Rates shown are monthly premiums, and apply statewide. Rates do not vary based on anyone's location, gender or health status. Carriers <u>may</u> consider age in developing their rates. If only a single rate is shown, age is NOT a rating factor which means th

			a rating factor which m		Under 25	25 to 29	30 to 34	35 to 39	40 to 44	45 to 49	50 to 54	55 to 59	60 to 64	65 years and
		SING	iLE	All Ages	years old	years old	years old	years old	years old	years old	years old	years old	years old	older
			Aetna Health Inc.	\$2,087.60										
		\$15	AmeriHealth HMO Inc.	\$1,491.00										
			Horizon HC	\$986.53										
	su		Aetna Health Inc.	\$1,296.40										
	Options		AmeriHealth HMO Inc.	\$883.00										
cts		\$30	CIGNA Healthcare		\$867.00	\$867.00	\$974.00	\$974.00	\$1,117.00	\$1,117.00	\$1,559.00	\$1,559.00	\$2,655.00	\$2,655.00
Products	ueu		Horizon HC	\$820.97										
	Copayment		Oxford Health Plan		\$399.76	\$446.89	\$520.71	\$566.27	\$625.17	\$658.94	\$749.26	\$860.00	\$1,004.51	\$1,057.92
HMO	ζop	\$50	AmeriHealth HMO Inc.	\$738.00		The HMO Prod	ducts provide c	overage of the	following servi	ces: office visi	ts (preventative	and treatment	related,	
I	Ü	Split	AmeriHealth HMO Inc. \$30/50	\$839.00		including most	medically-nec	essary speciali	st's care), hosp	oital care, prena	**	ity care, immu	nizations and	
		Copay	Horizon HC \$30/50	\$810.26							, and prescription			
			Horizon HC \$50/70	\$788.11		subject to a co					HMO plans wi	th split copaym	nents or	
	Deducti	ble &	Aetna Health Inc.	\$532.70		deductible and	coinsurance r	equirements, c	ontact the carr	ier.				
	Coinsu	rance	Horizon HC	\$510.51										-
			AmeriHealth 70/50%		\$266.33	\$300.99	\$359.70	\$389.61	\$404.23	\$424.02	\$484.40	\$559.42	\$668.70	\$668.70
	Plan	A/50	AmeriHealth w/ rider		\$269.57	\$304.64	\$364.07	\$394.35	\$409.14	\$429.17	\$490.28	\$566.22	\$676.82	\$676.82
ts			Horizon 70/50%		\$296.48	\$331.93	\$392.21	\$421.40	\$432.82	\$447.29	\$506.48	\$579.23	\$685.08	\$797.36
Products			AmeriHealth 90/70%		\$329.06	\$371.86	\$444.39	\$481.38	\$499.42	\$523.87	\$598.46	\$691.14	\$826.16	\$826.16
Pro			Horizon 80/70%		\$312.49	\$349.87	\$413.40	\$444.18	\$456.21	\$471.45	\$533.82	\$610.54	\$722.09	\$840.43
PPO	Plan C (7	70/30%)	Horizon 100/70%		\$419.62	\$469.80	\$555.15	\$596.45	\$612.62	\$633.08	\$716.86	\$819.84	\$969.67	\$1,128.60
₫			Oxford \$15, \$1000		\$418.69	\$468.05	\$545.37	\$593.08	\$654.77	\$690.14	\$784.74	\$900.73	\$1,052.08	\$1,108.02
			Oxford \$30, \$2500		\$321.50	\$359.40	\$418.77	\$455.41	\$502.78	\$529.94	\$602.58	\$691.63	\$807.85	\$850.81
	Plan D (8	30/20%)	Oxford \$30, \$1000		\$454.32	\$507.88	\$591.78	\$643.55	\$710.49	\$748.87	\$851.52	\$977.38	\$1,141.61	\$1,202.31

#### PPO/POS Options:

The PPO (and POS) products provide coverage of all of the same services covered by the HMO and Indemnity plans. An individual may choose to obtain healthcare services through the carrier's network of health care providers, or may go "out-of-network." Individuals typically pay more to go out-of-network because of increased cost-sharing requirements, plus health care providers may charge in excess of what the carrier considers reasonable and customary. In-network providers charge a negotiated rate. For more information about cost-sharing, see the explanation about the Indemnity Products.

AmeriHealth Insurance Co. offers Plan A/50 and Plan C with in-network (IN) and out-of-network (OON) benefits. A/50 70/50: IN=\$2,500 deductible and 70% coinsurance but for \$30 office visits; OON=\$7,500 deductible and 50% coinsurance. Plan C 90/70%: IN=\$2,500 deductible and 90% coinsurance but for \$30 office visits; OON=\$5,000 deductible and 70% coinsurance. AmeriHealth also offers an alternate copayment rider for Plan A/50. Contact the company for more details.

Horizon also offers "Direct Access" plans with in-network (IN) and out-of-network (OON) benefits. Plan A/50 70/50%: IN=\$2500 deductible, 70% coinsurance; OON=\$7500 deductible, 50% coinsurance. Plan C 100/70: IN=\$2500 deductible, 100% coinsurance; OON=\$7500 deductible, 70% coinsurance. Contact Horizon for more details.

Oxford Health Insurance Co. offers Plans C and D with in-network (IN) and out-of-network (OON) benefits. Plan C \$15, \$1000: IN=\$1,000 deductible and 30% coinsurance but for \$15 office visits; OON=\$2000 deductible and 30% coinsurance. Plan C \$30, \$2500: IN=\$2500 deductible and 30% coinsurance but for \$30 office visits; OON=\$5000 deductible and 30% coinsurance. Plan D \$30, \$1000: IN=\$1000 deductible and 20% coinsurance but for \$30 office visits; OON=\$2000 deductible and 20% coinsurance. Contact Oxford for more details.

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			SING	a rating factor which m		Under 25	25 to 29	30 to 34	35 to 39	40 to 44	45 to 49	50 to 54	55 to 59	60 to 64	65 years and
			SiNG	LL	All Ages	years old	years old	years old	years old	years old	years old	years old	years old	years old	older
				Aetna Life Ins. Co.	\$1,329.00										
			\$1,000	Celtic Ins. Co.	\$1,219.00										
	£0%	s		Horizon BCBSNJ	\$1,456.05										
apply.)	50/ anc	ple		Aetna Life Ins. Co.	\$1,093.00										
арк	50 ( sur	ucti	\$2,500	Celtic Ins. Co.	\$1,080.00										
ce	ın A/50 (50/5( coinsurance)	Deductibles	Ψ2,300	Horizon BCBSNJ	\$1,255.06										
coinsurance	Plan A/50 (50/50% coinsurance)	"		Oxford Health Ins Co		\$348.60	\$389.70	\$454.08	\$493.80	\$545.16	\$574.61	\$653.38	\$749.94	\$875.96	\$922.53
insı			\$5,000	Horizon BCBSNJ	\$869.65										
8			\$10,000	Horizon BCBSNJ	\$567.70										•
and				Aetna Life Ins. Co.	\$1,565.00										
les	40% Ce)	es	\$1,000	Celtic Ins. Co.	\$1,528.00						g services: offi				
cţ	Plan B (60/40% coinsurance)	Deductibles		Horizon BCBSNJ	\$2,012.32						e, immunization and lab service:				
npe	B n	gric		Aetna Life Ins. Co.	\$1,356.00						on drugs. Ther				
ŏ	Soi	De	\$2,500	Celtic Ins. Co.	\$1,375.00						whether a serv				
networks. Deductibles				Horizon BCBSNJ	\$1,718.22										
two	\o			Aetna Life Ins. Co.	\$1,784.00		Generally v	ou nay for the	nets of covere	d sarvicas unti	I the stated <b>de</b> d	ductible amour	ntis met (Carr	iers nav for	
o ne	30%	les	\$1,000	Celtic Ins. Co.	\$4,419.00						ot been met.) T		,	' '	
8	C (70/30% surance)	tib		Horizon BCBSNJ	\$2,843.96		•				<b>coinsurance</b> a		,	,	
Products	Plan C (70/30% coinsurance)	Deductibles		Aetna Life Ins. Co.	\$1,534.00						carrier pays 60				
od	Plan (	۵	\$2,500	Celtic Ins. Co.	\$3,352.00		•	r Plan C, the c overed charge		6 and you pay	30%, and for P	ian D, the carri	er pays 80% a	na you pay	
				Horizon BCBSNJ	\$1,762.86		2070 01 1110 0	overed charge							
Indemnity	% _			Aetna Life Ins. Co.	\$3,341.00		After vou no	, the maximum	m aut of nook	at (the deducti	ole plus a speci	find amount of	aninguranan)	ha carriar	
le m	/20°	les	\$1,000	Celtic Ins. Co.	\$6,009.00						using "reasona				
Ĕ	(80/20% rrance)	ctib		Horizon BCBSNJ	\$3,976.67						responsible fo				
	lan D (80/20% coinsurance)	Deductibles		Aetna Life Ins. Co.	\$2,873.00		•	-			•	-	=		
	Plan D coinst	۵	\$2,500	Celtic Ins. Co.	\$5,288.00										
	_			Horizon BCBSNJ	\$2,647.50										

<sup>•</sup>Horizon also offers a \$1,500 and \$2,250 deductible option for Plans C and D. Contact the carrier for details.

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		•	U D/DEN		Under 25	25 to 29 years	30 to 34 years	35 to 39 years	40 to 44 years	45 to 49 years	50 to 54 years	55 to 59 years	60 to 64 years	65 years and
	ADU	JLI & CF	IILD(REN)	All Ages	years old	old	old	old	old	old	old	old	old	older
			Aetna Health Inc.	\$3,761.30										
		\$15	AmeriHealth HMO Inc.	\$2,714.00										
			Horizon HC	\$1,513.26										
	SL		Aetna Health Inc.	\$2,336.10										
	ţi		AmeriHealth HMO Inc.	\$1,607.00										_
cts	Ŏ,	\$30	CIGNA Healthcare		\$1,561.00	\$1,561.00	\$1,754.00	\$1,754.00	\$2,010.00	\$2,010.00	\$2,806.00	\$2,806.00	\$4,779.00	\$4,779.00
Products	Jen		Horizon HC	\$1,259.24										
	Copayment Options		Oxford Health Plan		\$943.25	\$990.38	\$1,064.99	\$1,109.76	\$1,168.66	\$1,202.43	\$1,292.75	\$1,403.49	\$1,548.00	\$1,601.41
НМО	ġ	\$50	AmeriHealth HMO Inc.	\$1,343.00		The HMO Produ	ucts provide cov	erage of the foll	owing services:	office visits (pre	eventative and tre	eatment-related	, including	
I		Split	AmeriHealth HMO Inc. \$30/50	\$1,527.00				, .			ity care, immuniz nd lab services, t		·	
		Copay	Horizon HC \$30/50	\$1,242.86						•	rvices are subjec		·	
			Horizon HC \$50/70	\$1,208.87			ed information a	bout HMO plans	s with split copay	ments or deduc	tible and coinsur	rance requireme	ents, contact	
	Deduct	ible &	Aetna Health Inc.	\$961.80		the carrier.								
	Coinsu	rance	Horizon HC	\$783.05										
			AmeriHealth 70/50%		\$679.09	\$713.73	\$772.44	\$802.37	\$816.98	\$836.77	\$897.14	\$972.18	\$1,081.44	\$1,081.44
	Plan	A/50	AmeriHealth w/ rider		\$687.33	\$722.40	\$781.83	\$812.11	\$826.90	\$846.93	\$908.04	\$983.98	\$1,094.58	\$1,094.58
cts			Horizon 70/50%		\$672.43	\$705.15	\$760.90	\$788.08	\$798.68	\$812.28	\$867.18	\$934.90	\$1,033.11	\$1,315.25
Products			AmeriHealth 90/70%		\$838.66	\$881.46	\$953.99	\$990.98	\$1,009.02	\$1,033.47	\$1,108.06	\$1,200.74	\$1,335.76	\$1,335.76
o.			Horizon 80/70%		\$708.76	\$743.24	\$801.99	\$830.66	\$841.84	\$856.17	\$914.02	\$985.38	\$1,088.90	\$1,386.29
	Plan C (7	70/30%)	Horizon 100/70%		\$951.78	\$998.07	\$1,076.97	\$1,115.46	\$1,130.47	\$1,149.72	\$1,227.39	\$1,323.21	\$1,462.26	\$1,861.58
PPO			Oxford \$15, \$1,000		\$987.92	\$1,037.27	\$1,115.42	\$1,162.31	\$1,224.00	\$1,259.37	\$1,353.97	\$1,469.95	\$1,621.31	\$1,677.24
			Oxford \$30, \$2500		\$758.59	\$796.49	\$856.49	\$892.49	\$939.87	\$967.03	\$1,039.66	\$1,128.72	\$1,244.94	\$1,287.89
	Plan D (8	80/20%)	Oxford \$30, \$1000		\$1,071.99	\$1,125.54	\$1,210.34	\$1,261.22	\$1,328.16	\$1,366.54	\$1,469.19	\$1,595.04	\$1,759.28	\$1,819.97

#### PPO/POS Options:

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Horizon also offers "Direct Access" plans with in-network (IN) and out-of-network (OON) benefits. Plan A/50 70/50%: IN=\$2500 deductible, 70% coinsurance; OON=\$7500 deductible, 50% coinsurance. Plan C 80/70: IN=\$2500 deductible, 80% coinsurance; OON=\$7500 deductible, 70% coinsurance. Plan C 100/70: IN=\$0 deductible, 100% coinsurance; OON=\$7500 deductible, 70% coinsurance. Contact Horizon for more details.

Oxford Health Insurance Co. offers Plans C and D with in-network (IN) and out-of-network (OON) benefits. Plan C \$15, \$1000: IN=\$1,000 deductible and 30% coinsurance but for \$15 office visits; OON=\$2000 deductible and 30% coinsurance. Plan C \$30, \$2500: IN=\$1000 deductible and 30% coinsurance but for \$30 office visits; OON=\$5000 deductible and 30% coinsurance. Plan D \$30, \$1000: IN=\$1000 deductible and 20% coinsurance but for \$30 office visits; OON=\$2000 deductible and 20% coinsurance. Contact Oxford for more details.

