$384	\$328	\$410	\$1,153	\$933	\$885	\$718	\$576	\$493	\$615	
49	\$797	\$645	\$612	\$497	\$398	\$341	\$425	\$1,195	\$968	\$918	\$745	\$597	\$511	\$638	
50	\$826	\$669	\$634	\$515	\$413	\$353	\$441	\$1,240	\$1,003	\$952	\$773	\$619	\$530	\$662	
51	\$857	\$694	\$658	\$534	\$428	\$366	\$457	\$1,286	\$1,041	\$987	\$801	\$642	\$549	\$686	
52	\$889	\$720	\$683	\$554	\$444	\$380	\$475	\$1,334	\$1,080	\$1,024	\$831	\$666	\$570	\$712	
53	\$950	\$769	\$729	\$592	\$474	\$406	\$507	\$1,425	\$1,153	\$1,094	\$888	\$712	\$609	\$761	
54	\$1,014	\$821	\$779	\$632	\$507	\$434	\$542	\$1,522	\$1,232	\$1,168	\$948	\$760	\$650	\$812	
55	\$1,084	\$877	\$832	\$675	\$541	\$463	\$579	\$1,626	\$1,316	\$1,248	\$1,013	\$812	\$695	\$868	
56	\$1,121	\$908	\$861	\$699	\$560	\$479	\$599	\$1,682	\$1,362	\$1,291	\$1,048	\$840	\$719	\$898	
57	\$1,161	\$939	\$891	\$723	\$580	\$496	\$620	\$1,741	\$1,409	\$1,336	\$1,085	\$870	\$744	\$929	
58	\$1,201	\$972	\$922	\$748	\$600	\$513	\$641	\$1,801	\$1,458	\$1,383	\$1,123	\$900	\$770	\$962	
59	\$1,243	\$1,006	\$954	\$775	\$621	\$531	\$663	\$1,864	\$1,509	\$1,431	\$1,162	\$931	\$797	\$995	
60	\$1,246	\$1,009	\$956	\$777	\$622	\$532	\$665	\$1,869	\$1,513	\$1,435	\$1,165	\$934	\$799	\$998	
61	\$1,249	\$1,011	\$959	\$779	\$624	\$534	\$667	\$1,874	\$1,517	\$1,438	\$1,168	\$936	\$801	\$1,000	
62	\$1,254	\$1,015	\$962	\$781	\$626	\$536	\$669	\$1,880	\$1,522	\$1,443	\$1,172	\$939	\$804	\$1,004	
63	\$1,258	\$1,018	\$966	\$784	\$628	\$538	\$671	\$1,887	\$1,527	\$1,448	\$1,176	\$942	\$806	\$1,007	
64	\$1,262	\$1,022	\$969	\$787	\$630	\$539	\$674	\$1,893	\$1,533	\$1,453	\$1,180	\$946	\$809	\$1,011	
65+	\$1,262	\$1,022	\$969	\$787	\$630	\$539	\$674	\$1,893	\$1,533	\$1,453	\$1,180	\$946	\$809	\$1,011	

Optional Maternity Rider														
If selected, add the corresponding amount to Managed Care Option A or Indemnity Plan Option A premium rates above														
All Ages	\$940	Not Available	\$721	Not Available	Not Available	Not Available	Not Available	\$1,409	Not Available	\$1,082	Not Available	Not Available	Not Available	Not Available

The rates listed above are for single policies only. To figure rates for the Family Option please see instructions below.\*

Please note - Only Managed Care Option H is available for the Family Plan

*Managed Care Option H Family Plan Premium Rates	
Family Structure	*Calculate Premium:
2 Adults	Locate both adult single premiums from Managed Care Option H, add together and multiply the result by 0.91
1 Adult + Children	Locate the adult single premium from Managed Care Option H and add \$65 for each child
2 Adults + Children	Figure premium as outlined above for 2 adults and add \$65 for each child

Please add \$10 to your monthly premium for monthly direct bill.

Automatic withdrawal (ACH) option has no fee; Contact Plan Administrator to set up ACH.