



## HealthPartners Empower Individual Plan

### Single Rates - rates for April 1, 2011 through March 31, 2012

This rate sheet lists preferred rates for the HealthPartners Empower Individual Plan. Use the following pages to find your rates.

Rates are available for either tobacco-free applicants or applicants who have used tobacco or a tobacco cessation product in the past 12 months. You may also choose to have coverage for chemical dependency. Tobacco use, chemical dependency and other health factors could result in a higher rate.

Please keep this rate sheet for future reference. When you have a birthday that places you in a new age category, your rate will be adjusted accordingly the month after your birthday. You will not receive additional notification.

Applicants must be age 19 to 64 to apply.

If you have questions or need help estimating your rate, call HealthPartners Individual Sales at 952-883-5599 or 1-877-838-4949. TTY users call 952-883-5127 or 1-800-443-0156.

### Worksheet for Estimating Premiums

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Your Deductible Level	_____
Your Rate	\$ _____
<b>Estimated Monthly Premium</b>	\$ _____

The HealthPartners family of health plans are underwritten and administered by HealthPartners, Inc., Group Health, Inc. or HealthPartners Administrators, Inc.

**Tobacco-free without Chemical Dependency Coverage**

Age	100% Coinsurance	
	\$3,050	\$5,950
19-29	\$152.32	\$112.32
30-34	\$164.60	\$121.39
35-39	\$174.80	\$128.90
40-41	\$180.03	\$132.77
42-43	\$187.24	\$138.08
44-45	\$204.08	\$150.50
46-47	\$226.53	\$167.05
48-49	\$251.46	\$185.44
50-51	\$281.63	\$207.68
52-53	\$315.42	\$232.61
54-55	\$346.96	\$255.86
56-57	\$378.19	\$278.89
58-59	\$412.23	\$303.99
60-64	\$446.18	\$329.03

**Tobacco-free with Chemical Dependency Coverage**

Age	100% Coinsurance	
	\$3,050	\$5,950
19-29	\$156.89	\$115.69
30-34	\$169.54	\$125.03
35-39	\$180.04	\$132.77
40-41	\$185.43	\$136.75
42-43	\$192.85	\$142.22
44-45	\$210.20	\$155.02
46-47	\$233.33	\$172.06
48-49	\$259.00	\$191.00
50-51	\$290.07	\$213.91
52-53	\$324.88	\$239.58
54-55	\$357.37	\$263.53
56-57	\$389.53	\$287.25
58-59	\$424.60	\$313.11
60-64	\$459.56	\$338.90

Rates are subject to change.

**Tobacco user without Chemical Dependency Coverage**

Age	100% Coinsurance	
	\$3,050	\$5,950
19-29	\$203.09	\$149.76
30-34	\$219.47	\$161.85
35-39	\$233.06	\$171.87
40-41	\$240.04	\$177.02
42-43	\$249.65	\$184.10
44-45	\$272.11	\$200.67
46-47	\$302.04	\$222.73
48-49	\$335.28	\$247.25
50-51	\$375.50	\$276.91
52-53	\$420.56	\$310.14
54-55	\$462.61	\$341.14
56-57	\$504.25	\$371.85
58-59	\$549.64	\$405.32
60-64	\$594.90	\$438.70

**Tobacco user with Chemical Dependency Coverage**

Age	100% Coinsurance	
	\$3,050	\$5,950
19-29	\$209.18	\$154.25
30-34	\$226.05	\$166.71
35-39	\$240.05	\$177.03
40-41	\$247.24	\$182.33
42-43	\$257.14	\$189.62
44-45	\$280.27	\$206.69
46-47	\$311.10	\$229.41
48-49	\$345.34	\$254.67
50-51	\$386.77	\$285.22
52-53	\$433.18	\$319.44
54-55	\$476.49	\$351.37
56-57	\$519.38	\$383.01
58-59	\$566.13	\$417.48
60-64	\$612.75	\$451.86

Rates are subject to change.



## HealthPartners Empower Individual Plan

### Family Rates - rates for April 1, 2011 through March 31, 2012

This rate sheet lists preferred rates for the HealthPartners Empower Individual Plan. Use the following pages to find rates for you and your family.