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	,		•	IILD(REN)		Under 25	,	30 to 34 years	35 to 39 years	40 to 44 years	,	,	55 to 59 years	60 to 64 years	65 years and
		ADU	LIQUI	IILD(KEN)	All Ages	years old	old	old	old	old	old	old	old	old	older
				Aetna Life Ins. Co.	\$2,295.00										
			\$1,000	Celtic Ins. Co,	\$2,133.00										
	£ 20%	ω l		Horizon BCBSNJ	\$2,579.97										
<u> </u>	an A/50 (50/50% coinsurance)	Deductibles		Aetna Life Ins. Co.	\$1,880.00										
арр	50 ( sura	ucti	\$2,500	Celtic Ins. Co,	\$1,890.00										
Se	A Si	ed	Ψ2,000	Horizon BCBSNJ	\$2,224.04										
ırarı	Plan	-		Oxford Health Ins Co		\$822.54	\$863.63	\$928.70	\$967.74	\$1,019.10	\$1,048.55	\$1,127.31	\$1,223.88	\$1,349.90	\$1,396.47
nsı	_		\$5,000	Horizon BCBSNJ	\$1,540.91										
8			\$10,000	Horizon BCBSNJ	\$1,005.95	_									
and	·°			Aetna Life Ins. Co.	\$2,689.00										
es :	6 6 6	es	\$1,000	Celtic Ins. Co,	\$2,675.00							sits (preventative			
l iii	(60/ ran	gi		Horizon BCBSNJ	\$3,565.87							l-child care, scre atment for menta	0 (	0	
ğ	Plan B (60/40% coinsurance)	Deductibles		Aetna Life Ins. Co.	\$2,293.00							n care providers			
۵	Soi	De	\$2,500	Celtic Ins. Co,	\$2,406.00					s medically nece					
, sx				Horizon BCBSNJ	\$3,044.42										
Š				Aetna Life Ins. Co.	\$3,036.00										
je	% (e)	es	\$1,000	Celtic Ins. Co,	\$7,734.00							<b>ole</b> amount is me			
lå	(70/30% rrance)	it ib		Horizon BCBSNJ	\$5,046.06							nd the carrier eac carrier and you e			
cts	၁ ရ	Deductibles		Aetna Life Ins. Co.	\$2,608.00							charges. For Pla			
npc	Plan coir	De	\$2,500	Celtic Ins. Co,	\$5,865.00		U	,		, , ,		overed charges.	,	1 : 3 = 1 = 7 = 2.110	
Indemnity Products (No networks. Deductibles and coinsurance apply.)	L			Horizon BCBSNJ	\$3,128.03										
nit y	o.			Aetna Life Ins. Co.	\$5,770.00		A 61			a					
em	20%	es	\$1,000	Celtic Ins. Co,	\$10,517.00				• ,	•	•	mount of coinsulary" charges. Th	* *		
<u>lu</u>	lan D (80/20% coinsurance)	Deductibles		Horizon BCBSNJ	\$7,056.63			•		ponsible for any		, ,	e nealth care pr	OVIDEI 3	
	D S	onpa		Aetna Life Ins. Co.	\$4,959.00		3.2.2								
	Plan coir	Ď	\$2,500	Celtic Ins. Co,	\$9,255.00										
				Horizon BCBSNJ	\$3,965.04										

<sup>•</sup>Horizon also offers a \$1,500 and \$2,250 deductible option for Plans C and D. Contact the carrier for details.

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		TWO AD	on means t	A II. A = = =	Under 25 years	25 to 29 years	30 to 34 years	35 to 39 years	40 to 44 years	45 to 49 years	50 to 54 years	55 to 59 years	60 to 64 years	65 years and
		TWO AL	JULIS	All Ages	old	old	old	old	old	old	old	old	old	older
			Aetna Health Inc.	\$4,175.00										
		\$15	AmeriHealth HMO Inc.	\$2,982.00										
			Horizon HC	\$2,109.91										
	SL		Aetna Health Inc.	\$2,593.10										
	Options		AmeriHealth HMO Inc.	\$1,766.00										
cts	Ö	\$30	CIGNA Healthcare		\$1,674.00	\$1,674.00	\$1,880.00	\$1,880.00	\$2,155.00	\$2,155.00	\$3,009.00	\$3,009.00	\$5,124.00	\$5,124.00
Products	Copayment		Horizon HC	\$1,755.70										
	ayır		Oxford Health Plan		\$832.51	\$929.12	\$1,083.84	\$1,177.30	\$1,299.82	\$1,370.51	\$1,558.21	\$1,788.33	\$2,089.92	\$2,199.88
НМО	ďo	\$50	AmeriHealth HMO Inc.	\$1,476.00										
Ι	J	Split	AmeriHealth HMO Inc. \$30/50	\$1,678.00		medically-neces	sary specialist's	care), hospital	care, prenatal an	office visits (prev	, immunizations	and well-child c	are, screenings	
		Copay	Horizon HC \$30/50	\$1,732.87		, ,	•	•	* * * * * * * * * * * * * * * * * * * *	y and lab service vices are subjec				
			Horizon HC \$50/70	\$1,685.46					•	e and coinsurance		•		
	Deduc	tible &	Aetna Health Inc.	\$1,067.00			•							
	Coins	urance	Horizon HC	\$1,091.79										
			AmeriHealth 70/50%		\$532.66	\$601.98	\$719.39	\$779.26	\$808.46	\$848.05	\$968.80	\$1,118.83	\$1,337.39	\$1,337.39
	Plan	A/50	AmeriHealth w/rider		\$539.13	\$609.29	\$728.13	\$788.72	\$818.28	\$858.35	\$980.57	\$1,132.42	\$1,353.63	\$1,353.63
ncts			Horizon 70/50%		\$561.63	\$617.73	\$728.42	\$795.92	\$820.75	\$866.80	\$986.80	\$1,151.25	\$1,373.19	\$1,675.03
Products			AmeriHealth 90/70%		\$658.10	\$743.72	\$888.79	\$962.74	\$998.84	\$1,047.74	\$1,196.93	\$1,382.28	\$1,652.31	\$1,652.31
SP			Horizon 80/70%		\$591.96	\$651.10	\$767.76	\$838.91	\$865.09	\$913.62	\$1,040.08	\$1,213.46	\$1,447.36	\$1,765.50
PO	Plan C (	(70/30%)	Horizon 100/70%		\$794.91	\$874.30	\$1,030.99	\$1,126.55	\$1,161.69	\$1,226.87	\$1,396.71	\$1,629.50	\$1,943.61	\$2,370.85
PPO/POS			Oxford \$15, \$1000		\$871.93	\$973.11	\$1,135.16	\$1,233.05	\$1,361.37	\$1,435.40	\$1,632.00	\$1,873.01	\$2,188.89	\$2,304.05
ш.			Oxford \$30, \$2500		\$669.53	\$747.22	\$871.65	\$946.81	\$1,045.35	\$1,102.19	\$1,253.15	\$1,438.22	\$1,680.77	\$1,769.20
	Plan D (	(80/20%)	Oxford \$30, \$1000		\$946.13	\$1,055.92	\$1,231.76	\$1,337.98	\$1,477.22	\$1,557.55	\$1,770.88	\$2,032.40	\$2,375.16	\$2,500.12

### PPO/POS Options:

The PPO (and POS) products provide coverage of all of the same services covered by the HMO and Indemnity plans. An individual may choose to obtain healthcare services through the carrier's network of health care providers, or may go "out-of-network." Individuals typically pay more to go out-of-network because of increased cost-sharing requirements, plus health care providers may charge in excess of what the carrier considers reasonable and customary. In-network providers charge a negotiated rate. For more information about cost-sharing, see the explanation about the Indemnity Products.

AmeriHealth Insurance Co. offers Plan A/50 and Plan C with in-network (IN) and out-of-network (OON) benefits. A/50 70/50: IN=\$2,500 deductible and 70% coinsurance but for \$30 office visits; OON=\$7,500 deductible and 50% coinsurance. Plan C 90/70%: IN=\$2,500 deductible and 90% coinsurance but for \$30 office visits; OON=\$5,000 deductible and 70% coinsurance. AmeriHealth also offers an alternate copayment rider for Plan A/50. Contact the company for more details.

Horizon also offers "Direct Access" plans with in-network (IN) and out-of-network (OON) benefits. Plan A/50 70/50%: IN=\$2500 deductible, 70% coinsurance; OON=\$7500 deductible, 50% coinsurance. Plan C 80/70: IN=\$2500 deductible, 80% coinsurance; OON=\$7500 deductible, 70% coinsurance. Contact Horizon for more details.

Oxford Health Insurance Co. offers Plans C and D with in-network (IN) and out-of-network (OON) benefits. Plan C \$15. \$1000: IN=\$1,000 deductible and 30% coinsurance but for \$15 office visits; OON=\$2000 deductible and 30% coinsurance. Plan C \$30. \$2500: IN=\$1000 deductible and 20% coinsurance but for \$30 office visits; OON=\$5000 deductible and 30% coinsurance. Plan D \$30, \$1000: IN=\$1000 deductible and 20% coinsurance but for \$30 office visits; OON=\$2000 deductible and 20% coinsurance. Plan D \$30, \$1000: IN=\$1000 deductible and 20% coinsuran

Rates shown are monthly premiums, and apply statewide. Rates do not vary based on anyone's location, gender or health status. Carriersnay consider age in developing their rates. If only a single rate is shown, age is NOT a rating factor, which means t

		•	TWO AD	ULTS	All Ages	Under 25 years old	25 to 29 years old	30 to 34 years old	35 to 39 years old	40 to 44 years old	45 to 49 years old	50 to 54 years old	55 to 59 years old	60 to 64 years old	65 years and older
				Aetna Life Ins. Co.	\$2,657.00										
			\$1,000	Celtic Ins. Co,	\$2,840.00										
	%0			Horizon BCBSNJ	\$3,504.21										
<u>×</u>	50/5 nce	səlc		Aetna Life Ins. Co.	\$2,185.00										
apply.)	A/50 (50/50% insurance)	ıctil	\$2,500	Celtic Ins. Co,	\$2,517.00										
	an A/50 (50/50 coinsurance)	Deductibles	\$2,500	Horizon BCBSNJ	\$3,020.84										
coinsurance	Plan , coi	_		Oxford Health Ins Co		\$725.97	\$810.21	\$945.13	\$1,026.64	\$1,133.48	\$1,195.12	\$1,358.80	\$1,559.47	\$1,822.47	\$1,918.35
insı		-	\$5,000	Horizon BCBSNJ	\$2,092.95										
8			\$10,000	Horizon BCBSNJ	\$1,366.38										
and				Aetna Life Ins. Co.	\$3,133.00										
səlc	40% ce)	es	\$1,000	Celtic Ins. Co,	\$3,561.00			, ,				ts (preventative,			
E	(60/ Iran	tibl		Horizon BCBSNJ	\$4,843.55							screenings (inclu substance abuse			
Deductibles	Plan B (60/40% coinsurance)	Deductibles		Aetna Life Ins. Co.	\$2,651.00			,,	,			are not required.	. , , ,	,	
S.	Plar coi	۵	\$2,500	Celtic Ins. Co.	\$3,203.00			vice is medically		•					
networks.				Horizon BCBSNJ	\$4,135.18										
etw	9			Aetna Life Ins. Co.	\$3,564.00										
	/30°/ 1ce)	les	\$1,000	Celtic Ins. Co,	\$10,297.00							amount is met.  I the carrier each			
S	lan C (70/30% coinsurance)	Deductibles		Horizon BCBSNJ	\$6,781.32							and you each p			
dect	၁ ဇ	npe		Aetna Life Ins. Co.	\$3,053.00							or Plan C, the ca			
Products (No	Plan coin	۵		Celtic Ins. Co.	\$7,809.00		and for Plan [	D, the carrier pay	s 80% and you	pay 20% of the	covered charges	i.			
				Horizon BCBSNJ	\$4,203.88										
Indemnity	%( e	w		Aetna Life Ins. Co.	\$6,705.00		After you pay	the maximum o	out-of-pocket (th	ne deductible plu	s a specified am	ount of coinsura	nce), the carrier	pays all of the	
nde	(80/20% ırance)	ple		Celtic Ins. Co,	\$14,002.00			•		•	•	harges. The hea	Ith care provide	r's charges may	
	D (80/20% surance)	Deductibles		Horizon BCBSNJ Aetna Life Ins. Co.	\$9,483.38 \$5,762.00		be more than	that. You are re	esponsible for ar	y "excess" char	ges.				
	Plan I coins	Ded		Celtic Ins. Co.	\$12,322.00										
	E o	_		Horizon BCBSNJ	\$5,328.50										

Horizon also offers a \$1,500 and \$2,250 deductible option for Plans C and D. Contact the carrier for details.

Rates shown are monthly premiums, and apply statewide. Rates do not vary based on anyone's location, gender or health status. Carriers may consider age in developing their rates. If only a single rate is shown, age is NOT a rating factor, which means t

SHO	wii, age is in	OT a ratifi	g factor, which means t											
		FAMI	LY	All Ages	Under 25 years old	25 to 29 years old	30 to 34 years old	35 to 39 years old	40 to 44 years old	45 to 49 years old	50 to 54 years old	55 to 59 years old	60 to 64 years old	65 years and older
			Aetna Health Inc.	\$6,239.70										
		\$15	AmeriHealth HMO Inc.	\$4,205.00										
			Horizon HC	\$2,987.84										
	કા		Aetna Health Inc.	\$3,875.30										
	tio		AmeriHealth HMO Inc.	\$2,490.00										
	Copayment Options	\$30	CIGNA Healthcare		\$2,411.00	\$2,411.00	\$2,708.00	\$2,708.00	\$3,105.00	\$3,105.00	\$4,334.00	\$4,334.00	\$7,381.00	\$7,381.00
Plan	ent		Horizon HC	\$2,486.25										
	ayır		Oxford Health Plan		\$1,511.09	\$1,588.06	\$1,721.57	\$1,815.82	\$1,926.56	\$2,011.38	\$2,187.31	\$2,419.00	\$2,701.74	\$2,795.99
HMO	οdoς	\$50	AmeriHealth HMO Inc.	\$2,081.00		The HMO Prod	ucts provide co	verage of the fo	llowing services	: office visits (p	eventative and t	treatment-relate	ed. includina	
		Split	AmeriHealth HMO Inc. \$30/50	\$2,366.00		most medically- screenings (inc	necessary spe	cialist's care), ho	ospital care, pre	natal and mater	nity care, immun	izations and we	ell-child care,	
		Copay	Horizon HC \$30/50	\$2,453.93		and substance				•	•			
			Horizon HC \$50/70	\$2,386.81		requirement. F			out HMO plans	with split copay	ments or deduct	ible and coinsu	rance	
	Deducti	ible &	Aetna Health	\$1,595.40		requirements, o	ontact the carri	er.						
	Coinsu	rance	Horizon HC	\$1,546.08										
			AmeriHealth 70/50%		\$945.43	\$1,014.73	\$1,132.14	\$1,192.00	\$1,221.21	\$1,260.80	\$1,381.55	\$1,531.58	\$1,750.13	\$1,750.13
"	Plan A	A/50	AmeriHealth w/ rider		\$956.91	\$1,027.05	\$1,145.89	\$1,206.48	\$1,236.04	\$1,276.11	\$1,398.33	\$1,550.18	\$1,771.39	\$1,771.39
Products			Horizon 70/50%		\$1,248.42	\$1,312.96	\$1,440.35	\$1,518.03	\$1,546.58	\$1,599.52	\$1,737.60	\$2,094.65	\$2,517.79	\$2,928.06
ō			AmeriHealth 90/70%		\$1,167.70	\$1,253.32	\$1,398.39	\$1,472.34	\$1,508.44	\$1,557.34	\$1,706.53	\$1,891.88	\$2,161.91	\$2,161.91
			Horizon 80/70%		\$1,315.86	\$1,383.88	\$1,518.13	\$1,600.03	\$1,630.13	\$1,685.94	\$1,831.44	\$2,207.80	\$2,653.78	\$3,086.20
6	Plan C (7	0/30%)	Horizon 100/70%		\$1,767.03	\$1,858.34	\$2,038.64	\$2,148.62	\$2,189.03	\$2,263.97	\$2,459.39	\$2,964.77	\$3,563.67	\$4,144.36
PPO/POS			Oxford \$15, \$1000		\$1,582.64	\$1,663.26	\$1,803.10	\$1,901.80	\$2,017.79	\$2,106.63	\$2,290.89	\$2,533.55	\$2,829.68	\$2,928.38
1 "			Oxford \$30, \$2500		\$1,215.26	\$1,277.16	\$1,384.53	\$1,460.33	\$1,549.39	\$1,617.60	\$1,759.09	\$1,945.42	\$2,172.81	\$2,248.60
	Plan D (8	0/20%)	Oxford \$30, \$1000		\$1,717.32	\$1,804.80	\$1,956.54	\$2,063.64	\$2,189.50	\$2,285.90	\$2,485.84	\$2,749.15	\$3,070.48	\$3,177.58

### PPO/POS Options:

The PPO (and POS) products provide coverage of all of the same services covered by the HMO and Indemnity plans. An individual may choose to obtain healthcare services through the carrier's network of health care providers, or may go "out-of-network." Individuals typically pay more to go out-of-network because of increased cost-sharing requirements, plus health care providers may charge in excess of what the carrier considers reasonable and customary. In-network providers charge a negotiated rate. For more information about cost-sharing, see the explanation about the Indemnity Products.

