

**Atlantis Health Plan  
Sole Proprietor Rates  
2ndQuarter 2010**

<p><b>Plan #1: Low HMO</b></p> <p>Physician Copay: \$20  Hospital Copay: \$500  Pharmacy Copay: \$20/30/40  ER: \$50  Dependent Age: 25</p> <p style="text-align: center;"><b>Rates</b></p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th style="text-align: center;"><u>2 Tier</u></th> <th style="text-align: center;"><u>4 Tier</u></th> </tr> </thead> <tbody> <tr> <td>Single</td> <td style="text-align: center;">405.72</td> <td style="text-align: center;">405.72</td> </tr> <tr> <td>EE+ Spouse</td> <td></td> <td style="text-align: center;">797.44</td> </tr> <tr> <td>EE-Child(ren)</td> <td></td> <td style="text-align: center;">806.48</td> </tr> <tr> <td>Family</td> <td style="text-align: center;">1024.79</td> <td style="text-align: center;">1226.79</td> </tr> </tbody> </table>		<u>2 Tier</u>	<u>4 Tier</u>	Single	405.72	405.72	EE+ Spouse		797.44	EE-Child(ren)		806.48	Family	1024.79	1226.79	<p><b>Plan #2: Low HMO, Generic Pharmacy</b></p> <p>Physician Copay: \$20  Hospital Copay: \$500  Pharmacy Copay: \$0 Generic*  ER: \$50  Dependent Age: 25</p> <p style="text-align: center;"><b>Rates</b></p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th style="text-align: center;"><u>2 Tier</u></th> <th style="text-align: center;"><u>4 Tier</u></th> </tr> </thead> <tbody> <tr> <td>Single</td> <td style="text-align: center;">380.92</td> <td style="text-align: center;">380.92</td> </tr> <tr> <td>EE+ Spouse</td> <td></td> <td style="text-align: center;">747.84</td> </tr> <tr> <td>EE-Child(ren)</td> <td></td> <td style="text-align: center;">756.31</td> </tr> <tr> <td>Family</td> <td style="text-align: center;">960.80</td> <td style="text-align: center;">1150.16</td> </tr> </tbody> </table>		<u>2 Tier</u>	<u>4 Tier</u>	Single	380.92	380.92	EE+ Spouse		747.84	EE-Child(ren)		756.31	Family	960.80	1150.16
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<p><b>Plan #3: High HMO</b></p> <p>Physician Copay: \$10  Hospital Copay: \$0  Pharmacy Copay: \$20/30/40  ER: \$50  Dependent Age: 25</p> <p style="text-align: center;"><b>Rates</b></p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th style="text-align: center;"><u>2 Tier</u></th> <th style="text-align: center;"><u>4 Tier</u></th> </tr> </thead> <tbody> <tr> <td>Single</td> <td style="text-align: center;">472.18</td> <td style="text-align: center;">472.18</td> </tr> <tr> <td>EE+ Spouse</td> <td></td> <td style="text-align: center;">930.36</td> </tr> <tr> <td>EE-Child(ren)</td> <td></td> <td style="text-align: center;">940.93</td> </tr> <tr> <td>Family</td> <td style="text-align: center;">1196.28</td> <td style="text-align: center;">1432.74</td> </tr> </tbody> </table>		<u>2 Tier</u>	<u>4 Tier</u>	Single	472.18	472.18	EE+ Spouse		930.36	EE-Child(ren)		940.93	Family	1196.28	1432.74	<p><b>Plan #4: Low POS</b></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 style="text-align: center;"><b>Rates</b></p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th style="text-align: center;"><u>2 Tier</u></th> <th style="text-align: center;"><u>4 Tier</u></th> </tr> </thead> <tbody> <tr> <td>Single</td> <td style="text-align: center;">456.29</td> <td style="text-align: center;">456.29</td> </tr> <tr> <td>EE+ Spouse</td> <td></td> <td style="text-align: center;">898.58</td> </tr> <tr> <td>EE-Child(ren)</td> <td></td> <td style="text-align: center;">908.78</td> </tr> <tr> <td>Family</td> <td style="text-align: center;">1155.28</td> <td style="text-align: center;">1383.54</td> </tr> </tbody> </table>		<u>2 Tier</u>	<u>4 Tier</u>	Single	456.29	456.29	EE+ Spouse		898.58	EE-Child(ren)		908.78	Family	1155.28	1383.54
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**A \$14 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: 2/12/10