

Delaware

PPO Health Insurance Monthly Plan Rates — Counties (New Castle, Kent, Sussex) - Effective 4/1/09*

PPO First Dollar 25						
Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$361	\$361	N/A	N/A	N/A	N/A
1	\$217	\$217	N/A	N/A	N/A	N/A
2-18	\$144	\$144	\$288	\$432	\$432	\$576
19-24	\$152	\$218	\$370	\$440	\$506	\$658
25-29	\$175	\$249	\$424	\$463	\$537	\$712
30-34	\$201	\$270	\$471	\$489	\$558	\$759
35-39	\$237	\$286	\$523	\$525	\$574	\$811
40-44	\$282	\$320	\$602	\$570	\$608	\$890
45-49	\$348	\$349	\$697	\$636	\$637	\$985
50-54	\$450	\$405	\$855	\$738	\$693	\$1,143
55-59	\$585	\$494	\$1,079	\$873	\$782	\$1,367
60-64	\$822	\$639	\$1,461	\$1,110	\$927	\$1,749
65+***	\$879	\$715	\$1,594	\$1,167	\$1,003	\$1,882

PPO 2500						
Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$216	\$216	N/A	N/A	N/A	N/A
1	\$130	\$130	N/A	N/A	N/A	N/A
2-18	\$86	\$86	\$172	\$258	\$258	\$344
19-24	\$91	\$130	\$221	\$263	\$302	\$393
25-29	\$108	\$153	\$261	\$280	\$325	\$433
30-34	\$128	\$171	\$299	\$300	\$343	\$471
35-39	\$154	\$186	\$340	\$326	\$358	\$512
40-44	\$188	\$213	\$401	\$360	\$385	\$573
45-49	\$238	\$239	\$477	\$410	\$411	\$649
50-54	\$312	\$283	\$595	\$484	\$455	\$767
55-59	\$415	\$351	\$766	\$587	\$523	\$938
60-64	\$592	\$459	\$1,051	\$764	\$631	\$1,223
65+***	\$634	\$514	\$1,148	\$806	\$686	\$1,320

PPO 5000 (With Maternity)						
Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$536	\$536	N/A	N/A	N/A	N/A
1	\$484	\$484	N/A	N/A	N/A	N/A
2-18	\$458	\$458	\$916	\$1,374	\$1,374	\$1,832
19-24	\$461	\$485	\$946	\$1,377	\$1,401	\$1,862
25-29	\$473	\$502	\$975	\$1,389	\$1,418	\$1,891
30-34	\$489	\$515	\$1,004	\$1,405	\$1,431	\$1,920
35-39	\$506	\$527	\$1,033	\$1,422	\$1,443	\$1,949
40-44	\$530	\$547	\$1,077	\$1,446	\$1,463	\$1,993
45-49	\$564	\$566	\$1,130	\$1,480	\$1,482	\$2,046
50-54	\$618	\$597	\$1,215	\$1,534	\$1,513	\$2,131
55-59	\$689	\$646	\$1,335	\$1,605	\$1,562	\$2,251
60-64	\$814	\$723	\$1,537	\$1,730	\$1,639	\$2,453
65+***	\$843	\$761	\$1,604	\$1,759	\$1,677	\$2,520

PPO First Dollar 35						
Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$292	\$292	N/A	N/A	N/A	N/A
1	\$175	\$175	N/A	N/A	N/A	N/A
2-18	\$117	\$117	\$234	\$351	\$351	\$468
19-24	\$122	\$176	\$298	\$356	\$410	\$532
25-29	\$141	\$200	\$341	\$375	\$434	\$575
30-34	\$162	\$218	\$380	\$396	\$452	\$614
35-39	\$190	\$231	\$421	\$424	\$465	\$655
40-44	\$227	\$259	\$486	\$461	\$493	\$720
45-49	\$281	\$281	\$562	\$515	\$515	\$796
50-54	\$363	\$326	\$689	\$597	\$560	\$923
55-59	\$471	\$398	\$869	\$705	\$632	\$1,103
60-64	\$662	\$515	\$1,177	\$896	\$749	\$1,411
65+***	\$708	\$576	\$1,284	\$942	\$810	\$1,518

