

ConnectiCare® 2009 Rates *January – December 2009 Effective Dates*



Revised 12/08

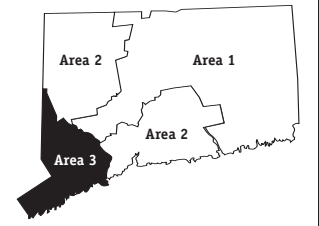
POS Upfront Deductible \$500 Individual/\$1,000 Family w/10/20/35 Rx

(POS-OA-25-35-UFRA)

All policyholders may be subject to a rate increase at their renewal date.
Rates are calculated as of the Applicant's age as of the effective date.

Area 3 (Fairfield County)

Fairfield County: Bethel, Bridgeport, Brookfield, Danbury, Darien, Easton, Fairfield, Greenwich, Monroe, New Canaan, New Fairfield, Newtown, Norwalk, Shelton, Sherman, Stamford, Stratford, Redding, Ridgefield, Trumbull, Weston, Westport, Wilton



\$1,000 Rx Benefit Max

Age	Individual Female	Individual Male	Individual +1 Dependent	Family
0-20	\$273.12	\$195.73	\$486.13	\$817.38
21	\$275.37	\$198.05	\$488.86	\$823.90
22	\$277.62	\$200.36	\$491.59	\$830.44
23	\$279.88	\$202.72	\$494.29	\$836.99
24	\$282.16	\$205.04	\$497.03	\$843.49
25	\$284.41	\$207.39	\$499.77	\$850.04
26	\$286.66	\$209.72	\$502.47	\$856.58
27	\$288.92	\$212.07	\$505.21	\$863.12
28	\$291.17	\$214.38	\$507.94	\$869.64
29	\$293.41	\$216.74	\$510.64	\$876.18
30	\$295.69	\$219.06	\$513.37	\$882.73
31	\$303.87	\$232.12	\$515.04	\$905.03
32	\$312.08	\$245.18	\$516.73	\$927.37
33	\$320.24	\$258.23	\$518.39	\$949.66
34	\$328.46	\$271.29	\$520.06	\$972.00
35	\$331.64	\$277.14	\$525.64	\$978.79
36	\$333.23	\$280.04	\$528.44	\$982.19
37	\$334.82	\$282.98	\$531.21	\$985.58
38	\$336.43	\$285.90	\$534.02	\$988.98
39	\$341.20	\$294.70	\$542.40	\$999.15
40	\$347.53	\$306.36	\$553.55	\$1,012.75
41	\$353.90	\$318.07	\$564.72	\$1,026.33
42	\$360.28	\$329.77	\$575.88	\$1,039.91
43	\$368.69	\$340.16	\$589.83	\$1,049.33
44	\$377.15	\$350.54	\$603.80	\$1,058.71
45	\$385.56	\$360.94	\$617.78	\$1,068.13
46	\$394.01	\$371.33	\$631.74	\$1,077.52
47	\$402.42	\$381.71	\$645.70	\$1,086.94
48	\$428.77	\$403.42	\$698.85	\$1,123.01
49	\$455.16	\$425.11	\$752.01	\$1,159.10
50	\$481.52	\$446.82	\$805.12	\$1,195.19
51	\$507.90	\$468.49	\$858.28	\$1,231.27
52	\$534.26	\$490.21	\$911.43	\$1,267.36
53	\$562.34	\$521.48	\$967.19	\$1,320.78
54	\$590.43	\$552.75	\$1,022.97	\$1,374.19
55	\$618.50	\$584.05	\$1,078.73	\$1,427.61
56	\$646.60	\$615.33	\$1,134.51	\$1,481.02
57	\$674.68	\$646.60	\$1,190.27	\$1,534.45
58	\$700.85	\$687.80	\$1,254.26	\$1,589.40
59	\$727.03	\$729.01	\$1,318.26	\$1,644.33
60	\$753.18	\$770.25	\$1,382.25	\$1,699.28
61	\$779.37	\$811.46	\$1,446.25	\$1,754.20
62	\$805.55	\$852.67	\$1,510.24	\$1,809.16
63	\$836.77	\$907.04	\$1,591.44	\$1,873.95
64	\$868.04	\$961.37	\$1,672.65	\$1,938.70

\$2,000 Rx Benefit Max

Age	Individual Female	Individual Male	Individual +1 Dependent	Family
0-20	\$281.39	\$201.65	\$500.85	\$842.15
21	\$283.71	\$204.04	\$503.66	\$848.85
22	\$286.04	\$206.43	\$506.48	\$855.59
23	\$288.36	\$208.87	\$509.26	\$862.34
24	\$290.71	\$211.25	\$512.08	\$869.05
25	\$293.03	\$213.67	\$514.91	\$875.79
26	\$295.35	\$216.07	\$517.69	\$882.53
27	\$297.66	\$218.49	\$520.51	\$889.27
28	\$299.98	\$220.89	\$523.32	\$895.98
29	\$302.30	\$223.32	\$526.11	\$902.73
30	\$304.66	\$225.70	\$528.93	\$909.47
31	\$313.07	\$239.16	\$530.65	\$932.45
32	\$321.53	\$252.60	\$532.39	\$955.46
33	\$329.94	\$266.06	\$534.10	\$978.43
34	\$338.40	\$279.50	\$535.82	\$1,001.45
35	\$341.69	\$285.54	\$541.56	\$1,008.44
36	\$343.33	\$288.52	\$544.45	\$1,011.94
37	\$344.97	\$291.56	\$547.30	\$1,015.43
38	\$346.62	\$294.56	\$550.19	\$1,018.93
39	\$351.54	\$303.62	\$558.83	\$1,029.41
40	\$358.07	\$315.64	\$570.31	\$1,043.43
41	\$364.62	\$327.70	\$581.83	\$1,057.42
42	\$371.20	\$339.76	\$593.32	\$1,071.41
43	\$379.86	\$350.46	\$607.70	\$1,081.12
44	\$388.57	\$361.17	\$622.09	\$1,090.78
45	\$397.23	\$371.87	\$636.50	\$1,100.49
46	\$405.94	\$382.58	\$650.87	\$1,110.16
47	\$414.61	\$393.28	\$665.25	\$1,119.87
48	\$441.76	\$415.64	\$720.02	\$1,157.04
49	\$468.95	\$437.98	\$774.79	\$1,194.22
50	\$496.10	\$460.36	\$829.52	\$1,231.39
51	\$523.29	\$482.69	\$884.28	\$1,268.57
52	\$550.44	\$505.06	\$939.04	\$1,305.75
53	\$579.38	\$537.27	\$996.49	\$1,360.79
54	\$608.32	\$569.50	\$1,053.96	\$1,415.82
55	\$637.24	\$601.74	\$1,111.41	\$1,470.86
56	\$666.18	\$633.96	\$1,168.89	\$1,525.88
57	\$695.11	\$666.18	\$1,226.33	\$1,580.94
58	\$722.09	\$708.63	\$1,292.25	\$1,637.55
59	\$749.06	\$751.09	\$1,358.19	\$1,694.14
60	\$775.99	\$793.58	\$1,424.12	\$1,750.75
61	\$802.97	\$836.04	\$1,490.06	\$1,807.34
62	\$829.94	\$878.49	\$1,555.99	\$1,863.96
63	\$862.13	\$934.51	\$1,639.65	\$1,930.72
64	\$894.33	\$990.49	\$1,723.33	\$1,997.43

