



# Health Plan Rates

for individuals & families



# LifeWise monthly rates—Area 1

These rates are applicable if you live in the following Oregon Counties: Benton, Clackamas, Lane, Linn, Marion, Multnomah, Polk, Yamhill or Washington.

## WiseEssentials

Age Band	0–19	20–24	25–29	30–34	35–39	40–44	45–49	50–54	55–59	60–64	65+
<b>1,500 Deductible</b>											
Policyholder	\$95	\$121	\$144	\$173	\$188	\$220	\$259	\$320	\$366	\$441	\$462
Policyholder & Spouse	200	254	302	381	409	443	517	638	729	883	952
Policyholder, Spouse & Child(ren)	282	359	435	514	550	574	640	741	825	979	1,046
Policyholder & Child(ren)	164	233	291	325	353	379	415	463	496	563	579
<b>2,500 Deductible</b>											
Policyholder	70	90	107	127	139	163	191	237	269	325	341
Policyholder & Spouse	147	187	222	281	302	326	381	471	537	652	702
Policyholder, Spouse & Child(ren)	208	265	321	380	406	424	472	548	609	723	773
Policyholder & Child(ren)	121	172	215	241	260	280	307	342	365	416	428
<b>5,000 Deductible</b>											
Policyholder	50	65	76	92	100	117	138	170	194	235	246
Policyholder & Spouse	106	136	160	202	217	236	276	339	387	470	506
Policyholder, Spouse & Child(ren)	149	191	231	273	292	305	341	395	438	521	557
Policyholder & Child(ren)	87	124	155	174	187	202	221	247	263	300	308
<b>7,500 Deductible</b>											
Policyholder	42	53	63	76	82	96	112	139	159	193	201
Policyholder & Spouse	87	111	132	166	177	193	225	278	318	384	415
Policyholder, Spouse & Child(ren)	122	156	190	224	239	250	278	323	360	426	456
Policyholder & Child(ren)	72	101	127	142	153	165	181	202	217	245	253

## WiseChoices

Age Band	0–19	20–24	25–29	30–34	35–39	40–44	45–49	50–54	55–59	60–64	65+
<b>500 Deductible</b>											
Policyholder	\$147	\$187	\$220	\$266	\$289	\$337	\$399	\$491	\$562	\$679	\$711
Policyholder & Spouse	308	392	464	586	627	681	796	980	1,119	1,357	1,464
Policyholder, Spouse & Child(ren)	433	552	669	791	846	883	985	1,140	1,268	1,505	1,608
Policyholder & Child(ren)	252	358	448	501	543	582	639	712	762	866	892
<b>1,000 Deductible</b>											
Policyholder	124	159	188	226	246	287	339	419	477	576	604
Policyholder & Spouse	261	333	395	498	533	579	676	834	952	1,153	1,244
Policyholder, Spouse & Child(ren)	369	468	569	672	718	750	837	969	1,078	1,280	1,368
Policyholder & Child(ren)	214	304	381	426	461	496	543	605	647	735	758
<b>2,500 Deductible</b>											
Policyholder	91	116	137	165	179	210	248	305	347	420	439
Policyholder & Spouse	190	243	287	363	389	422	491	607	692	839	905
Policyholder, Spouse & Child(ren)	268	342	414	489	523	546	610	706	785	931	996
Policyholder & Child(ren)	156	222	277	310	337	361	395	441	471	536	551
<b>5,000 Deductible</b>											
Policyholder	68	87	103	124	134	157	185	228	261	315	330
Policyholder & Spouse	142	181	215	273	291	316	369	456	520	631	680
Policyholder, Spouse & Child(ren)	201	256	311	367	393	410	457	530	589	700	747
Policyholder & Child(ren)	117	166	208	232	252	270	296	330	354	402	414

