



Revised 12/08

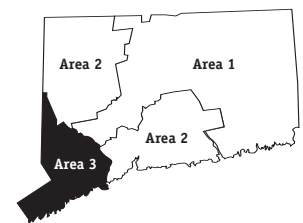
## HMO 25/35 Hospital Copay \$500

(HMO-0A-25-35-AFOA)

All policyholders may be subject to a rate increase at their renewal date.  
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### Area 3 (Fairfield County)

Fairfield County: Bethel, Bridgeport, Brookfield, Danbury, Darien, Easton, Fairfield, Greenwich, Monroe, New Canaan, New Fairfield, Newtown, Norwalk, Shelton, Sherman, Stamford, Stratford, Redding, Ridgefield, Trumbull, Weston, Westport, Wilton



### 10-20-35 and \$1,000 Rx Benefit Max

Age	Individual Male	Individual Female	Individual +1 Dependent	Family
65	\$1,263.39	\$1,118.03	\$2,181.56	\$2,491.81
66	\$1,330.96	\$1,156.78	\$2,282.60	\$2,572.35
67	\$1,398.55	\$1,195.55	\$2,383.64	\$2,652.93
68	\$1,440.50	\$1,231.43	\$2,455.15	\$2,732.53
69	\$1,483.70	\$1,268.34	\$2,528.79	\$2,814.49
70+	\$1,528.23	\$1,306.41	\$2,604.69	\$2,898.92
Medicare Prime	\$559.93	\$559.93	\$1,378.30	\$2,218.21

### 10-20-35 and \$2,000 Rx Benefit Max

Age	Individual Male	Individual Female	Individual +1 Dependent	Family
65	\$1,298.18	\$1,148.80	\$2,241.63	\$2,560.42
66	\$1,367.61	\$1,188.64	\$2,345.45	\$2,643.18
67	\$1,437.06	\$1,228.47	\$2,449.28	\$2,725.98
68	\$1,480.17	\$1,265.33	\$2,522.75	\$2,807.78
69	\$1,524.56	\$1,303.27	\$2,598.43	\$2,891.99
70+	\$1,570.32	\$1,342.39	\$2,676.42	\$2,978.75
Medicare Prime	\$575.35	\$575.35	\$1,416.25	\$2,279.29

### 10-20-35 and \$3,000 Rx Benefit Max

Age	Individual Male	Individual Female	Individual +1 Dependent	Family
65	\$1,315.25	\$1,163.92	\$2,271.10	\$2,594.09
66	\$1,385.60	\$1,204.27	\$2,376.30	\$2,677.93
67	\$1,455.96	\$1,244.63	\$2,481.49	\$2,761.83
68	\$1,499.63	\$1,281.97	\$2,555.92	\$2,844.69
69	\$1,544.61	\$1,320.41	\$2,632.60	\$2,930.03
70+	\$1,590.97	\$1,360.04	\$2,711.61	\$3,017.91
Medicare Prime	\$582.91	\$582.91	\$1,434.88	\$2,309.26

### 15-25-40 and \$1,000 Rx Benefit Max

Age	Individual Male	Individual Female	Individual +1 Dependent	Family
65	\$1,251.65	\$1,107.64	\$2,161.29	\$2,468.66
66	\$1,318.61	\$1,146.05	\$2,261.39	\$2,548.46
67	\$1,385.57	\$1,184.45	\$2,361.51	\$2,628.30
68	\$1,427.12	\$1,219.99	\$2,432.35	\$2,707.16
69	\$1,469.92	\$1,256.56	\$2,505.31	\$2,788.36
70+	\$1,514.05	\$1,294.28	\$2,580.51	\$2,872.00
Medicare Prime	\$554.73	\$554.73	\$1,365.51	\$2,197.61

### 15-25-40 and \$2,000 Rx Benefit Max

Age	Individual Male	Individual Female	Individual +1 Dependent	Family
65	\$1,280.64	\$1,133.28	\$2,211.34	\$2,525.82
66	\$1,349.14	\$1,172.58	\$2,313.76	\$2,607.46
67	\$1,417.65	\$1,211.88	\$2,416.18	\$2,689.15
68	\$1,460.17	\$1,248.23	\$2,488.66	\$2,769.83
69	\$1,503.96	\$1,285.66	\$2,563.32	\$2,852.92
70+	\$1,549.10	\$1,324.25	\$2,640.25	\$2,938.49
Medicare Prime	\$567.57	\$567.57	\$1,397.12	\$2,248.49