\$3,000 Rx Benefit Max

Age	Individual Female	Individual Male	Individual +1 Dependent	Family
0-20	\$285.46	\$204.56	\$508.08	\$854.30
21	\$287.81	\$206.98	\$510.93	\$861.11
22	\$290.16	\$209.40	\$513.79	\$867.95
23	\$292.52	\$211.88	\$516.62	\$874.79
24	\$294.90	\$214.30	\$519.48	\$881.59
25	\$297.25	\$216.75	\$522.34	\$888.43
26	\$299.60	\$219.19	\$525.16	\$895.27
27	\$301.96	\$221.65	\$528.02	\$902.11
28	\$304.32	\$224.07	\$530.87	\$908.92
29	\$306.67	\$226.53	\$533.70	\$915.76
30	\$309.06	\$228.96	\$536.56	\$922.60
31	\$317.59	\$242.61	\$538.30	\$945.90
32	\$326.17	\$256.25	\$540.07	\$969.25
33	\$334.71	\$269.89	\$541.81	\$992.55
34	\$343.29	\$283.54	\$543.55	\$1,015.90
35	\$346.63	\$289.65	\$549.37	\$1,022.99
36	\$348.28	\$292.69	\$552.31	\$1,026.54
37	\$349.94	\$295.77	\$555.20	\$1,030.09
38	\$351.61	\$298.81	\$558.13	\$1,033.64
39	\$356.61	\$308.00	\$566.90	\$1,044.27
40	\$363.24	\$320.19	\$578.54	\$1,058.49
41	\$369.89	\$332.44	\$590.23	\$1,072.68
42	\$376.55	\$344.66	\$601.89	\$1,086.87
43	\$385.34	\$355.53	\$616.47	\$1,096.72
44	\$394.18	\$366.38	\$631.06	\$1,106.52
45	\$402.97	\$377.23	\$645.69	\$1,116.38
46	\$411.81	\$388.10	\$660.26	\$1,126.18
47	\$420.59	\$398.95	\$674.86	\$1,136.03
48	\$448.14	\$421.64	\$730.41	\$1,173.74
49	\$475.72	\$444.31	\$785.97	\$1,211.45
50	\$503.26	\$466.99	\$841.49	\$1,249.16
51	\$530.84	\$489.65	\$897.05	\$1,286.88
52	\$558.38	\$512.35	\$952.60	\$1,324.60
53	\$587.74	\$545.03	\$1,010.87	\$1,380.44
54	\$617.09	\$577.72	\$1,069.18	\$1,436.25
55	\$646.44	\$610.43	\$1,127.45	\$1,492.09
56	\$675.80	\$643.11	\$1,185.75	\$1,547.91
57	\$705.15	\$675.80	\$1,244.03	\$1,603.76
58	\$732.51	\$718.86	\$1,310.90	\$1,661.18
59	\$759.87	\$761.93	\$1,377.79	\$1,718.60
60	\$787.20	\$805.04	\$1,444.68	\$1,776.02
61	\$814.56	\$848.11	\$1,511.57	\$1,833.43
62	\$841.92	\$891.18	\$1,578.44	\$1,890.87
63	\$874.56	\$948.01	\$1,663.32	\$1,958.59
64	\$907.25	\$1,004.79	\$1,748.20	\$2,026.26

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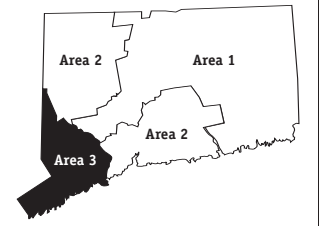
POS Upfront Deductible \$500 Individual/\$1,000 Family w/15/25/40 Rx

(POS-OA-25-35-UFRA)

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\$1,000 Rx Benefit Max

Age	Individual Female	Individual Male	Individual +1 Dependent	Family
0-20	\$270.32	\$193.72	\$481.14	\$809.01
21	\$272.55	\$196.01	\$483.84	\$815.45
22	\$274.78	\$198.31	\$486.55	\$821.92
23	\$277.01	\$200.64	\$489.22	\$828.41
24	\$279.27	\$202.94	\$491.94	\$834.85
25	\$281.50	\$205.26	\$494.65	\$841.32
26	\$283.73	\$207.57	\$497.32	\$847.81
27	\$285.95	\$209.89	\$500.03	\$854.28
28	\$288.18	\$212.19	\$502.73	\$860.72
29	\$290.40	\$214.52	\$505.40	\$867.21
30	\$292.67	\$216.82	\$508.11	\$873.68
31	\$300.75	\$229.74	\$509.76	\$895.76
32	\$308.88	\$242.67	\$511.43	\$917.86
33	\$316.96	\$255.58	\$513.08	\$939.93
34	\$325.09	\$268.51	\$514.73	\$962.04
35	\$328.24	\$274.30	\$520.24	\$968.75
36	\$329.82	\$277.17	\$523.02	\$972.11
37	\$331.39	\$280.08	\$525.76	\$975.47
38	\$332.98	\$282.97	\$528.54	\$978.83
39	\$337.70	\$291.67	\$536.83	\$988.91
40	\$343.97	\$303.22	\$547.87	\$1,002.37
41	\$350.28	\$314.81	\$558.93	\$1,015.81
42	\$356.59	\$326.39	\$569.97	\$1,029.24
43	\$364.92	\$336.67	\$583.79	\$1,038.57
44	\$373.28	\$346.95	\$597.60	\$1,047.86
45	\$381.60	\$357.23	\$611.45	\$1,057.18
46	\$389.97	\$367.52	\$625.26	\$1,066.47
47	\$398.29	\$377.80	\$639.07	\$1,075.80
48	\$424.38	\$399.29	\$691.68	\$1,111.50
49	\$450.49	\$420.75	\$744.30	\$1,147.23
50	\$476.58	\$442.24	\$796.87	\$1,182.93
51	\$502.70	\$463.68	\$849.49	\$1,218.65
52	\$528.77	\$485.18	\$902.09	\$1,254.36
53	\$556.58	\$516.13	\$957.27	\$1,307.25
54	\$584.38	\$547.08	\$1,012.49	\$1,360.10
55	\$612.16	\$578.07	\$1,067.67	\$1,412.98
56	\$639.96	\$609.02	\$1,122.88	\$1,465.83
57	\$667.76	\$639.96	\$1,178.07	\$1,518.72
58	\$693.67	\$680.75	\$1,241.39	\$1,573.11
59	\$719.58	\$721.54	\$1,304.74	\$1,627.47
60	\$745.46	\$762.35	\$1,368.08	\$1,681.85
61	\$771.38	\$803.13	\$1,431.42	\$1,736.21
62	\$797.28	\$843.93	\$1,494.76	\$1,790.62
63	\$828.19	\$897.74	\$1,575.12	\$1,854.74
64	\$859.15	\$951.51	\$1,655.51	\$1,918.83