PPO 2500 (With Maternity)						
Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$622	\$622	N/A	N/A	N/A	N/A
1	\$536	\$536	N/A	N/A	N/A	N/A
2-18	\$492	\$492	\$984	\$1,476	\$1,476	\$1,968
19-24	\$497	\$536	\$1,033	\$1,481	\$1,520	\$2,017
25-29	\$514	\$559	\$1,073	\$1,498	\$1,543	\$2,057
30-34	\$534	\$577	\$1,111	\$1,518	\$1,561	\$2,095
35-39	\$560	\$592	\$1,152	\$1,544	\$1,576	\$2,136
40-44	\$594	\$619	\$1,213	\$1,578	\$1,603	\$2,197
45-49	\$644	\$645	\$1,289	\$1,628	\$1,629	\$2,273
50-54	\$718	\$689	\$1,407	\$1,702	\$1,673	\$2,391
55-59	\$821	\$757	\$1,578	\$1,805	\$1,741	\$2,562
60-64	\$998	\$865	\$1,863	\$1,982	\$1,849	\$2,847
65+***	\$1,040	\$920	\$1,960	\$2,024	\$1,904	\$2,944

PPO High Deductible 1500						
Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$289	\$289	N/A	N/A	N/A	N/A
1	\$176	\$176	N/A	N/A	N/A	N/A
2-18	\$118	\$118	\$236	\$354	\$354	\$472
19-24	\$123	\$176	\$299	\$359	\$412	\$535
25-29	\$147	\$208	\$355	\$383	\$444	\$591
30-34	\$175	\$234	\$409	\$411	\$470	\$645
35-39	\$206	\$256	\$462	\$442	\$492	\$698
40-44	\$256	\$291	\$547	\$492	\$527	\$783
45-49	\$324	\$325	\$649	\$560	\$561	\$885
50-54	\$426	\$384	\$810	\$662	\$620	\$1,046
55-59	\$564	\$477	\$1,041	\$800	\$713	\$1,277
60-64	\$806	\$626	\$1,432	\$1,042	\$862	\$1,668
65+***	\$862	\$701	\$1,563	\$1,098	\$937	\$1,799

PPO 1500						
Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$277	\$277	N/A	N/A	N/A	N/A
1	\$166	\$166	N/A	N/A	N/A	N/A
2-18	\$111	\$111	\$222	\$333	\$333	\$444
19-24	\$117	\$168	\$285	\$339	\$390	\$507
25-29	\$138	\$195	\$333	\$360	\$417	\$555
30-34	\$161	\$215	\$376	\$383	\$437	\$598
35-39	\$191	\$231	\$422	\$413	\$453	\$644
40-44	\$229	\$263	\$492	\$451	\$485	\$714
45-49	\$287	\$289	\$576	\$509	\$511	\$798
50-54	\$376	\$339	\$715	\$598	\$561	\$937
55-59	\$493	\$417	\$910	\$715	\$639	\$1,132
60-64	\$700	\$543	\$1,243	\$922	\$765	\$1,465
65+***	\$748	\$608	\$1,356	\$970	\$830	\$1,578

PPO 5000						
Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$130	\$130	N/A	N/A	N/A	N/A
1	\$78	\$78	N/A	N/A	N/A	N/A
2-18	\$52	\$52	\$104	\$156	\$156	\$208
19-24	\$55	\$79	\$134	\$159	\$183	\$238
25-29	\$67	\$96	\$163	\$171	\$200	\$267
30-34	\$83	\$109	\$192	\$187	\$213	\$296
35-39	\$100	\$121	\$221	\$204	\$225	\$325
40-44	\$124	\$141	\$265	\$228	\$245	\$369
45-49	\$158	\$160	\$318	\$262	\$264	\$422
50-54	\$212	\$191	\$403	\$316	\$295	\$507
55-59	\$283	\$240	\$523	\$387	\$344	\$627
60-64	\$408	\$317	\$725	\$512	\$421	\$829
65+***	\$437	\$355	\$792	\$541	\$459	\$896