AmeriHealth Insurance Co. offers Plan A/50 and Plan C with in-network (IN) and out-of-network (OON) benefits. A/50 70/50: IN=\$2,500 deductible and 70% coinsurance but for \$30 office visits; OON=\$7,500 deductible and 50% coinsurance. Plan C 90/70%: IN=\$2,500 deductible and 90% coinsurance but for \$30 office visits; OON=\$5,000 deductible and 70% coinsurance. AmeriHealth also offers an alternate copayment rider for Plan A/50. Contact the company for more details.

Horizon also offers "Direct Access" plans with in-network (IN) and out-of-network (OON) benefits. Plan A/50 70/50%: IN=\$2500 deductible, 70% coinsurance; OON=\$7500 deductible, 50% coinsurance. Plan C 80/70: IN=\$0 deductible, 100% coinsurance; OON=\$7500 deductible, 70% coinsurance. Contact Horizon for more details.

Oxford Health Insurance Co. offers Plans C and D with in-network (IN) and out-of-network (OON) benefits. Plan C \$15, \$1000: IN=\$1,000 deductible and 30% coinsurance but for \$15 office visits; OON=\$2000 deductible and 30% coinsurance. Plan C \$30, \$2500: IN=\$1000 deductible and 30% coinsurance but for \$30 office visits; OON=\$5000 deductible and 30% coinsurance. Plan D \$30, \$1000: IN=\$1000 deductible and 20% coinsurance but for \$30 office visits; OON=\$2000 deductible and 20% coinsurance. Solution of the solu

Rates shown are monthly premiums, and apply statewide. Rates do not vary based on anyone's location, gender or health status. Carriers <u>may</u> consider age in developing their rates. If only a single rate is shown, age is NOT a rating factor, which means t

			FAMI	ıv		Under 25 years	25 to 29 years	30 to 34 years	35 to 39 years	40 to 44 years	45 to 49 years	50 to 54 years	55 to 59 years	60 to 64 years	65 years and
			FAIVII	LI	All Ages	old	old	old	old	old	old	old	old	old	older
				Aetna Life Ins. Co.	\$3,625.00										
	_		\$1,000	Celtic Ins. Co.	\$2,852.00										
	ر ان ش	,,		Horizon BCBSNJ	\$3,679.60										
(.	20/	ples		Aetna Life Ins. Co.	\$2,973.00										
арк	50 ( sura	ıcti	<b>#0.500</b>	Celtic Ins. Co.	\$2,528.00										
JCe	an A/50 (50/50 coinsurance)	Deductibles	\$2,500	Horizon BCBSNJ	\$3,171.88										
coinsurance apply.)	Plan A/50 (50/50% coinsurance)			Oxford Health Ins Co		\$1,317.71	\$1,384.83	\$1,501.26	\$1,583.44	\$1,680.01	\$1,753.98	\$1,907.39	\$2,109.43	\$2,355.99	\$2,438.17
ins	_		\$5,000	Horizon BCBSNJ	\$2,197.65										
			\$10,000	Horizon BCBSNJ	\$1,434.72										
and	. 0			Aetna Life Ins. Co.	\$4,255.00										
les	40% Ce)	es	\$1,000	Celtic Ins. Co.	\$3,576.00				•	•		risits (preventativ			
ctib	(60/ ran	tibl		Horizon BCBSNJ	\$5,085.63							ell-child care, scr			
Deductibles	Plan B (60/40% coinsurance)	Deductibles		Aetna Life Ins. Co.	\$3,588.00				•			eatment for ment of health care p			
Ŏ	Soi	۵	\$2,500	Celtic Ins. Co.	\$3,217.00				onsider whether	•					
network.	-			Horizon BCBSNJ	\$4,341.96										
etw	<b>%</b> -			Aetna Life Ins. Co.	\$4,819.00										
	30°	es	\$1,000	Celtic Ins. Co.	\$10,341.00							tible amount is r			
Products (No	lan C (70/30% coinsurance)	Deductibles		Horizon BCBSNJ	\$7,120.32						, , ,	and the carrier ea the carrier and y			
ncts	၁ r	ñ		Aetna Life Ins. Co.	\$4,127.00							covered charge			
o	Plan	۵	\$2,500	Celtic Ins. Co.	\$7,843.00		pays 70% an	d you pay 30%	, and for Plan D	the carrier pays	s 80% and you	pay 20% of the c	overed charges	S.	
_	_			Horizon BCBSNJ	\$4,413.77										
ıni	% _			Aetna Life Ins. Co.	\$9,132.00		After you pay	the maximum	out-of-pocket	(the deductible	nlue a enocified	amount of coins	uranco) the ca	rrior pave all of	
ndemnity	(80/20% rrance)	les	\$1,000	Celtic Ins. Co.	\$14,062.00							nary" charges. T			
Ĕ	a	ctik		Horizon BCBSNJ	\$9,957.54			0	hat. You are re	0		, ,			
	'lan D (80/20% coinsurance)	Deductibles		Aetna Life Ins. Co.	\$7,849.00										
	Plan coin	۵		Celtic Ins. Co.	\$12,375.00										
				Horizon BCBSNJ	\$5,595.04										

Horizon also offers a \$1,500 and \$2,250 deductible option for Plans C and D. Contact the carrier for details.

Zip	Cod	es 07	0-073 (Essex, Hudson &	Under 25	25 to 29	30 to 34	35 to 39	40 to 44	45 to 49	50 to 54	55 to 59	60 to 64 years	65 years and
		Un	ion Counties)	years old	years old	years old	years old	years old	years old	years old	years old	old	older
			Aetna Life Ins. Co.	\$138.00	\$149.00	\$173.00	\$181.00	\$207.00	\$269.00	\$292.00	\$362.00	\$413.00	\$456.00
			AmeriHealth HMO	\$183.23	\$183.23	\$201.16	\$237.01	\$265.89	\$314.68	\$434.18	\$598.49	\$641.31	\$641.31
		e le	Celtic Ins. Co.	\$854.00	\$1,001.00	\$1,102.00	\$1,291.00	\$1,589.00	\$1,748.00	\$1,923.00	\$2,115.00	\$2,327.00	\$2,560.00
	Jer	Male	CIGNA Healthcare	\$771.00	\$771.00	\$866.00	\$866.00	\$992.00	\$992.00	\$1,386.00	\$1,386.00	\$2,359.00	\$2,359.00
	Rider		Horizon BCBSNJ	\$151.75	\$151.75	\$176.88	\$211.81	\$222.86	\$260.81	\$304.00	\$384.75	\$473.98	\$504.49
	any		Oxford Health Ins	\$146.11	\$149.17	\$165.63	\$198.01	\$219.83	\$263.56	\$308.01	\$384.31	\$453.55	\$464.89
			Aetna Life Ins. Co.	\$155.00	\$181.00	\$208.00	\$224.00	\$239.00	\$249.00	\$293.00	\$310.00	\$392.00	\$417.00
a)	Without	•	AmeriHealth HMO	\$332.61	\$400.32	\$376.42	\$347.54	\$362.48	\$378.42	\$432.19	\$559.66	\$639.32	\$641.31
Single	N X	Female	Celtic Ins. Co.	\$939.40	\$1,101.10	\$1,212.20	\$1,420.10	\$1,747.90	\$1,922.80	\$2,115.30	\$2,326.50	\$2,559.70	\$2,816.00
ä		Fen	CIGNA Healthcare	\$771.00	\$771.00	\$866.00	\$866.00	\$992.00	\$992.00	\$1,386.00	\$1,386.00	\$2,359.00	\$2,359.00
0,			Horizon BCBSNJ	\$188.84	\$222.86	\$264.86	\$270.88	\$274.88	\$264.86	\$294.43	\$313.41	\$358.76	\$367.51
			Oxford Health Ins	\$172.94	\$202.84	\$243.08	\$250.80	\$276.19	\$268.47	\$299.05	\$321.41	\$372.38	\$401.04
			AmeriHealth HMO 1**	\$184.00	\$184.00	\$202.00	\$238.00	\$267.00	\$316.00	\$436.00	\$601.00	\$644.00	\$644.00
		Male	AmeriHealth HMO 2**	\$274.00	\$287.00	\$303.00	\$355.00	\$397.00	\$470.00	\$650.00	\$898.00	\$959.00	\$959.00
	ь	Ž	Horizon BCBSNJ	\$190.88	\$190.88	\$222.48	\$266.42	\$280.33	\$328.05	\$382.37	\$483.95	\$596.19	\$634.58
	Rid		Oxford Health Ins	\$183.08	\$186.91	\$207.53	\$248.11	\$275.45	\$330.24	\$385.94	\$481.54	\$568.31	\$582.52
	With Rider	е	AmeriHealth HMO 1**	\$334.00	\$402.00	\$378.00	\$349.00	\$364.00	\$380.00	\$434.00	\$562.00	\$642.00	\$644.00
	_	Female	AmeriHealth HMO 2**	\$500.00	\$600.00	\$563.00	\$522.00	\$543.00	\$568.00	\$646.00	\$837.00	\$959.00	
		Fer	Horizon BCBSNJ	\$237.53	\$280.33	\$333.16	\$340.73	\$345.76	\$333.16	\$370.36	\$394.23	· ·	\$462.27
			Oxford Health Ins	\$216.70	\$254.16	\$304.58	\$314.25	\$346.06	\$336.39	\$374.72	\$402.73		
			Aetna Life Ins. Co.	\$274.00	\$285.00	\$309.00	\$317.00	\$343.00	\$405.00	\$428.00	\$498.00		
			AmeriHealth HMO	\$585.55	\$585.55	\$603.47	\$638.33	\$667.21	\$716.00	\$836.50	\$1,000.81	\$1,043.63	
	L	Male	Celtic Ins. Co.	\$1,494.50	\$1,751.75	\$1,928.50	\$2,259.25	\$2,780.75	\$3,059.00	\$3,365.25	\$3,701.25	1 1	
	Rider	Σ	CIGNA Healthcare	\$1,387.00	\$1,387.00	\$1,558.00	\$1,558.00	\$1,786.00	\$1,786.00	\$2,494.00	\$2,494.00		
	<u>ح</u>		Horizon BCBSNJ	\$404.64	\$404.64	\$429.77	\$464.71	\$475.77	\$513.71	\$556.89	\$637.64	-	
	any		Oxford Health Ins	\$365.94	\$369.00	\$385.46	\$417.85	\$439.67	\$483.39	\$527.84	\$604.14	\$673.39	
Child(ren)	Without		Aetna Life Ins. Co.	\$291.00	\$317.00	\$344.00	\$360.00	\$375.00	\$385.00	\$429.00	\$446.00		· ·
<u> </u>	ij	<u>e</u>	AmeriHealth HMO	\$734.92	\$801.64	\$778.74	\$749.86	\$764.80	\$780.73	\$834.51	\$960.98		
I≅	>	Female	Celtic Ins. Co.	\$1,643.95	\$1,926.93	\$2,121.35	\$2,485.18	\$3,058.83	\$3,364.90	\$3,701.78	\$4,071.38	1 1	
ည်		Fe	CIGNA Healthcare	\$1,387.00	\$1,387.00	\$1,558.00	\$1,558.00	\$1,786.00	\$1,786.00	\$2,494.00	\$2,494.00		
య			Horizon BCBSNJ	\$441.74	\$475.77	\$517.76	\$523.78	\$527.77	\$517.76	\$547.34	\$566.33		
Adult	-		Oxford Health Ins	\$392.78	\$422.67	\$462.91	\$470.63	\$496.02	\$488.30	\$518.89	\$541.25	\$592.21	\$620.87
β		4	AmeriHealth HMO 1**	\$588.00	\$588.00	\$606.00	\$641.00	\$670.00	\$719.00	\$840.00	\$1,005.00		
`		Male	AmeriHealth HMO 2**	\$875.00	\$887.00	\$903.00	\$955.00	\$998.00	\$1,070.00	\$1,251.00	\$1,498.00		
	Rider	2	Horizon BCBSNJ	\$508.97	\$508.97	\$540.60	\$584.53	\$598.44	\$646.16	\$700.48	\$802.04	-	
	r Ŗ		Oxford Health Ins	\$458.53	\$462.36	\$482.99	\$523.56	\$550.91	\$605.70	\$661.39	\$757.00	\$843.76	
	With	ale	AmeriHealth HMO 1**	\$738.00	\$805.00	\$782.00	\$753.00	\$768.00	\$784.00	\$838.00	\$965.00		
		Female	AmeriHealth HMO 2**	\$1,100.00	\$1,200.00	\$1,163.00	\$1,122.00	\$1,144.00	\$1,168.00	\$1,246.00	\$1,437.00		
		Fe	Horizon BCBSNJ	\$555.64 \$400.46	\$598.44	\$651.26	\$658.83	\$663.83	\$651.26	\$688.46	\$712.35		
			Oxford Health Ins	\$492.16	\$529.61	\$580.03	\$589.71	\$621.52	\$611.84	\$650.17	\$678.19	\$742.05	\$777.96