\$2,000 Rx Benefit Max

Age	Individual Female	Individual Male	Individual +1 Dependent	Family
0-20	\$277.21	\$198.66	\$493.41	\$829.64
21	\$279.50	\$201.01	\$496.18	\$836.24
22	\$281.78	\$203.36	\$498.96	\$842.89
23	\$284.07	\$205.76	\$501.70	\$849.53
24	\$286.39	\$208.11	\$504.48	\$856.13
25	\$288.67	\$210.49	\$507.26	\$862.78
26	\$290.96	\$212.86	\$510.00	\$869.42
27	\$293.24	\$215.25	\$512.78	\$876.06
28	\$295.53	\$217.60	\$515.54	\$882.68
29	\$297.81	\$220.00	\$518.29	\$889.31
30	\$300.13	\$222.35	\$521.07	\$895.96
31	\$308.42	\$235.60	\$522.76	\$918.60
32	\$316.75	\$248.85	\$524.48	\$941.27
33	\$325.05	\$262.11	\$526.17	\$963.90
34	\$333.37	\$275.35	\$527.86	\$986.56
35	\$336.61	\$281.29	\$533.52	\$993.46
36	\$338.23	\$284.23	\$536.36	\$996.91
37	\$339.84	\$287.23	\$539.17	\$1,000.35
38	\$341.47	\$290.19	\$542.02	\$1,003.80
39	\$346.31	\$299.11	\$550.52	\$1,014.13
40	\$352.74	\$310.95	\$561.84	\$1,027.94
41	\$359.21	\$322.84	\$573.19	\$1,041.71
42	\$365.68	\$334.71	\$584.51	\$1,055.49
43	\$374.22	\$345.26	\$598.68	\$1,065.06
44	\$382.80	\$355.81	\$612.84	\$1,074.58
45	\$391.34	\$366.34	\$627.04	\$1,084.14
46	\$399.92	\$376.90	\$641.20	\$1,093.66
47	\$408.45	\$387.44	\$655.37	\$1,103.23
48	\$435.20	\$409.47	\$709.32	\$1,139.85
49	\$461.98	\$431.48	\$763.28	\$1,176.48
50	\$488.73	\$453.52	\$817.19	\$1,213.10
51	\$515.51	\$475.51	\$871.15	\$1,249.72
52	\$542.26	\$497.56	\$925.09	\$1,286.35
53	\$570.77	\$529.29	\$981.68	\$1,340.58
54	\$599.28	\$561.04	\$1,038.31	\$1,394.78
55	\$627.78	\$592.80	\$1,094.90	\$1,449.01
56	\$656.28	\$624.55	\$1,151.52	\$1,503.21
57	\$684.79	\$656.28	\$1,208.11	\$1,557.45
58	\$711.36	\$698.11	\$1,273.06	\$1,613.22
59	\$737.93	\$739.94	\$1,338.02	\$1,668.97
60	\$764.47	\$781.79	\$1,402.97	\$1,724.74
61	\$791.04	\$823.62	\$1,467.93	\$1,780.49
62	\$817.62	\$865.45	\$1,532.88	\$1,836.27
63	\$849.31	\$920.63	\$1,615.30	\$1,902.04
64	\$881.05	\$975.78	\$1,697.72	\$1,967.76

\$3,000 Rx Benefit Max

Age	Individual Female	Individual Male	Individual +1 Dependent	Family
0-20	\$280.51	\$201.02	\$499.28	\$839.50
21	\$282.82	\$203.40	\$502.08	\$846.19
22	\$285.13	\$205.78	\$504.90	\$852.91
23	\$287.45	\$208.20	\$507.66	\$859.63
24	\$289.79	\$210.59	\$510.48	\$866.32
25	\$292.10	\$213.00	\$513.29	\$873.04
26	\$294.42	\$215.39	\$516.07	\$879.77
27	\$296.73	\$217.81	\$518.88	\$886.48
28	\$299.04	\$220.18	\$521.68	\$893.17
29	\$301.35	\$222.62	\$524.46	\$899.89
30	\$303.70	\$225.00	\$527.27	\$906.62
31	\$312.09	\$238.40	\$528.98	\$929.52
32	\$320.52	\$251.81	\$530.71	\$952.46
33	\$328.91	\$265.22	\$532.43	\$975.36
34	\$337.34	\$278.63	\$534.14	\$998.30
35	\$340.62	\$284.63	\$539.86	\$1,005.27
36	\$342.25	\$287.61	\$542.74	\$1,008.76
37	\$343.88	\$290.65	\$545.58	\$1,012.24
38	\$345.53	\$293.64	\$548.46	\$1,015.74
39	\$350.43	\$302.67	\$557.08	\$1,026.19
40	\$356.94	\$314.65	\$568.52	\$1,040.16
41	\$363.48	\$326.68	\$580.01	\$1,054.10
42	\$370.04	\$338.69	\$591.46	\$1,068.04
43	\$378.67	\$349.36	\$605.79	\$1,077.72
44	\$387.35	\$360.03	\$620.13	\$1,087.36
45	\$395.99	\$370.70	\$634.50	\$1,097.04
46	\$404.67	\$381.37	\$648.83	\$1,106.67
47	\$413.30	\$392.04	\$663.17	\$1,116.35
48	\$440.38	\$414.34	\$717.76	\$1,153.40
49	\$467.47	\$436.61	\$772.36	\$1,190.46
50	\$494.54	\$458.91	\$826.91	\$1,227.52
51	\$521.65	\$481.17	\$881.51	\$1,264.58
52	\$548.71	\$503.47	\$936.09	\$1,301.65
53	\$577.56	\$535.58	\$993.35	\$1,356.52
54	\$606.40	\$567.70	\$1,050.66	\$1,411.37
55	\$635.24	\$599.86	\$1,107.92	\$1,466.24
56	\$664.08	\$631.98	\$1,165.21	\$1,521.09
57	\$692.94	\$664.08	\$1,222.47	\$1,575.97
58	\$719.82	\$706.41	\$1,288.19	\$1,632.41
59	\$746.71	\$748.73	\$1,353.92	\$1,688.81
60	\$773.56	\$791.09	\$1,419.65	\$1,745.25
61	\$800.45	\$833.41	\$1,485.38	\$1,801.67
62	\$827.34	\$875.74	\$1,551.10	\$1,858.12
63	\$859.42	\$931.58	\$1,634.50	\$1,924.66
64	\$891.53	\$987.39	\$1,717.91	\$1,991.16

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Revised 12/08

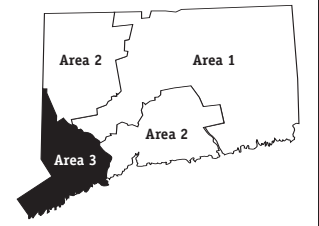
POS Upfront Deductible \$1,000 Individual/\$2,000 Family w/10/20/35 Rx

(POS-OA-25-35-UFSA)

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\$1,000 Rx Benefit Max

Age	Individual Female	Individual Male	Individual +1 Dependent	Family
0-20	\$241.72	\$173.22	\$430.24	\$723.42
21	\$243.71	\$175.28	\$432.66	\$729.18
22	\$245.70	\$177.32	\$435.08	\$734.97
23	\$247.70	\$179.41	\$437.47	\$740.76
24	\$249.72	\$181.47	\$439.89	\$746.52
25	\$251.70	\$183.55	\$442.31	\$752.32
26	\$253.70	\$185.61	\$444.70	\$758.11
27	\$255.70	\$187.69	\$447.12	\$763.90
28	\$257.69	\$189.74	\$449.55	\$769.66
29	\$259.68	\$191.82	\$451.93	\$775.45
30	\$261.70	\$193.87	\$454.35	\$781.25
31	\$268.94	\$205.44	\$455.83	\$800.98
32	\$276.20	\$216.99	\$457.33	\$820.75
33	\$283.43	\$228.54	\$458.80	\$840.49
34	\$290.70	\$240.09	\$460.27	\$860.25
35	\$293.52	\$245.28	\$465.21	\$866.27
36	\$294.92	\$247.85	\$467.68	\$869.27
37	\$296.34	\$250.45	\$470.14	\$872.27
38	\$297.75	\$253.04	\$472.63	\$875.28
39	\$301.97	\$260.81	\$480.04	\$884.29
40	\$307.58	\$271.14	\$489.91	\$896.33
41	\$313.22	\$281.50	\$499.81	\$908.35
42	\$318.86	\$291.87	\$509.67	\$920.37
43	\$326.31	\$301.06	\$522.03	\$928.70
44	\$333.79	\$310.25	\$534.38	\$937.00
45	\$341.24	\$319.45	\$546.76	\$945.33
46	\$348.71	\$328.64	\$559.11	\$953.65
47	\$356.16	\$337.83	\$571.47	\$961.98
48	\$379.48	\$357.05	\$618.51	\$993.91
49	\$402.83	\$376.23	\$665.56	\$1,025.85
50	\$426.17	\$395.45	\$712.56	\$1,057.79
51	\$449.52	\$414.64	\$759.60	\$1,089.72
52	\$472.84	\$433.85	\$806.66	\$1,121.66
53	\$497.69	\$461.53	\$856.00	\$1,168.95
54	\$522.55	\$489.20	\$905.37	\$1,216.20
55	\$547.40	\$516.91	\$954.72	\$1,263.50
56	\$572.26	\$544.59	\$1,004.09	\$1,310.76
57	\$597.12	\$572.26	\$1,053.44	\$1,358.05
58	\$620.28	\$608.72	\$1,110.08	\$1,406.69
59	\$643.45	\$645.20	\$1,166.72	\$1,455.29
60	\$666.60	\$681.70	\$1,223.34	\$1,503.93
61	\$689.77	\$718.18	\$1,279.98	\$1,552.53
62	\$712.94	\$754.65	\$1,336.62	\$1,601.17
63	\$740.58	\$802.77	\$1,408.49	\$1,658.51
64	\$768.25	\$850.85	\$1,480.36	\$1,715.83

