

Northeastern Pennsylvania

HMO Health Insurance Monthly Plan Rates — (Bradford, Clinton, Columbia, Lackawanna, Luzerne, Lycoming, Northumberland, Pike, Snyder, Sullivan, Susquehanna, Wayne, Wyoming), Effective 4/1/08*

HMO 20						
Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$266	\$266	N/A	N/A	N/A	N/A
1	\$159	\$159	N/A	N/A	N/A	N/A
2-18	\$106	\$106	\$212	\$318	\$318	\$424
19-24	\$110	\$175	\$285	\$322	\$387	\$497
25-29	\$127	\$212	\$339	\$339	\$424	\$551
30-34	\$146	\$216	\$362	\$358	\$428	\$574
35-39	\$170	\$225	\$395	\$382	\$437	\$607
40-44	\$203	\$229	\$432	\$415	\$441	\$644
45-49	\$252	\$233	\$485	\$464	\$445	\$697
50-54	\$324	\$263	\$587	\$536	\$475	\$799
55-59	\$422	\$307	\$729	\$634	\$519	\$941
60-64	\$594	\$379	\$973	\$806	\$591	\$1,185
65+*** Non-Medicare Eligible	\$817	\$432	\$1,249	\$1,029	\$644	\$1,461
65+*** Medicare Eligible	\$594	\$351	\$945	\$806	\$563	\$1,157

HMO 30						
Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$241	\$241	\$482	\$433	\$433	\$674
1	\$144	\$144	\$288	\$336	\$336	\$480
2-18	\$96	\$96	\$192	\$288	\$288	\$384
19-24	\$99	\$158	\$257	\$291	\$350	\$449
25-29	\$115	\$192	\$307	\$307	\$384	\$499
30-34	\$132	\$195	\$327	\$324	\$387	\$519
35-39	\$154	\$203	\$357	\$346	\$395	\$549
40-44	\$184	\$207	\$391	\$376	\$399	\$583
45-49	\$228	\$211	\$439	\$420	\$403	\$631
50-54	\$293	\$238	\$531	\$485	\$430	\$723
55-59	\$382	\$278	\$660	\$574	\$470	\$852
60-64	\$537	\$343	\$880	\$729	\$535	\$1,072
65+*** Non-Medicare Eligible	\$739	\$391	\$1,130	\$931	\$583	\$1,322
65+*** Medicare Eligible	\$537	\$317	\$854	\$729	\$509	\$1,046

Monthly Dental Rates†			
Single	Couple**	Parent & Child(ren)	Family**
\$12	\$23	\$34	\$45

Your rates are guaranteed not to increase for a minimum of 6 months from your effective date!

- * Rates are subject to increase upon underwriting review.
- ** Couple and Family rates are based on the age of the oldest spouse.
- *** Age 65+ rates are not available to new applicants.
- † Dental is offered only if medical coverage is obtained.

Aetna Advantage Plans for individuals, families and the self-employed are underwritten by Aetna Life Insurance Company (Aetna) directly and/or through an out-of-state blanket trust or Aetna Health Inc., 151 Farmington Ave., Hartford, CT 06156. In some states, individuals may qualify as a business group of one and may be eligible for guaranteed issue, small group health plans. This managed care plan may not cover all of your health care expenses. Read your contract carefully to determine which health care services are covered. To contact the plan if you are a member, call the number on your ID card; all others, call 1-800-My-Health (1-800-694-3258) or your licensed broker.

If you need this material translated into another language, please call Member Services at 1-866-565-1236.

Si usted necesita este material en otro lenguaje, por favor llame a Servicios al Miembro al 1-866-565-1236.

Upon request, we will provide you with rates at a different underwriting level.

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Rates are subject to change based on rate increases implemented to the whole book of business in accordance with state laws and regulations based on your medical history, Aetna's underwriting guidelines and any optional benefits selected. Information is subject to change.

Eastern Pennsylvania

HMO Health Insurance Monthly Plan Rates — (Berks, Bucks, Carbon, Chester, Delaware, Lehigh, Monroe, Montgomery, Northampton, Philadelphia), Effective 4/1/08*

HMO 20						
Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$276	\$276	N/A	N/A	N/A	N/A
1	\$166	\$166	N/A	N/A	N/A	N/A
2-18	\$110	\$110	\$220	\$330	\$330	\$440
19-24	\$116	\$184	\$300	\$336	\$404	\$520
25-29	\$133	\$222	\$355	\$353	\$442	\$575
30-34	\$154	\$228	\$382	\$374	\$448	\$602
35-39	\$181	\$232	\$413	\$401	\$452	\$633
40-44	\$215	\$236	\$451	\$435	\$456	\$671
45-49	\$265	\$246	\$511	\$485	\$466	\$731
50-54	\$342	\$275	\$617	\$562	\$495	\$837
55-59	\$446	\$323	\$769	\$666	\$543	\$989
60-64	\$626	\$402	\$1,028	\$846	\$622	\$1,248
65+*** Non-Medicare Eligible	\$860	\$458	\$1,318	\$1,080	\$678	\$1,538
65+*** Medicare Eligible	\$626	\$345	\$971	\$846	\$565	\$1,191

HMO 30						
Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$250	\$250	\$500	\$448	\$448	\$698
1	\$150	\$150	\$300	\$348	\$348	\$498
2-18	\$99	\$99	\$198	\$297	\$297	\$396
19-24	\$105	\$166	\$271	\$303	\$364	\$469
25-29	\$120	\$201	\$321	\$318	\$399	\$519
30-34	\$139	\$206	\$345	\$337	\$404	\$543
35-39	\$164	\$210	\$374	\$362	\$408	\$572
40-44	\$194	\$213	\$407	\$392	\$411	\$605
45-49	\$240	\$222	\$462	\$438	\$420	\$660
50-54	\$309	\$249	\$558	\$507	\$447	\$756
55-59	\$403	\$292	\$695	\$601	\$490	\$893
60-64	\$566	\$364	\$930	\$764	\$562	\$1,128
65+*** Non-Medicare Eligible	\$778	\$414	\$1,192	\$976	\$612	\$1,390
65+*** Medicare Eligible	\$566	\$312	\$878	\$764	\$510	\$1,076

Monthly Dental Rates†			
Single	Couple**	Parent & Child(ren)	Family**
\$14	\$28	\$41	\$55

Your rates are guaranteed not to increase for a minimum of 6 months from your effective date!