### 15-25-40 and \$3,000 Rx Benefit Max

Age	Individual Male	Individual Female	Individual +1 Dependent	Family
65	\$1,294.45	\$1,145.51	\$2,235.20	\$2,553.07
66	\$1,363.69	\$1,185.23	\$2,338.72	\$2,635.59
67	\$1,432.94	\$1,224.95	\$2,442.25	\$2,718.16
68	\$1,475.92	\$1,261.70	\$2,515.51	\$2,799.72
69	\$1,520.18	\$1,299.52	\$2,590.97	\$2,883.69
70+	\$1,565.81	\$1,338.53	\$2,668.73	\$2,970.20
Medicare Prime	\$573.70	\$573.70	\$1,412.19	\$2,272.74



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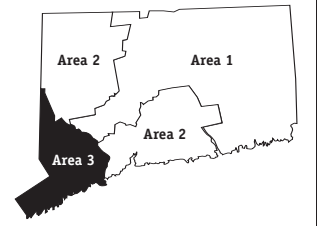
**HMO 30/45 Hospital Copay \$500 w/Radiology Copay**

(HMO-OA-30-45-AJEA)

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**20-50%-50% and \$3,000 Rx Benefit Max**

Age	Individual Male	Individual Female	Individual +1 Dependent	Family
65	\$1,176.82	\$1,041.42	\$2,032.09	\$2,321.08
66	\$1,239.78	\$1,077.53	\$2,126.21	\$2,396.11
67	\$1,302.74	\$1,113.64	\$2,220.34	\$2,471.18
68	\$1,341.80	\$1,147.06	\$2,286.93	\$2,545.32
69	\$1,382.05	\$1,181.45	\$2,355.55	\$2,621.67
70+	\$1,423.53	\$1,216.91	\$2,426.24	\$2,700.31
Medicare				
Prime	\$521.58	\$521.58	\$1,283.88	\$2,066.23



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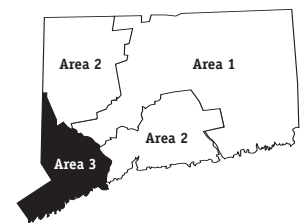
## HMO Hospital Deductible \$2,000 Individual/\$4,000 Family

(HMO-OA-25-35-DFPA)

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### 10-20-35 and \$1,000 Rx Benefit Max

Age	Individual Male	Individual Female	Individual +1 Dependent	Family
65	\$1,189.82	\$1,052.93	\$2,054.52	\$2,346.71
66	\$1,253.47	\$1,089.42	\$2,149.69	\$2,422.56
67	\$1,317.12	\$1,125.93	\$2,244.84	\$2,498.45
68	\$1,356.62	\$1,159.73	\$2,312.19	\$2,573.41
69	\$1,397.31	\$1,194.48	\$2,381.55	\$2,650.62
70+	\$1,439.25	\$1,230.34	\$2,453.03	\$2,730.12
Medicare Prime	\$527.33	\$527.33	\$1,298.05	\$2,089.05

### 10-20-35 and \$2,000 Rx Benefit Max

Age	Individual Male	Individual Female	Individual +1 Dependent	Family
65	\$1,224.61	\$1,083.70	\$2,114.60	\$2,415.32
66	\$1,290.12	\$1,121.28	\$2,212.54	\$2,493.39
67	\$1,355.62	\$1,158.85	\$2,310.48	\$2,571.51
68	\$1,396.30	\$1,193.63	\$2,379.80	\$2,648.66
69	\$1,438.17	\$1,229.41	\$2,451.19	\$2,728.11
70+	\$1,481.33	\$1,266.32	\$2,524.75	\$2,809.94
Medicare Prime	\$542.75	\$542.75	\$1,336.00	\$2,150.13

### 10-20-35 and \$3,000 Rx Benefit Max

Age	Individual Male	Individual Female	Individual +1 Dependent	Family
65	\$1,241.68	\$1,098.82	\$2,144.07	\$2,448.99
66	\$1,308.10	\$1,136.92	\$2,243.39	\$2,528.15
67	\$1,374.52	\$1,175.01	\$2,342.69	\$2,607.36
68	\$1,415.76	\$1,210.27	\$2,412.97	\$2,685.58
69	\$1,458.22	\$1,246.55	\$2,485.35	\$2,766.15
70+	\$1,501.98	\$1,283.97	\$2,559.95	\$2,849.11
Medicare Prime	\$550.31	\$550.31	\$1,354.63	\$2,180.10