\$2,000 Rx Benefit Max

Age	Individual Female	Individual Male	Individual +1 Dependent	Family
0-20	\$249.99	\$179.15	\$444.97	\$748.18
21	\$252.06	\$181.27	\$447.47	\$754.14
22	\$254.12	\$183.40	\$449.97	\$760.12
23	\$256.18	\$185.56	\$452.44	\$766.12
24	\$258.27	\$187.67	\$454.94	\$772.08
25	\$260.33	\$189.83	\$457.46	\$778.07
26	\$262.39	\$191.96	\$459.92	\$784.06
27	\$264.45	\$194.12	\$462.42	\$790.05
28	\$266.50	\$196.24	\$464.93	\$796.00
29	\$268.57	\$198.39	\$467.40	\$801.99
30	\$270.67	\$200.51	\$469.90	\$807.99
31	\$278.14	\$212.47	\$471.43	\$828.40
32	\$285.65	\$224.41	\$472.99	\$848.84
33	\$293.13	\$236.37	\$474.50	\$869.26
34	\$300.64	\$248.31	\$476.03	\$889.70
35	\$303.56	\$253.68	\$481.13	\$895.92
36	\$305.02	\$256.33	\$483.69	\$899.02
37	\$306.48	\$259.03	\$486.23	\$902.13
38	\$307.94	\$261.70	\$488.80	\$905.23
39	\$312.32	\$269.74	\$496.47	\$914.55
40	\$318.12	\$280.43	\$506.68	\$927.00
41	\$323.94	\$291.13	\$516.92	\$939.44
42	\$329.77	\$301.85	\$527.11	\$951.87
43	\$337.48	\$311.36	\$539.90	\$960.49
44	\$345.21	\$320.88	\$552.67	\$969.07
45	\$352.92	\$330.38	\$565.48	\$977.69
46	\$360.65	\$339.89	\$578.25	\$986.29
47	\$368.35	\$349.40	\$591.02	\$994.91
48	\$392.47	\$369.27	\$639.68	\$1,027.94
49	\$416.62	\$389.11	\$688.34	\$1,060.97
50	\$440.75	\$408.99	\$736.96	\$1,093.99
51	\$464.91	\$428.83	\$785.61	\$1,127.02
52	\$489.03	\$448.70	\$834.27	\$1,160.05
53	\$514.73	\$477.32	\$885.30	\$1,208.96
54	\$540.44	\$505.94	\$936.37	\$1,257.83
55	\$566.14	\$534.60	\$987.40	\$1,306.75
56	\$591.85	\$563.23	\$1,038.46	\$1,355.62
57	\$617.56	\$591.85	\$1,089.50	\$1,404.53
58	\$641.52	\$629.56	\$1,148.07	\$1,454.83
59	\$665.48	\$667.29	\$1,206.65	\$1,505.10
60	\$689.40	\$705.03	\$1,265.21	\$1,555.40
61	\$713.37	\$742.76	\$1,323.79	\$1,605.67
62	\$737.33	\$780.47	\$1,382.37	\$1,655.97
63	\$765.93	\$830.24	\$1,456.70	\$1,715.28
64	\$794.54	\$879.97	\$1,531.03	\$1,774.55

\$3,000 Rx Benefit Max

Age	Individual Female	Individual Male	Individual +1 Dependent	Family
0-20	\$254.06	\$182.06	\$452.19	\$760.34
21	\$256.15	\$184.21	\$454.74	\$766.39
22	\$258.24	\$186.37	\$457.28	\$772.48
23	\$260.35	\$188.57	\$459.80	\$778.56
24	\$262.46	\$190.73	\$462.34	\$784.62
25	\$264.55	\$192.92	\$464.89	\$790.71
26	\$266.65	\$195.07	\$467.39	\$796.79
27	\$268.75	\$197.27	\$469.93	\$802.88
28	\$270.84	\$199.43	\$472.48	\$808.94
29	\$272.94	\$201.61	\$474.99	\$815.02
30	\$275.06	\$203.77	\$477.54	\$821.12
31	\$282.66	\$215.92	\$479.08	\$841.85
32	\$290.29	\$228.06	\$480.67	\$862.64
33	\$297.89	\$240.20	\$482.22	\$883.38
34	\$305.53	\$252.35	\$483.77	\$904.15
35	\$308.50	\$257.79	\$488.95	\$910.47
36	\$309.97	\$260.50	\$491.55	\$913.63
37	\$311.46	\$263.24	\$494.13	\$916.78
38	\$312.94	\$265.94	\$496.74	\$919.94
39	\$317.38	\$274.12	\$504.54	\$929.41
40	\$323.29	\$284.98	\$514.91	\$942.07
41	\$329.21	\$295.87	\$525.31	\$954.70
42	\$335.12	\$306.76	\$535.68	\$967.33
43	\$342.96	\$316.43	\$548.66	\$976.09
44	\$350.82	\$326.09	\$561.65	\$984.81
45	\$358.66	\$335.75	\$574.67	\$993.58
46	\$366.51	\$345.41	\$587.64	\$1,002.31
47	\$374.33	\$355.07	\$600.63	\$1,011.07
48	\$398.85	\$375.27	\$650.08	\$1,044.64
49	\$423.39	\$395.43	\$699.52	\$1,078.20
50	\$447.91	\$415.62	\$748.93	\$1,111.77
51	\$472.46	\$435.80	\$798.37	\$1,145.33
52	\$496.97	\$455.99	\$847.83	\$1,178.90
53	\$523.08	\$485.08	\$899.68	\$1,228.60
54	\$549.21	\$514.17	\$951.58	\$1,278.27
55	\$575.34	\$543.29	\$1,003.44	\$1,327.98
56	\$601.47	\$572.38	\$1,055.33	\$1,377.65
57	\$627.59	\$601.47	\$1,107.20	\$1,427.35
58	\$651.94	\$639.79	\$1,166.72	\$1,478.46
59	\$676.29	\$678.13	\$1,226.25	\$1,529.56
60	\$700.61	\$716.49	\$1,285.77	\$1,580.67
61	\$724.97	\$754.83	\$1,345.30	\$1,631.76
62	\$749.31	\$793.15	\$1,404.82	\$1,682.88
63	\$778.37	\$843.74	\$1,480.37	\$1,743.15
64	\$807.46	\$894.27	\$1,555.91	\$1,803.39

ConnectiCare® 2009 Rates *January – December 2009 Effective Dates*



Revised 12/08

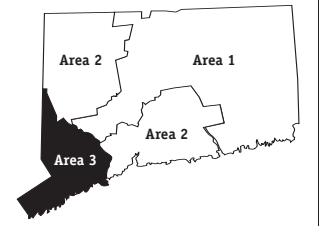
POS Upfront Deductible \$1,000 Individual/\$2,000 Family w/15/25/40 Rx

(POS-OA-25-35-UFGA)

All policyholders may be subject to a rate increase at their renewal date.
Rates are calculated as of the Applicant's age as of the effective date.