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- ** Couple and Family rates are based on the age of the oldest spouse.
- *** Age 65+ rates are not available to new applicants.
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Western Pennsylvania

HMO Health Insurance Monthly Plan Rates — (Allegheny, Armstrong, Beaver, Blair, Butler, Cambria, Clarion, Erie, Fayette, Greene, Jefferson, Lawrence, Mercer, Somerset, Washington, Westmoreland), Effective 4/1/08*

HMO 20						
Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$340	\$340	N/A	N/A	N/A	N/A
1	\$204	\$204	N/A	N/A	N/A	N/A
2-18	\$136	\$136	\$272	\$408	\$408	\$544
19-24	\$143	\$229	\$372	\$415	\$501	\$644
25-29	\$164	\$273	\$437	\$436	\$545	\$709
30-34	\$188	\$279	\$467	\$460	\$551	\$739
35-39	\$221	\$284	\$505	\$493	\$556	\$777
40-44	\$263	\$288	\$551	\$535	\$560	\$823
45-49	\$324	\$302	\$626	\$596	\$574	\$898
50-54	\$417	\$335	\$752	\$689	\$607	\$1,024
55-59	\$559	\$395	\$954	\$831	\$667	\$1,226
60-64	\$765	\$491	\$1,256	\$1,037	\$763	\$1,528
65+*** Non-Medicare Eligible	\$1,082	\$579	\$1,661	\$1,354	\$851	\$1,933
65+*** Medicare Eligible	\$765	\$435	\$1,200	\$1,037	\$707	\$1,472

HMO 30						
Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$307	\$307	\$614	\$553	\$553	\$860
1	\$184	\$184	\$368	\$430	\$430	\$614
2-18	\$123	\$123	\$246	\$369	\$369	\$492
19-24	\$129	\$207	\$336	\$375	\$453	\$582
25-29	\$148	\$247	\$395	\$394	\$493	\$641
30-34	\$170	\$252	\$422	\$416	\$498	\$668
35-39	\$200	\$257	\$457	\$446	\$503	\$703
40-44	\$238	\$260	\$498	\$484	\$506	\$744
45-49	\$293	\$273	\$566	\$539	\$519	\$812
50-54	\$377	\$303	\$680	\$623	\$549	\$926
55-59	\$506	\$357	\$863	\$752	\$603	\$1,109
60-64	\$692	\$444	\$1,136	\$938	\$690	\$1,382
65+*** Non-Medicare Eligible	\$979	\$524	\$1,503	\$1,225	\$770	\$1,749
65+*** Medicare Eligible	\$692	\$393	\$1,085	\$938	\$639	\$1,331

Monthly Dental Rates†			
Single	Couple**	Parent & Child(ren)	Family**
\$12	\$23	\$34	\$45

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Central Pennsylvania

HMO Health Insurance Monthly Plan Rates — (Adams, Cumberland, Dauphin, Franklin, Fulton, Lancaster, Lebanon, Perry, Schuylkill, York), Effective 4/1/08*

HMO 20						
Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$266	\$266	N/A	N/A	N/A	N/A
1	\$159	\$159	N/A	N/A	N/A	N/A
2-18	\$106	\$106	\$212	\$318	\$318	\$424
19-24	\$110	\$175	\$285	\$322	\$387	\$497
25-29	\$127	\$212	\$339	\$339	\$424	\$551
30-34	\$146	\$216	\$362	\$358	\$428	\$574
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65+*** Medicare Eligible	\$594	\$351	\$945	\$806	\$563	\$1,157

HMO 30						
Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$241	\$241	\$482	\$433	\$433	\$674
1	\$144	\$144	\$288	\$336	\$336	\$480
2-18	\$96	\$96	\$192	\$288	\$288	\$384
19-24	\$99	\$158	\$257	\$291	\$350	\$449
25-29	\$115	\$192	\$307	\$307	\$384	\$499
30-34	\$132	\$195	\$327	\$324	\$387	\$519
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40-44	\$184	\$207	\$391	\$376	\$399	\$583
45-49	\$228	\$211	\$439	\$420	\$403	\$631
50-54	\$293	\$238	\$531	\$485	\$430	\$723
55-59	\$382	\$278	\$660	\$574	\$470	\$852
60-64	\$537	\$343	\$880	\$729	\$535	\$1,072
65+*** Non-Medicare Eligible	\$739	\$391	\$1,130	\$931	\$583	\$1,322
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Monthly Dental Rates†			
Single	Couple**	Parent & Child(ren)	Family**
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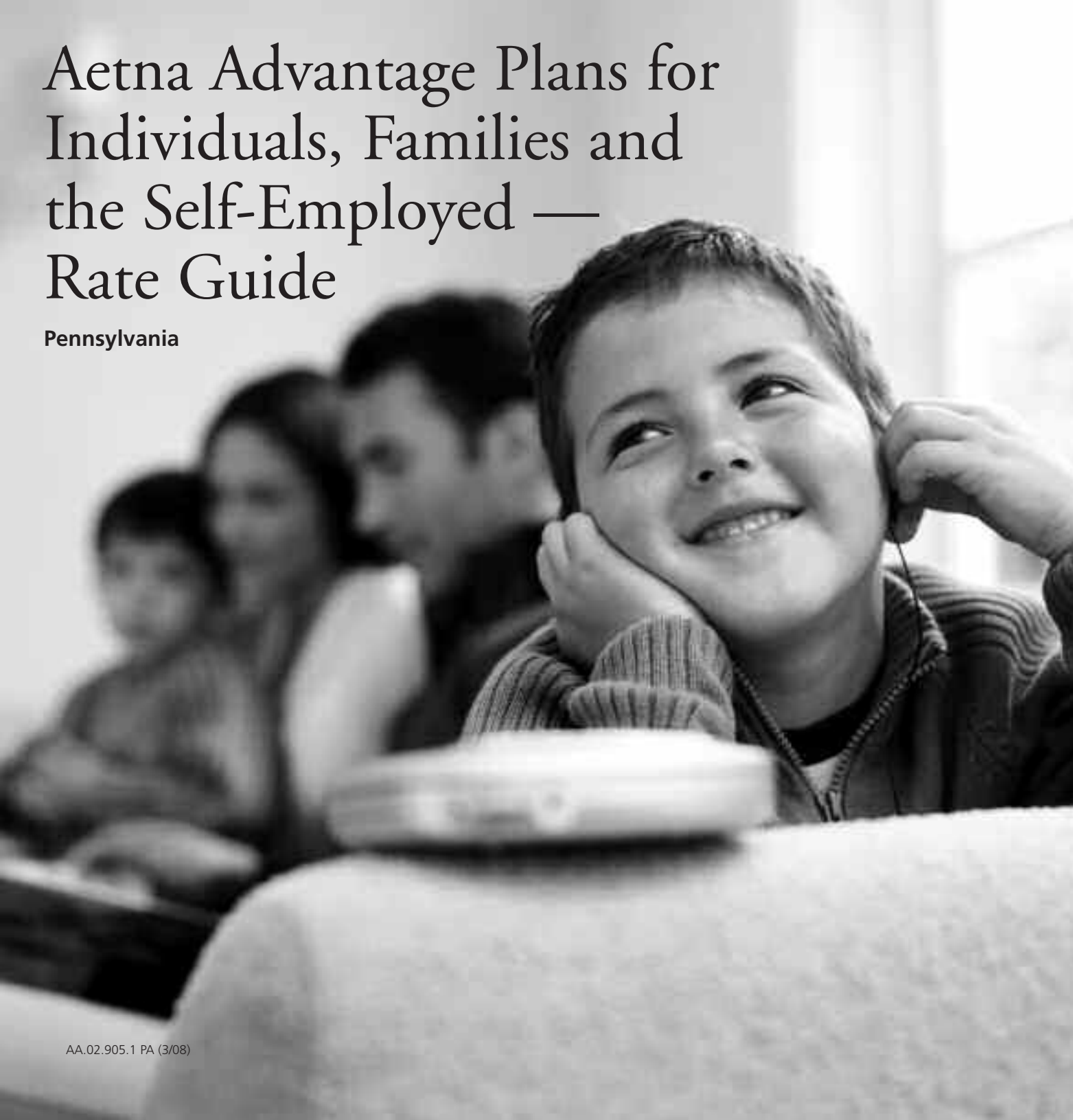
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Aetna Advantage Plans for Individuals, Families and the Self-Employed — Rate Guide