### 15-25-40 and \$1,000 Rx Benefit Max

Age	Individual Male	Individual Female	Individual +1 Dependent	Family
65	\$1,178.09	\$1,042.54	\$2,034.26	\$2,323.56
66	\$1,241.11	\$1,078.69	\$2,128.49	\$2,398.68
67	\$1,304.13	\$1,114.83	\$2,222.71	\$2,473.82
68	\$1,343.25	\$1,148.29	\$2,289.39	\$2,548.04
69	\$1,383.53	\$1,182.71	\$2,358.07	\$2,624.48
70+	\$1,425.06	\$1,218.21	\$2,428.84	\$2,703.20
Medicare Prime	\$522.13	\$522.13	\$1,285.25	\$2,068.45

### 15-25-40 and \$2,000 Rx Benefit Max

Age	Individual Male	Individual Female	Individual +1 Dependent	Family
65	\$1,207.07	\$1,068.18	\$2,084.31	\$2,380.72
66	\$1,271.64	\$1,105.22	\$2,180.85	\$2,457.68
67	\$1,336.21	\$1,142.26	\$2,277.38	\$2,534.68
68	\$1,376.30	\$1,176.53	\$2,345.71	\$2,610.72
69	\$1,417.57	\$1,211.81	\$2,416.07	\$2,689.04
70+	\$1,460.11	\$1,248.18	\$2,488.59	\$2,769.69
Medicare Prime	\$534.97	\$534.97	\$1,316.87	\$2,119.33

### 15-25-40 and \$3,000 Rx Benefit Max

Age	Individual Male	Individual Female	Individual +1 Dependent	Family
65	\$1,220.89	\$1,080.41	\$2,108.16	\$2,407.97
66	\$1,286.20	\$1,117.87	\$2,205.81	\$2,485.81
67	\$1,351.50	\$1,155.33	\$2,303.45	\$2,563.68
68	\$1,392.04	\$1,190.00	\$2,372.56	\$2,640.60
69	\$1,433.79	\$1,225.67	\$2,443.73	\$2,719.82
70+	\$1,476.82	\$1,262.46	\$2,517.07	\$2,801.39
Medicare Prime	\$541.10	\$541.10	\$1,331.94	\$2,143.58



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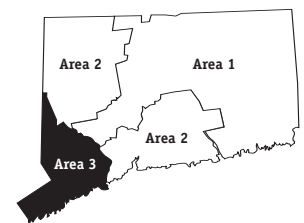
## HMO Upfront Deductible \$1,500 Individual/\$3,000 Family

(HMO-OA-25-35-UFNA)

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### 10-20-35 and \$1,000 Rx Benefit Max

Age	Individual Male	Individual Female	Individual +1 Dependent	Family
65	\$923.43	\$817.18	\$1,594.53	\$1,821.30
66	\$972.82	\$845.51	\$1,668.39	\$1,880.16
67	\$1,022.22	\$873.84	\$1,742.24	\$1,939.06
68	\$1,052.88	\$900.07	\$1,794.50	\$1,997.25
69	\$1,084.46	\$927.04	\$1,848.34	\$2,057.16
70+	\$1,117.01	\$954.88	\$1,903.81	\$2,118.86
Medicare Prime	\$409.26	\$409.26	\$1,007.42	\$1,621.32

### 10-20-35 and \$2,000 Rx Benefit Max

Age	Individual Male	Individual Female	Individual +1 Dependent	Family
65	\$958.22	\$847.96	\$1,654.61	\$1,889.91
66	\$1,009.48	\$877.36	\$1,731.24	\$1,950.99
67	\$1,060.72	\$906.76	\$1,807.88	\$2,012.12
68	\$1,092.55	\$933.97	\$1,862.11	\$2,072.50
69	\$1,125.31	\$961.97	\$1,917.97	\$2,134.66
70+	\$1,159.09	\$990.86	\$1,975.53	\$2,198.69
Medicare Prime	\$424.68	\$424.68	\$1,045.37	\$1,682.40

### 10-20-35 and \$3,000 Rx Benefit Max

Age	Individual Male	Individual Female	Individual +1 Dependent	Family
65	\$975.29	\$863.07	\$1,684.08	\$1,923.58
66	\$1,027.46	\$893.00	\$1,762.09	\$1,985.75
67	\$1,079.62	\$922.92	\$1,840.08	\$2,047.97
68	\$1,112.01	\$950.62	\$1,895.28	\$2,109.41
69	\$1,145.36	\$979.11	\$1,952.14	\$2,172.69
70+	\$1,179.75	\$1,008.51	\$2,010.73	\$2,237.85
Medicare Prime	\$432.24	\$432.24	\$1,064.00	\$1,712.38