PPO High Deductible 3000 (HSA Compatible)						
Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$170	\$170	N/A	N/A	N/A	N/A
1	\$104	\$104	N/A	N/A	N/A	N/A
2-18	\$69	\$69	\$138	\$207	\$207	\$276
19-24	\$72	\$104	\$176	\$210	\$242	\$314
25-29	\$86	\$122	\$208	\$224	\$260	\$346
30-34	\$103	\$137	\$240	\$241	\$275	\$378
35-39	\$121	\$150	\$271	\$259	\$288	\$409
40-44	\$150	\$171	\$321	\$288	\$309	\$459
45-49	\$190	\$191	\$381	\$328	\$329	\$519
50-54	\$250	\$225	\$475	\$388	\$363	\$613
55-59	\$331	\$280	\$611	\$469	\$418	\$749
60-64	\$473	\$368	\$841	\$611	\$506	\$979
65+***	\$506	\$411	\$917	\$644	\$549	\$1,055

Aetna Advantage Plans for individuals, families and the self-employed are underwritten by Aetna Life Insurance Company (Aetna) directly and/or through an out of state blanket trust.

In some states, individuals may qualify as a business group of one and may be eligible for guaranteed issue, small group health plans. These plans are medically underwritten and you may be declined coverage in accordance with your health condition.



Delaware

PPO Health Insurance Monthly Plan Rates — Counties (New Castle, Kent, Sussex) - Effective 4/1/09*

PPO High Deductible 5000 (HSA Compatible)						
Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$132	\$132	N/A	N/A	N/A	N/A
1	\$79	\$79	N/A	N/A	N/A	N/A
2-18	\$53	\$53	\$106	\$159	\$159	\$212
19-24	\$56	\$80	\$136	\$162	\$186	\$242
25-29	\$68	\$97	\$165	\$174	\$203	\$271
30-34	\$83	\$111	\$194	\$189	\$217	\$300
35-39	\$101	\$123	\$224	\$207	\$229	\$330
40-44	\$126	\$143	\$269	\$232	\$249	\$375
45-49	\$160	\$161	\$321	\$266	\$267	\$427
50-54	\$215	\$194	\$409	\$321	\$300	\$515
55-59	\$287	\$243	\$530	\$393	\$349	\$636
60-64	\$414	\$322	\$736	\$520	\$428	\$842
65+***	\$443	\$360	\$803	\$549	\$466	\$909

PPO Value 2500						
Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$161	\$161	N/A	N/A	N/A	N/A
1	\$97	\$97	N/A	N/A	N/A	N/A
2-18	\$65	\$65	\$130	\$195	\$195	\$260
19-24	\$68	\$97	\$165	\$198	\$227	\$295
25-29	\$80	\$114	\$194	\$210	\$244	\$324
30-34	\$96	\$128	\$224	\$226	\$258	\$354
35-39	\$116	\$140	\$256	\$246	\$270	\$386
40-44	\$141	\$160	\$301	\$271	\$290	\$431
45-49	\$177	\$178	\$355	\$307	\$308	\$485
50-54	\$233	\$211	\$444	\$363	\$341	\$574
55-59	\$309	\$262	\$571	\$439	\$392	\$701
60-64	\$442	\$342	\$784	\$572	\$472	\$914
65+***	\$473	\$384	\$857	\$603	\$514	\$987