Pennsylvania

PPO
Rate Guide



We want you to know[®]



Southeastern Pennsylvania

PPO Health Insurance Monthly Plan Rates — Berks, Bucks, Carbon, Chester, Delaware, Lehigh, Monroe, Montgomery, Northampton, Philadelphia; Effective 4/1/08*

PPO 1500

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$233	\$233	N/A	N/A	N/A	N/A
1	\$140	\$140	N/A	N/A	N/A	N/A
2-18	\$93	\$93	\$186	\$279	\$279	\$372
19-24	\$98	\$140	\$238	\$284	\$326	\$424
25-29	\$114	\$163	\$277	\$300	\$349	\$463
30-34	\$135	\$179	\$314	\$321	\$365	\$500
35-39	\$160	\$194	\$354	\$346	\$380	\$540
40-44	\$193	\$236	\$429	\$379	\$422	\$615
45-49	\$240	\$256	\$496	\$426	\$442	\$682
50-54	\$315	\$294	\$609	\$501	\$480	\$795
55-59	\$413	\$356	\$769	\$599	\$542	\$955
60-64	\$586	\$456	\$1,042	\$772	\$642	\$1,228
65+***	\$627	\$511	\$1,138	\$813	\$697	\$1,324

PPO 2500

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$164	\$164	N/A	N/A	N/A	N/A
1	\$99	\$99	N/A	N/A	N/A	N/A
2-18	\$66	\$66	\$132	\$198	\$198	\$264
19-24	\$70	\$100	\$170	\$202	\$232	\$302
25-29	\$83	\$118	\$201	\$215	\$250	\$333
30-34	\$99	\$131	\$230	\$231	\$263	\$362
35-39	\$118	\$144	\$262	\$250	\$276	\$394
40-44	\$144	\$177	\$321	\$276	\$309	\$453
45-49	\$182	\$194	\$376	\$314	\$326	\$508
50-54	\$241	\$225	\$466	\$373	\$357	\$598
55-59	\$318	\$275	\$593	\$450	\$407	\$725
60-64	\$454	\$354	\$808	\$586	\$486	\$940
65+***	\$486	\$396	\$882	\$618	\$528	\$1,014

PPO 5000

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$104	\$104	N/A	N/A	N/A	N/A
1	\$63	\$63	N/A	N/A	N/A	N/A
2-18	\$42	\$42	\$84	\$126	\$126	\$168
19-24	\$45	\$64	\$109	\$129	\$148	\$193
25-29	\$54	\$77	\$131	\$138	\$161	\$215
30-34	\$66	\$88	\$154	\$150	\$172	\$238
35-39	\$81	\$98	\$179	\$165	\$182	\$263
40-44	\$100	\$123	\$223	\$184	\$207	\$307
45-49	\$128	\$137	\$265	\$212	\$221	\$349
50-54	\$172	\$161	\$333	\$256	\$245	\$417
55-59	\$229	\$198	\$427	\$313	\$282	\$511
60-64	\$330	\$257	\$587	\$414	\$341	\$671
65+***	\$354	\$288	\$642	\$438	\$372	\$726

PPO High Deductible 3000 (HSA Compatible)

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$148	\$148	N/A	N/A	N/A	N/A
1	\$89	\$89	N/A	N/A	N/A	N/A
2-18	\$59	\$59	\$118	\$177	\$177	\$236
19-24	\$63	\$90	\$153	\$181	\$208	\$271
25-29	\$74	\$106	\$180	\$192	\$224	\$298
30-34	\$89	\$118	\$207	\$207	\$236	\$325
35-39	\$108	\$129	\$237	\$226	\$247	\$355
40-44	\$130	\$160	\$290	\$248	\$278	\$408
45-49	\$164	\$175	\$339	\$282	\$293	\$457
50-54	\$217	\$203	\$420	\$335	\$321	\$538
55-59	\$287	\$247	\$534	\$405	\$365	\$652
60-64	\$409	\$319	\$728	\$527	\$437	\$846
65+***	\$438	\$357	\$795	\$556	\$475	\$913

PPO High Deductible 5000 (HSA Compatible)