### 15-25-40 and \$1,000 Rx Benefit Max

Age	Individual Male	Individual Female	Individual +1 Dependent	Family
65	\$911.69	\$806.80	\$1,574.27	\$1,798.16
66	\$960.47	\$834.77	\$1,647.19	\$1,856.27
67	\$1,009.23	\$862.74	\$1,720.10	\$1,914.43
68	\$1,039.50	\$888.63	\$1,771.70	\$1,971.88
69	\$1,070.68	\$915.27	\$1,824.85	\$2,031.02
70+	\$1,102.82	\$942.75	\$1,879.62	\$2,091.94
Medicare Prime	\$404.06	\$404.06	\$994.63	\$1,600.72

### 15-25-40 and \$2,000 Rx Benefit Max

Age	Individual Male	Individual Female	Individual +1 Dependent	Family
65	\$940.68	\$832.44	\$1,624.32	\$1,855.32
66	\$991.00	\$861.30	\$1,699.55	\$1,915.28
67	\$1,041.31	\$890.17	\$1,774.78	\$1,975.29
68	\$1,072.55	\$916.88	\$1,828.02	\$2,034.55
69	\$1,104.71	\$944.37	\$1,882.86	\$2,095.58
70+	\$1,137.87	\$972.72	\$1,939.37	\$2,158.43
Medicare Prime	\$416.91	\$416.91	\$1,026.24	\$1,651.60

### 15-25-40 and \$3,000 Rx Benefit Max

Age	Individual Male	Individual Female	Individual +1 Dependent	Family
65	\$954.49	\$844.66	\$1,648.17	\$1,882.56
66	\$1,005.56	\$873.95	\$1,724.51	\$1,943.41
67	\$1,056.60	\$903.24	\$1,800.84	\$2,004.30
68	\$1,088.30	\$930.34	\$1,854.87	\$2,064.44
69	\$1,120.94	\$958.23	\$1,910.51	\$2,126.36
70+	\$1,154.59	\$987.00	\$1,967.85	\$2,190.14
Medicare Prime	\$423.03	\$423.03	\$1,041.31	\$1,675.86



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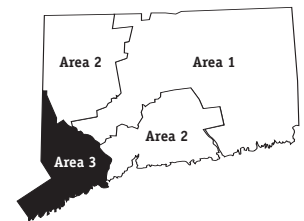
## HMO Upfront Deductible \$2,500 Individual/\$5,000 Family

(HMO-0A-25-35-UFQA)

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### 10-20-35 and \$1,000 Rx Benefit Max

Age	Individual Male	Individual Female	Individual +1 Dependent	Family
65	\$828.74	\$733.39	\$1,431.03	\$1,634.55
66	\$873.07	\$758.81	\$1,497.32	\$1,687.39
67	\$917.41	\$784.24	\$1,563.60	\$1,740.24
68	\$944.93	\$807.79	\$1,610.50	\$1,792.46
69	\$973.26	\$831.99	\$1,658.82	\$1,846.23
70+	\$1,002.47	\$856.97	\$1,708.60	\$1,901.61
Medicare Prime	\$367.30	\$367.30	\$904.12	\$1,455.08

### 10-20-35 and \$2,000 Rx Benefit Max

Age	Individual Male	Individual Female	Individual +1 Dependent	Family
65	\$863.53	\$764.17	\$1,491.10	\$1,703.17
66	\$909.72	\$790.67	\$1,560.17	\$1,758.22
67	\$955.92	\$817.16	\$1,629.24	\$1,813.30
68	\$984.60	\$841.69	\$1,678.11	\$1,867.70
69	\$1,014.12	\$866.92	\$1,728.46	\$1,923.73
70+	\$1,044.56	\$892.95	\$1,780.33	\$1,981.44
Medicare Prime	\$382.72	\$382.72	\$942.08	\$1,516.16

### 10-20-35 and \$3,000 Rx Benefit Max

Age	Individual Male	Individual Female	Individual +1 Dependent	Family
65	\$880.60	\$779.29	\$1,520.58	\$1,736.83
66	\$927.70	\$806.30	\$1,591.02	\$1,792.98
67	\$974.82	\$833.32	\$1,661.45	\$1,849.15
68	\$1,004.06	\$858.33	\$1,711.28	\$1,904.62
69	\$1,034.17	\$884.06	\$1,762.63	\$1,961.76
70+	\$1,065.21	\$910.60	\$1,815.52	\$2,020.60
Medicare Prime	\$390.28	\$390.28	\$960.70	\$1,546.14