Zip Cod	les 07	0-073 (Essex, Hudson &	Under 25	25 to 29	30 to 34	35 to 39	40 to 44	45 to 49	50 to 54	55 to 59	60 to 64 years	65 years and
	Un	ion Counties)	years old	old	older							
	¥	Aetna Life Ins. Co.	\$293.00	\$330.00	\$381.00	\$405.00	\$446.00	\$518.00	\$585.00	\$672.00	\$805.00	\$873.00
	Ride	AmeriHealth HMO <sup>†</sup>	\$515.84	\$583.56	\$577.58	\$584.55	\$628.37	\$693.10	\$866.37	\$1,158.15	\$1,280.64	\$1,282.63
		Celtic Ins. Co. (M)	\$1,989.82	\$2,332.33	\$2,567.66	\$3,008.03	\$3,702.37	\$4,072.84	\$4,480.59	\$4,927.95	\$5,421.91	\$5,964.80
	t any	Celtic Ins. Co. (F)	\$2,188.80	\$2,565.56	\$2,824.43	\$3,308.83	\$4,072.61	\$4,480.12	\$4,928.65	\$5,420.75	\$5,964.10	\$6,561.28
ts,	l g	CIGNA Healthcare	\$1,488.00	\$1,488.00	\$1,671.00	\$1,671.00	\$1,915.00	\$1,915.00	\$2,674.00	\$2,674.00	\$4,554.00	\$4,554.00
Two	Withou	Horizon BCBSNJ	\$340.59	\$374.61	\$441.74	\$482.69	\$497.73	\$525.66	\$598.43	\$698.16	\$832.74	\$872.05
Ac		Oxford Health Ins	\$303.10	\$334.42	\$388.25	\$426.40	\$471.19	\$505.43	\$576.72	\$670.47	\$784.62	\$822.61
	e	AmeriHealth HMO 1**,†	\$518.00	\$586.00	\$580.00	\$587.00	\$631.00	\$696.00	\$870.00	\$1,163.00	\$1,286.00	\$1,288.00
	Rider	AmeriHealth HMO 2**,†	\$774.00	\$887.00	\$866.00	\$877.00	\$940.00	\$1,038.00	\$1,296.00	\$1,735.00	\$1,918.00	\$1,918.00
	With	Horizon BCBSNJ	\$428.40	\$471.18	\$555.64	\$607.13	\$626.05	\$661.19	\$752.73	\$878.17	\$1,047.45	\$1,096.89
	>	Oxford Health Ins	\$379.79	\$419.03	\$486.48	\$534.28	\$590.41	\$633.31	\$722.63	\$840.10	\$983.14	\$1,030.74
	Ē	Aetna Life Ins. Co.	\$429.00	\$466.00	\$517.00	\$541.00	\$582.00	\$654.00	\$721.00	\$808.00	\$941.00	\$1,009.00
	Rid	AmeriHealth HMO <sup>†</sup>	\$918.16	\$985.87	\$979.90	\$985.87	\$1,029.69	\$1,094.42	\$1,268.69	\$1,560.47	\$1,682.95	\$1,684.94
	Ş	Celtic Ins. Co. (M)	\$1,998.36	\$2,342.34	\$2,578.68	\$3,020.94	\$3,718.26	\$4,090.32	\$4,499.82	\$4,949.10	\$5,445.18	\$5,990.40
	ā	Celtic Ins. Co. (F)	\$2,198.20	\$2,576.57	\$2,836.55	\$3,323.03	\$4,090.09	\$4,499.35	\$4,949.80	\$5,444.01	\$5,989.70	\$6,589.44
Family*	ğ	CIGNA Healthcare	\$2,143.00	\$2,143.00	\$2,407.00	\$2,407.00	\$2,759.00	\$2,759.00	\$3,852.00	\$3,852.00	\$6,559.00	\$6,559.00
Ξ	With	Horizon BCBSNJ	\$658.05	\$692.08	\$759.21	\$800.16	\$815.20	\$843.10	\$915.90	\$1,015.63	\$1,150.21	\$1,189.51
Гa		Oxford Health Ins	\$610.87	\$642.18	\$696.02	\$734.16	\$778.96	\$813.20	\$884.48	\$978.23	\$1,092.39	\$1,130.37
	e	AmeriHealth HMO 1**,†	\$922.00	\$990.00	\$984.00	\$990.00	\$1,034.00	\$1,099.00	\$1,274.00	\$1,567.00	\$1,690.00	\$1,692.00
	Rider	AmeriHealth HMO 2**,†	\$1,375.00	\$1,487.00	\$1,466.00	\$1,477.00	\$1,541.00	\$1,638.00	\$1,897.00	\$2,335.00	\$2,519.00	\$2,519.00
	With	Horizon BCBSNJ	\$827.73	\$870.51	\$954.96	\$1,006.46	\$1,025.40	\$1,060.49	\$1,152.06	\$1,277.50	\$1,446.78	\$1,496.20
	>	Oxford Health Ins	\$765.43	\$804.66	\$872.12	\$919.92	\$976.05	\$1,018.95	\$1,108.27	\$1,225.74	\$1,368.77	\$1,416.37

Companies may rate Basic & Essential policies based on age, gender and location of the primary insured/subscriber. Companies may choose to use all, none or some of these factors.

<sup>\*</sup>Most carriers do not price policies with two adults based on whether the primary insured/subscriber is male or female; Celtic is an exception.

Contact carriers for more information about the riders they offer.

<sup>\*\*</sup>AmeriHealth offers two riders: a Basic rider (1), and a Preferred rider (2).

<sup>†</sup>AmeriHealth's Two Adults and Family rates shown assume a male/female composition. AmeriHealth has separate rate schedules for these rate tiers for male/male and female/female families.

Zip	Code	es 074	4-076 (Bergen & Passaic	Under 25	25 to 29	30 to 34	35 to 39	40 to 44	45 to 49	50 to 54	55 to 59	60 to 64 years	65 years and
			Counties)	years old	old	older							
			Aetna Life Ins. Co.	\$139.00	\$150.00	\$174.00	\$182.00	\$208.00	\$271.00	\$294.00	\$364.00	\$416.00	\$460.00
			AmeriHealth HMO	\$183.23	\$183.23	\$201.16	\$237.01	\$265.89	\$314.68	\$434.18	\$598.49	\$641.31	\$641.31
		Male	Celtic Ins. Co.	\$854.00	\$1,001.00	\$1,102.00	\$1,291.00	\$1,589.00	\$1,748.00	\$1,923.00	\$2,115.00	\$2,327.00	\$2,560.00
	Rider	Ma	CIGNA Healthcare	\$771.00	\$771.00	\$866.00	\$866.00	\$992.00	\$992.00	\$1,386.00	\$1,386.00	\$2,359.00	\$2,359.00
	ž		Horizon BCBSNJ	\$151.75	\$151.75	\$176.88	\$211.81	\$222.86	\$260.81	\$304.00	\$384.75	\$473.98	\$504.49
	any		Oxford Health Ins	\$146.11	\$149.17	\$165.63	\$198.01	\$219.83	\$263.56	\$308.01	\$384.31	\$453.55	\$464.89
			Aetna Life Ins. Co.	\$157.00	\$182.00	\$211.00	\$225.00	\$241.00	\$251.00	\$295.00	\$312.00	\$395.00	\$419.00
	Without	•	AmeriHealth HMO	\$332.61	\$400.32	\$376.42	\$347.54	\$362.48	\$378.42	\$432.19	\$559.66	\$639.32	\$641.31
(I)	Ž	-emale	Celtic Ins. Co.	\$939.40	\$1,101.10	\$1,212.20	\$1,420.10	\$1,747.90	\$1,922.80	\$2,115.30	\$2,326.50	\$2,559.70	\$2,816.00
g		-en	CIGNA Healthcare	\$771.00	\$771.00	\$866.00	\$866.00	\$992.00	\$992.00	\$1,386.00	\$1,386.00	\$2,359.00	\$2,359.00
Single		_	Horizon BCBSNJ	\$188.84	\$222.86	\$264.86	\$270.88	\$274.88	\$264.86	\$294.43	\$313.41	\$358.76	\$367.51
0,			Oxford Health Ins	\$172.94	\$202.84	\$243.08	\$250.80	\$276.19	\$268.47	\$299.05	\$321.41	\$372.38	\$401.04
			AmeriHealth HMO 1**	\$184.00	\$184.00	\$202.00	\$238.00	\$267.00	\$316.00	\$436.00	\$601.00	\$644.00	\$644.00
		Male	AmeriHealth HMO 2**	\$274.00	\$287.00	\$303.00	\$355.00	\$397.00	\$470.00	\$650.00	\$898.00	\$959.00	\$959.00
	<u>10</u>	Ř	Horizon BCBSNJ	\$190.88	\$190.88	\$222.48	\$266.42	\$280.33	\$328.05	\$382.37	\$483.95	\$596.19	\$634.58
	With Rider		Oxford Health Ins	\$183.08	\$186.91	\$207.53	\$248.11	\$275.45	\$330.24	\$385.94	\$481.54	\$568.31	\$582.52
	lŧ.	3	AmeriHealth HMO 1**	\$334.00	\$402.00	\$378.00	\$349.00	\$364.00	\$380.00	\$434.00	\$562.00	\$642.00	\$644.00
	>	nale	AmeriHealth HMO 2**	\$500.00	\$600.00	\$563.00	\$522.00	\$543.00	\$568.00	\$646.00	\$837.00	\$959.00	\$959.00
		Female	Horizon BCBSNJ	\$237.53	\$280.33	\$333.16	\$340.73	\$345.76	\$333.16	\$370.36	\$394.23	\$451.27	\$462.27
			Oxford Health Ins	\$216.70	\$254.16	\$304.58	\$314.25	\$346.06	\$336.39	\$374.72	\$402.73	\$466.59	\$502.50
			Aetna Life Ins. Co.	\$276.00	\$287.00	\$311.00	\$319.00	\$345.00	\$408.00	\$431.00	\$501.00	\$553.00	\$597.00
			AmeriHealth HMO	\$585.55	\$585.55	\$603.47	\$638.33	\$667.21	\$716.00	\$836.50	\$1,000.81	\$1,043.63	\$1,043.63
	1. 1	Male	Celtic Ins. Co.	\$1,494.50	\$1,751.75	\$1,928.50	\$2,259.25	\$2,780.75	\$3,059.00	\$3,365.25	\$3,701.25	\$4,072.25	\$4,480.00
	Rider	Ĕ	CIGNA Healthcare	\$1,387.00	\$1,387.00	\$1,558.00	\$1,558.00	\$1,786.00	\$1,786.00	\$2,494.00	\$2,494.00	\$4,247.00	\$4,247.00
	室		Horizon BCBSNJ	\$404.64	\$404.64	\$429.77	\$464.71	\$475.77	\$513.71	\$556.89	\$637.64	\$726.86	\$757.44
	any		Oxford Health Ins	\$365.94	\$369.00	\$385.46	\$417.85	\$439.67	\$483.39	\$527.84	\$604.14	\$673.39	\$684.73
Child(ren)	ij		Aetna Life Ins. Co.	\$294.00	\$319.00	\$348.00	\$362.00	\$378.00	\$388.00	\$432.00	\$449.00	\$532.00	\$556.00
چا	Without	ø)	AmeriHealth HMO	\$734.92	\$801.64	\$778.74	\$749.86	\$764.80	\$780.73	\$834.51	\$960.98	\$1,041.64	\$1,043.63
Iĕ	ĬŽ	Female	Celtic Ins. Co.	\$1,643.95	\$1,926.93	\$2,121.35	\$2,485.18	\$3,058.83	\$3,364.90	\$3,701.78	\$4,071.38	\$4,479.48	\$4,928.00
ᄗ		Fer	CIGNA Healthcare	\$1,387.00	\$1,387.00	\$1,558.00	\$1,558.00	\$1,786.00	\$1,786.00	\$2,494.00	\$2,494.00	\$4,247.00	\$4,247.00
and			Horizon BCBSNJ	\$441.74	\$475.77	\$517.76	\$523.78	\$527.77	\$517.76	\$547.34	\$566.33	\$611.66	\$620.41
t a	Ш		Oxford Health Ins	\$392.78	\$422.67	\$462.91	\$470.63	\$496.02	\$488.30	\$518.89	\$541.25		\$620.87
Adult			AmeriHealth HMO 1**	\$588.00	\$588.00	\$606.00	\$641.00	\$670.00	\$719.00	\$840.00	\$1,005.00		\$1,048.00
ĕ		Male	AmeriHealth HMO 2**	\$875.00	\$887.00	\$903.00	\$955.00	\$998.00	\$1,070.00	\$1,251.00	\$1,498.00	\$1,560.00	\$1,560.00
	e	Ĕ	Horizon BCBSNJ	\$508.97	\$508.97	\$540.60	\$584.53	\$598.44	\$646.16	\$700.48	\$802.04	\$914.27	\$952.74
	With Rider		Oxford Health Ins	\$458.53	\$462.36	\$482.99	\$523.56	\$550.91	\$605.70	\$661.39	\$757.00	\$843.76	\$857.97
	Ĭ₹I	a)	AmeriHealth HMO 1**	\$738.00	\$805.00	\$782.00	\$753.00	\$768.00	\$784.00	\$838.00	\$965.00	\$1,046.00	\$1,048.00
	>	Female	AmeriHealth HMO 2**	\$1,100.00	\$1,200.00	\$1,163.00	\$1,122.00	\$1,144.00	\$1,168.00	\$1,246.00	\$1,437.00	\$1,559.00	\$1,560.00
		Fen	Horizon BCBSNJ	\$555.64	\$598.44	\$651.26	\$658.83	\$663.83	\$651.26	\$688.46	\$712.35	\$769.36	\$780.38
			Oxford Health Ins	\$492.16	\$529.61	\$580.03	\$589.71	\$621.52	\$611.84	\$650.17	\$678.19	\$742.05	\$777.96

