

Individual PPO Value First Plan Rates



Non-Tobacco User Rates 80/50 (Region 1)

Deductible	\$1,000			\$2,500			\$5,000			\$10,000		
	Male	Female		Male	Female		Male	Female		Male	Female	
		Non-Maternity	Maternity		Non-Maternity	Maternity		Non-Maternity	Maternity		Non-Maternity	Maternity
19-24	\$116	\$143	\$245	\$92	\$114	\$195	\$73	\$92	\$156	\$52	\$65	\$111
25-29	\$124	\$167	\$313	\$98	\$135	\$248	\$79	\$108	\$197	\$56	\$78	\$142
30-34	\$132	\$193	\$308	\$105	\$155	\$245	\$84	\$124	\$196	\$60	\$89	\$140
35-39	\$148	\$221	\$256	\$119	\$177	\$204	\$95	\$142	\$163	\$68	\$102	\$116
40-44	\$168	\$245	\$251	\$134	\$196	\$200	\$106	\$158	\$159	\$76	\$112	\$113
45-49	\$216	\$275	\$275	\$172	\$219	\$219	\$137	\$175	\$175	\$97	\$124	\$124
50-54	\$353	\$363	\$363	\$280	\$290	\$290	\$224	\$231	\$231	\$160	\$166	\$166
55-59	\$426	\$434	\$434	\$339	\$346	\$346	\$271	\$275	\$275	\$193	\$196	\$196
60-64	\$570	\$543	\$543	\$453	\$433	\$433	\$362	\$345	\$345	\$259	\$247	\$247
65+	\$800	\$762	\$762	\$638	\$607	\$607	\$508	\$483	\$483	\$364	\$346	\$346
Per Child Rate*		\$84			\$66			\$54			\$39	

Non-Tobacco User Rates 80/50 (Region 2)

Deductible	\$1,000			\$2,500			\$5,000			\$10,000		
	Male	Female		Male	Female		Male	Female		Male	Female	
		Non-Maternity	Maternity		Non-Maternity	Maternity		Non-Maternity	Maternity		Non-Maternity	Maternity
19-24	\$127	\$158	\$269	\$101	\$126	\$214	\$81	\$101	\$172	\$57	\$72	\$123
25-29	\$137	\$184	\$345	\$108	\$148	\$272	\$88	\$119	\$217	\$61	\$85	\$156
30-34	\$144	\$213	\$339	\$116	\$171	\$269	\$92	\$137	\$216	\$66	\$98	\$154
35-39	\$162	\$243	\$282	\$130	\$195	\$224	\$105	\$156	\$178	\$74	\$112	\$127
40-44	\$186	\$269	\$277	\$147	\$216	\$220	\$117	\$174	\$175	\$83	\$124	\$125
45-49	\$237	\$302	\$302	\$189	\$241	\$241	\$152	\$193	\$193	\$107	\$137	\$137
50-54	\$388	\$399	\$399	\$310	\$318	\$318	\$247	\$254	\$254	\$176	\$183	\$183
55-59	\$469	\$477	\$477	\$373	\$381	\$381	\$299	\$302	\$302	\$213	\$216	\$216
60-64	\$628	\$597	\$597	\$499	\$476	\$476	\$398	\$379	\$379	\$284	\$271	\$271
65+	\$881	\$838	\$838	\$702	\$667	\$667	\$560	\$532	\$532	\$400	\$381	\$381
Per Child Rate*		\$92			\$73			\$59			\$43	

Tobacco User Rates 80/50 (Region 1)

Deductible	\$1,000			\$2,500			\$5,000			\$10,000		
	Male	Female		Male	Female		Male	Female		Male	Female	
		Non-Maternity	Maternity		Non-Maternity	Maternity		Non-Maternity	Maternity		Non-Maternity	Maternity
19-24	\$140	\$172	\$297	\$111	\$137	\$236	\$89	\$111	\$188	\$64	\$79	\$135
25-29	\$151	\$201	\$378	\$120	\$163	\$300	\$96	\$131	\$240	\$68	\$94	\$171
30-34	\$160	\$235	\$373	\$128	\$188	\$298	\$102	\$151	\$237	\$72	\$108	\$169
35-39	\$180	\$268	\$311	\$143	\$215	\$247	\$114	\$172	\$197	\$81	\$122	\$142
40-44	\$204	\$298	\$303	\$161	\$237	\$242	\$129	\$191	\$192	\$92	\$136	\$137
45-49	\$260	\$332	\$332	\$208	\$264	\$264	\$166	\$211	\$211	\$119	\$151	\$151
50-54	\$426	\$438	\$438	\$339	\$349	\$349	\$271	\$279	\$279	\$193	\$199	\$199
55-59	\$515	\$524	\$524	\$410	\$418	\$418	\$327	\$332	\$332	\$234	\$237	\$237
60-64	\$690	\$656	\$656	\$548	\$523	\$523	\$437	\$417	\$417	\$314	\$298	\$298
65+	\$969	\$922	\$922	\$772	\$734	\$734	\$615	\$584	\$584	\$441	\$419	\$419
Per Child Rate*		\$84			\$66			\$54			\$39	

Tobacco User Rates 80/50 (Region 2)

Deductible	\$1,000			\$2,500			\$5,000			\$10,000		
	Male	Female		Male	Female		Male	Female		Male	Female	
		Non-Maternity	Maternity		Non-Maternity	Maternity		Non-Maternity	Maternity		Non-Maternity	Maternity
19-24	\$154	\$189	\$326	\$123	\$152	\$259	\$98	\$123	\$207	\$70	\$88	\$148
25-29	\$166	\$222	\$416	\$131	\$178	\$330	\$106	\$143	\$265	\$74	\$104	\$188
30-34	\$176	\$258	\$410	\$141	\$207	\$328	\$112	\$166	\$261	\$80	\$119	\$187
35-39	\$198	\$295	\$342	\$158	\$236	\$271	\$126	\$189	\$217	\$90	\$136	\$156
40-44	\$224	\$328	\$334	\$177	\$261	\$266	\$142	\$210	\$211	\$101	\$151	\$152
45-49	\$286	\$365	\$365	\$230	\$290	\$290	\$183	\$232	\$232	\$130	\$166	\$166
50-54	\$469	\$482	\$482	\$373	\$384	\$384	\$299	\$307	\$307	\$213	\$219	\$219
55-59	\$567	\$578	\$578	\$452	\$459	\$459	\$360	\$365	\$365	\$257	\$261	\$261
60-64	\$759	\$722	\$722	\$603	\$576	\$576	\$481	\$458	\$458	\$346	\$328	\$328
65+	\$1,065	\$1,013	\$1,013	\$849	\$807	\$807	\$676	\$642	\$642	\$485	\$461	\$461
Per Child Rate*		\$92			\$73			\$59			\$43	

REGION 1 (BLUE)

Barry Barton	Cedar Christian	Dade Dallas	Douglas Greene	Hickory Howell	Jasper Ladele	Lawrence McDonald	Newton Ozark	Oregon Phelps	Polk Shannon	Stone Taney	Texas Vernon	Webster Wright
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REGION 2 (GREEN)

Benton Boone	Butler Callaway	Camden Carter	Cole Cooper	Crawford Dent	Gasconade Howard	Iron Madison	Maries Miller	Moniteau Morgan	Osage Pulaski	Reynolds Ripley	St. Clair Washington	Wayne
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COX HEALTH PLANS
CoxHealth

*With parent membership
CHP IRTVF-304
Rates Effective 2/1/12