Area 3 (Fairfield County)

Fairfield County: Bethel, Bridgeport, Brookfield, Danbury, Darien, Easton, Fairfield, Greenwich, Monroe, New Canaan, New Fairfield, Newtown, Norwalk, Shelton, Sherman, Stamford, Stratford, Redding, Ridgefield, Trumbull, Weston, Westport, Wilton



\$1,000 Rx Benefit Max

Age	Individual Female	Individual Male	Individual +1 Dependent	Family
0-20	\$238.92	\$171.22	\$425.25	\$715.04
21	\$240.90	\$173.24	\$427.64	\$720.73
22	\$242.86	\$175.28	\$430.05	\$726.45
23	\$244.83	\$177.33	\$432.40	\$732.18
24	\$246.83	\$179.37	\$434.80	\$737.88
25	\$248.79	\$181.42	\$437.19	\$743.60
26	\$250.77	\$183.46	\$439.55	\$749.33
27	\$252.74	\$185.52	\$441.94	\$755.05
28	\$254.71	\$187.55	\$444.34	\$760.74
29	\$256.67	\$189.60	\$446.70	\$766.47
30	\$258.68	\$191.63	\$449.09	\$772.20
31	\$265.82	\$203.05	\$450.54	\$791.70
32	\$273.00	\$214.47	\$452.03	\$811.25
33	\$280.14	\$225.89	\$453.49	\$830.76
34	\$287.33	\$237.31	\$454.94	\$850.29
35	\$290.12	\$242.44	\$459.82	\$856.23
36	\$291.51	\$244.98	\$462.27	\$859.20
37	\$292.91	\$247.55	\$464.69	\$862.17
38	\$294.30	\$250.11	\$467.16	\$865.13
39	\$298.47	\$257.79	\$474.47	\$874.05
40	\$304.02	\$268.00	\$484.23	\$885.94
41	\$309.60	\$278.24	\$494.02	\$897.82
42	\$315.17	\$288.49	\$503.77	\$909.70
43	\$322.53	\$297.57	\$515.98	\$917.94
44	\$329.92	\$306.66	\$528.18	\$926.15
45	\$337.28	\$315.75	\$540.43	\$934.38
46	\$344.68	\$324.83	\$552.64	\$942.61
47	\$352.03	\$333.92	\$564.84	\$950.84
48	\$375.08	\$352.92	\$611.35	\$982.40
49	\$398.17	\$371.88	\$657.84	\$1,013.97
50	\$421.23	\$390.87	\$704.31	\$1,045.54
51	\$444.32	\$409.83	\$750.81	\$1,077.10
52	\$467.36	\$428.82	\$797.31	\$1,108.66
53	\$491.93	\$456.18	\$846.09	\$1,155.41
54	\$516.50	\$483.53	\$894.89	\$1,202.12
55	\$541.06	\$510.92	\$943.66	\$1,248.87
56	\$565.63	\$538.28	\$992.46	\$1,295.57
57	\$590.20	\$565.63	\$1,041.23	\$1,342.31
58	\$613.10	\$601.68	\$1,097.21	\$1,390.39
59	\$636.00	\$637.73	\$1,153.20	\$1,438.43
60	\$658.87	\$673.80	\$1,209.17	\$1,486.50
61	\$681.78	\$709.85	\$1,265.15	\$1,534.54
62	\$704.67	\$745.90	\$1,321.14	\$1,582.63
63	\$732.00	\$793.47	\$1,392.17	\$1,639.30
64	\$759.36	\$840.99	\$1,463.22	\$1,695.96

\$2,000 Rx Benefit Max

Age	Individual Female	Individual Male	Individual +1 Dependent	Family
0-20	\$245.81	\$176.15	\$437.53	\$735.67
21	\$247.85	\$178.24	\$439.99	\$741.53
22	\$249.86	\$180.33	\$442.45	\$747.42
23	\$251.90	\$182.45	\$444.88	\$753.30
24	\$253.95	\$184.54	\$447.34	\$759.17
25	\$255.97	\$186.66	\$449.80	\$765.06
26	\$258.01	\$188.75	\$452.23	\$770.95
27	\$260.03	\$190.87	\$454.70	\$776.83
28	\$262.06	\$192.96	\$457.15	\$782.70
29	\$264.08	\$195.07	\$459.58	\$788.58
30	\$266.14	\$197.16	\$462.05	\$794.48
31	\$273.49	\$208.92	\$463.54	\$814.54
32	\$280.88	\$220.66	\$465.08	\$834.66
33	\$288.23	\$232.42	\$466.57	\$854.73
34	\$295.61	\$244.15	\$468.07	\$874.82
35	\$298.48	\$249.44	\$473.09	\$880.94
36	\$299.92	\$252.04	\$475.60	\$883.99
37	\$301.35	\$254.70	\$478.10	\$887.04
38	\$302.79	\$257.32	\$480.63	\$890.10
39	\$307.08	\$265.23	\$488.16	\$899.27
40	\$312.79	\$275.74	\$498.21	\$911.51
41	\$318.52	\$286.27	\$508.27	\$923.73
42	\$324.25	\$296.80	\$518.30	\$935.95
43	\$331.84	\$306.16	\$530.87	\$944.43
44	\$339.44	\$315.51	\$543.43	\$952.87
45	\$347.02	\$324.85	\$556.02	\$961.34
46	\$354.63	\$334.21	\$568.58	\$969.79
47	\$362.19	\$343.56	\$581.14	\$978.27
48	\$385.90	\$363.09	\$628.99	\$1,010.75
49	\$409.66	\$382.61	\$676.82	\$1,043.23
50	\$433.38	\$402.15	\$724.63	\$1,075.70
51	\$457.13	\$421.66	\$772.47	\$1,108.17
52	\$480.84	\$441.20	\$820.32	\$1,140.65
53	\$506.12	\$469.34	\$870.49	\$1,188.74
54	\$531.40	\$497.49	\$920.71	\$1,236.79
55	\$556.67	\$525.66	\$970.89	\$1,284.90
56	\$581.95	\$553.81	\$1,021.10	\$1,332.95
57	\$607.24	\$581.95	\$1,071.28	\$1,381.04
58	\$630.79	\$619.03	\$1,128.88	\$1,430.50
59	\$654.35	\$656.13	\$1,186.47	\$1,479.93
60	\$677.88	\$693.24	\$1,244.06	\$1,529.39
61	\$701.45	\$730.34	\$1,301.66	\$1,578.82
62	\$725.01	\$767.42	\$1,359.26	\$1,628.29
63	\$753.12	\$816.36	\$1,432.35	\$1,686.60
64	\$781.26	\$865.25	\$1,505.42	\$1,744.89