Zip Co	des 07	4-076 (Bergen & Passaic	Under 25	25 to 29	30 to 34	35 to 39	40 to 44	45 to 49	50 to 54	55 to 59	60 to 64 years	65 years and
		Counties)	years old	old	older							
	er	Aetna Life Ins. Co.	\$296.00	\$332.00	\$385.00	\$407.00	\$449.00	\$522.00	\$589.00	\$676.00	\$811.00	\$879.00
	Ride	AmeriHealth HMO <sup>†</sup>	\$515.84	\$583.56	\$577.58	\$584.55	\$628.37	\$693.10	\$866.37	\$1,158.15	\$1,280.64	\$1,282.63
	_	Celtic Ins. Co. (M)	\$1,989.82	\$2,332.33	\$2,567.66	\$3,008.03	\$3,702.37	\$4,072.84	\$4,480.59	\$4,927.95	\$5,421.91	\$5,964.80
<u>*</u> 2	t any	Celtic Ins. Co. (F)	\$2,188.80	\$2,565.56	\$2,824.43	\$3,308.83	\$4,072.61	\$4,480.12	\$4,928.65	\$5,420.75	\$5,964.10	\$6,561.28
Adults*	l g	CIGNA Healthcare	\$1,488.00	\$1,488.00	\$1,671.00	\$1,671.00	\$1,915.00	\$1,915.00	\$2,674.00	\$2,674.00	\$4,554.00	\$4,554.00
Ac	With	Horizon BCBSNJ	\$340.59	\$374.61	\$441.74	\$482.69	\$497.73	\$525.66	\$598.43	\$698.16	\$832.74	\$872.05
Two		Oxford Health Ins	\$303.10	\$334.42	\$388.25	\$426.40	\$471.19	\$505.43	\$576.72	\$670.47	\$784.62	\$822.61
≥	er	AmeriHealth HMO 1**,†	\$518.00	\$586.00	\$580.00	\$587.00	\$631.00	\$696.00	\$870.00	\$1,163.00	\$1,286.00	\$1,288.00
	Rid	AmeriHealth HMO 2**,†	\$774.00	\$887.00	\$866.00	\$877.00	\$940.00	\$1,038.00	\$1,296.00	\$1,735.00	\$1,918.00	\$1,918.00
	With	Horizon BCBSNJ	\$428.40	\$471.18	\$555.64	\$607.13	\$626.05	\$661.19	\$752.73	\$878.17	\$1,047.45	\$1,096.89
	>	Oxford Health Ins	\$379.79	\$419.03	\$486.48	\$534.28	\$590.41	\$633.31	\$722.63	\$840.10	\$983.14	\$1,030.74
	ē	Aetna Life Ins. Co.	\$433.00	\$469.00	\$522.00	\$544.00	\$586.00	\$659.00	\$726.00	\$813.00	\$948.00	\$1,016.00
	Rid	AmeriHealth HMO <sup>†</sup>	\$918.16	\$985.87	\$979.90	\$985.87	\$1,029.69	\$1,094.42	\$1,268.69	\$1,560.47	\$1,682.95	\$1,684.94
	Ş	Celtic Ins. Co. (M)	\$1,998.36	\$2,342.34	\$2,578.68	\$3,020.94	\$3,718.26	\$4,090.32	\$4,499.82	\$4,949.10	\$5,445.18	\$5,990.40
مد	a	Celtic Ins. Co. (F)	\$2,198.20	\$2,576.57	\$2,836.55	\$3,323.03	\$4,090.09	\$4,499.35	\$4,949.80	\$5,444.01	\$5,989.70	\$6,589.44
Family*	ğ	CIGNA Healthcare	\$2,143.00	\$2,143.00	\$2,407.00	\$2,407.00	\$2,759.00	\$2,759.00	\$3,852.00	\$3,852.00	\$6,559.00	\$6,559.00
Ξ	With	Horizon BCBSNJ	\$658.05	\$692.08	\$759.21	\$800.16	\$815.20	\$843.10	\$915.90	\$1,015.63	\$1,150.21	\$1,189.51
Б		Oxford Health Ins	\$610.87	\$642.18	\$696.02	\$734.16	\$778.96	\$813.20	\$884.48	\$978.23	\$1,092.39	\$1,130.37
	ь	AmeriHealth HMO 1**,†	\$922.00	\$990.00	\$984.00	\$990.00	\$1,034.00	\$1,099.00	\$1,274.00	\$1,567.00	\$1,690.00	\$1,692.00
	Rider	AmeriHealth HMO 2**,†	\$1,375.00	\$1,487.00	\$1,466.00	\$1,477.00	\$1,541.00	\$1,638.00	\$1,897.00	\$2,335.00	\$2,519.00	\$2,519.00
	With	Horizon BCBSNJ	\$827.73	\$870.51	\$954.96	\$1,006.46		\$1,060.49	\$1,152.06	\$1,277.50	\$1,446.78	\$1,496.20
	>	Oxford Health Ins	\$765.43	\$804.66	\$872.12	\$919.92	\$976.05	\$1,018.95	\$1,108.27	\$1,225.74	\$1,368.77	\$1,416.37

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<sup>\*</sup>Most carriers do not price policies with two adults based on whether the primary insured/subscriber is male or female; Celtic is an exception.

<sup>\*\*</sup>AmeriHealth offers two riders: a Basic rider (1), and a Preferred rider (2).

<sup>†</sup>AmeriHealth's Two Adults and Family rates shown assume a male/female composition. AmeriHealth has separate rate schedules for these rate tiers for male/male and female/female families.

Z	Zip Codes 077-079 (Monmouth,			Under 25	25 to 29	30 to 34	35 to 39	40 to 44	45 to 49	50 to 54	55 to 59	60 to 64 years	65 years and
	Мо	rris,	Sussex & Warren)	years old	old	older							
			Aetna Life Ins. Co.	\$143.00	\$154.00	\$180.00	\$187.00	\$215.00	\$280.00	\$303.00	\$375.00	\$429.00	\$474.00
			AmeriHealth HMO	\$183.23	\$183.23	\$201.16	\$237.01	\$265.89	\$314.68	\$434.18	\$598.49	\$641.31	\$641.31
		Male	Celtic Ins. Co.	\$854.00	\$1,001.00	\$1,102.00	\$1,291.00	\$1,589.00	\$1,748.00	\$1,923.00	\$2,115.00	\$2,327.00	\$2,560.00
	Rider	Ma	CIGNA Healthcare	\$771.00	\$771.00	\$866.00	\$866.00	\$992.00	\$992.00	\$1,386.00	\$1,386.00	\$2,359.00	\$2,359.00
	Ιž		Horizon BCBSNJ	\$144.14	\$144.14	\$168.02	\$201.20	\$211.72	\$247.76	\$288.78	\$365.49	\$450.28	\$479.31
	any		Oxford Health Ins	\$138.38	\$141.28	\$156.87	\$187.54	\$208.21	\$249.62	\$291.72	\$363.98	\$429.56	\$440.31
			Aetna Life Ins. Co.	\$161.00	\$188.00	\$217.00	\$231.00	\$248.00	\$259.00	\$304.00	\$322.00	\$407.00	\$432.00
	Without	•	AmeriHealth HMO	\$332.61	\$400.32	\$376.42	\$347.54	\$362.48	\$378.42	\$432.19	\$559.66	\$639.32	\$641.31
a	Ķ	ıale	Celtic Ins. Co.	\$939.40	\$1,101.10	\$1,212.20	\$1,420.10	\$1,747.90	\$1,922.80	\$2,115.30	\$2,326.50	\$2,559.70	\$2,816.00
Single		Femal	CIGNA Healthcare	\$771.00	\$771.00	\$866.00	\$866.00	\$992.00	\$992.00	\$1,386.00	\$1,386.00	\$2,359.00	\$2,359.00
ı.		_	Horizon BCBSNJ	\$179.40	\$211.72	\$251.61	\$257.34	\$261.12	\$251.61	\$279.70	\$297.76	\$340.81	\$349.14
0,			Oxford Health Ins	\$163.80	\$192.11	\$230.22	\$237.53	\$261.58	\$254.27	\$283.24	\$304.41	\$352.68	\$379.82
		4	AmeriHealth HMO 1**	\$184.00	\$184.00	\$202.00	\$238.00	\$267.00	\$316.00	\$436.00	\$601.00	\$644.00	\$644.00
		Male	AmeriHealth HMO 2**	\$274.00	\$287.00	\$303.00	\$355.00	\$397.00	\$470.00	\$650.00	\$898.00	\$959.00	\$959.00
	<u></u>	Ě	Horizon BCBSNJ	\$181.31	\$181.31	\$211.33	\$253.07	\$266.31	\$311.65	\$363.25	\$459.72	\$566.38	\$602.90
	With Rider		Oxford Health Ins	\$173.39	\$177.02	\$196.55	\$234.99	\$260.88	\$312.77	\$365.52	\$456.07	\$538.25	\$551.70
	lth.	•	AmeriHealth HMO 1**	\$334.00	\$402.00	\$378.00	\$349.00	\$364.00	\$380.00	\$434.00	\$562.00	\$642.00	\$644.00
	>	nale	AmeriHealth HMO 2**	\$500.00	\$600.00	\$563.00	\$522.00	\$543.00	\$568.00	\$646.00	\$837.00	\$959.00	\$959.00
		Female	Horizon BCBSNJ	\$225.65	\$266.31	\$316.48	\$323.70	\$328.45	\$316.48	\$351.81	\$374.54	\$428.68	\$439.16
			Oxford Health Ins	\$205.24	\$240.71	\$288.47	\$297.63	\$327.76	\$318.60	\$354.90	\$381.43	\$441.91	\$475.92
			Aetna Life Ins. Co.	\$284.00	\$295.00	\$321.00	\$328.00	\$356.00	\$421.00	\$444.00	\$516.00	\$570.00	\$615.00
		•	AmeriHealth HMO	\$585.55	\$585.55	\$603.47	\$638.33	\$667.21	\$716.00	\$836.50	\$1,000.81	\$1,043.63	\$1,043.63
		Male	Celtic Ins. Co.	\$1,494.50	\$1,751.75	\$1,928.50	\$2,259.25	\$2,780.75	\$3,059.00	\$3,365.25	\$3,701.25	\$4,072.25	\$4,480.00
	Rider	Ĭ	CIGNA Healthcare	\$1,387.00	\$1,387.00	\$1,558.00	\$1,558.00	\$1,786.00	\$1,786.00	\$2,494.00	\$2,494.00	\$4,247.00	\$4,247.00
	Ē		Horizon BCBSNJ	\$384.41	\$384.41	\$408.28	\$441.47	\$451.97	\$488.01	\$529.06	\$605.77	\$690.53	\$719.57
	any		Oxford Health Ins	\$346.59	\$349.48	\$365.07	\$395.74	\$416.41	\$457.83	\$499.92	\$572.19	\$637.77	\$648.51
Child(ren)	ij		Aetna Life Ins. Co.	\$302.00	\$329.00	\$358.00	\$372.00	\$389.00	\$400.00	\$445.00	\$463.00	\$548.00	\$573.00
٦	Without	o)	AmeriHealth HMO	\$734.92	\$801.64	\$778.74	\$749.86	\$764.80	\$780.73	\$834.51	\$960.98	\$1,041.64	\$1,043.63
Iĕ	Ĭ	Female	Celtic Ins. Co.	\$1,643.95	\$1,926.93	\$2,121.35	\$2,485.18	\$3,058.83	\$3,364.90	\$3,701.78	\$4,071.38	\$4,479.48	\$4,928.00
ū		Fen	CIGNA Healthcare	\$1,387.00	\$1,387.00	\$1,558.00	\$1,558.00	\$1,786.00	\$1,786.00	\$2,494.00	\$2,494.00	\$4,247.00	\$4,247.00
and			Horizon BCBSNJ	\$419.66	\$451.97	\$491.86	\$497.60	\$501.39	\$491.86	\$519.95	\$538.00	\$581.06	\$589.39
a			Oxford Health Ins	\$372.00	\$400.31	\$438.43	\$445.74	\$469.78	\$462.47	\$491.44	\$512.62	\$560.89	\$588.03
Adult			AmeriHealth HMO 1**	\$588.00	\$588.00	\$606.00	\$641.00	\$670.00	\$719.00	\$840.00	\$1,005.00	\$1,048.00	\$1,048.00
Ac		Male	AmeriHealth HMO 2**	\$875.00	\$887.00	\$903.00	\$955.00	\$998.00	\$1,070.00	\$1,251.00	\$1,498.00	\$1,560.00	\$1,560.00
	er	Ĕ	Horizon BCBSNJ	\$483.52	\$483.52	\$513.55	\$555.30	\$568.50	\$613.83	\$665.48	\$761.96	\$868.59	\$905.11
	Rider		Oxford Health Ins	\$434.27	\$437.90	\$457.44	\$495.87	\$521.77	\$573.66	\$626.41	\$716.95	\$799.13	\$812.59
	With	O)	AmeriHealth HMO 1**	\$738.00	\$805.00	\$782.00	\$753.00	\$768.00	\$784.00	\$838.00	\$965.00	\$1,046.00	\$1,048.00
	>	nal	AmeriHealth HMO 2**	\$1,100.00	\$1,200.00	\$1,163.00	\$1,122.00	\$1,144.00	\$1,168.00	\$1,246.00	\$1,437.00	\$1,559.00	\$1,560.00
		Fem	Horizon BCBSNJ	\$527.84	\$568.50	\$618.67	\$625.90	\$630.66	\$618.67	\$654.04	\$676.72	\$730.88	\$741.37
			Oxford Health Ins	\$466.12	\$501.60	\$549.35	\$558.51	\$588.64	\$579.48	\$615.78	\$642.31	\$702.79	\$736.80