### 15-25-40 and \$1,000 Rx Benefit Max

Age	Individual Male	Individual Female	Individual +1 Dependent	Family
65	\$817.01	\$723.01	\$1,410.77	\$1,611.41
66	\$860.71	\$748.07	\$1,476.12	\$1,663.50
67	\$904.43	\$773.14	\$1,541.47	\$1,715.61
68	\$931.55	\$796.35	\$1,587.70	\$1,767.08
69	\$959.48	\$820.21	\$1,635.34	\$1,820.09
70+	\$988.29	\$844.83	\$1,684.42	\$1,874.69
Medicare Prime	\$362.10	\$362.10	\$891.33	\$1,434.48

### 15-25-40 and \$2,000 Rx Benefit Max

Age	Individual Male	Individual Female	Individual +1 Dependent	Family
65	\$845.99	\$748.65	\$1,460.81	\$1,668.57
66	\$891.25	\$774.61	\$1,528.49	\$1,722.50
67	\$936.51	\$800.57	\$1,596.14	\$1,776.47
68	\$964.60	\$824.59	\$1,644.02	\$1,829.76
69	\$993.52	\$849.31	\$1,693.34	\$1,884.65
70+	\$1,023.34	\$874.81	\$1,744.16	\$1,941.18
Medicare Prime	\$374.94	\$374.94	\$922.94	\$1,485.36

### 15-25-40 and \$3,000 Rx Benefit Max

Age	Individual Male	Individual Female	Individual +1 Dependent	Family
65	\$859.81	\$760.88	\$1,484.67	\$1,695.82
66	\$905.80	\$787.26	\$1,553.45	\$1,750.64
67	\$951.80	\$813.64	\$1,622.21	\$1,805.48
68	\$980.35	\$838.06	\$1,670.87	\$1,859.64
69	\$1,009.74	\$863.18	\$1,721.00	\$1,915.43
70+	\$1,040.05	\$889.09	\$1,772.64	\$1,972.89
Medicare Prime	\$381.07	\$381.07	\$938.02	\$1,509.62



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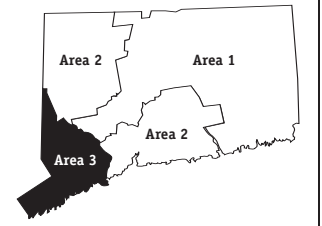
## HMO HDHP \$1,500 Individual/\$3,000 Family

(HMO-HSA-00-00-HDPI/HDQF)

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### 15-25-40 and \$3,000 Rx Benefit Max

Age	Individual Male	Individual Female	Individual +1 Dependent	Family
65	\$822.49	\$727.89	\$1,249.86	\$1,622.30
66	\$866.51	\$753.12	\$1,307.76	\$1,674.77
67	\$910.51	\$778.37	\$1,365.65	\$1,727.24
68	\$937.83	\$801.73	\$1,406.63	\$1,779.04
69	\$965.96	\$825.78	\$1,448.82	\$1,832.41
70+	\$994.94	\$850.55	\$1,492.27	\$1,887.40
Medicare				
Prime	\$353.03	\$353.03	\$869.00	\$1,398.53



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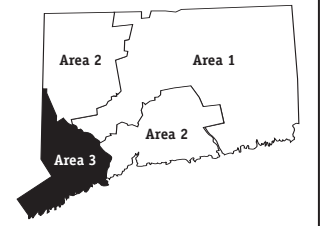
## HMO HDHP \$1,500 Individual/\$3,000 Family

(HMO-HSA-00-00-HDPI/HDQF)

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### 15-25-40 Unlimited

Age	Individual Male	Individual Female	Individual +1 Dependent	Family
65	\$838.91	\$742.41	\$1,274.80	\$1,654.68
66	\$883.82	\$768.14	\$1,333.85	\$1,708.19
67	\$928.69	\$793.90	\$1,392.91	\$1,761.71
68	\$956.56	\$817.73	\$1,434.70	\$1,814.55
69	\$985.25	\$842.27	\$1,477.74	\$1,868.98
70+	\$1,014.80	\$867.53	\$1,522.06	\$1,925.07
Medicare				
Prime	\$360.07	\$360.07	\$886.34	\$1,426.44



Revised 12/08

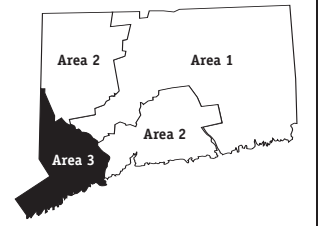
## HMO HDHP \$3,000 Individual/\$6,000 Family

(HMO-HSA-00-00-HDQI/HDRF)

All policyholders may be subject to a rate increase at their renewal date.  
Rates are calculated as of the Applicant's age as of the effective date.

