

CoverColorado

PPO Monthly Premium Discount Rates: Annual Incomes Between \$40,000 and \$50,000

Effective January 1, 2009 through December 31, 2009

Calculating Your Monthly Premium

1. Select the deductible of the plan you want to purchase: \$1,000, \$1,500, \$2,000, HSA \$2,000, \$3,000, \$5,000, \$7,500 or \$10,000
2. In the appropriate Base Rate table below find the age bracket that contains your current age.
3. Look to the right of your age bracket and select the Base Rate for your gender and smoking status.
4. In the County Area Factors table to the right, find the County you live in and its Area Factor.
5. Multiply the appropriate County Area Factor by the appropriate Base Rate and the result is your monthly premium.

Base Rates

\$1,000 In-network/\$2,000 Out-of-network Deductible					HSA-eligible \$2,000 Deductible with Integrated Pharmacy				
Age	Male		Female		Age	Male		Female	
	Non smoker	Smoker	Non smoker	Smoker		Non smoker	Smoker	Non smoker	Smoker
0 - 19	\$151.03	\$191.54	\$151.03	\$191.54	0 - 19	\$100.19	\$127.05	\$100.19	\$127.05
20 - 24	\$144.08	\$182.72	\$242.01	\$306.89	20 - 24	\$95.60	\$121.22	\$160.54	\$203.59
25 - 29	\$165.81	\$210.26	\$302.96	\$384.15	25 - 29	\$110.00	\$139.49	\$200.97	\$254.84
30 - 34	\$188.91	\$239.54	\$320.94	\$406.98	30 - 34	\$125.31	\$158.90	\$212.91	\$269.97
35 - 39	\$224.71	\$284.96	\$352.68	\$447.24	35 - 39	\$149.07	\$189.03	\$233.98	\$296.69
40 - 44	\$274.71	\$348.37	\$402.42	\$510.33	40 - 44	\$182.24	\$231.09	\$266.95	\$338.51
45 - 49	\$346.15	\$438.94	\$457.73	\$580.44	45 - 49	\$229.62	\$291.16	\$303.63	\$385.04
50 - 54	\$443.92	\$562.91	\$532.25	\$674.94	50 - 54	\$294.49	\$373.42	\$353.09	\$447.73
55 - 59	\$591.14	\$749.60	\$640.72	\$812.46	55 - 59	\$392.16	\$497.30	\$425.04	\$538.95
60 - 64	\$755.88	\$958.49	\$745.90	\$945.84	60 - 64	\$501.42	\$635.83	\$494.82	\$627.48

\$1,500 In-network/\$3,000 Out-of-network Deductible					\$3,000 In-network/\$6,000 Out-of-network Deductible				
Age	Male		Female		Age	Male		Female	
	Non smoker	Smoker	Non smoker	Smoker		Non smoker	Smoker	Non smoker	Smoker
0 - 19	\$134.28	\$170.28	\$134.28	\$170.28	0 - 19	\$94.57	\$119.93	\$94.57	\$119.93
20 - 24	\$128.13	\$162.47	\$215.16	\$272.85	20 - 24	\$90.24	\$114.43	\$151.54	\$192.17
25 - 29	\$147.43	\$186.95	\$269.34	\$341.54	25 - 29	\$103.84	\$131.67	\$189.70	\$240.55
30 - 34	\$167.94	\$212.96	\$285.34	\$361.82	30 - 34	\$118.28	\$149.99	\$200.97	\$254.84
35 - 39	\$199.79	\$253.34	\$313.59	\$397.63	35 - 39	\$140.72	\$178.43	\$220.87	\$280.06
40 - 44	\$244.24	\$309.72	\$357.77	\$453.68	40 - 44	\$172.02	\$218.14	\$251.98	\$319.54
45 - 49	\$307.74	\$390.22	\$406.94	\$516.04	45 - 49	\$216.75	\$274.84	\$286.61	\$363.45
50 - 54	\$394.69	\$500.47	\$473.22	\$600.06	50 - 54	\$277.98	\$352.49	\$333.30	\$422.63
55 - 59	\$525.59	\$666.49	\$569.65	\$722.32	55 - 59	\$370.18	\$469.42	\$401.21	\$508.74
60 - 64	\$672.02	\$852.16	\$663.17	\$840.97	60 - 64	\$473.31	\$600.19	\$467.08	\$592.30