Zip Codes 077-079 (Monmouth,			Under 25	25 to 29	30 to 34	35 to 39	40 to 44	45 to 49	50 to 54	55 to 59	60 to 64 years	65 years and
M	orris,	Sussex & Warren)	years old	old	older							
	e	Aetna Life Ins. Co.	\$304.00	\$342.00	\$397.00	\$418.00	\$463.00	\$539.00	\$607.00	\$697.00	\$836.00	\$906.00
	Zide	AmeriHealth HMO <sup>†</sup>	\$515.84	\$583.56	\$577.58	\$584.55	\$628.37	\$693.10	\$866.37	\$1,158.15	\$1,280.64	\$1,282.63
		Celtic Ins. Co. (M)	\$1,989.82	\$2,332.33	\$2,567.66	\$3,008.03	\$3,702.37	\$4,072.84	\$4,480.59	\$4,927.95	\$5,421.91	\$5,964.80
* <u>v</u>	an	Celtic Ins. Co. (F)	\$2,188.80	\$2,565.56	\$2,824.43	\$3,308.83	\$4,072.61	\$4,480.12	\$4,928.65	\$5,420.75	\$5,964.10	\$6,561.28
Adults*	o Li	CIGNA Healthcare	\$1,488.00	\$1,488.00	\$1,671.00	\$1,671.00	\$1,915.00	\$1,915.00	\$2,674.00	\$2,674.00	\$4,554.00	\$4,554.00
Αq	With	Horizon BCBSNJ	\$323.57	\$355.87	\$419.65	\$458.55	\$472.86	\$499.37	\$568.50	\$663.24	\$791.10	\$828.44
Q		Oxford Health Ins	\$287.07	\$316.73	\$367.71	\$403.84	\$446.27	\$478.70	\$546.21	\$635.00	\$743.12	\$779.10
Dw T	ь	AmeriHealth HMO 1**,†	\$518.00	\$586.00	\$580.00	\$587.00	\$631.00	\$696.00	\$870.00	\$1,163.00	\$1,286.00	\$1,288.00
	With Rider	AmeriHealth HMO 2**,†	\$774.00	\$887.00	\$866.00	\$877.00	\$940.00	\$1,038.00	\$1,296.00	\$1,735.00	\$1,918.00	\$1,918.00
		Horizon BCBSNJ	\$406.99	\$447.64	\$527.83	\$576.79	\$594.78	\$628.12	\$715.07	\$834.25	\$995.07	\$1,042.05
		Oxford Health Ins	\$359.70	\$396.86	\$460.74	\$506.02	\$559.18	\$599.81	\$684.40	\$795.66	\$931.13	\$976.21
	er	Aetna Life Ins. Co.	\$445.00	\$483.00	\$538.00	\$559.00	\$604.00	\$680.00	\$748.00	\$838.00	\$977.00	\$1,047.00
	Rid	AmeriHealth HMO <sup>†</sup>	\$918.16	\$985.87	\$979.90	\$985.87	\$1,029.69	\$1,094.42	\$1,268.69	\$1,560.47	\$1,682.95	\$1,684.94
	\ <u>`</u>	Celtic Ins. Co. (M)	\$1,998.36	\$2,342.34	\$2,578.68	\$3,020.94	\$3,718.26	\$4,090.32	\$4,499.82	\$4,949.10	\$5,445.18	\$5,990.40
	ra l	Celtic Ins. Co. (F)	\$2,198.20	\$2,576.57	\$2,836.55	\$3,323.03	\$4,090.09	\$4,499.35	\$4,949.80	\$5,444.01	\$5,989.70	\$6,589.44
Family*	ō	CIGNA Healthcare	\$2,143.00	\$2,143.00	\$2,407.00	\$2,407.00	\$2,759.00	\$2,759.00	\$3,852.00	\$3,852.00	\$6,559.00	\$6,559.00
Ξ	With	Horizon BCBSNJ	\$625.16	\$657.47	\$721.23	\$760.16	\$774.45	\$800.98	\$870.11	\$964.86	\$1,092.69	\$1,130.04
Бa		Oxford Health Ins	\$578.56	\$608.22	\$659.20	\$695.33	\$737.76	\$770.19	\$837.70	\$926.49	\$1,034.61	\$1,070.59
	er	AmeriHealth HMO 1**,†	\$922.00	\$990.00	\$984.00	\$990.00	\$1,034.00	\$1,099.00	\$1,274.00	\$1,567.00	\$1,690.00	\$1,692.00
	Rider	AmeriHealth HMO 2**,†	\$1,375.00	\$1,487.00	\$1,466.00	\$1,477.00	\$1,541.00	\$1,638.00	\$1,897.00	\$2,335.00	\$2,519.00	\$2,519.00
	With	Horizon BCBSNJ	\$786.34	\$826.99	\$907.19	\$956.16	\$974.14	\$1,007.49	\$1,094.44	\$1,213.64	\$1,374.42	\$1,421.42
	>	Oxford Health Ins	\$724.94	\$762.10	\$825.98	\$871.25	\$924.42	\$965.04	\$1,049.64	\$1,160.90	\$1,296.37	\$1,341.45

Companies may rate Basic & Essential policies based on age, gender and location of the primary insured/subscriber. Companies may choose to use all, none or some of these factors.

<sup>\*</sup>Most carriers do not price policies with two adults based on whether the primary insured/subscriber is male or female; Celtic is an exception.

<sup>\*\*</sup>AmeriHealth offers two riders: a Basic rider (1), and a Preferred rider (2).

<sup>†</sup>AmeriHealth's Two Adults and Family rates shown assume a male/female composition. AmeriHealth has separate rate schedules for these rate tiers for male/male and female/female families.

7	Zip Codes 088-089 (Hunterdon,			Under 25	25 to 29	30 to 34	35 to 39	40 to 44	45 to 49	50 to 54	55 to 59	60 to 64 years	65 years and
	· N	/liddle	esex & Somerset)	years old	old	older							
			Aetna Life Ins. Co.	\$140.00	\$151.00	\$176.00	\$184.00	\$211.00	\$273.00	\$297.00	\$367.00	\$420.00	\$463.00
			AmeriHealth HMO	\$183.23	\$183.23	\$201.16	\$237.01	\$265.89	\$314.68	\$434.18	\$598.49	\$641.31	\$641.31
		<u>e</u>	Celtic Ins. Co.	\$854.00	\$1,001.00	\$1,102.00	\$1,291.00	\$1,589.00	\$1,748.00	\$1,923.00	\$2,115.00	\$2,327.00	\$2,560.00
	Jer	Male	CIGNA Healthcare	\$771.00	\$771.00	\$866.00	\$866.00	\$992.00	\$992.00	\$1,386.00	\$1,386.00	\$2,359.00	\$2,359.00
	Ric		Horizon BCBSNJ	\$151.75	\$151.75	\$176.88	\$211.81	\$222.86	\$260.81	\$304.00	\$384.75	\$473.98	\$504.49
	any Rider		Oxford Health Ins	\$146.11	\$149.17	\$165.63	\$198.01	\$219.83	\$263.56	\$308.01	\$384.31	\$453.55	\$464.89
			Aetna Life Ins. Co.	\$158.00	\$184.00	\$213.00	\$227.00	\$244.00	\$254.00	\$298.00	\$315.00	\$399.00	\$423.00
	Without		AmeriHealth HMO	\$332.61	\$400.32	\$376.42	\$347.54	\$362.48	\$378.42	\$432.19	\$559.66	\$639.32	\$641.31
4	Ķ	Female	Celtic Ins. Co.	\$939.40	\$1,101.10	\$1,212.20	\$1,420.10	\$1,747.90	\$1,922.80	\$2,115.30	\$2,326.50	\$2,559.70	\$2,816.00
Single		-er	CIGNA Healthcare	\$771.00	\$771.00	\$866.00	\$866.00	\$992.00	\$992.00	\$1,386.00	\$1,386.00	\$2,359.00	\$2,359.00
i		_	Horizon BCBSNJ	\$188.84	\$222.86	\$264.86	\$270.88	\$274.88	\$264.86	\$294.43	\$313.41	\$358.76	\$367.51
0,			Oxford Health Ins	\$172.94	\$202.84	\$243.08	\$250.80	\$276.19	\$268.47	\$299.05	\$321.41	\$372.38	\$401.04
			AmeriHealth HMO 1**	\$184.00	\$184.00	\$202.00	\$238.00	\$267.00	\$316.00	\$436.00	\$601.00	\$644.00	\$644.00
		Male	AmeriHealth HMO 2**	\$274.00	\$287.00	\$303.00	\$355.00	\$397.00	\$470.00	\$650.00	\$898.00	\$959.00	\$959.00
	70	Ĕ	Horizon BCBSNJ	\$190.88	\$190.88	\$222.48	\$266.42	\$280.33	\$328.05	\$382.37	\$483.95	\$596.19	\$634.58
	Ride		Oxford Health Ins	\$183.08	\$186.91	\$207.53	\$248.11	\$275.45	\$330.24	\$385.94	\$481.54	\$568.31	\$582.52
	With Rider	4)	AmeriHealth HMO 1**	\$334.00	\$402.00	\$378.00	\$349.00	\$364.00	\$380.00	\$434.00	\$562.00	\$642.00	\$644.00
	>	Female	AmeriHealth HMO 2**	\$500.00	\$600.00	\$563.00	\$522.00	\$543.00	\$568.00	\$646.00	\$837.00	\$959.00	\$959.00
		Fen	Horizon BCBSNJ	\$237.53	\$280.33	\$333.16	\$340.73	\$345.76	\$333.16	\$370.36	\$394.23	\$451.27	\$462.27
			Oxford Health Ins	\$216.70	\$254.16	\$304.58	\$314.25	\$346.06	\$336.39	\$374.72	\$402.73	\$466.59	\$502.50
			Aetna Life Ins. Co.	\$278.00	\$289.00	\$314.00	\$322.00	\$349.00	\$411.00	\$435.00	\$505.00	\$558.00	\$601.00
			AmeriHealth HMO	\$585.55	\$585.55	\$603.47	\$638.33	\$667.21	\$716.00	\$836.50	\$1,000.81	\$1,043.63	\$1,043.63
		Male	Celtic Ins. Co.	\$1,494.50	\$1,751.75	\$1,928.50	\$2,259.25	\$2,780.75	\$3,059.00	\$3,365.25	\$3,701.25	\$4,072.25	\$4,480.00
	Rider	ž	CIGNA Healthcare	\$1,387.00	\$1,387.00	\$1,558.00	\$1,558.00	\$1,786.00	\$1,786.00	\$2,494.00	\$2,494.00	\$4,247.00	\$4,247.00
	쮼		Horizon BCBSNJ	\$404.64	\$404.64	\$429.77	\$464.71	\$475.77	\$513.71	\$556.89	\$637.64	\$726.86	\$757.44
	any		Oxford Health Ins	\$365.94	\$369.00	\$385.46	\$417.85	\$439.67	\$483.39	\$527.84	\$604.14	\$673.39	\$684.73
Child(ren)	ţ		Aetna Life Ins. Co.	\$296.00	\$322.00	\$351.00	\$365.00	\$382.00	\$392.00	\$436.00	\$453.00	\$537.00	\$561.00
<u>ټ</u> ا	Without	a)	AmeriHealth HMO	\$734.92	\$801.64	\$778.74	\$749.86	\$764.80	\$780.73	\$834.51	\$960.98	\$1,041.64	\$1,043.63
ΙĒ	≶	Female	Celtic Ins. Co.	\$1,643.95	\$1,926.93	\$2,121.35	\$2,485.18	\$3,058.83	\$3,364.90	\$3,701.78	\$4,071.38	\$4,479.48	\$4,928.00
ರ		Fer	CIGNA Healthcare	\$1,387.00	\$1,387.00	\$1,558.00	\$1,558.00	\$1,786.00	\$1,786.00	\$2,494.00	\$2,494.00	\$4,247.00	\$4,247.00
and			Horizon BCBSNJ	\$441.74	\$475.77	\$517.76	\$523.78	\$527.77	\$517.76	\$547.34	\$566.33	\$611.66	\$620.41
t a			Oxford Health Ins	\$392.78	\$422.67	\$462.91	\$470.63	\$496.02	\$488.30	\$518.89	\$541.25	\$592.21	\$620.87
Adult			AmeriHealth HMO 1**	\$588.00	\$588.00	\$606.00	\$641.00	\$670.00	\$719.00	\$840.00	\$1,005.00	\$1,048.00	\$1,048.00
ĕ		Male	AmeriHealth HMO 2**	\$875.00	\$887.00	\$903.00	\$955.00	\$998.00	\$1,070.00	\$1,251.00	\$1,498.00	\$1,560.00	\$1,560.00
	er	Ž	Horizon BCBSNJ	\$508.97	\$508.97	\$540.60	\$584.53	\$598.44	\$646.16	\$700.48	\$802.04	\$914.27	\$952.74
	With Rider		Oxford Health Ins	\$458.53	\$462.36	\$482.99	\$523.56	\$550.91	\$605.70	\$661.39	\$757.00	\$843.76	\$857.97
	Vith	Ф	AmeriHealth HMO 1**	\$738.00	\$805.00	\$782.00	\$753.00	\$768.00	\$784.00	\$838.00	\$965.00	\$1,046.00	\$1,048.00
	>	Female	AmeriHealth HMO 2**	\$1,100.00	\$1,200.00	\$1,163.00	\$1,122.00	\$1,144.00	\$1,168.00	\$1,246.00	\$1,437.00	\$1,559.00	\$1,560.00
		Fer	Horizon BCBSNJ	\$555.64	\$598.44	\$651.26	\$658.83	\$663.83	\$651.26	\$688.46	\$712.35	\$769.36	\$780.38
			Oxford Health Ins	\$492.16	\$529.61	\$580.03	\$589.71	\$621.52	\$611.84	\$650.17	\$678.19	\$742.05	\$777.96

Zip Codes 088-089 (Hunterdon,		Under 25	25 to 29	30 to 34	35 to 39	40 to 44	45 to 49	50 to 54	55 to 59	60 to 64 years	65 years and	
l	Middle	esex & Somerset)	years old	old	older							
	į.	Aetna Life Ins. Co.	\$298.00	\$335.00	\$389.00	\$411.00	\$455.00	\$527.00	\$595.00	\$682.00	\$819.00	\$886.00
	Zig.	AmeriHealth HMO <sup>†</sup>	\$515.84	\$583.56	\$577.58	\$584.55	\$628.37	\$693.10	\$866.37	\$1,158.15	\$1,280.64	\$1,282.63
	I 🛬	Celtic Ins. Co. (M)	\$1,989.82	\$2,332.33	\$2,567.66	\$3,008.03	\$3,702.37	\$4,072.84	\$4,480.59	\$4,927.95	\$5,421.91	\$5,964.80
ts,	t an	Celtic Ins. Co. (F)	\$2,188.80	\$2,565.56	\$2,824.43	\$3,308.83	\$4,072.61	\$4,480.12	\$4,928.65	\$5,420.75	\$5,964.10	\$6,561.28
Adults*	ō	CIGNA Healthcare	\$1,488.00	\$1,488.00	\$1,671.00	\$1,671.00	\$1,915.00	\$1,915.00	\$2,674.00	\$2,674.00	\$4,554.00	\$4,554.00
¥	With	Horizon BCBSNJ	\$340.59	\$374.61	\$441.74	\$482.69	\$497.73	\$525.66	\$598.43	\$698.16	\$832.74	\$872.05
Two		Oxford Health Ins	\$303.10	\$334.42	\$388.25	\$426.40	\$471.19	\$505.43	\$576.72	\$670.47	\$784.62	\$822.61
≥	With Rider	AmeriHealth HMO 1**,†	\$518.00	\$586.00	\$580.00	\$587.00	\$631.00	\$696.00	\$870.00	\$1,163.00	\$1,286.00	\$1,288.00
		AmeriHealth HMO 2**,†	\$774.00	\$887.00	\$866.00	\$877.00	\$940.00	\$1,038.00	\$1,296.00	\$1,735.00	\$1,918.00	\$1,918.00
		Horizon BCBSNJ	\$428.40	\$471.18	\$555.64		\$626.05	\$661.19	\$752.73	\$878.17	\$1,047.45	\$1,096.89
		Oxford Health Ins	\$379.79	\$419.03	\$486.48	\$534.28	\$590.41	\$633.31	\$722.63	\$840.10	\$983.14	\$1,030.74
	er	Aetna Life Ins. Co.	\$436.00	\$473.00	\$527.00	\$549.00	\$593.00	\$665.00	\$733.00	\$820.00	\$957.00	\$1,024.00
	Rid	AmeriHealth HMO <sup>†</sup>	\$918.16	\$985.87	\$979.90	\$985.87	\$1,029.69	\$1,094.42	\$1,268.69	\$1,560.47	\$1,682.95	\$1,684.94
	<u>-</u>	Celtic Ins. Co. (M)	\$1,998.36	\$2,342.34	\$2,578.68	\$3,020.94	\$3,718.26	\$4,090.32	\$4,499.82	\$4,949.10	\$5,445.18	\$5,990.40
ىد	tal	Celtic Ins. Co. (F)	\$2,198.20	\$2,576.57	\$2,836.55	\$3,323.03	\$4,090.09	\$4,499.35	\$4,949.80	\$5,444.01	\$5,989.70	\$6,589.44
Family*	100	CIGNA Healthcare	\$2,143.00	\$2,143.00	\$2,407.00	\$2,407.00	\$2,759.00	\$2,759.00	\$3,852.00	\$3,852.00	\$6,559.00	\$6,559.00
Ξ	With	Horizon BCBSNJ	\$658.05	\$692.08	\$759.21	\$800.16	\$815.20	\$843.10	\$915.90	\$1,015.63	\$1,150.21	\$1,189.51
E.		Oxford Health Ins	\$610.87	\$642.18	\$696.02	\$734.16	\$778.96	\$813.20	\$884.48	\$978.23	\$1,092.39	\$1,130.37
	e	AmeriHealth HMO 1**,†	\$922.00	\$990.00	\$984.00	\$990.00		\$1,099.00	\$1,274.00	\$1,567.00		
	Rider	AmeriHealth HMO 2**,†	\$1,375.00	\$1,487.00	\$1,466.00	\$1,477.00	\$1,541.00	\$1,638.00	\$1,897.00	\$2,335.00	\$2,519.00	\$2,519.00
	With	Horizon BCBSNJ	\$827.73		\$954.96		\$1,025.40	\$1,060.49	\$1,152.06	\$1,277.50		
	>	Oxford Health Ins	\$765.43	\$804.66	\$872.12	\$919.92	\$976.05	\$1,018.95	\$1,108.27	\$1,225.74	\$1,368.77	\$1,416.37

Companies may rate Basic & Essential policies based on age, gender and location of the primary insured/subscriber. Companies may choose to use all, none or some of these factors.