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$108	\$108	N/A	N/A	N/A	N/A
1	\$65	\$65	N/A	N/A	N/A	N/A
2-18	\$43	\$43	\$86	\$129	\$129	\$172
19-24	\$46	\$66	\$112	\$132	\$152	\$198
25-29	\$56	\$80	\$136	\$142	\$166	\$222
30-34	\$69	\$91	\$160	\$155	\$177	\$246
35-39	\$84	\$102	\$186	\$170	\$188	\$272
40-44	\$104	\$128	\$232	\$190	\$214	\$318
45-49	\$133	\$142	\$275	\$219	\$228	\$361
50-54	\$178	\$167	\$345	\$264	\$253	\$431
55-59	\$238	\$205	\$443	\$324	\$291	\$529
60-64	\$343	\$267	\$610	\$429	\$353	\$696
65+***	\$367	\$299	\$666	\$453	\$385	\$752

First Dollar PPO 25

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$304	\$304	N/A	N/A	N/A	N/A
1	\$182	\$182	N/A	N/A	N/A	N/A
2-18	\$122	\$122	\$244	\$366	\$366	\$488
19-24	\$128	\$183	\$311	\$372	\$427	\$555
25-29	\$148	\$209	\$357	\$392	\$453	\$601
30-34	\$169	\$227	\$396	\$413	\$471	\$640
35-39	\$199	\$241	\$440	\$443	\$485	\$684
40-44	\$237	\$292	\$529	\$481	\$536	\$773
45-49	\$293	\$311	\$604	\$537	\$555	\$848
50-54	\$379	\$354	\$733	\$623	\$598	\$977
55-59	\$493	\$425	\$918	\$737	\$669	\$1,162
60-64	\$692	\$539	\$1,231	\$936	\$783	\$1,475
65+***	\$740	\$604	\$1,344	\$984	\$848	\$1,588

First Dollar PPO 35

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$220	\$220	N/A	N/A	N/A	N/A
1	\$132	\$132	N/A	N/A	N/A	N/A
2-18	\$88	\$88	\$176	\$264	\$264	\$352
19-24	\$93	\$133	\$226	\$269	\$309	\$402
25-29	\$108	\$153	\$261	\$284	\$329	\$437
30-34	\$125	\$167	\$292	\$301	\$343	\$468
35-39	\$148	\$179	\$327	\$324	\$355	\$503
40-44	\$177	\$217	\$394	\$353	\$393	\$570
45-49	\$220	\$234	\$454	\$396	\$410	\$630
50-54	\$286	\$267	\$553	\$462	\$443	\$729
55-59	\$373	\$322	\$695	\$549	\$498	\$871
60-64	\$527	\$411	\$938	\$703	\$587	\$1,114
65+***	\$564	\$460	\$1,024	\$740	\$636	\$1,200

Monthly Dental Rates^{††}

Single	Couple	Parent & Child(ren)	Family
\$14	\$28	\$41	\$55

Your rates are guaranteed not to increase for 12 months from your effective date once you've been accepted for coverage. *

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- *** Age 65+ rates are not available to new applicants.
- † Dental is offered only if medical coverage is obtained.

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Central Pennsylvania

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PPO 1500

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$233	\$233	N/A	N/A	N/A	N/A
1	\$140	\$140	N/A	N/A	N/A	N/A
2-18	\$93	\$93	\$186	\$279	\$279	\$372
19-24	\$98	\$140	\$238	\$284	\$326	\$424
25-29	\$114	\$163	\$277	\$300	\$349	\$463
30-34	\$135	\$179	\$314	\$321	\$365	\$500
35-39	\$160	\$194	\$354	\$346	\$380	\$540
40-44	\$193	\$236	\$429	\$379	\$422	\$615
45-49	\$240	\$256	\$496	\$426	\$442	\$682
50-54	\$315	\$294	\$609	\$501	\$480	\$795
55-59	\$413	\$356	\$769	\$599	\$542	\$955
60-64	\$586	\$456	\$1,042	\$772	\$642	\$1,228
65+***	\$627	\$511	\$1,138	\$813	\$697	\$1,324

PPO 2500

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$164	\$164	N/A	N/A	N/A	N/A
1	\$99	\$99	N/A	N/A	N/A	N/A
2-18	\$66	\$66	\$132	\$198	\$198	\$264
19-24	\$70	\$100	\$170	\$202	\$232	\$302
25-29	\$83	\$118	\$201	\$215	\$250	\$333
30-34	\$99	\$131	\$230	\$231	\$263	\$362
35-39	\$118	\$144	\$262	\$250	\$276	\$394
40-44	\$144	\$177	\$321	\$276	\$309	\$453
45-49	\$182	\$194	\$376	\$314	\$326	\$508
50-54	\$241	\$225	\$466	\$373	\$357	\$598
55-59	\$318	\$275	\$593	\$450	\$407	\$725
60-64	\$454	\$354	\$808	\$586	\$486	\$940
65+***	\$486	\$396	\$882	\$618	\$528	\$1,014

PPO 5000

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$104	\$104	N/A	N/A	N/A	N/A
1	\$63	\$63	N/A	N/A	N/A	N/A
2-18	\$42	\$42	\$84	\$126	\$126	\$168
19-24	\$45	\$64	\$109	\$129	\$148	\$193
25-29	\$54	\$77	\$131	\$138	\$161	\$215
30-34	\$66	\$88	\$154	\$150	\$172	\$238
35-39	\$81	\$98	\$179	\$165	\$182	\$263
40-44	\$100	\$123	\$223	\$184	\$207	\$307
45-49	\$128	\$137	\$265	\$212	\$221	\$349
50-54	\$172	\$161	\$333	\$256	\$245	\$417
55-59	\$229	\$198	\$427	\$313	\$282	\$511
60-64	\$330	\$257	\$587	\$414	\$341	\$671
65+***	\$354	\$288	\$642	\$438	\$372	\$726

PPO High Deductible 3000 (HSA Compatible)

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$148	\$148	N/A	N/A	N/A	N/A
1	\$89	\$89	N/A	N/A	N/A	N/A
2-18	\$59	\$59	\$118	\$177	\$177	\$236
19-24	\$63	\$90	\$153	\$181	\$208	\$271
25-29	\$74	\$106	\$180	\$192	\$224	\$298
30-34	\$89	\$118	\$207	\$207	\$236	\$325
35-39	\$108	\$129	\$237	\$226	\$247	\$355
40-44	\$130	\$160	\$290	\$248	\$278	\$408
45-49	\$164	\$175	\$339	\$282	\$293	\$457
50-54	\$217	\$203	\$420	\$335	\$321	\$538
55-59	\$287	\$247	\$534	\$405	\$365	\$652
60-64	\$409	\$319	\$728	\$527	\$437	\$846
65+***	\$438	\$357	\$795	\$556	\$475	\$913