\$2,000 In-network/\$4,000 Out-of-network Deductible					\$5,000 In-network/\$10,000 Out-of-network Deductible				
Age	Male		Female		Age	Male		Female	
	Non smoker	Smoker	Non smoker	Smoker		Non smoker	Smoker	Non smoker	Smoker
0 - 19	\$116.32	\$147.50	\$116.32	\$147.50	0 - 19	\$77.21	\$97.91	\$77.21	\$97.91
20 - 24	\$110.99	\$140.73	\$186.38	\$236.35	20 - 24	\$73.67	\$93.42	\$123.71	\$156.89
25 - 29	\$127.71	\$161.94	\$233.31	\$295.85	25 - 29	\$84.78	\$107.50	\$154.88	\$196.38
30 - 34	\$145.47	\$184.48	\$247.17	\$313.42	30 - 34	\$96.56	\$122.45	\$164.07	\$208.04
35 - 39	\$173.07	\$219.45	\$271.64	\$344.44	35 - 39	\$114.88	\$145.66	\$180.30	\$228.64
40 - 44	\$211.57	\$268.28	\$309.91	\$392.99	40 - 44	\$140.44	\$178.10	\$205.71	\$260.87
45 - 49	\$266.58	\$338.02	\$352.50	\$447.01	45 - 49	\$176.96	\$224.38	\$233.99	\$296.72
50 - 54	\$341.89	\$433.52	\$409.92	\$519.79	50 - 54	\$226.95	\$287.77	\$272.11	\$345.03
55 - 59	\$455.28	\$577.33	\$493.45	\$625.69	55 - 59	\$302.20	\$383.21	\$327.53	\$415.35
60 - 64	\$582.12	\$738.16	\$574.45	\$728.47	60 - 64	\$386.41	\$489.97	\$381.33	\$483.55

\$7,500 In-network/\$15,000 Out-of-network Deductible					\$10,000 In-network/\$20,000 Out-of-network Deductible				
Age	Male		Female		Age	Male		Female	
	Non smoker	Smoker	Non smoker	Smoker		Non smoker	Smoker	Non smoker	Smoker
0 - 19	\$67.33	\$85.38	\$67.33	\$85.38	0 - 19	\$59.96	\$76.03	\$59.96	\$76.03
20 - 24	\$64.25	\$81.47	\$107.89	\$136.82	20 - 24	\$57.21	\$72.55	\$96.07	\$121.83
25 - 29	\$73.93	\$93.75	\$135.07	\$171.26	25 - 29	\$65.83	\$83.48	\$120.27	\$152.50
30 - 34	\$84.20	\$106.79	\$143.09	\$181.43	30 - 34	\$74.98	\$95.09	\$127.41	\$161.55
35 - 39	\$100.19	\$127.03	\$157.23	\$199.39	35 - 39	\$89.21	\$113.11	\$140.01	\$177.55
40 - 44	\$122.48	\$155.31	\$179.40	\$227.50	40 - 44	\$109.06	\$138.30	\$159.74	\$202.58
45 - 49	\$154.32	\$195.68	\$204.06	\$258.76	45 - 49	\$137.42	\$174.24	\$181.71	\$230.42
50 - 54	\$197.92	\$250.96	\$237.30	\$300.89	50 - 54	\$176.24	\$223.47	\$211.31	\$267.93
55 - 59	\$263.54	\$334.19	\$285.63	\$362.22	55 - 59	\$234.67	\$297.58	\$254.34	\$322.54
60 - 64	\$336.98	\$427.29	\$332.55	\$421.69	60 - 64	\$300.07	\$380.48	\$296.12	\$375.50