## WiseSavings

Age Band	0–19	20–24	25–29	30–34	35–39	40–44	45–49	50–54	55–59	60–64	65+
<b>3,000 Deductible</b>											
Policyholder	\$81	\$103	\$121	\$146	\$158	\$185	\$218	\$270	\$307	\$371	\$389
Policyholder & Spouse											
Policyholder, Spouse & Child(ren)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Policyholder & Child(ren)											
<b>6,000 Deductible</b>											
Policyholder	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Policyholder & Spouse	147	187	222	281	300	326	381	471	537	652	702
Policyholder, Spouse & Child(ren)	208	264	321	380	406	424	472	548	609	723	773
Policyholder & Child(ren)	121	172	215	241	260	280	307	342	365	416	428

# LifeWise monthly rates—Area 2

These rates are applicable if you live in the following Oregon Counties: Baker, Clatsop, Columbia, Coos, Crook, Curry, Deschutes, Douglas, Gilliam, Grant, Harney, Hood River, Jackson, Jefferson, Josephine, Klamath, Lake, Lincoln, Malheur, Morrow, Sherman, Tillamook, Umatilla, Union, Wallowa, Wasco or Wheeler.

## WiseEssentials

Age Band	0–19	20–24	25–29	30–34	35–39	40–44	45–49	50–54	55–59	60–64	65+
<b>1,500 Deductible</b>											
Policyholder	\$111	\$143	\$168	\$204	\$220	\$258	\$305	\$376	\$428	\$517	\$541
Policyholder & Spouse	234	299	354	447	478	520	606	748	854	1,035	1,117
Policyholder, Spouse & Child(ren)	330	421	510	602	645	674	751	870	968	1,149	1,227
Policyholder & Child(ren)	192	273	342	382	414	445	487	544	581	660	679
<b>2,500 Deductible</b>											
Policyholder	83	105	125	150	163	190	225	277	316	382	399
Policyholder & Spouse	173	220	261	330	352	384	447	551	631	764	823
Policyholder, Spouse & Child(ren)	245	311	376	445	476	497	554	643	714	847	905
Policyholder & Child(ren)	142	202	252	282	306	328	359	401	429	488	502
<b>5,000 Deductible</b>											
Policyholder	60	76	90	109	117	137	162	200	228	276	288
Policyholder & Spouse	125	159	189	238	254	277	323	398	455	551	593
Policyholder, Spouse & Child(ren)	176	224	272	320	343	358	399	463	515	611	653
Policyholder & Child(ren)	102	145	182	204	220	236	259	289	310	352	361
<b>7,500 Deductible</b>											
Policyholder	49	62	73	89	96	112	132	163	187	225	236
Policyholder & Spouse	103	129	155	195	208	226	264	326	373	451	487
Policyholder, Spouse & Child(ren)	143	183	222	263	281	294	328	378	422	501	534
Policyholder & Child(ren)	84	120	149	166	180	194	212	236	253	288	297

## WiseChoices

Age Band	0–19	20–24	25–29	30–34	35–39	40–44	45–49	50–54	55–59	60–64	65+
<b>500 Deductible</b>											
Policyholder	\$172	\$219	\$259	\$313	\$340	\$397	\$468	\$576	\$658	\$796	\$832
Policyholder & Spouse	361	458	544	687	735	799	932	1,149	1,313	1,591	1,717
Policyholder, Spouse & Child(ren)	509	647	784	927	991	1,036	1,155	1,337	1,488	1,765	1,887
Policyholder & Child(ren)	296	420	526	587	637	683	749	835	894	1,015	1,046
<b>1,000 Deductible</b>											
Policyholder	147	186	220	266	288	337	398	491	559	676	708
Policyholder & Spouse	307	390	462	584	625	680	793	976	1,116	1,353	1,458
Policyholder, Spouse & Child(ren)	432	549	667	788	842	881	981	1,137	1,263	1,501	1,604
Policyholder & Child(ren)	251	357	447	499	542	581	636	711	759	863	888
<b>2,500 Deductible</b>											
Policyholder	107	136	160	193	210	245	290	357	408	493	516
Policyholder & Spouse	224	283	337	425	455	494	577	711	813	984	1,062
Policyholder, Spouse & Child(ren)	315	400	485	574	613	641	715	828	921	1,092	1,167
Policyholder & Child(ren)	183	260	325	363	394	423	464	517	552	629	646
<b>5,000 Deductible</b>											
Policyholder	80	102	120	145	158	184	218	268	305	369	386
Policyholder & Spouse	167	213	253	320	342	371	433	534	610	739	798
Policyholder, Spouse & Child(ren)	236	300	364	431	461	482	537	621	691	820	876
Policyholder & Child(ren)	137	195	244	273	296	317	347	388	415	471	486

