

Iowa Comprehensive Health Association (HIPIOWA)

2010 Monthly Individual Premium Rates

<b>Tobacco User</b>										
Plan	\$1,000 Deductible		\$1,500 Deductible		\$2,500 Deductible		\$5,000 Deductible		\$10,000 Deductible	
	Age \ Gender	Male	Female	Male	Female	Male	Female	Male	Female	Male
0 - 17	\$239.16	\$264.21	\$219.54	\$242.54	\$189.89	\$209.78	\$142.77	\$157.73	\$114.80	\$126.83
18	251.45	299.66	230.82	275.07	199.64	237.93	150.11	178.88	120.69	143.84
19	263.72	335.10	242.10	307.62	209.39	266.06	157.46	200.06	126.60	160.85
20	276.50	370.55	253.82	340.16	219.53	294.21	165.06	221.21	132.71	177.86
21	288.78	405.99	265.10	372.69	229.28	322.35	172.40	242.37	138.62	194.87
22	301.05	441.44	276.38	405.23	239.06	350.51	179.73	263.54	144.51	211.89
23	305.79	452.31	280.71	415.22	242.79	359.13	182.55	270.03	146.78	217.10
24	311.48	465.08	285.92	426.93	247.29	369.27	185.96	277.65	149.49	223.23
25	316.67	477.36	290.70	438.20	251.42	379.02	189.05	284.99	152.00	229.13
26	320.45	484.91	294.17	445.16	254.43	385.02	191.31	289.50	153.81	232.76
27	321.87	484.91	295.46	445.16	255.56	385.02	192.15	289.50	154.49	232.76
28	329.52	501.86	302.51	460.71	261.65	398.48	196.73	299.60	158.18	240.89
29	335.31	511.26	307.80	469.32	266.24	405.95	200.18	305.21	160.95	245.40
30	339.68	516.41	311.84	474.08	269.70	410.04	202.80	308.30	163.04	247.89
31	343.59	520.16	315.42	477.51	272.82	413.01	205.14	310.55	164.93	249.68
32	348.48	525.83	319.89	482.70	276.71	417.50	208.04	313.92	167.27	252.39
33	357.20	541.05	327.90	496.68	283.62	429.59	213.24	323.00	171.47	259.71
34	365.94	555.84	335.94	510.27	290.55	441.35	218.48	331.85	175.65	266.82
35	374.72	570.21	344.00	523.46	297.51	452.76	223.71	340.43	179.87	273.71
36	384.47	586.07	352.94	538.02	305.28	465.33	229.53	349.88	184.56	281.31
37	395.22	603.90	362.81	554.37	313.82	479.49	235.95	360.53	189.72	289.88
38	410.96	613.08	377.27	562.80	326.31	486.78	245.34	366.02	197.27	294.27
39	426.72	624.68	391.73	573.45	338.82	495.98	254.76	372.93	204.84	299.84
40	443.96	637.73	407.57	585.44	352.50	506.37	265.05	380.73	213.11	306.12
41	462.18	649.86	424.28	596.57	366.98	515.99	275.93	387.96	221.84	311.93
42	482.85	660.54	443.27	606.39	383.39	524.48	288.26	394.34	231.77	317.06
43	496.74	676.17	456.00	620.73	394.41	536.88	296.55	403.68	238.44	324.57
44	513.57	690.41	471.45	633.78	407.78	548.18	306.59	412.17	246.51	331.40
45	531.42	704.18	487.83	646.44	421.95	559.13	317.25	420.39	255.08	338.01
46	549.83	718.50	504.74	659.60	436.56	570.50	328.25	428.94	263.91	344.90
47	566.81	733.83	520.34	673.67	450.05	582.66	338.39	438.09	272.07	352.23
48	587.78	744.62	539.58	683.55	466.68	591.21	350.90	444.53	282.14	357.41
49	608.36	756.41	558.47	694.38	483.03	600.60	363.20	451.59	292.01	363.09
50	628.61	768.78	577.05	705.74	499.11	610.41	375.27	458.96	301.73	369.02
51	649.94	780.71	596.64	716.69	516.06	619.89	388.01	466.10	311.96	374.73
52	671.90	790.73	616.79	725.90	533.49	627.84	401.12	472.07	322.50	379.56
53	698.46	809.73	641.19	743.33	554.57	642.92	416.97	483.41	335.27	388.68
54	725.18	827.36	665.72	759.50	575.79	656.91	432.93	493.94	348.08	397.14
55	753.08	844.08	691.32	774.87	597.93	670.20	449.58	503.91	361.47	405.15
56	782.13	861.89	717.98	791.21	621.00	684.33	466.92	514.55	375.42	413.70
57	812.85	882.32	746.21	809.96	645.41	700.56	485.27	526.76	390.17	423.50
58	857.15	896.91	786.86	823.37	680.58	712.16	511.71	535.46	411.44	430.52
59	901.95	913.52	827.99	838.61	716.13	725.33	538.47	545.37	432.93	438.48
60	948.26	931.14	870.50	854.79	752.91	739.34	566.10	555.89	455.16	446.96
61	998.60	949.26	916.70	871.41	792.87	753.71	596.16	566.72	479.31	455.64
62	1,054.46	966.87	967.98	887.60	837.23	767.69	629.52	577.23	506.15	464.09
63	1,105.29	984.50	1,014.66	903.75	877.59	781.70	659.85	587.75	530.54	472.56
64	1,158.65	1,003.11	1,063.62	920.87	919.95	796.47	691.71	598.85	556.14	481.49
65+	1,214.00	1,021.23	1,114.46	937.49	963.92	810.86	724.76	609.68	582.72	490.20

**Optional Maternity Rider**

**All Ages, Add: \$314.74 Must Elect Maternity Rider Upon Initial Enrollment.**

Age/Rate is calculated as age upon enrollment, then attained age every January 1st thereafter.

Premium Rates subject to change with a 30-Day written notice.