Calculation of rates - Example: \$7,500 deductible, 40 years old, Female, Non-smoker, Park county
 $\$179.40 \times 1.02$ (Park county) = \$182.99 monthly premium rate

County	Area Factor
Adams	1.02
Alamosa	0.96
Arapahoe	1.02
Archuleta	0.96
Baca	0.96
Bent	0.96
Boulder	0.96
Broomfield	1.02
Chaffee	0.96
Cheyenne	0.96
Clear Creek	1.02
Conejos	0.96
Costilla	0.96
Crowley	0.96
Custer	0.96
Delta	0.96
Denver	1.02
Dolores	1.02
Douglas	1.09
Eagle	1.09
El Paso	0.96
Elbert	1.06
Fronton	1.02
Garfield	1.06
Gilpin	1.02
Grand	0.96
Gunnison	1.06
Hinsdale	0.96
Huerfano	0.96
Jackson	1.06
Jefferson	1.02
Kiowa	0.96
Kit Carson	0.96
Lake	1.06
La Plata	0.96
Larimer	1.02
Las Animas	0.96
Lincoln	0.96
Logan	1.06
Mesa	0.96
Mineral	0.96
Moffat	1.06
Montezuma	0.96
Montrose	0.96
Morgan	1.06
Otero	0.96
Ouray	0.96
Park	1.02
Phillips	1.06
Pitkin	1.09
Prowers	0.96
Pueblo	0.96
Rio Blanco	0.96
Rio Grande	0.96
Routt	1.06
Saguache	0.96
San Juan	0.96
San Miguel	0.96
Sedgwick	1.06
Summit	1.06
Teller	1.02
Washington	1.06
Weld	1.02
Yuma	1.06

Notes

1. Coverage after age 64 is only available if you are not eligible for Medicare. Call 303-863-1960 for more rates.
2. Select the smoker rate if you have used any tobacco product within the last 12 months.

PPO Monthly Premium Discount Rates: Annual Incomes Less Than \$40,000

Effective January 1, 2009 through December 31, 2009

Calculating Your Monthly Premium

1. Select the deductible of the plan you want to purchase: \$1,000, \$1,500, \$2,000, HSA \$2,000, \$3,000, \$5,000, \$7,500 or \$10,000
2. In the appropriate Base Rate table below find the age bracket that contains your current age.
3. Look to the right of your age bracket and select the Base Rate for your gender and smoking status.
4. In the County Area Factors table to the right, find the County you live in and its Area Factor.
5. Multiply the appropriate County Area Factor by the appropriate Base Rate and the result is your monthly premium.

County Factors

County	Area Factor
Adams	1.02
Alamosa	0.96
Arapahoe	1.02
Archuleta	0.96
Baca	0.96
Bent	0.96
Boulder	0.96
Broomfield	1.02
Chaffee	0.96
Cheyenne	0.96
Clear Creek	1.02
Conejos	0.96
Costilla	0.96
Crowley	0.96
Custer	0.96
Delta	0.96
Denver	1.02
Dolores	1.02
Douglas	1.09
Eagle	1.09
El Paso	0.96
Elbert	1.06
Fremont	1.02
Garfield	1.06
Gilpin	1.02
Grand	0.96
Gunnison	1.06
Hinsdale	0.96
Huerfano	0.96
Jackson	1.06
Jefferson	1.02
Kiowa	0.96
Kit Carson	0.96
Lake	1.06
La Plata	0.96
Larimer	1.02
Las Animas	0.96
Lincoln	0.96
Logan	1.06
Mesa	0.96
Mineral	0.96
Moffat	1.06
Montezuma	0.96
Montrose	0.96
Morgan	1.06
Otero	0.96
Ouray	0.96
Park	1.02
Phillips	1.06
Pitkin	1.09
Prowers	0.96
Pueblo	0.96
Rio Blanco	0.96
Rio Grande	0.96
Routt	1.06
Saguache	0.96
San Juan	0.96
San Miguel	0.96
Sedgwick	1.06
Summit	1.06
Teller	1.02
Washington	1.06
Weld	1.02
Yuma	1.06