Rates are available for either tobacco-free applicants or applicants who have used tobacco or a tobacco cessation product in the past 12 months. You may also choose to have coverage for chemical dependency. Tobacco use, chemical dependency and other health factors could result in a higher rate.

Please keep this rate sheet for future reference. When you have a birthday that places you in a new age category, your rate will be adjusted accordingly the month after your birthday. You will not receive additional notification.

#### **Covering Dependents**

You may cover dependent children ages 26 or younger using these rates. Premiums are charged per child on a family contract. A family contract covers at least one adult policyholder and one or more dependent children.

Applicants must be age 19 to 64 to apply.

If you have questions or need help estimating your rates, call HealthPartners Individual Sales at 952-883-5599 or 1-877-838-4949. TTY users call 952-883-5127 or 1-800-443-0156.

#### **Worksheet for Estimating Premiums**

Your Deductible Level	_____
Your Rate	\$ _____
Spouse Rate (if applicable)	\$ _____
Per Child	\$ _____
<b>Estimated Monthly Premium</b>	<b>\$ _____</b>

The HealthPartners family of health plans are underwritten and administered by HealthPartners, Inc., Group Health, Inc. or HealthPartners Administrators, Inc.

**Tobacco-free without Chemical Dependency Coverage**

100% Coinsurance		
Age	\$6,100	\$11,900
19-29	\$141.61	\$104.42
30-34	\$153.03	\$112.85
35-39	\$162.51	\$119.84
40-41	\$167.38	\$123.43
42-43	\$174.07	\$128.36
44-45	\$189.74	\$139.92
46-47	\$210.60	\$155.30
48-49	\$233.78	\$172.40
50-51	\$261.83	\$193.08
52-53	\$293.24	\$216.25
54-55	\$322.56	\$237.87
56-57	\$351.60	\$259.28
58-59	\$383.24	\$282.62
60-64	\$414.80	\$305.89

**Dependent Children Rates**

Per child	\$128.31	\$94.62
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**Tobacco-free with Chemical Dependency Coverage**

100% Coinsurance		
Age	\$6,100	\$11,900
19-29	\$145.86	\$107.56
30-34	\$157.62	\$116.24
35-39	\$167.39	\$123.43
40-41	\$172.40	\$127.13
42-43	\$179.29	\$132.21
44-45	\$195.43	\$144.12
46-47	\$216.92	\$159.96
48-49	\$240.80	\$177.57
50-51	\$269.68	\$198.87
52-53	\$302.04	\$222.73
54-55	\$332.24	\$245.01
56-57	\$362.15	\$267.06
58-59	\$394.74	\$291.09
60-64	\$427.25	\$315.06

**Dependent Children Rates**

Per child	\$132.16	\$97.46
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Rates are subject to change.

**Tobacco user without Chemical Dependency Coverage****100% Coinsurance**

<b>Age</b>	<b>\$6,100</b>	<b>\$11,900</b>
19-29	\$188.81	\$139.23
30-34	\$204.04	\$150.47
35-39	\$216.68	\$159.78
40-41	\$223.17	\$164.57
42-43	\$232.09	\$171.15
44-45	\$252.98	\$186.56
46-47	\$280.80	\$207.07
48-49	\$311.71	\$229.86
50-51	\$349.10	\$257.44
52-53	\$390.99	\$288.33
54-55	\$430.08	\$317.16
56-57	\$468.80	\$345.71
58-59	\$510.99	\$376.82
60-64	\$553.07	\$407.85

**Dependent Children Rates**

<b>Per child</b>	\$171.08	\$126.16
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**Tobacco user with Chemical Dependency Coverage****100% Coinsurance**

<b>Age</b>	<b>\$6,100</b>	<b>\$11,900</b>
19-29	\$194.47	\$143.41
30-34	\$210.16	\$154.98
35-39	\$223.18	\$164.57
40-41	\$229.87	\$169.51
42-43	\$239.05	\$176.28
44-45	\$260.57	\$192.16
46-47	\$289.22	\$213.28
48-49	\$321.06	\$236.76
50-51	\$359.57	\$265.16
52-53	\$402.72	\$296.98
54-55	\$442.98	\$326.67
56-57	\$482.86	\$356.08
58-59	\$526.32	\$388.12
60-64	\$569.66	\$420.09

**Dependent Children Rates**

<b>Per child</b>	\$176.21	\$129.94
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Rates are subject to change.