\$3,000 Rx Benefit Max

Age	Individual Female	Individual Male	Individual +1 Dependent	Family
0-20	\$249.11	\$178.51	\$443.39	\$745.54
21	\$251.17	\$180.63	\$445.88	\$751.47
22	\$253.21	\$182.75	\$448.39	\$757.44
23	\$255.28	\$184.90	\$450.84	\$763.41
24	\$257.35	\$187.01	\$453.34	\$769.35
25	\$259.40	\$189.16	\$455.84	\$775.32
26	\$261.47	\$191.28	\$458.30	\$781.29
27	\$263.52	\$193.43	\$460.79	\$787.26
28	\$265.57	\$195.54	\$463.29	\$793.19
29	\$267.62	\$197.69	\$465.75	\$799.16
30	\$269.71	\$199.81	\$468.24	\$805.14
31	\$277.16	\$211.71	\$469.76	\$825.47
32	\$284.64	\$223.61	\$471.31	\$845.84
33	\$292.09	\$235.53	\$472.83	\$866.19
34	\$299.58	\$247.43	\$474.35	\$886.55
35	\$302.49	\$252.77	\$479.43	\$892.75
36	\$303.94	\$255.42	\$481.98	\$895.85
37	\$305.39	\$258.12	\$484.51	\$898.94
38	\$306.85	\$260.77	\$487.07	\$902.04
39	\$311.21	\$268.78	\$494.72	\$911.33
40	\$316.99	\$279.43	\$504.89	\$923.74
41	\$322.80	\$290.11	\$515.09	\$936.11
42	\$328.61	\$300.78	\$525.25	\$948.50
43	\$336.28	\$310.26	\$537.98	\$957.09
44	\$343.99	\$319.74	\$550.72	\$965.65
45	\$351.67	\$329.21	\$563.48	\$974.24
46	\$359.38	\$338.69	\$576.21	\$982.80
47	\$367.04	\$348.16	\$588.94	\$991.39
48	\$391.08	\$367.97	\$637.42	\$1,024.31
49	\$415.15	\$387.74	\$685.90	\$1,057.21
50	\$439.20	\$407.54	\$734.35	\$1,090.13
51	\$463.27	\$427.32	\$782.83	\$1,123.03
52	\$487.30	\$447.11	\$831.32	\$1,155.95
53	\$512.91	\$475.63	\$882.17	\$1,204.68
54	\$538.52	\$504.15	\$933.06	\$1,253.38
55	\$564.13	\$532.71	\$983.91	\$1,302.13
56	\$589.75	\$561.24	\$1,034.79	\$1,350.83
57	\$615.38	\$589.75	\$1,085.64	\$1,399.56
58	\$639.25	\$627.34	\$1,144.01	\$1,449.69
59	\$663.12	\$664.93	\$1,202.38	\$1,499.78
60	\$686.97	\$702.54	\$1,260.74	\$1,549.90
61	\$710.85	\$740.13	\$1,319.11	\$1,600.00
62	\$734.73	\$777.71	\$1,377.49	\$1,650.13
63	\$763.23	\$827.31	\$1,451.55	\$1,709.22
64	\$791.75	\$876.87	\$1,525.62	\$1,768.29

ConnectiCare® 2009 Rates *January – December 2009 Effective Dates*



Revised 12/08

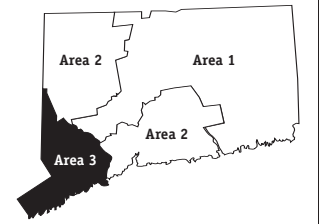
POS Upfront Deductible \$2,000 Individual/\$4,000 Family w/10/20/35 Rx

(POS-OA-25-35-UFTA)

All policyholders may be subject to a rate increase at their renewal date.
Rates are calculated as of the Applicant's age as of the effective date.

Area 3 (Fairfield County)

Fairfield County: Bethel, Bridgeport, Brookfield, Danbury, Darien, Easton, Fairfield, Greenwich, Monroe, New Canaan, New Fairfield, Newtown, Norwalk, Shelton, Sherman, Stamford, Stratford, Redding, Ridgefield, Trumbull, Weston, Westport, Wilton



\$1,000 Rx Benefit Max

Age	Individual Female	Individual Male	Individual +1 Dependent	Family
0-20	\$204.66	\$146.67	\$364.27	\$612.50
21	\$206.34	\$148.41	\$366.32	\$617.38
22	\$208.03	\$150.14	\$368.38	\$622.29
23	\$209.72	\$151.90	\$370.39	\$627.19
24	\$211.43	\$153.64	\$372.45	\$632.06
25	\$213.12	\$155.41	\$374.49	\$636.97
26	\$214.80	\$157.15	\$376.52	\$641.87
27	\$216.50	\$158.91	\$378.57	\$646.78
28	\$218.18	\$160.64	\$380.62	\$651.65
29	\$219.87	\$162.41	\$382.65	\$656.56
30	\$221.58	\$164.15	\$384.69	\$661.47
31	\$227.70	\$173.93	\$385.94	\$678.17
32	\$233.85	\$183.73	\$387.22	\$694.91
33	\$239.98	\$193.50	\$388.45	\$711.62
34	\$246.13	\$203.29	\$389.70	\$728.37
35	\$248.51	\$207.67	\$393.88	\$733.46
36	\$249.71	\$209.85	\$395.98	\$735.99
37	\$250.90	\$212.05	\$398.06	\$738.53
38	\$252.10	\$214.24	\$400.16	\$741.08
39	\$255.67	\$220.82	\$406.44	\$748.70
40	\$260.42	\$229.57	\$414.80	\$758.90
41	\$265.20	\$238.34	\$423.18	\$769.08
42	\$269.97	\$247.11	\$431.53	\$779.26
43	\$276.27	\$254.90	\$441.98	\$786.31
44	\$282.62	\$262.68	\$452.45	\$793.33
45	\$288.92	\$270.47	\$462.92	\$800.40
46	\$295.25	\$278.25	\$473.38	\$807.43
47	\$301.56	\$286.04	\$483.85	\$814.49
48	\$321.30	\$302.30	\$523.68	\$841.53
49	\$341.07	\$318.55	\$563.51	\$868.57
50	\$360.82	\$334.82	\$603.31	\$895.60
51	\$380.59	\$351.06	\$643.15	\$922.64
52	\$400.35	\$367.33	\$682.97	\$949.68
53	\$421.38	\$390.77	\$724.75	\$989.72
54	\$442.43	\$414.20	\$766.55	\$1,029.74
55	\$463.47	\$437.66	\$808.34	\$1,069.77
56	\$484.53	\$461.09	\$850.14	\$1,109.79
57	\$505.57	\$484.53	\$891.92	\$1,149.83
58	\$525.18	\$515.40	\$939.88	\$1,191.01
59	\$544.80	\$546.28	\$987.83	\$1,232.16
60	\$564.40	\$577.18	\$1,035.78	\$1,273.34
61	\$584.01	\$608.06	\$1,083.74	\$1,314.49
62	\$603.63	\$638.95	\$1,131.68	\$1,355.68
63	\$627.03	\$679.68	\$1,192.54	\$1,404.23
64	\$650.46	\$720.40	\$1,253.38	\$1,452.75