<sup>\*</sup>Most carriers do not price policies with two adults based on whether the primary insured/subscriber is male or female; Celtic is an exception.

<sup>\*\*</sup>AmeriHealth offers two riders: a Basic rider (1), and a Preferred rider (2).

<sup>†</sup>AmeriHealth's Two Adults and Family rates shown assume a male/female composition. AmeriHealth has separate rate schedules for these rate tiers for male/male and female/female families.

Zip	Zip Codes 081, 085-086 (Burlington,		Under 25	25 to 29	30 to 34	35 to 39	40 to 44	45 to 49	50 to 54	55 to 59	60 to 64 years	65 years and	
		Cai	mden, Mercer)	years old	old	older							
			Aetna Life Ins. Co.	\$140.00	\$151.00	\$175.00	\$183.00	\$211.00	\$273.00	\$297.00	\$366.00	\$419.00	\$462.00
			AmeriHealth HMO	\$183.23	\$183.23	\$201.16	\$237.01	\$265.89	\$314.68	\$434.18	\$598.49	\$641.31	\$641.31
		Male	Celtic Ins. Co.	\$854.00	\$1,001.00	\$1,102.00	\$1,291.00	\$1,589.00	\$1,748.00	\$1,923.00	\$2,115.00	\$2,327.00	\$2,560.00
	Rider	Ma	CIGNA Healthcare	\$771.00	\$771.00	\$866.00	\$866.00	\$992.00	\$992.00	\$1,386.00	\$1,386.00	\$2,359.00	\$2,359.00
	Ϋ́		Horizon BCBSNJ	\$144.14	\$144.14	\$168.02	\$201.20	\$211.72	\$247.76	\$288.78	\$365.49	\$450.28	\$479.31
	any		Oxford Health Ins	\$138.38	\$141.28	\$156.87	\$187.54	\$208.21	\$249.62	\$291.72	\$363.98	\$429.56	\$440.31
			Aetna Life Ins. Co.	\$158.00	\$184.00	\$212.00	\$227.00	\$243.00	\$252.00	\$298.00	\$314.00	\$398.00	\$422.00
	Without	4	AmeriHealth HMO	\$332.61	\$400.32	\$376.42	\$347.54	\$362.48	\$378.42	\$432.19	\$559.66	\$639.32	\$641.31
d)	Š	Female	Celtic Ins. Co.	\$939.40	\$1,101.10	\$1,212.20	\$1,420.10	\$1,747.90	\$1,922.80	\$2,115.30	\$2,326.50	\$2,559.70	\$2,816.00
Single		Fen	CIGNA Healthcare	\$771.00	\$771.00	\$866.00	\$866.00	\$992.00	\$992.00	\$1,386.00	\$1,386.00	\$2,359.00	\$2,359.00
ü			Horizon BCBSNJ	\$179.40	\$211.72	\$251.61	\$257.34	\$261.12	\$251.61	\$279.70	\$297.76	\$340.81	\$349.14
0,			Oxford Health Ins	\$163.80	\$192.11	\$230.22	\$237.53	\$261.58	\$254.27	\$283.24	\$304.41	\$352.68	\$379.82
			AmeriHealth HMO 1**	\$184.00	\$184.00	\$202.00	\$238.00	\$267.00	\$316.00	\$436.00	\$601.00	\$644.00	\$644.00
		Male	AmeriHealth HMO 2**	\$274.00	\$287.00	\$303.00	\$355.00	\$397.00	\$470.00	\$650.00	\$898.00	\$959.00	\$959.00
	ь	Ĕ	Horizon BCBSNJ	\$181.31	\$181.31	\$211.33	\$253.07	\$266.31	\$311.65	\$363.25	\$459.72	\$566.38	\$602.90
	With Rider		Oxford Health Ins	\$173.39	\$177.02	\$196.55	\$234.99	\$260.88	\$312.77	\$365.52	\$456.07	\$538.25	\$551.70
	Vith	ω	AmeriHealth HMO 1**	\$334.00	\$402.00	\$378.00	\$349.00	\$364.00	\$380.00	\$434.00	\$562.00	\$642.00	\$644.00
	>	Female	AmeriHealth HMO 2**	\$500.00	\$600.00	\$563.00	\$522.00	\$543.00	\$568.00	\$646.00	\$837.00	\$959.00	\$959.00
		Fer	Horizon BCBSNJ	\$225.65	\$266.31	\$316.48	\$323.70	\$328.45	\$316.48	\$351.81	\$374.54	\$428.68	\$439.16
			Oxford Health Ins	\$205.24	\$240.71	\$288.47	\$297.63	\$327.76	\$318.60	\$354.90	\$381.43	\$441.91	\$475.92
			Aetna Life Ins. Co.	\$278.00	\$289.00	\$313.00	\$321.00	\$349.00	\$411.00	\$435.00	\$504.00	\$551.00	\$600.00
			AmeriHealth HMO	\$585.55	\$585.55	\$603.47	\$638.33	\$667.21	\$716.00	\$836.50	\$1,000.81	\$1,043.63	\$1,043.63
	ا ا	Male	Celtic Ins. Co.	\$1,494.50	\$1,751.75	\$1,928.50	\$2,259.25	\$2,780.75	\$3,059.00	\$3,365.25	\$3,701.25	\$4,072.25	\$4,480.00
	Rider	Σ	CIGNA Healthcare	\$1,387.00	\$1,387.00	\$1,558.00	\$1,558.00	\$1,786.00	\$1,786.00	\$2,494.00	\$2,494.00	\$4,247.00	\$4,247.00
	<u>   </u>		Horizon BCBSNJ	\$384.41	\$384.41	\$408.28	\$441.47	\$451.97	\$488.01	\$529.06	\$605.77	\$690.53	\$719.57
	any		Oxford Health Ins	\$346.59	\$349.48	\$365.07	\$395.74	\$416.41	\$457.83	\$499.92	\$572.19	\$637.77	\$648.51
Child(ren)	μ		Aetna Life Ins. Co.	\$296.00	\$322.00	\$350.00	\$365.00	\$381.00	\$390.00	\$436.00	\$452.00	\$536.00	\$560.00
ᅡ늉	Without	ø	AmeriHealth HMO	\$734.92	\$801.64	\$778.74	\$749.86	\$764.80	\$780.73	\$834.51	\$960.98	\$1,041.64	\$1,043.63
Ē	>	Female	Celtic Ins. Co.	\$1,643.95	\$1,926.93	\$2,121.35	\$2,485.18	\$3,058.83	\$3,364.90	\$3,701.78	\$4,071.38	\$4,479.48	\$4,928.00
ပ		Feı	CIGNA Healthcare	\$1,387.00	\$1,387.00	\$1,558.00	\$1,558.00	\$1,786.00	\$1,786.00	\$2,494.00	\$2,494.00	\$4,247.00	\$4,247.00
and			Horizon BCBSNJ	\$419.66	\$451.97	\$491.86	\$497.60	\$501.39	\$491.86	\$519.95	\$538.00	\$581.06	\$589.39
t a	ш		Oxford Health Ins	\$372.00	\$400.31	\$438.43	\$445.74	\$469.78	\$462.47	\$491.44	\$512.62	\$560.89	\$588.03
Adult			AmeriHealth HMO 1**	\$588.00	\$588.00	\$606.00	\$641.00	\$670.00	\$719.00	\$840.00	\$1,005.00	\$1,048.00	\$1,048.00
ĕ		Male	AmeriHealth HMO 2**	\$875.00	\$887.00	\$903.00	\$955.00	\$998.00	\$1,070.00	\$1,251.00	\$1,498.00	\$1,560.00	\$1,560.00
	er	Σ	Horizon BCBSNJ	\$483.52	\$483.52	\$513.55	\$555.30	\$568.50	\$613.83	\$665.48	\$761.96	\$868.59	\$905.11
	With Rider		Oxford Health Ins	\$434.27	\$437.90	\$457.44	\$495.87	\$521.77	\$573.66	\$626.41	\$716.95	\$799.13	\$812.59
	Nit	e e	AmeriHealth HMO 1**	\$738.00	\$805.00	\$782.00	\$753.00	\$768.00	\$784.00	\$838.00	\$965.00	\$1,046.00	\$1,048.00
	-	Female	AmeriHealth HMO 2**	\$1,100.00	\$1,200.00	\$1,163.00	\$1,122.00	\$1,144.00	\$1,168.00	\$1,246.00	\$1,437.00	\$1,559.00	\$1,560.00
		Fel	Horizon BCBSNJ	\$527.84	\$568.50	\$618.67	\$625.90	\$630.66	\$618.67	\$654.04	\$676.72	\$730.88	\$741.37
			Oxford Health Ins	\$466.12	\$501.60	\$549.35	\$558.51	\$588.64	\$579.48	\$615.78	\$642.31	\$702.79	\$736.80

Zip Co		81, 085-086 (Burlington, mden, Mercer)	Under 25 years old	25 to 29 years old	30 to 34 years old	35 to 39 years old	40 to 44 years old	45 to 49 years old	50 to 54 years old	55 to 59 years old	60 to 64 years old	65 years and older
		Aetna Life Ins. Co.	\$298.00	\$335.00			\$454.00	\$525.00				
	der	AmeriHealth HMO <sup>†</sup>	\$515.84	\$583.56	\$577.58	\$584.55	\$628.37	\$693.10	\$866.37	\$1,158.15		
	/ Rid	Celtic Ins. Co. (M)	\$1,989.82	\$2,332.33	\$2.567.66	\$3,008.03	\$3,702.37	\$4,072.84	\$4,480.59	\$4,927.95		
Adults*	any	Celtic Ins. Co. (F)	\$2,188.80	\$2,565.56	\$2,824.43	. ,		\$4,480.12	\$4,928.65	\$5,420.75	1 1	
	out	CIGNA Healthcare	\$1,488.00	\$1,488.00	\$1,671.00	\$1,671.00	\$1,915.00	\$1,915.00	\$2,674.00	\$2,674.00		
Þ	Witho	Horizon BCBSNJ	\$323.57	\$355.87	\$419.65	\$458.55	\$472.86	\$499.37	\$568.50	\$663.24		\$828.44
		Oxford Health Ins	\$287.07	\$316.73	\$367.71	\$403.84	\$446.27	\$478.70	\$546.21	\$635.00	·	\$779.10
Two	With Rider	AmeriHealth HMO 1**,†	\$518.00	\$586.00	\$580.00	\$587.00	\$631.00	\$696.00	\$870.00	\$1,163.00	\$1,286.00	\$1,288.00
•		AmeriHealth HMO 2**,†	\$774.00	\$887.00	\$866.00		\$940.00	\$1,038.00	\$1,296.00	\$1,735.00	\$1,918.00	\$1,918.00
		Horizon BCBSNJ	\$406.99	\$447.64	\$527.83	\$576.79	\$594.78	\$628.12	\$715.07	\$834.25	\$995.07	\$1,042.05
	>	Oxford Health Ins	\$359.70	\$396.86	\$460.74	\$506.02	\$559.18	\$599.81	\$684.40	\$795.66	\$931.13	\$976.21
	ē	Aetna Life Ins. Co.	\$436.00	\$473.00	\$525.00	\$548.00	\$592.00	\$663.00	\$733.00	\$818.00	\$955.00	\$1,022.00
	Ride	AmeriHealth HMO <sup>†</sup>	\$918.16	\$985.87	\$979.90	\$985.87	\$1,029.69	\$1,094.42	\$1,268.69	\$1,560.47	\$1,682.95	\$1,684.94
	Ş	Celtic Ins. Co. (M)	\$1,998.36	\$2,342.34	\$2,578.68	\$3,020.94	\$3,718.26	\$4,090.32	\$4,499.82	\$4,949.10	\$5,445.18	\$5,990.40
-	a	Celtic Ins. Co. (F)	\$2,198.20	\$2,576.57	\$2,836.55	\$3,323.03	\$4,090.09	\$4,499.35	\$4,949.80	\$5,444.01	\$5,989.70	\$6,589.44
Family*	l g	CIGNA Healthcare	\$2,143.00	\$2,143.00	\$2,407.00	\$2,407.00	\$2,759.00	\$2,759.00	\$3,852.00	\$3,852.00	\$6,559.00	\$6,559.00
Ξ	With Th	Horizon BCBSNJ	\$625.16	\$657.47	\$721.23	\$760.16	\$774.45	\$800.98	\$870.11	\$964.86	\$1,092.69	\$1,130.04
Б		Oxford Health Ins	\$578.56	\$608.22	\$659.20	\$695.33	\$737.76	\$770.19	\$837.70	\$926.49	\$1,034.61	\$1,070.59
	ē	AmeriHealth HMO 1**,†	\$922.00	\$990.00	\$984.00	\$990.00	\$1,034.00	\$1,099.00	\$1,274.00	\$1,567.00	\$1,690.00	\$1,692.00
	Rider	AmeriHealth HMO 2**,†	\$1,375.00	\$1,487.00	\$1,466.00	\$1,477.00	\$1,541.00	\$1,638.00	\$1,897.00	\$2,335.00	\$2,519.00	\$2,519.00
	With	Horizon BCBSNJ	\$786.34	\$826.99	\$907.19	\$956.16	\$974.14	\$1,007.49	\$1,094.44	\$1,213.64	\$1,374.42	\$1,421.42
	>	Oxford Health Ins	\$724.94	\$762.10	\$825.98	\$871.25	\$924.42	\$965.04	\$1,049.64	\$1,160.90	\$1,296.37	\$1,341.45

Companies may rate Basic & Essential policies based on age, gender and location of the primary insured/subscriber. Companies may choose to use all, none or some of these factors.

