

High Deductible G Plan - Any Doctor, any Hospital, any Facility that takes Medicare
 No PPO or HMO list to look up

PLAN HDG - AREA 2 (ZIP 320-322; 327-329; 347; 349)

Non Smoker **Male**

Preferred		Effective Date: 01/01/2020			Plan Code: 512
Issue Age	Annual	Semi Annual	Quarterly	Monthly	
65	697	349	174	58	
66	752	376	188	63	
67	752	376	188	63	
68	752	376	188	63	
69	752	376	188	63	
70	897	449	224	75	
71	897	449	224	75	
72	897	449	224	75	
73	897	449	224	75	
74	897	449	224	75	
75	1155	578	289	96	
76	1155	578	289	96	
77	1155	578	289	96	
78	1155	578	289	96	
79	1155	578	289	96	
80+	1281	641	320	107	

Non Smoker **Female**

Preferred		Effective Date: 01/01/2020			Plan Code: 513
Issue Age	Annual	Semi Annual	Quarterly	Monthly	
65	607	304	152	51	
66	654	327	164	55	
67	654	327	164	55	
68	654	327	164	55	
69	654	327	164	55	
70	780	390	195	65	
71	780	390	195	65	
72	780	390	195	65	
73	780	390	195	65	
74	780	390	195	65	
75	1004	502	251	84	
76	1004	502	251	84	
77	1004	502	251	84	
78	1004	502	251	84	
79	1004	502	251	84	
80+	1114	557	279	93	

Standard Smoker Effective Date: 01/01/2020 Plan Code: 514

Issue Age	Annual	Semi Annual	Quarterly	Monthly	
65	803	402	201	67	
66	865	433	216	72	
67	865	433	216	72	
68	865	433	216	72	
69	865	433	216	72	
70	1032	516	258	86	
71	1032	516	258	86	
72	1032	516	258	86	
73	1032	516	258	86	
74	1032	516	258	86	
75	1329	665	332	111	
76	1329	665	332	111	
77	1329	665	332	111	
78	1329	665	332	111	
79	1329	665	332	111	
80+	1474	737	369	123	

Standard Smoker Effective Date: 01/01/2020 Plan Code: 515

Issue Age	Annual	Semi Annual	Quarterly	Monthly	
65	697	349	174	58	
66	752	376	188	63	
67	752	376	188	63	
68	752	376	188	63	
69	752	376	188	63	
70	897	449	224	75	
71	897	449	224	75	
72	897	449	224	75	
73	897	449	224	75	
74	897	449	224	75	
75	1155	578	289	96	
76	1155	578	289	96	
77	1155	578	289	96	
78	1155	578	289	96	
79	1155	578	289	96	
80+	1281	641	320	107	