Base Rates

\$1,000 In-network/\$2,000 Out-of-network Deductible					HSA-eligible \$2,000 Deductible with Integrated Pharmacy				
Age	Male		Female		Age	Male		Female	
	Nonsmoker	Smoker	Nonsmoker	Smoker		Nonsmoker	Smoker	Nonsmoker	Smoker
0 - 19	\$132.49	\$132.49	\$168.02	\$168.02	0 - 19	\$87.89	\$87.89	\$111.45	\$111.45
20 - 24	\$126.39	\$212.29	\$160.28	\$269.20	20 - 24	\$83.86	\$140.83	\$106.34	\$178.59
25 - 29	\$145.44	\$265.75	\$184.44	\$336.98	25 - 29	\$96.50	\$176.29	\$122.36	\$223.54
30 - 34	\$165.71	\$281.53	\$210.12	\$357.00	30 - 34	\$109.92	\$186.76	\$139.39	\$236.82
35 - 39	\$197.12	\$309.37	\$249.97	\$392.31	35 - 39	\$130.77	\$205.25	\$165.81	\$260.25
40 - 44	\$240.97	\$353.00	\$305.59	\$447.65	40 - 44	\$159.86	\$234.17	\$202.71	\$296.94
45 - 49	\$303.64	\$401.52	\$385.03	\$509.16	45 - 49	\$201.42	\$266.35	\$255.40	\$337.75
50 - 54	\$389.40	\$466.89	\$493.78	\$592.05	50 - 54	\$258.33	\$309.73	\$327.56	\$392.75
55 - 59	\$518.54	\$562.03	\$657.54	\$712.69	55 - 59	\$344.00	\$372.84	\$436.22	\$472.77
60 - 64	\$663.06	\$654.30	\$840.78	\$829.68	60 - 64	\$439.85	\$434.05	\$557.75	\$550.42

\$1,500 In-network/\$3,000 Out-of-network Deductible					\$3,000 In-network/\$6,000 Out-of-network Deductible				
Age	Male		Female		Age	Male		Female	
	Nonsmoker	Smoker	Nonsmoker	Smoker		Nonsmoker	Smoker	Nonsmoker	Smoker
0 - 19	\$117.79	\$149.37	\$117.79	\$149.37	0 - 19	\$82.96	\$105.20	\$82.96	\$105.20
20 - 24	\$112.39	\$142.52	\$188.74	\$239.34	20 - 24	\$79.16	\$100.38	\$132.93	\$168.57
25 - 29	\$129.33	\$163.99	\$236.26	\$299.59	25 - 29	\$91.09	\$115.50	\$166.40	\$211.01
30 - 34	\$147.31	\$186.81	\$250.30	\$317.39	30 - 34	\$103.76	\$131.57	\$176.29	\$223.54
35 - 39	\$175.26	\$222.23	\$275.08	\$348.80	35 - 39	\$123.44	\$156.52	\$193.74	\$245.66
40 - 44	\$214.25	\$271.68	\$313.83	\$397.97	40 - 44	\$150.90	\$191.35	\$221.04	\$280.29
45 - 49	\$269.95	\$342.30	\$356.96	\$452.66	45 - 49	\$190.13	\$241.09	\$251.41	\$318.82
50 - 54	\$346.22	\$439.01	\$415.11	\$526.37	50 - 54	\$243.84	\$309.20	\$292.37	\$370.73
55 - 59	\$461.04	\$584.64	\$499.69	\$633.61	55 - 59	\$324.72	\$411.77	\$351.94	\$446.26
60 - 64	\$589.49	\$737.69	\$581.73	\$747.51	60 - 64	\$415.19	\$526.48	\$409.72	\$519.56