### Area 3 (Fairfield County)

Fairfield County: Bethel, Bridgeport, Brookfield, Danbury, Darien, Easton, Fairfield, Greenwich, Monroe, New Canaan, New Fairfield, Newtown, Norwalk, Shelton, Sherman, Stamford, Stratford, Redding, Ridgefield, Trumbull, Weston, Westport, Wilton



### 15-25-40 and \$3,000 Rx Benefit Max

Age	Individual Male	Individual Female	Individual +1 Dependent	Family
65	\$674.66	\$597.06	\$1,025.20	\$1,330.71
66	\$710.77	\$617.76	\$1,072.70	\$1,373.74
67	\$746.86	\$638.47	\$1,120.19	\$1,416.78
68	\$769.26	\$657.62	\$1,153.80	\$1,459.29
69	\$792.34	\$677.36	\$1,188.42	\$1,503.05
70+	\$816.11	\$697.68	\$1,224.05	\$1,548.15
Medicare				
Prime	\$289.58	\$289.58	\$712.80	\$1,147.17



Revised 5/09

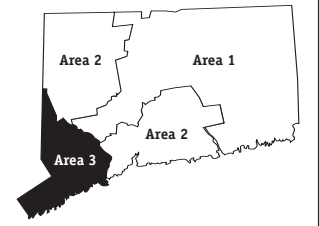
## HMO HDHP \$3,000 Individual/\$6,000 Family

(HMO-HSA-00-00-HDQI/HDRF)

All policyholders may be subject to a rate increase at their renewal date.  
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### Area 3 (Fairfield County)

Fairfield County: Bethel, Bridgeport, Brookfield, Danbury, Darien, Easton, Fairfield, Greenwich, Monroe, New Canaan, New Fairfield, Newtown, Norwalk, Shelton, Sherman, Stamford, Stratford, Redding, Ridgefield, Trumbull, Weston, Westport, Wilton



### 15-25-40 Unlimited

Age	Individual Male	Individual Female	Individual +1 Dependent	Family
65	\$689.23	\$609.95	\$1,047.34	\$1,359.45
66	\$726.12	\$631.09	\$1,095.87	\$1,403.41
67	\$762.99	\$652.25	\$1,144.38	\$1,447.37
68	\$785.87	\$671.83	\$1,178.72	\$1,490.80
69	\$809.46	\$691.99	\$1,214.09	\$1,535.50
70+	\$833.73	\$712.74	\$1,250.48	\$1,581.59
Medicare				
Prime	\$295.83	\$295.83	\$728.19	\$1,171.94



Revised 12/08

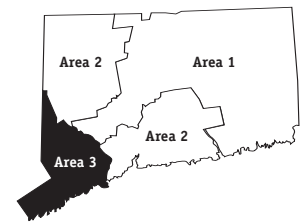
## HMO HDHP \$5,000 Individual/\$10,000 Family

(HMO-HSA-00-00-HDSI/HDTF)

All policyholders may be subject to a rate increase at their renewal date.  
Rates are calculated as of the Applicant's age as of the effective date.

### Area 3 (Fairfield County)

Fairfield County: Bethel, Bridgeport, Brookfield, Danbury, Darien, Easton, Fairfield, Greenwich, Monroe, New Canaan, New Fairfield, Newtown, Norwalk, Shelton, Sherman, Stamford, Stratford, Redding, Ridgefield, Trumbull, Weston, Westport, Wilton



### 15-25-40 and \$3,000 Rx Benefit Max

Age	Individual Male	Individual Female	Individual +1 Dependent	Family
65	\$533.13	\$471.81	\$810.14	\$1,051.55
66	\$561.66	\$488.15	\$847.65	\$1,085.56
67	\$590.18	\$504.53	\$885.19	\$1,119.56
68	\$607.89	\$519.66	\$911.75	\$1,153.14
69	\$626.13	\$535.26	\$939.10	\$1,187.74
70+	\$644.91	\$551.31	\$967.27	\$1,223.38
Medicare				
Prime	\$228.82	\$228.82	\$563.26	\$906.49