PPO High Deductible 5000 (HSA Compatible)

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$108	\$108	N/A	N/A	N/A	N/A
1	\$65	\$65	N/A	N/A	N/A	N/A
2-18	\$43	\$43	\$86	\$129	\$129	\$172
19-24	\$46	\$66	\$112	\$132	\$152	\$198
25-29	\$56	\$80	\$136	\$142	\$166	\$222
30-34	\$69	\$91	\$160	\$155	\$177	\$246
35-39	\$84	\$102	\$186	\$170	\$188	\$272
40-44	\$104	\$128	\$232	\$190	\$214	\$318
45-49	\$133	\$142	\$275	\$219	\$228	\$361
50-54	\$178	\$167	\$345	\$264	\$253	\$431
55-59	\$238	\$205	\$443	\$324	\$291	\$529
60-64	\$343	\$267	\$610	\$429	\$353	\$696
65+***	\$367	\$299	\$666	\$453	\$385	\$752

First Dollar PPO 25

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$304	\$304	N/A	N/A	N/A	N/A
1	\$182	\$182	N/A	N/A	N/A	N/A
2-18	\$122	\$122	\$244	\$366	\$366	\$488
19-24	\$128	\$183	\$311	\$372	\$427	\$555
25-29	\$148	\$209	\$357	\$392	\$453	\$601
30-34	\$169	\$227	\$396	\$413	\$471	\$640
35-39	\$199	\$241	\$440	\$443	\$485	\$684
40-44	\$237	\$292	\$529	\$481	\$536	\$773
45-49	\$293	\$311	\$604	\$537	\$555	\$848
50-54	\$379	\$354	\$733	\$623	\$598	\$977
55-59	\$493	\$425	\$918	\$737	\$669	\$1,162
60-64	\$692	\$539	\$1,231	\$936	\$783	\$1,475
65+***	\$740	\$604	\$1,344	\$984	\$848	\$1,588

First Dollar PPO 35

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$220	\$220	N/A	N/A	N/A	N/A
1	\$132	\$132	N/A	N/A	N/A	N/A
2-18	\$88	\$88	\$176	\$264	\$264	\$352
19-24	\$93	\$133	\$226	\$269	\$309	\$402
25-29	\$108	\$153	\$261	\$284	\$329	\$437
30-34	\$125	\$167	\$292	\$301	\$343	\$468
35-39	\$148	\$179	\$327	\$324	\$355	\$503
40-44	\$177	\$217	\$394	\$353	\$393	\$570
45-49	\$220	\$234	\$454	\$396	\$410	\$630
50-54	\$286	\$267	\$553	\$462	\$443	\$729
55-59	\$373	\$322	\$695	\$549	\$498	\$871
60-64	\$527	\$411	\$938	\$703	\$587	\$1,114
65+***	\$564	\$460	\$1,024	\$740	\$636	\$1,200

Monthly Dental Rates††

Single	Couple	Parent & Child(ren)	Family
\$14	\$28	\$41	\$55

Your rates are guaranteed not to increase for 12 months from your effective date once you've been accepted for coverage. *

- * Rates are subject to increase upon underwriting review.
- ** Couple and Family rates are based on the age of the oldest spouse.
- *** Age 65+ rates are not available to new applicants.
- † Dental is offered only if medical coverage is obtained.

Western Pennsylvania

PPO Health Insurance Monthly Plan Rates — Cameron, Clearfield, Crawford, Elk, Erie, Forest, Jefferson, McKean, Mercer, Venango, Warren; Effective 4/1/08*

PPO 1500

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$256	\$256	N/A	N/A	N/A	N/A
1	\$154	\$154	N/A	N/A	N/A	N/A
2-18	\$102	\$102	\$204	\$306	\$306	\$408
19-24	\$108	\$154	\$262	\$312	\$358	\$466
25-29	\$126	\$179	\$305	\$330	\$383	\$509
30-34	\$148	\$197	\$345	\$352	\$401	\$549
35-39	\$176	\$213	\$389	\$380	\$417	\$593
40-44	\$212	\$260	\$472	\$416	\$464	\$676
45-49	\$264	\$282	\$546	\$468	\$486	\$750
50-54	\$346	\$324	\$670	\$550	\$528	\$874
55-59	\$454	\$392	\$846	\$658	\$596	\$1,050
60-64	\$644	\$502	\$1,146	\$848	\$706	\$1,350
65+***	\$689	\$562	\$1,251	\$893	\$766	\$1,455

PPO 2500

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$181	\$181	N/A	N/A	N/A	N/A
1	\$108	\$108	N/A	N/A	N/A	N/A
2-18	\$72	\$72	\$144	\$216	\$216	\$288
19-24	\$77	\$110	\$187	\$221	\$254	\$331
25-29	\$91	\$129	\$220	\$235	\$273	\$364
30-34	\$108	\$144	\$252	\$252	\$288	\$396
35-39	\$130	\$158	\$288	\$274	\$302	\$432
40-44	\$159	\$195	\$354	\$303	\$339	\$498
45-49	\$200	\$214	\$414	\$344	\$358	\$558
50-54	\$265	\$248	\$513	\$409	\$392	\$657
55-59	\$350	\$302	\$652	\$494	\$446	\$796
60-64	\$500	\$389	\$889	\$644	\$533	\$1,033
65+***	\$535	\$436	\$971	\$679	\$580	\$1,115

PPO 5000

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$115	\$115	N/A	N/A	N/A	N/A
1	\$69	\$69	N/A	N/A	N/A	N/A
2-18	\$46	\$46	\$92	\$138	\$138	\$184
19-24	\$49	\$70	\$119	\$141	\$162	\$211
25-29	\$60	\$85	\$145	\$152	\$177	\$237
30-34	\$73	\$97	\$170	\$165	\$189	\$262
35-39	\$89	\$108	\$197	\$181	\$200	\$289
40-44	\$110	\$135	\$245	\$202	\$227	\$337
45-49	\$141	\$150	\$291	\$233	\$242	\$383
50-54	\$189	\$177	\$366	\$281	\$269	\$458
55-59	\$252	\$218	\$470	\$344	\$310	\$562
60-64	\$363	\$283	\$646	\$455	\$375	\$738
65+***	\$389	\$317	\$706	\$481	\$409	\$798

PPO High Deductible 3000 (HSA Compatible)