<sup>\*</sup>Most carriers do not price policies with two adults based on whether the primary insured/subscriber is male or female; Celtic is an exception.

<sup>\*\*</sup>AmeriHealth offers two riders: a Basic rider (1), and a Preferred rider (2).

<sup>†</sup>AmeriHealth's Two Adults and Family rates shown assume a male/female composition. AmeriHealth has separate rate schedules for these rate tiers for male/male and female/female families.

Zip	Cape May, Ocean, Salem		Under 25	25 to 29	30 to 34	35 to 39	40 to 44	45 to 49	50 to 54	55 to 59	60 to 64	65 years and	
		•	lay, Ocean, Salem,	years old	older								
	Cı	ımbe	rland, Gloucester)	*	*				*	*	•		
			Aetna Life Ins. Co.	\$136.00	\$147.00	\$170.00	\$177.00	\$204.00	\$265.00	\$288.00	\$355.00	\$406.00	\$448.00
		_	AmeriHealth HMO	\$183.23	\$183.23	\$201.16	\$237.01	\$265.89	\$314.68	\$434.18	\$598.49	\$641.31	\$641.31
	_	Male	Celtic Ins. Co.	\$854.00	\$1,001.00	\$1,102.00	\$1,291.00	\$1,589.00	\$1,748.00	\$1,923.00	\$2,115.00	\$2,327.00	\$2,560.00
	ġ	2	CIGNA Healthcare	\$771.00	\$771.00	\$866.00	\$866.00	\$992.00	\$992.00	\$1,386.00	\$1,386.00	\$2,359.00	\$2,359.00
	× ×		Horizon BCBSNJ	\$144.14	\$144.14	\$168.02	\$201.20	\$211.72	\$247.76	\$288.78	\$365.49	\$450.28	\$479.31
	an		Oxford Health Ins	\$138.38	\$141.28	\$156.87	\$187.54	\$208.21	\$249.62	\$291.72	\$363.98	\$429.56	\$440.31
	Without any Rider		Aetna Life Ins. Co.	\$152.00	\$177.00	\$205.00	\$219.00	\$235.00	\$245.00	\$288.00	\$304.00	\$386.00	\$409.00
	럁	e	AmeriHealth HMO	\$332.61	\$400.32	\$376.42	\$347.54	\$362.48	\$378.42	\$432.19	\$559.66	\$639.32	\$641.31
Φ	≥	Female	Celtic Ins. Co.	\$939.40	\$1,101.10	\$1,212.20	\$1,420.10	\$1,747.90	\$1,922.80	\$2,115.30	\$2,326.50	\$2,559.70	\$2,816.00
<u>g</u>		Fel	CIGNA Healthcare	\$771.00	\$771.00	\$866.00	\$866.00	\$992.00	\$992.00	\$1,386.00	\$1,386.00	\$2,359.00	\$2,359.00
Single			Horizon BCBSNJ	\$179.40	\$211.72	\$251.61	\$257.34	\$261.12	\$251.61	\$279.70	\$297.76	\$340.81	\$349.14
			Oxford Health Ins	\$163.80	\$192.11	\$230.22	\$237.53	\$261.58	\$254.27	\$283.24	\$304.41	\$352.68	\$379.82
			AmeriHealth HMO 1**	\$184.00	\$184.00	\$202.00	\$238.00	\$267.00	\$316.00	\$436.00	\$601.00	\$644.00	\$644.00
		Male	AmeriHealth HMO 2**	\$274.00	\$287.00	\$303.00	\$355.00	\$397.00	\$470.00	\$650.00	\$898.00	\$959.00	\$959.00
		Σ	Horizon BCBSNJ	\$181.31	\$181.31	\$211.33	\$253.07	\$266.31	\$311.65	\$363.25	\$459.72	\$566.38	\$602.90
	Rider		Oxford Health Ins	\$173.39	\$177.02	\$196.55	\$234.99	\$260.88	\$312.77	\$365.52	\$456.07	\$538.25	\$551.70
	≅	9	AmeriHealth HMO 1**	\$334.00	\$402.00	\$378.00	\$349.00	\$364.00	\$380.00	\$434.00	\$562.00	\$642.00	\$644.00
		Female	AmeriHealth HMO 2**	\$500.00	\$600.00	\$563.00	\$522.00	\$543.00	\$568.00	\$646.00	\$837.00	\$959.00	\$959.00
		Fer	Horizon BCBSNJ	\$225.65	\$266.31	\$316.48	\$323.70	\$328.45	\$316.48	\$351.81	\$374.54	\$428.68	\$439.16
			Oxford Health Ins	\$205.24	\$240.71	\$288.47	\$297.63	\$327.76	\$318.60	\$354.90	\$381.43	\$441.91	\$475.92
			Aetna Life Ins. Co.	\$269.00	\$280.00	\$303.00	\$310.00	\$337.00	\$398.00	\$421.00	\$488.00	\$539.00	\$581.00
			AmeriHealth HMO	\$585.55	\$585.55	\$603.47	\$638.33	\$667.21	\$716.00	\$836.50	\$1,000.81	\$1,043.63	\$1,043.63
	١. ا	Male	Celtic Ins. Co.	\$1,494.50	\$1,751.75	\$1,928.50	\$2,259.25	\$2,780.75	\$3,059.00	\$3,365.25	\$3,701.25	\$4,072.25	\$4,480.00
	Rider	Ë	CIGNA Healthcare	\$1,387.00	\$1,387.00	\$1,558.00	\$1,558.00	\$1,786.00	\$1,786.00	\$2,494.00	\$2,494.00	\$4,247.00	\$4,247.00
	굗		Horizon BCBSNJ	\$384.41	\$384.41	\$408.28	\$441.47	\$451.97	\$488.01	\$529.06	\$605.77	\$690.53	\$719.57
	Without any		Oxford Health Ins	\$346.59	\$349.48	\$365.07	\$395.74	\$416.41	\$457.83	\$499.92	\$572.19	\$637.77	\$648.51
eu	ij		Aetna Life Ins. Co.	\$285.00	\$310.00	\$338.00	\$352.00	\$368.00	\$378.00	\$421.00	\$437.00	\$519.00	\$542.00
늘	울	e	AmeriHealth HMO	\$734.92	\$801.64	\$778.74	\$749.86	\$764.80	\$780.73	\$834.51	\$960.98	\$1,041.64	\$1,043.63
Iĕ	≶	nale	Celtic Ins. Co.	\$1,643.95	\$1,926.93	\$2,121.35	\$2,485.18	\$3,058.83	\$3,364.90	\$3,701.78	\$4,071.38	\$4,479.48	\$4,928.00
ਹ		Femal	CIGNA Healthcare	\$1,387.00	\$1,387.00	\$1,558.00	\$1,558.00	\$1,786.00	\$1,786.00	\$2,494.00	\$2,494.00	\$4,247.00	\$4,247.00
Adult and Child(ren)			Horizon BCBSNJ	\$419.66	\$451.97	\$491.86	\$497.60	\$501.39	\$491.86	\$519.95	\$538.00	\$581.06	\$589.39
ā			Oxford Health Ins	\$372.00	\$400.31	\$438.43	\$445.74	\$469.78	\$462.47	\$491.44	\$512.62	\$560.89	\$588.03
₹			AmeriHealth HMO 1**	\$588.00	\$588.00	\$606.00	\$641.00	\$670.00	\$719.00	\$840.00	\$1,005.00	\$1,048.00	\$1,048.00
Ρ		Male	AmeriHealth HMO 2**	\$875.00	\$887.00	\$903.00	\$955.00	\$998.00	\$1,070.00	\$1,251.00	\$1,498.00	\$1,560.00	\$1,560.00
		Ĕ	Horizon BCBSNJ	\$483.52	\$483.52	\$513.55	\$555.30	\$568.50	\$613.83	\$665.48	\$761.96	\$868.59	\$905.11
	Rider		Oxford Health Ins	\$434.27	\$437.90	\$457.44	\$495.87	\$521.77	\$573.66	\$626.41	\$716.95	\$799.13	\$812.59
	滋	a)	AmeriHealth HMO 1**	\$738.00	\$805.00	\$782.00	\$753.00	\$768.00	\$784.00	\$838.00	\$965.00	\$1,046.00	\$1,048.00
		nale	AmeriHealth HMO 2**	\$1,100.00	\$1,200.00	\$1,163.00	\$1,122.00	\$1,144.00	\$1,168.00	\$1,246.00	\$1,437.00	\$1,559.00	\$1,560.00
		Female	Horizon BCBSNJ	\$527.84	\$568.50	\$618.67	\$625.90	\$630.66	\$618.67	\$654.04	\$676.72	\$730.88	\$741.37
			Oxford Health Ins	\$466.12	\$501.60	\$549.35	\$558.51	\$588.64	\$579.48	\$615.78	\$642.31	\$702.79	\$736.80

· c	Zip Codes 080, 082-084, 087 (Atlantic, Cape May, Ocean, Salem, Cumberland, Gloucester)			25 to 29 years old	30 to 34 years old	35 to 39 years old	40 to 44 years old	45 to 49 years old	50 to 54 years old	55 to 59 years old	60 to 64 years old	65 years and older
	e	Aetna Life Ins. Co.	\$288.00	\$324.00	\$375.00	\$396.00	\$439.00	\$510.00	\$576.00	\$659.00	\$792.00	\$857.00
	Ride	AmeriHealth HMO <sup>†</sup>	\$515.84	\$583.56	\$577.58	\$584.55	\$628.37	\$693.10	\$866.37	\$1,158.15	\$1,280.64	\$1,282.63
		Celtic Ins. Co. (M)	\$1,989.82	\$2,332.33	\$2,567.66	\$3,008.03	\$3,702.37	\$4,072.84	\$4,480.59	\$4,927.95	\$5,421.91	\$5,964.80
ults*	an	Celtic Ins. Co. (F)	\$2,188.80	\$2,565.56	\$2,824.43	\$3,308.83	\$4,072.61	\$4,480.12	\$4,928.65	\$5,420.75	\$5,964.10	\$6,561.28
<u> </u>	9	CIGNA Healthcare	\$1,488.00	\$1,488.00	\$1,671.00	\$1,671.00	\$1,915.00	\$1,915.00	\$2,674.00	\$2,674.00	\$4,554.00	\$4,554.00
Ad	With	Horizon BCBSNJ	\$323.57	\$355.87	\$419.65	\$458.55	\$472.86	\$499.37	\$568.50	\$663.24	\$791.10	\$828.44
9		Oxford Health Ins	\$287.07	\$316.73	\$367.71	\$403.84	\$446.27	\$478.70	\$546.21	\$635.00	\$743.12	\$779.10
Two	Rider	AmeriHealth HMO 1**, <sup>†</sup>	\$518.00	\$586.00	\$580.00	\$587.00	\$631.00	\$696.00	\$870.00	\$1,163.00	\$1,286.00	\$1,288.00
		AmeriHealth HMO 2**,†	\$774.00	\$887.00	\$866.00	\$877.00	\$940.00	\$1,038.00	\$1,296.00	\$1,735.00	\$1,918.00	\$1,918.00
		Horizon BCBSNJ	\$406.99	\$447.64	\$527.83	\$576.79	\$594.78	*	\$715.07	\$834.25	\$995.07	\$1,042.05
		Oxford Health Ins	\$359.70	\$396.86	\$460.74	\$506.02	\$559.18	\$599.81	\$684.40		\$931.13	\$976.21
	e	Aetna Life Ins. Co.	\$421.00	\$457.00	\$508.00		\$572.00				\$925.00	
	Rig Ši	AmeriHealth HMO <sup>†</sup>	\$918.16	\$985.87	\$979.90	\$985.87	\$1,029.69	\$1,094.42	\$1,268.69	\$1,560.47	\$1,682.95	\$1,684.94
	ج	Celtic Ins. Co. (M)	\$1,998.36	\$2,342.34	\$2,578.68	\$3,020.94	\$3,718.26	\$4,090.32	\$4,499.82	\$4,949.10	\$5,445.18	\$5,990.40
*	t ar	Celtic Ins. Co. (F)	\$2,198.20	\$2,576.57	\$2,836.55	\$3,323.03	\$4,090.09	\$4,499.35	\$4,949.80	\$5,444.01	\$5,989.70	\$6,589.44
Family*	ŏ	CIGNA Healthcare	\$2,143.00	\$2,143.00	\$2,407.00	\$2,407.00	\$2,759.00	\$2,759.00	\$3,852.00	\$3,852.00	\$6,559.00	\$6,559.00
Ē	Vith	Horizon BCBSNJ	\$625.16	\$657.47	\$721.23	\$760.16	\$774.45	\$800.98	\$870.11	\$964.86	\$1,092.69	\$1,130.04
ь		Oxford Health Ins	\$578.56	\$608.22	\$659.20	\$695.33	\$737.76	\$770.19	\$837.70	\$926.49	\$1,034.61	\$1,070.59
		AmeriHealth HMO 1**,†	\$922.00	\$990.00	\$984.00	\$990.00	\$1,034.00	\$1,099.00	\$1,274.00	\$1,567.00	\$1,690.00	. ,
	Rider	AmeriHealth HMO 2**,†	\$1,375.00	\$1,487.00	\$1,466.00	\$1,477.00	\$1,541.00	\$1,638.00	\$1,897.00	\$2,335.00	\$2,519.00	\$2,519.00
		Horizon BCBSNJ	\$786.34	\$826.99	\$907.19	\$956.16			\$1,094.44		\$1,374.42	
		Oxford Health Ins	\$724.94	\$762.10	\$825.98	\$871.25	\$924.42	\$965.04	\$1,049.64	\$1,160.90	\$1,296.37	\$1,341.45

Companies may rate Basic & Essential policies based on age, gender and location of the primary insured/subscriber. Companies may choose to use all, none or some of these factors.

<sup>\*</sup>Most carriers do not price policies with two adults based on whether the primary insured/subscriber is male or female; Celtic is an exception.

Contact carriers for more information about the riders they offer.

<sup>\*\*</sup>AmeriHealth offers two riders: a Basic rider (1), and a Preferred rider (2).

<sup>†</sup>AmeriHealth's Two Adults and Family rates shown assume a male/female composition. AmeriHealth has separate rate schedules for these rate tiers for male/male and female/female families.