



# HealthSave Premium Rates

Deductible applies to all services except preventive care.



AGE	\$1,500 SINGLE/\$3,000 FAMILY			\$2,700 SINGLE/\$5,400 FAMILY			\$5,000 SINGLE/\$10,000 FAMILY		
	SINGLE	2-PARTY	FAMILY	SINGLE	2-PARTY	FAMILY	SINGLE	2-PARTY	FAMILY
0 - 19	62	103	163	56	90	151	47	69	137
20 - 24	65	114	175	59	99	162	50	76	147
25 - 29	74	130	216	67	113	201	56	87	182
30 - 34	83	146	264	75	127	245	63	98	222
35 - 39	93	157	300	84	137	278	70	105	252
40 - 44	110	181	350	99	157	324	83	121	294
45 - 49	127	223	395	114	193	366	96	149	331
50 - 54	149	265	430	134	229	399	113	176	361
55 - 59	176	326	472	159	283	437	133	217	396
60 - 64	215	387	543	193	336	504	162	258	456



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	SINGLE	2-PARTY	FAMILY	SINGLE	2-PARTY	FAMILY	SINGLE	2-PARTY	FAMILY
0 - 19	67	112	177	61	97	164	51	75	149
20 - 24	71	124	190	64	107	176	54	83	159
25 - 29	81	141	235	73	123	218	61	94	197
30 - 34	90	159	287	81	138	266	68	106	241
35 - 39	101	171	325	91	148	302	76	114	273
40 - 44	119	196	380	107	170	353	90	131	319
45 - 49	138	242	429	124	210	397	104	161	360
50 - 54	162	287	468	146	249	433	122	191	393
55 - 59	191	354	513	172	307	475	144	236	431
60 - 64	233	421	591	210	365	547	176	280	496



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	SINGLE	2-PARTY	FAMILY	SINGLE	2-PARTY	FAMILY	SINGLE	2-PARTY	FAMILY
0 - 19	74	123	194	67	107	180	56	82	163
20 - 24	78	136	208	70	118	193	59	91	175
25 - 29	88	155	258	80	135	239	67	104	217
30 - 34	99	174	315	89	151	292	75	117	265
35 - 39	111	188	358	100	163	332	84	125	300
40 - 44	131	216	418	118	187	388	99	144	351
45 - 49	152	266	472	136	230	437	114	177	396
50 - 54	178	316	514	160	274	476	134	210	432
55 - 59	210	389	564	189	337	523	159	259	473
60 - 64	256	463	649	231	401	602	193	308	545