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$163	\$163	N/A	N/A	N/A	N/A
1	\$98	\$98	N/A	N/A	N/A	N/A
2-18	\$65	\$65	\$130	\$195	\$195	\$260
19-24	\$69	\$99	\$168	\$199	\$229	\$298
25-29	\$82	\$117	\$199	\$212	\$247	\$329
30-34	\$98	\$130	\$228	\$228	\$260	\$358
35-39	\$119	\$142	\$261	\$249	\$272	\$391
40-44	\$143	\$176	\$319	\$273	\$306	\$449
45-49	\$180	\$192	\$372	\$310	\$322	\$502
50-54	\$238	\$223	\$461	\$368	\$353	\$591
55-59	\$315	\$272	\$587	\$445	\$402	\$717
60-64	\$450	\$351	\$801	\$580	\$481	\$931
65+***	\$482	\$393	\$875	\$612	\$523	\$1,005

PPO High Deductible 5000 (HSA Compatible)

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$119	\$119	N/A	N/A	N/A	N/A
1	\$72	\$72	N/A	N/A	N/A	N/A
2-18	\$48	\$48	\$96	\$144	\$144	\$192
19-24	\$51	\$73	\$124	\$147	\$169	\$220
25-29	\$62	\$88	\$150	\$158	\$184	\$246
30-34	\$76	\$101	\$177	\$172	\$197	\$273
35-39	\$92	\$112	\$204	\$188	\$208	\$300
40-44	\$114	\$140	\$254	\$210	\$236	\$350
45-49	\$146	\$156	\$302	\$242	\$252	\$398
50-54	\$196	\$183	\$379	\$292	\$279	\$475
55-59	\$262	\$226	\$488	\$358	\$322	\$584
60-64	\$377	\$294	\$671	\$473	\$390	\$767
65+***	\$404	\$329	\$733	\$500	\$425	\$829

First Dollar PPO 25

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$335	\$335	N/A	N/A	N/A	N/A
1	\$201	\$201	N/A	N/A	N/A	N/A
2-18	\$134	\$134	\$268	\$402	\$402	\$536
19-24	\$140	\$202	\$342	\$408	\$470	\$610
25-29	\$162	\$230	\$392	\$430	\$498	\$660
30-34	\$186	\$250	\$436	\$454	\$518	\$704
35-39	\$219	\$265	\$484	\$487	\$533	\$752
40-44	\$261	\$321	\$582	\$529	\$589	\$850
45-49	\$322	\$342	\$664	\$590	\$610	\$932
50-54	\$417	\$390	\$807	\$685	\$658	\$1,075
55-59	\$542	\$468	\$1,010	\$810	\$736	\$1,278
60-64	\$761	\$593	\$1,354	\$1,029	\$861	\$1,622
65+***	\$814	\$664	\$1,478	\$1,082	\$932	\$1,746

First Dollar PPO 35

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$242	\$242	N/A	N/A	N/A	N/A
1	\$145	\$145	N/A	N/A	N/A	N/A
2-18	\$97	\$97	\$194	\$291	\$291	\$388
19-24	\$102	\$146	\$248	\$296	\$340	\$442
25-29	\$118	\$168	\$286	\$312	\$362	\$480
30-34	\$138	\$184	\$322	\$332	\$378	\$516
35-39	\$163	\$197	\$360	\$357	\$391	\$554
40-44	\$195	\$239	\$434	\$389	\$433	\$628
45-49	\$242	\$257	\$499	\$436	\$451	\$693
50-54	\$314	\$294	\$608	\$508	\$488	\$802
55-59	\$411	\$354	\$765	\$605	\$548	\$959
60-64	\$580	\$452	\$1,032	\$774	\$646	\$1,226
65+***	\$620	\$506	\$1,126	\$814	\$700	\$1,320

Monthly Dental Rates^{††}

Single	Couple	Parent & Child(ren)	Family
\$14	\$28	\$41	\$55

Your rates are guaranteed not to increase for 12 months from your effective date once you've been accepted for coverage. *

- * Rates are subject to increase upon underwriting review.
- ** Couple and Family rates are based on the age of the oldest spouse.
- *** Age 65+ rates are not available to new applicants.
- † Dental is offered only if medical coverage is obtained.

Northeastern Pennsylvania

PPO Health Insurance Monthly Plan Rates — Bradford, Clinton, Columbia, Lackawanna, Luzerne, Lycoming, Northumberland, Pike, Snyder, Sullivan, Susquehanna, Wayne, Wyoming; Effective 4/1/08*

PPO 1500

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$233	\$233	N/A	N/A	N/A	N/A
1	\$140	\$140	N/A	N/A	N/A	N/A
2-18	\$93	\$93	\$186	\$279	\$279	\$372
19-24	\$98	\$140	\$238	\$284	\$326	\$424
25-29	\$114	\$163	\$277	\$300	\$349	\$463
30-34	\$135	\$179	\$314	\$321	\$365	\$500
35-39	\$160	\$194	\$354	\$346	\$380	\$540
40-44	\$193	\$236	\$429	\$379	\$422	\$615
45-49	\$240	\$256	\$496	\$426	\$442	\$682
50-54	\$315	\$294	\$609	\$501	\$480	\$795
55-59	\$413	\$356	\$769	\$599	\$542	\$955
60-64	\$586	\$456	\$1,042	\$772	\$642	\$1,228
65+***	\$627	\$511	\$1,138	\$813	\$697	\$1,324

PPO 2500

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$164	\$164	N/A	N/A	N/A	N/A
1	\$99	\$99	N/A	N/A	N/A	N/A
2-18	\$66	\$66	\$132	\$198	\$198	\$264
19-24	\$70	\$100	\$170	\$202	\$232	\$302
25-29	\$83	\$118	\$201	\$215	\$250	\$333
30-34	\$99	\$131	\$230	\$231	\$263	\$362
35-39	\$118	\$144	\$262	\$250	\$276	\$394
40-44	\$144	\$177	\$321	\$276	\$309	\$453
45-49	\$182	\$194	\$376	\$314	\$326	\$508
50-54	\$241	\$225	\$466	\$373	\$357	\$598
55-59	\$318	\$275	\$593	\$450	\$407	\$725
60-64	\$454	\$354	\$808	\$586	\$486	\$940
65+***	\$486	\$396	\$882	\$618	\$528	\$1,014

