

**Atlantis Health Plan
Sole Proprietor Rates**

3rd Quarter 2009

AUG/SEP

<p>Plan #1: Low HMO</p> <p>Physician Copay: \$20 Hospital Copay: \$500 Pharmacy Copay: \$20/30/40 ER: \$50 Dependent Age: 25</p> <p align="center">Rates</p> <table border="0"> <thead> <tr> <th></th> <th align="center"><u>2 Tier</u></th> <th align="center"><u>4 Tier</u></th> </tr> </thead> <tbody> <tr> <td>Single</td> <td>\$ 373.75</td> <td>\$ 373.75</td> </tr> <tr> <td>EE+ Spouse</td> <td></td> <td>\$ 737.50</td> </tr> <tr> <td>EE-Child(ren)</td> <td></td> <td>\$ 741.31</td> </tr> <tr> <td>Family</td> <td>\$ 943.02</td> <td>\$ 1,129.62</td> </tr> </tbody> </table>		<u>2 Tier</u>	<u>4 Tier</u>	Single	\$ 373.75	\$ 373.75	EE+ Spouse		\$ 737.50	EE-Child(ren)		\$ 741.31	Family	\$ 943.02	\$ 1,129.62	<p>Plan #2: Low HMO, Generic Pharmacy</p> <p>Physician Copay: \$20 Hospital Copay: \$500 Pharmacy Copay: \$0 Generic* ER: \$50 Dependent Age: 25</p> <p align="center">Rates</p> <table border="0"> <thead> <tr> <th></th> <th align="center"><u>2 Tier</u></th> <th align="center"><u>4 Tier</u></th> </tr> </thead> <tbody> <tr> <td>Single</td> <td>\$ 350.07</td> <td>\$ 350.07</td> </tr> <tr> <td>EE+ Spouse</td> <td></td> <td>\$ 690.14</td> </tr> <tr> <td>EE-Child(ren)</td> <td></td> <td>\$ 694.20</td> </tr> <tr> <td>Family</td> <td>\$ 882.27</td> <td>\$1,057.22</td> </tr> </tbody> </table>		<u>2 Tier</u>	<u>4 Tier</u>	Single	\$ 350.07	\$ 350.07	EE+ Spouse		\$ 690.14	EE-Child(ren)		\$ 694.20	Family	\$ 882.27	\$1,057.22
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<p>Plan #3: High HMO</p> <p>Physician Copay: \$10 Hospital Copay: \$0 Pharmacy Copay: \$20/30/40 ER: \$50 Dependent Age: 25</p> <p align="center">Rates</p> <table border="0"> <thead> <tr> <th></th> <th align="center"><u>2 Tier</u></th> <th align="center"><u>4 Tier</u></th> </tr> </thead> <tbody> <tr> <td>Single</td> <td>\$ 435.46</td> <td>\$ 435.46</td> </tr> <tr> <td>EE+ Spouse</td> <td></td> <td>\$ 860.92</td> </tr> <tr> <td>EE-Child(ren)</td> <td></td> <td>\$ 865.60</td> </tr> <tr> <td>Family</td> <td>\$ 1,101.30</td> <td>\$ 1,319.57</td> </tr> </tbody> </table>		<u>2 Tier</u>	<u>4 Tier</u>	Single	\$ 435.46	\$ 435.46	EE+ Spouse		\$ 860.92	EE-Child(ren)		\$ 865.60	Family	\$ 1,101.30	\$ 1,319.57	<p>Plan #4: Low POS</p> <p>Physician Copay: \$20 Hospital Copay: \$500 Pharmacy Copay: \$20/30/40 ER: \$50 Deductible Single/Family: \$2000/\$4000 Coinsurance: 70/30 UCR: 80% Out of Pocket Max: \$5000/\$10,000 Dependent Age: 25</p> <p align="center">Rates</p> <table border="0"> <thead> <tr> <th></th> <th align="center"><u>2 Tier</u></th> <th align="center"><u>4 Tier</u></th> </tr> </thead> <tbody> <tr> <td>Single</td> <td>\$ 415.37</td> <td>\$ 415.37</td> </tr> <tr> <td>EE+ Spouse</td> <td></td> <td>\$ 820.74</td> </tr> <tr> <td>EE-Child(ren)</td> <td></td> <td>\$ 825.19</td> </tr> <tr> <td>Family</td> <td>\$ 1,049.77</td> <td>\$1,257.72</td> </tr> </tbody> </table>		<u>2 Tier</u>	<u>4 Tier</u>	Single	\$ 415.37	\$ 415.37	EE+ Spouse		\$ 820.74	EE-Child(ren)		\$ 825.19	Family	\$ 1,049.77	\$1,257.72
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A \$10 monthly billing fee has been added to your premium.

These rates include New York State's new health insurance taxes.

**Plan 2 - Generic Drug \$0 copay - \$0 deductible - no maximum.*

Brand Drugs have a \$25 co-payment - an annual deductible of \$250 - and an annual maximum of \$2,000 for covered brand drugs only.

This is a brief summary of benefits and should be used as a guide only.

Please refer to Atlantis Health Plan's subscriber agreement for a complete description of requirements for coverage, covered services, limitations and exclusions.

Note: The Rates contained in this document have been filed with the NYS Insurance Department but have not received final approval and therefore are subject to change.



Dated: 6/23/09