\$2,000 Rx Benefit Max

Age	Individual Female	Individual Male	Individual +1 Dependent	Family
0-20	\$212.94	\$152.59	\$379.00	\$637.26
21	\$214.69	\$154.40	\$381.13	\$642.34
22	\$216.45	\$156.21	\$383.27	\$647.44
23	\$218.20	\$158.05	\$385.36	\$652.54
24	\$219.98	\$159.85	\$387.50	\$657.62
25	\$221.74	\$161.69	\$389.64	\$662.72
26	\$223.49	\$163.50	\$391.74	\$667.83
27	\$225.24	\$165.33	\$393.87	\$672.93
28	\$226.99	\$167.15	\$396.00	\$678.00
29	\$228.75	\$168.99	\$398.12	\$683.10
30	\$230.54	\$170.79	\$400.24	\$688.20
31	\$236.91	\$180.97	\$401.55	\$705.59
32	\$243.30	\$191.15	\$402.87	\$723.00
33	\$249.68	\$201.32	\$404.15	\$740.40
34	\$256.07	\$211.50	\$405.46	\$757.81
35	\$258.55	\$216.07	\$409.80	\$763.10
36	\$259.81	\$218.33	\$411.99	\$765.74
37	\$261.05	\$220.63	\$414.15	\$768.39
38	\$262.29	\$222.90	\$416.34	\$771.03
39	\$266.02	\$229.75	\$422.87	\$778.97
40	\$270.95	\$238.85	\$431.56	\$789.58
41	\$275.92	\$247.98	\$440.28	\$800.17
42	\$280.89	\$257.10	\$448.98	\$810.76
43	\$287.44	\$265.20	\$459.86	\$818.10
44	\$294.04	\$273.30	\$470.74	\$825.40
45	\$300.59	\$281.40	\$481.64	\$832.75
46	\$307.19	\$289.50	\$492.52	\$840.07
47	\$313.74	\$297.61	\$503.40	\$847.42
48	\$334.29	\$314.52	\$544.85	\$875.55
49	\$354.86	\$331.43	\$586.29	\$903.68
50	\$375.41	\$348.36	\$627.70	\$931.81
51	\$395.98	\$365.26	\$669.15	\$959.94
52	\$416.53	\$382.18	\$710.59	\$988.07
53	\$438.42	\$406.56	\$754.06	\$1,029.73
54	\$460.32	\$430.94	\$797.55	\$1,071.37
55	\$482.21	\$455.35	\$841.02	\$1,113.02
56	\$504.11	\$479.73	\$884.51	\$1,154.66
57	\$526.01	\$504.11	\$927.98	\$1,196.32
58	\$546.41	\$536.23	\$977.87	\$1,239.16
59	\$566.83	\$568.37	\$1,027.76	\$1,281.97
60	\$587.21	\$600.51	\$1,077.65	\$1,324.81
61	\$607.61	\$632.64	\$1,127.54	\$1,367.63
62	\$628.03	\$664.77	\$1,177.44	\$1,410.48
63	\$652.39	\$707.16	\$1,240.75	\$1,461.00
64	\$676.75	\$749.52	\$1,304.06	\$1,511.48

\$3,000 Rx Benefit Max

Age	Individual Female	Individual Male	Individual +1 Dependent	Family
0-20	\$217.00	\$155.50	\$386.23	\$649.41
21	\$218.78	\$157.34	\$388.40	\$654.60
22	\$220.57	\$159.19	\$390.58	\$659.80
23	\$222.36	\$161.06	\$392.72	\$664.99
24	\$224.17	\$162.90	\$394.90	\$670.16
25	\$225.96	\$164.77	\$397.07	\$675.36
26	\$227.75	\$166.62	\$399.21	\$680.56
27	\$229.55	\$168.49	\$401.38	\$685.76
28	\$231.33	\$170.33	\$403.55	\$690.93
29	\$233.12	\$172.20	\$405.71	\$696.13
30	\$234.94	\$174.05	\$407.88	\$701.33
31	\$241.42	\$184.42	\$409.20	\$719.04
32	\$247.94	\$194.80	\$410.55	\$736.79
33	\$254.44	\$205.16	\$411.87	\$754.51
34	\$260.96	\$215.54	\$413.19	\$772.26
35	\$263.49	\$220.18	\$417.62	\$777.66
36	\$264.76	\$222.50	\$419.85	\$780.35
37	\$266.03	\$224.83	\$422.05	\$783.04
38	\$267.29	\$227.15	\$424.27	\$785.74
39	\$271.08	\$234.13	\$430.94	\$793.83
40	\$276.12	\$243.40	\$439.80	\$804.64
41	\$281.19	\$252.71	\$448.68	\$815.43
42	\$286.24	\$262.01	\$457.55	\$826.22
43	\$292.93	\$270.27	\$468.62	\$833.70
44	\$299.64	\$278.51	\$479.72	\$841.15
45	\$306.33	\$286.77	\$490.83	\$848.64
46	\$313.05	\$295.02	\$501.91	\$856.09
47	\$319.73	\$303.28	\$513.01	\$863.58
48	\$340.67	\$320.52	\$555.25	\$892.25
49	\$361.63	\$337.75	\$597.48	\$920.92
50	\$382.56	\$354.99	\$639.67	\$949.58
51	\$403.53	\$372.22	\$681.91	\$978.25
52	\$424.47	\$389.47	\$724.14	\$1,006.92
53	\$446.78	\$414.32	\$768.44	\$1,049.37
54	\$469.09	\$439.17	\$812.76	\$1,091.81
55	\$491.41	\$464.04	\$857.06	\$1,134.25
56	\$513.73	\$488.88	\$901.37	\$1,176.68
57	\$536.04	\$513.73	\$945.68	\$1,219.13
58	\$556.83	\$546.46	\$996.52	\$1,262.79
59	\$577.64	\$579.21	\$1,047.36	\$1,306.43
60	\$598.41	\$611.97	\$1,098.21	\$1,350.09
61	\$619.21	\$644.71	\$1,149.06	\$1,393.72
62	\$640.01	\$677.46	\$1,199.89	\$1,437.39
63	\$664.82	\$720.65	\$1,264.42	\$1,488.87
64	\$689.67	\$763.82	\$1,328.94	\$1,540.32

ConnectiCare® 2009 Rates *January – December 2009 Effective Dates*



Revised 12/08

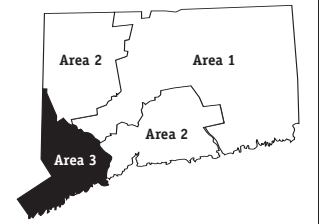
POS Upfront Deductible \$2,000 Individual/\$4,000 Family w/15/25/40 Rx

(POS-OA-25-35-UFTA)

All policyholders may be subject to a rate increase at their renewal date.
Rates are calculated as of the Applicant's age as of the effective date.

Area 3 (Fairfield County)

Fairfield County: Bethel, Bridgeport, Brookfield, Danbury, Darien, Easton, Fairfield, Greenwich, Monroe, New Canaan, New Fairfield, Newtown, Norwalk, Shelton, Sherman, Stamford, Stratford, Redding, Ridgefield, Trumbull, Weston, Westport, Wilton