PPO 5000

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$104	\$104	N/A	N/A	N/A	N/A
1	\$63	\$63	N/A	N/A	N/A	N/A
2-18	\$42	\$42	\$84	\$126	\$126	\$168
19-24	\$45	\$64	\$109	\$129	\$148	\$193
25-29	\$54	\$77	\$131	\$138	\$161	\$215
30-34	\$66	\$88	\$154	\$150	\$172	\$238
35-39	\$81	\$98	\$179	\$165	\$182	\$263
40-44	\$100	\$123	\$223	\$184	\$207	\$307
45-49	\$128	\$137	\$265	\$212	\$221	\$349
50-54	\$172	\$161	\$333	\$256	\$245	\$417
55-59	\$229	\$198	\$427	\$313	\$282	\$511
60-64	\$330	\$257	\$587	\$414	\$341	\$671
65+***	\$354	\$288	\$642	\$438	\$372	\$726

PPO High Deductible 3000 (HSA Compatible)

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$148	\$148	N/A	N/A	N/A	N/A
1	\$89	\$89	N/A	N/A	N/A	N/A
2-18	\$59	\$59	\$118	\$177	\$177	\$236
19-24	\$63	\$90	\$153	\$181	\$208	\$271
25-29	\$74	\$106	\$180	\$192	\$224	\$298
30-34	\$89	\$118	\$207	\$207	\$236	\$325
35-39	\$108	\$129	\$237	\$226	\$247	\$355
40-44	\$130	\$160	\$290	\$248	\$278	\$408
45-49	\$164	\$175	\$339	\$282	\$293	\$457
50-54	\$217	\$203	\$420	\$335	\$321	\$538
55-59	\$287	\$247	\$534	\$405	\$365	\$652
60-64	\$409	\$319	\$728	\$527	\$437	\$846
65+***	\$438	\$357	\$795	\$556	\$475	\$913

PPO High Deductible 5000 (HSA Compatible)

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$108	\$108	N/A	N/A	N/A	N/A
1	\$65	\$65	N/A	N/A	N/A	N/A
2-18	\$43	\$43	\$86	\$129	\$129	\$172
19-24	\$46	\$66	\$112	\$132	\$152	\$198
25-29	\$56	\$80	\$136	\$142	\$166	\$222
30-34	\$69	\$91	\$160	\$155	\$177	\$246
35-39	\$84	\$102	\$186	\$170	\$188	\$272
40-44	\$104	\$128	\$232	\$190	\$214	\$318
45-49	\$133	\$142	\$275	\$219	\$228	\$361
50-54	\$178	\$167	\$345	\$264	\$253	\$431
55-59	\$238	\$205	\$443	\$324	\$291	\$529
60-64	\$343	\$267	\$610	\$429	\$353	\$696
65+***	\$367	\$299	\$666	\$453	\$385	\$752

First Dollar PPO 25

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$304	\$304	N/A	N/A	N/A	N/A
1	\$182	\$182	N/A	N/A	N/A	N/A
2-18	\$122	\$122	\$244	\$366	\$366	\$488
19-24	\$128	\$183	\$311	\$372	\$427	\$555
25-29	\$148	\$209	\$357	\$392	\$453	\$601
30-34	\$169	\$227	\$396	\$413	\$471	\$640
35-39	\$199	\$241	\$440	\$443	\$485	\$684
40-44	\$237	\$292	\$529	\$481	\$536	\$773
45-49	\$293	\$311	\$604	\$537	\$555	\$848
50-54	\$379	\$354	\$733	\$623	\$598	\$977
55-59	\$493	\$425	\$918	\$737	\$669	\$1,162
60-64	\$692	\$539	\$1,231	\$936	\$783	\$1,475
65+***	\$740	\$604	\$1,344	\$984	\$848	\$1,588

First Dollar PPO 35

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$220	\$220	N/A	N/A	N/A	N/A
1	\$132	\$132	N/A	N/A	N/A	N/A
2-18	\$88	\$88	\$176	\$264	\$264	\$352
19-24	\$93	\$133	\$226	\$269	\$309	\$402
25-29	\$108	\$153	\$261	\$284	\$329	\$437
30-34	\$125	\$167	\$292	\$301	\$343	\$468
35-39	\$148	\$179	\$327	\$324	\$355	\$503
40-44	\$177	\$217	\$394	\$353	\$393	\$570
45-49	\$220	\$234	\$454	\$396	\$410	\$630
50-54	\$286	\$267	\$553	\$462	\$443	\$729
55-59	\$373	\$322	\$695	\$549	\$498	\$871
60-64	\$527	\$411	\$938	\$703	\$587	\$1,114
65+***	\$564	\$460	\$1,024	\$740	\$636	\$1,200

Monthly Dental Rates^{††}

Single	Couple	Parent & Child(ren)	Family
\$14	\$28	\$41	\$55

Your rates are guaranteed not to increase for 12 months from your effective date once you've been accepted for coverage. *

- * Rates are subject to increase upon underwriting review.
- ** Couple and Family rates are based on the age of the oldest spouse.
- *** Age 65+ rates are not available to new applicants.
- † Dental is offered only if medical coverage is obtained.

Western Pennsylvania Aexcel Network

PPO Health Insurance Monthly Plan Rates — Allegheny, Armstrong, Beaver, Blair, Butler, Cambria, Clarion, Fayette, Greene, Indiana, Lawrence, Somerset, Washington, Westmoreland; Effective 4/1/08*

PPO 1500

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$253	\$253	N/A	N/A	N/A	N/A
1	\$152	\$152	N/A	N/A	N/A	N/A
2-18	\$101	\$101	\$202	\$303	\$303	\$404
19-24	\$107	\$153	\$260	\$309	\$355	\$462
25-29	\$125	\$177	\$302	\$327	\$379	\$504
30-34	\$147	\$195	\$342	\$349	\$397	\$544
35-39	\$174	\$211	\$385	\$376	\$413	\$587
40-44	\$210	\$258	\$468	\$412	\$460	\$670
45-49	\$262	\$279	\$541	\$464	\$481	\$743
50-54	\$343	\$320	\$663	\$545	\$522	\$865
55-59	\$450	\$388	\$838	\$652	\$590	\$1,040
60-64	\$638	\$497	\$1,135	\$840	\$699	\$1,337
65+***	\$682	\$556	\$1,238	\$884	\$758	\$1,440