## WiseSavings

Age Band	0–19	20–24	25–29	30–34	35–39	40–44	45–49	50–54	55–59	60–64	65+
<b>3,000 Individual Deductible</b>											
Policyholder	\$94	\$121	\$141	\$171	\$186	\$217	\$257	\$316	\$361	\$435	\$456
Policyholder & Spouse											
Policyholder, Spouse & Child(ren)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Policyholder & Child(ren)											
<b>6,000 Family Deductible</b>											
Policyholder	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Policyholder & Spouse	173	220	261	330	353	384	447	552	630	764	823
Policyholder, Spouse & Child(ren)	245	311	376	445	476	497	554	641	714	847	905
Policyholder & Child(ren)	142	202	252	282	306	328	359	401	429	488	501

# Supplemental option—Areas 1 and 2

## Alcoholism Coverage

Available as a supplemental option on all plans in both areas

Age Band	All Ages
Policyholder	\$119
Policyholder & Spouse	250
Policyholder, Spouse & Child(ren)	287
Policyholder & Child(ren)	242

Rates effective from September 1, 2008–August 31, 2009

### Important notes

- LifeWise Individual Health Plans are available to permanent Oregon residents age 64 or under. If an individual purchases a plan prior to age 65, the plan may be continued past the age of 65 at the time of renewal.
- Eligible family members include you, your spouse, your registered domestic partner and unmarried children under age 23 who are primarily dependent on you for support.
- Eligibility is based on approval of the Oregon Individual Health Statement that must be completed for all enrolling plan individuals.
- The deductible amounts listed for the rate categories are the individual deductible. The family deductible is three times the individual deductible, except for the HSA plans, which include an aggregate family deductible.
- When you fill out your application for membership you can elect to pay your rate monthly through an automatic bank withdrawal or receive a monthly billing.
- These rates are guaranteed September 1, 2008 through August 31, 2009, provided the contract remains continuously in effect within this year, with the following exceptions:
  - Change in the number of enrolled dependents.
  - If any federal, state or local authority mandates a change in benefits, or other provisions.

LifeWise Health Plan of Oregon  
800-290-1278 • lifewiseor.com

## How to determine your monthly rate...

- STEP 1:** Find the name of the plan you wish to enroll in, based on the Area (by county) where you live (only one plan per application).
- STEP 2:** Choose your deductible from the plan.
- STEP 3:** Choose the appropriate coverage category under your deductible. ("Individual plus Family" includes you, your spouse and your children.)
- STEP 4:** Identify the plan rate by locating the age range that matches the age of the main applicant (or your age if you are enrolling only yourself).
- STEP 5:** Select desired Supplemental Benefit Option; determine additional monthly cost by choosing the appropriate coverage category and age range (if applicable).
- STEP 6:** Add selected option(s) cost(s) to plan cost to determine monthly total.



## To calculate your total...

Plan name \_\_\_\_\_

Deductible \_\_\_\_\_

Coverage Category \_\_\_\_\_

Age range \_\_\_\_\_

Monthly plan rate \$

+ Additional option(s) costs \$

**= TOTAL MONTHLY RATE \$**