Preventive and Hospital Care 1250						
Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$125	\$125	N/A	N/A	N/A	N/A
1	\$75	\$75	N/A	N/A	N/A	N/A
2-18	\$50	\$50	\$100	\$150	\$150	\$200
19-24	\$53	\$75	\$128	\$153	\$175	\$228
25-29	\$65	\$92	\$157	\$165	\$192	\$257
30-34	\$78	\$105	\$183	\$178	\$205	\$283
35-39	\$95	\$115	\$210	\$195	\$215	\$310
40-44	\$118	\$134	\$252	\$218	\$234	\$352
45-49	\$151	\$152	\$303	\$251	\$252	\$403
50-54	\$203	\$183	\$386	\$303	\$283	\$486
55-59	\$271	\$228	\$499	\$371	\$328	\$599
60-64	\$390	\$304	\$694	\$490	\$404	\$794
65+***	\$418	\$340	\$758	\$518	\$440	\$858

PPO Value 7500						
Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$107	\$107	N/A	N/A	N/A	N/A
1	\$64	\$64	N/A	N/A	N/A	N/A
2-18	\$43	\$43	\$86	\$129	\$129	\$172
19-24	\$45	\$64	\$109	\$131	\$150	\$195
25-29	\$53	\$76	\$129	\$139	\$162	\$215
30-34	\$64	\$85	\$149	\$150	\$171	\$235
35-39	\$77	\$93	\$170	\$163	\$179	\$256
40-44	\$94	\$106	\$200	\$180	\$192	\$286
45-49	\$118	\$119	\$237	\$204	\$205	\$323
50-54	\$155	\$141	\$296	\$241	\$227	\$382
55-59	\$206	\$174	\$380	\$292	\$260	\$466
60-64	\$294	\$228	\$522	\$380	\$314	\$608
65+***	\$315	\$256	\$571	\$401	\$342	\$657

Preventive and Hospital Care 3000 (HSA Compatible)						
Age	Single Male	Single Female	Couple**	Male & Child(ren)	Female & Child(ren)	Family**
0	\$91	\$91	N/A	N/A	N/A	N/A
1	\$55	\$55	N/A	N/A	N/A	N/A
2-18	\$36	\$36	\$72	\$108	\$108	\$144
19-24	\$39	\$55	\$94	\$111	\$127	\$166
25-29	\$47	\$67	\$114	\$119	\$139	\$186
30-34	\$57	\$77	\$134	\$129	\$149	\$206
35-39	\$70	\$85	\$155	\$142	\$157	\$227
40-44	\$87	\$99	\$186	\$159	\$171	\$258
45-49	\$111	\$112	\$223	\$183	\$184	\$295
50-54	\$150	\$134	\$284	\$222	\$206	\$356
55-59	\$199	\$168	\$367	\$271	\$240	\$439
60-64	\$287	\$223	\$510	\$359	\$295	\$582
65+***	\$307	\$250	\$557	\$379	\$322	\$629

Monthly Dental Rates [†]			
Single	Couple**	Parent & Child(ren)	Family**
\$14	\$28	\$41	\$55

Your rates are guaranteed not to increase for 12 months from your effective date once you've been accepted for coverage.

* Rates are subject to increase upon underwriting review.
 Networks may not be available in all ZIP codes and are subject to change.
 ** Couple and Family rates are based on the age of the oldest spouse
 ***Age 65+ rates are not available to new applicants.
 † Dental is offered only if medical coverage is obtained.

If you need this material translated into another language, please call Member Services at 1-866-565-1236.

Si usted necesita este material en otro lenguaje, por favor llame a Servicios al Miembro al 1-866-565-1236.

Upon request, we will provide you with rates at a different underwriting level.

This material is for information only. Health/Dental insurance plans contain exclusions and limitations. Plans may be subject to medical underwriting or other restrictions. Rates and benefits vary by location.

Rates are subject to change based on rate increases implemented to the whole book of business in accordance with state laws and regulations based on your medical history, Aetna's underwriting guidelines and any optional benefits selected. Investment services are independently offered through JPMorgan Institutional Investors, Inc., a subsidiary of JPMorgan Chase bank. Information is subject to change.

For Questions & Applications
 Call: 302-477-1557
 American Benefits Group