PPO 2500

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$179	\$179	N/A	N/A	N/A	N/A
1	\$107	\$107	N/A	N/A	N/A	N/A
2-18	\$72	\$72	\$144	\$216	\$216	\$288
19-24	\$76	\$109	\$185	\$220	\$253	\$329
25-29	\$90	\$128	\$218	\$234	\$272	\$362
30-34	\$107	\$143	\$250	\$251	\$287	\$394
35-39	\$129	\$156	\$285	\$273	\$300	\$429
40-44	\$157	\$193	\$350	\$301	\$337	\$494
45-49	\$198	\$211	\$409	\$342	\$355	\$553
50-54	\$262	\$245	\$507	\$406	\$389	\$651
55-59	\$347	\$299	\$646	\$491	\$443	\$790
60-64	\$495	\$385	\$880	\$639	\$529	\$1,024
65+***	\$529	\$432	\$961	\$673	\$576	\$1,105

PPO 5000

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$114	\$114	N/A	N/A	N/A	N/A
1	\$68	\$68	N/A	N/A	N/A	N/A
2-18	\$46	\$46	\$92	\$138	\$138	\$184
19-24	\$49	\$70	\$119	\$141	\$162	\$211
25-29	\$59	\$84	\$143	\$151	\$176	\$235
30-34	\$72	\$96	\$168	\$164	\$188	\$260
35-39	\$88	\$107	\$195	\$180	\$199	\$287
40-44	\$109	\$134	\$243	\$201	\$226	\$335
45-49	\$140	\$149	\$289	\$232	\$241	\$381
50-54	\$187	\$175	\$362	\$279	\$267	\$454
55-59	\$250	\$216	\$466	\$342	\$308	\$558
60-64	\$360	\$280	\$640	\$452	\$372	\$732
65+***	\$385	\$314	\$699	\$477	\$406	\$791

PPO High Deductible 3000 (HSA Compatible)

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$161	\$161	N/A	N/A	N/A	N/A
1	\$97	\$97	N/A	N/A	N/A	N/A
2-18	\$64	\$64	\$128	\$192	\$192	\$256
19-24	\$68	\$98	\$166	\$196	\$226	\$294
25-29	\$81	\$115	\$196	\$209	\$243	\$324
30-34	\$97	\$129	\$226	\$225	\$257	\$354
35-39	\$117	\$141	\$258	\$245	\$269	\$386
40-44	\$142	\$174	\$316	\$270	\$302	\$444
45-49	\$179	\$190	\$369	\$307	\$318	\$497
50-54	\$236	\$221	\$457	\$364	\$349	\$585
55-59	\$312	\$269	\$581	\$440	\$397	\$709
60-64	\$446	\$347	\$793	\$574	\$475	\$921
65+***	\$477	\$389	\$866	\$605	\$517	\$994

PPO High Deductible 5000 (HSA Compatible)

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$118	\$118	N/A	N/A	N/A	N/A
1	\$71	\$71	N/A	N/A	N/A	N/A
2-18	\$47	\$47	\$94	\$141	\$141	\$188
19-24	\$51	\$72	\$123	\$145	\$166	\$217
25-29	\$61	\$87	\$148	\$155	\$181	\$242
30-34	\$75	\$100	\$175	\$169	\$194	\$269
35-39	\$91	\$111	\$202	\$185	\$205	\$296
40-44	\$113	\$139	\$252	\$207	\$233	\$346
45-49	\$145	\$155	\$300	\$239	\$249	\$394
50-54	\$194	\$182	\$376	\$288	\$276	\$470
55-59	\$259	\$224	\$483	\$353	\$318	\$577
60-64	\$374	\$291	\$665	\$468	\$385	\$759
65+***	\$400	\$326	\$726	\$494	\$420	\$820

First Dollar PPO 25

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$331	\$331	N/A	N/A	N/A	N/A
1	\$199	\$199	N/A	N/A	N/A	N/A
2-18	\$132	\$132	\$264	\$396	\$396	\$528
19-24	\$139	\$200	\$339	\$403	\$464	\$603
25-29	\$161	\$228	\$389	\$425	\$492	\$653
30-34	\$185	\$248	\$433	\$449	\$512	\$697
35-39	\$217	\$263	\$480	\$481	\$527	\$744
40-44	\$258	\$317	\$575	\$522	\$581	\$839
45-49	\$319	\$339	\$658	\$583	\$603	\$922
50-54	\$413	\$386	\$799	\$677	\$650	\$1,063
55-59	\$536	\$463	\$999	\$800	\$727	\$1,263
60-64	\$754	\$587	\$1,341	\$1,018	\$851	\$1,605
65+***	\$806	\$658	\$1,464	\$1,070	\$922	\$1,728

First Dollar PPO 35

Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$240	\$240	N/A	N/A	N/A	N/A
1	\$144	\$144	N/A	N/A	N/A	N/A
2-18	\$96	\$96	\$192	\$288	\$288	\$384
19-24	\$101	\$145	\$246	\$293	\$337	\$438
25-29	\$117	\$167	\$284	\$309	\$359	\$476
30-34	\$136	\$182	\$318	\$328	\$374	\$510
35-39	\$161	\$195	\$356	\$353	\$387	\$548
40-44	\$193	\$237	\$430	\$385	\$429	\$622
45-49	\$239	\$255	\$494	\$431	\$447	\$686
50-54	\$311	\$291	\$602	\$503	\$483	\$794
55-59	\$407	\$351	\$758	\$599	\$543	\$950
60-64	\$574	\$447	\$1,021	\$766	\$639	\$1,213
65+***	\$614	\$501	\$1,115	\$806	\$693	\$1,307

Monthly Dental Rates^{††}

Single	Couple	Parent & Child(ren)	Family
\$14	\$28	\$41	\$55

Your rates are guaranteed not to increase for 12 months from your effective date once you've been accepted for coverage. *

- * Rates are subject to increase upon underwriting review.
- ** Couple and Family rates are based on the age of the oldest spouse.
- *** Age 65+ rates are not available to new applicants.
- † Dental is offered only if medical coverage is obtained.

Investment services are independently offered through JPMorgan Institutional Investors, Inc., a subsidiary of JPMorgan Chase Bank. For more information about Aetna plans, refer to www.aetna.com.

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Si usted necesita este material en otro lenguaje, por favor llame a Servicios al Miembro al 1-866-565-1236.

Upon request, we will provide you with rates at a different underwriting level.

This material is for information only. Plans may be subject to medical underwriting or other restrictions. Rates and benefits vary by location.

Rates are subject to change based on rate increases implemented to the whole book of business in accordance with state laws and regulations based on your medical history, Aetna's underwriting guidelines and any optional benefits selected. Information is subject to change. Health insurance plans contain exclusions and limitations.