

Monthly rates for active plans

individuals and families

Effective January 1, 2011—December 31, 2011

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How to determine your monthly rate:

- STEP 1:** Choose one of the deductible amounts available for the plan in which you wish to enroll (only one plan per application may be selected). For WiseChoices, your family deductible amount will be 3x the individual deductible amount.
- STEP 2:** Identify the individual rate or family rate (for WiseSavings) for the benefit plan based on the chosen deductible amount, your current age range and tobacco use. Circle the appropriate monthly rate.
- STEP 3:** Repeat step 2 for each person who will be covered under this plan.
- STEP 4:** Add up all of the circled amounts. This is your total monthly rate for the plan you selected.

To calculate your total...

You \$ _____
 + Spouse \$ _____
 + Child \$ _____
 + Child \$ _____
 + Child \$ _____
 + Additional Child
 (if applicable) \$ _____
 = Total Rate \$ _____



Notes:

- To qualify for non-smoker rate, an individual must not have used any tobacco product during the past 12 months.
- Eligible family members include you, your spouse, and your children under age 26.

WiseSimplicity™

\$10,000 DEDUCTIBLE

AGE BAND	NON-SMOKER	SMOKER
<25	\$62	\$71
25-29	69	80
30-34	80	93
35-39	95	111
40-44	112	132
45-49	141	163
50-54	173	201
55-59	201	234
60-64	228	266
65>	228	266
Per Child [†]	\$50	

WiseEssentials™ Rx

AGE BAND	\$1,850 DEDUCTIBLE		\$2,500 DEDUCTIBLE		\$3,500 DEDUCTIBLE	
	NON-SMOKER	SMOKER	NON-SMOKER	SMOKER	NON-SMOKER	SMOKER
<25	\$126	\$148	\$108	\$126	\$96	\$114
25-29	144	166	122	142	110	128
30-34	165	191	140	162	126	146
35-39	197	230	168	196	151	176
40-44	231	271	197	231	177	208
45-49	291	336	248	287	223	258
50-54	356	414	304	354	273	318
55-59	414	480	354	410	318	368
60-64	472	552	403	470	360	422
65>	472	552	403	470	360	422
Per Child [†]	\$107		\$90		\$81	

WiseEssentials™ Copay

AGE BAND	\$5,000 DEDUCTIBLE		\$7,500 DEDUCTIBLE	
	NON-SMOKER	SMOKER	NON-SMOKER	SMOKER
<25	\$86	\$101	\$70	\$83
25-29	97	113	81	92
30-34	112	131	91	107
35-39	135	157	109	128
40-44	158	185	129	152
45-49	199	229	162	186
50-54	243	283	198	230
55-59	283	329	230	268
60-64	322	376	262	307
65>	322	376	262	307
Per Child [†]	\$71		\$59	

WiseSavings™ Individual HSA

AGE BAND	\$1,840 DEDUCTIBLE		\$3,000 DEDUCTIBLE	
	NON-SMOKER	SMOKER	NON-SMOKER	SMOKER
<25	\$144	\$168	\$113	\$133
25-29	163	189	127	149
30-34	188	217	149	174
35-39	224	262	179	206
40-44	264	309	211	245
45-49	332	383	263	306
50-54	405	472	321	374
55-59	472	548	377	436
60-64	537	628	423	498
65>	537	628	423	498
Per Child [†]	Not Applicable		Not Applicable	

WiseSavings™ Family HSA

AGE BAND	\$3,680 DEDUCTIBLE		\$6,000 DEDUCTIBLE	
	NON-SMOKER	SMOKER	NON-SMOKER	SMOKER
<25	\$106	\$125	\$88	\$102
25-29	120	140	97	113
30-34	139	161	113	132
35-39	166	193	134	158
40-44	195	228	159	187
45-49	245	283	200	231
50-54	300	349	245	286
55-59	349	405	286	332
60-64	397	465	323	378
65>	397	465	323	378
Per Child [†]	\$90		\$72	

WiseChoices™ Prime

\$1,500 DEDUCTIBLE

AGE BAND	NON-SMOKER	SMOKER
<25	\$203	\$238
25-29	231	267
30-34	265	308
35-39	318	370
40-44	372	436
45-49	468	541
50-54	573	667
55-59	667	774
60-64	759	888
65>	759	888
Per Child [†]	\$171	

[†] Applies to dependent children applying on the same plan as a parent or legal guardian.