\$2,000 In-network/\$4,000 Out-of-network Deductible					\$5,000 In-network/\$10,000 Out-of-network Deductible				
Age	Male		Female		Age	Male		Female	
	Nonsmoker	Smoker	Nonsmoker	Smoker		Nonsmoker	Smoker	Nonsmoker	Smoker
0 - 19	\$102.03	\$129.39	\$102.03	\$129.39	0 - 19	\$67.73	\$85.88	\$67.73	\$85.88
20 - 24	\$97.36	\$123.45	\$163.49	\$207.33	20 - 24	\$64.63	\$81.95	\$108.52	\$137.62
25 - 29	\$112.03	\$142.06	\$204.66	\$259.52	25 - 29	\$74.37	\$94.30	\$135.86	\$172.26
30 - 34	\$127.61	\$161.82	\$216.82	\$274.93	30 - 34	\$84.70	\$107.41	\$143.92	\$182.49
35 - 39	\$151.81	\$192.50	\$238.28	\$302.14	35 - 39	\$100.77	\$127.77	\$158.15	\$200.56
40 - 44	\$185.59	\$235.34	\$271.85	\$344.73	40 - 44	\$123.19	\$156.22	\$180.45	\$228.84
45 - 49	\$233.84	\$296.51	\$309.21	\$392.11	45 - 49	\$155.23	\$196.83	\$205.26	\$260.28
50 - 54	\$299.90	\$380.28	\$359.58	\$455.96	50 - 54	\$199.08	\$252.43	\$238.69	\$302.66
55 - 59	\$399.37	\$506.43	\$432.85	\$548.85	55 - 59	\$265.09	\$336.15	\$287.31	\$364.35
60 - 64	\$510.64	\$639.01	\$503.91	\$647.51	60 - 64	\$338.96	\$429.80	\$334.50	\$424.17

\$7,500 In-network/\$15,000 Out-of-network Deductible					\$10,000 In-network/\$20,000 Out-of-network Deductible				
Age	Male		Female		Age	Male		Female	
	Nonsmoker	Smoker	Nonsmoker	Smoker		Nonsmoker	Smoker	Nonsmoker	Smoker
0 - 19	\$59.06	\$74.90	\$59.06	\$74.90	0 - 19	\$52.59	\$66.69	\$52.59	\$66.69
20 - 24	\$56.36	\$71.47	\$94.64	\$120.02	20 - 24	\$50.19	\$63.64	\$84.27	\$106.87
25 - 29	\$64.85	\$82.24	\$118.48	\$150.23	25 - 29	\$57.75	\$73.23	\$105.50	\$133.77
30 - 34	\$73.86	\$93.67	\$125.51	\$159.15	30 - 34	\$65.77	\$83.41	\$111.76	\$141.71
35 - 39	\$87.88	\$111.43	\$137.92	\$174.90	35 - 39	\$78.26	\$99.22	\$122.81	\$155.74
40 - 44	\$107.43	\$136.24	\$157.36	\$199.56	40 - 44	\$95.67	\$121.32	\$140.13	\$177.70
45 - 49	\$135.37	\$171.65	\$179.00	\$226.98	45 - 49	\$120.54	\$152.84	\$159.39	\$202.12
50 - 54	\$173.61	\$220.14	\$208.16	\$263.94	50 - 54	\$154.59	\$196.03	\$185.36	\$235.03
55 - 59	\$231.18	\$293.15	\$250.56	\$317.74	55 - 59	\$205.85	\$261.04	\$223.11	\$282.93
60 - 64	\$295.60	\$369.91	\$291.71	\$374.81	60 - 64	\$263.22	\$333.76	\$259.76	\$329.38

Calculation of rates - Example: \$7,500 deductible, 40 years old, Female, Non-smoker, Park county
 $\$157.36 \times 1.02$ (Park county) = \$160.51 monthly premium rate

Notes

1. Coverage after age 64 is only available if you are not eligible for Medicare. Call 303-863-1960 for more rates.
2. Select the smoker rate if you have used any tobacco product within the last 12 months.