\$1,000 Rx Benefit Max

Age	Individual Female	Individual Male	Individual +1 Dependent	Family
0-20	\$201.86	\$144.66	\$359.29	\$604.12
21	\$203.52	\$146.37	\$361.30	\$608.94
22	\$205.19	\$148.09	\$363.34	\$613.77
23	\$206.85	\$149.82	\$365.32	\$618.61
24	\$208.54	\$151.54	\$367.36	\$623.42
25	\$210.21	\$153.28	\$369.37	\$628.25
26	\$211.87	\$155.00	\$371.37	\$633.10
27	\$213.54	\$156.73	\$373.39	\$637.93
28	\$215.20	\$158.45	\$375.41	\$642.74
29	\$216.86	\$160.19	\$377.41	\$647.58
30	\$218.55	\$161.91	\$379.43	\$652.42
31	\$224.59	\$171.55	\$380.66	\$668.90
32	\$230.65	\$181.21	\$381.91	\$685.40
33	\$236.69	\$190.85	\$383.13	\$701.89
34	\$242.76	\$200.51	\$384.37	\$718.40
35	\$245.11	\$204.83	\$388.49	\$723.42
36	\$246.30	\$206.98	\$390.56	\$725.91
37	\$247.47	\$209.15	\$392.61	\$728.43
38	\$248.65	\$211.31	\$394.69	\$730.93
39	\$252.17	\$217.80	\$400.88	\$738.46
40	\$256.86	\$226.42	\$409.12	\$748.52
41	\$261.58	\$235.08	\$417.38	\$758.55
42	\$266.28	\$243.74	\$425.63	\$768.59
43	\$272.50	\$251.41	\$435.94	\$775.55
44	\$278.75	\$259.08	\$446.25	\$782.48
45	\$284.96	\$266.77	\$456.59	\$789.45
46	\$291.22	\$274.44	\$466.91	\$796.39
47	\$297.42	\$282.13	\$477.22	\$803.35
48	\$316.91	\$298.17	\$516.52	\$830.02
49	\$336.41	\$314.20	\$555.80	\$856.69
50	\$355.89	\$330.24	\$595.05	\$883.35
51	\$375.39	\$346.26	\$634.35	\$910.02
52	\$394.86	\$362.30	\$673.63	\$936.68
53	\$415.62	\$385.42	\$714.84	\$976.18
54	\$436.38	\$408.53	\$756.07	\$1,015.65
55	\$457.13	\$431.67	\$797.28	\$1,055.13
56	\$477.89	\$454.78	\$838.50	\$1,094.61
57	\$498.65	\$477.89	\$879.72	\$1,134.10
58	\$517.99	\$508.36	\$927.01	\$1,174.72
59	\$537.35	\$538.81	\$974.31	\$1,215.31
60	\$556.67	\$569.28	\$1,021.61	\$1,255.92
61	\$576.02	\$599.74	\$1,068.91	\$1,296.51
62	\$595.37	\$630.21	\$1,116.20	\$1,337.14
63	\$618.45	\$670.38	\$1,176.22	\$1,385.02
64	\$641.57	\$710.53	\$1,236.24	\$1,432.89

\$2,000 Rx Benefit Max

Age	Individual Female	Individual Male	Individual +1 Dependent	Family
0-20	\$208.75	\$149.60	\$371.56	\$624.75
21	\$210.47	\$151.37	\$373.65	\$629.73
22	\$212.19	\$153.14	\$375.75	\$634.74
23	\$213.91	\$154.94	\$377.80	\$639.73
24	\$215.66	\$156.71	\$379.90	\$644.70
25	\$217.38	\$158.51	\$381.98	\$649.71
26	\$219.10	\$160.30	\$384.05	\$654.72
27	\$220.82	\$162.09	\$386.15	\$659.72
28	\$222.54	\$163.86	\$388.22	\$664.69
29	\$224.26	\$165.67	\$390.30	\$669.69
30	\$226.02	\$167.44	\$392.39	\$674.70
31	\$232.25	\$177.41	\$393.66	\$691.74
32	\$238.52	\$187.40	\$394.96	\$708.81
33	\$244.78	\$197.37	\$396.22	\$725.86
34	\$251.04	\$207.35	\$397.50	\$742.93
35	\$253.48	\$211.83	\$401.76	\$748.12
36	\$254.71	\$214.05	\$403.90	\$750.71
37	\$255.92	\$216.30	\$406.02	\$753.30
38	\$257.14	\$218.52	\$408.16	\$755.90
39	\$260.78	\$225.24	\$414.56	\$763.68
40	\$265.63	\$234.16	\$423.09	\$774.09
41	\$270.50	\$243.11	\$431.64	\$784.46
42	\$275.37	\$252.05	\$440.16	\$794.84
43	\$281.80	\$260.00	\$450.83	\$802.04
44	\$288.26	\$267.94	\$461.50	\$809.20
45	\$294.70	\$275.88	\$472.18	\$816.41
46	\$301.16	\$283.82	\$482.85	\$823.57
47	\$307.58	\$291.77	\$493.52	\$830.78
48	\$327.73	\$308.35	\$534.16	\$858.36
49	\$347.90	\$324.93	\$574.78	\$885.94
50	\$368.04	\$341.52	\$615.38	\$913.52
51	\$388.20	\$358.09	\$656.01	\$941.09
52	\$408.35	\$374.68	\$696.63	\$968.67
53	\$429.81	\$398.59	\$739.25	\$1,009.52
54	\$451.28	\$422.48	\$781.89	\$1,050.33
55	\$472.74	\$446.41	\$824.51	\$1,091.17
56	\$494.22	\$470.31	\$867.15	\$1,131.98
57	\$515.68	\$494.22	\$909.76	\$1,172.82
58	\$535.68	\$525.71	\$958.68	\$1,214.83
59	\$555.70	\$557.21	\$1,007.58	\$1,256.80
60	\$575.68	\$588.72	\$1,056.50	\$1,298.81
61	\$595.68	\$620.22	\$1,105.41	\$1,340.78
62	\$615.70	\$651.73	\$1,154.32	\$1,382.80
63	\$639.57	\$693.27	\$1,216.40	\$1,432.32
64	\$663.47	\$734.80	\$1,278.45	\$1,481.81

\$3,000 Rx Benefit Max

Age	Individual Female	Individual Male	Individual +1 Dependent	Family
0-20	\$212.05	\$151.96	\$377.42	\$634.62
21	\$213.79	\$153.76	\$379.54	\$639.67
22	\$215.54	\$155.56	\$381.68	\$644.75
23	\$217.29	\$157.38	\$383.77	\$649.83
24	\$219.06	\$159.19	\$385.90	\$654.89
25	\$220.81	\$161.02	\$388.02	\$659.97
26	\$222.56	\$162.82	\$390.12	\$665.06
27	\$224.32	\$164.65	\$392.24	\$670.14
28	\$226.06	\$166.44	\$394.36	\$675.19
29	\$227.81	\$168.28	\$396.47	\$680.26
30	\$229.59	\$170.09	\$398.59	\$685.35
31	\$235.93	\$180.21	\$399.88	\$702.66
32	\$242.29	\$190.35	\$401.19	\$720.00
33	\$248.64	\$200.49	\$402.48	\$737.32
34	\$255.01	\$210.63	\$403.78	\$754.67
35	\$257.49	\$215.17	\$408.10	\$759.94
36	\$258.73	\$217.42	\$410.28	\$762.56
37	\$259.96	\$219.71	\$412.43	\$765.20
38	\$261.20	\$221.97	\$414.61	\$767.84
39	\$264.91	\$228.79	\$421.12	\$775.75
40	\$269.82	\$237.85	\$429.77	\$786.31
41	\$274.78	\$246.95	\$438.46	\$796.84
42	\$279.73	\$256.03	\$447.11	\$807.39
43	\$286.25	\$264.10	\$457.94	\$814.70
44	\$292.81	\$272.16	\$468.78	\$821.98
45	\$299.35	\$280.23	\$479.64	\$829.30
46	\$305.91	\$288.30	\$490.48	\$836.58
47	\$312.44	\$296.37	\$501.31	\$843.90
48	\$332.91	\$313.22	\$542.60	\$871.92
49	\$353.38	\$330.06	\$583.86	\$899.93
50	\$373.85	\$346.91	\$625.10	\$927.94
51	\$394.34	\$363.75	\$666.37	\$955.95
52	\$414.80	\$380.59	\$707.63	\$983.97
53	\$436.60	\$404.88	\$750.92	\$1,025.46
54	\$458.40	\$429.15	\$794.24	\$1,066.92
55	\$480.20	\$453.47	\$837.53	\$1,108.40
56	\$502.02	\$477.74	\$880.83	\$1,149.86
57	\$523.83	\$502.02	\$924.12	\$1,191.35
58	\$544.14	\$534.02	\$973.81	\$1,234.02
59	\$564.48	\$566.01	\$1,023.49	\$1,276.65
60	\$584.77	\$598.03	\$1,073.18	\$1,319.32
61	\$605.09	\$630.02	\$1,122.87	\$1,361.96
62	\$625.42	\$662.02	\$1,172.55	\$1,404.64
63	\$649.68	\$704.22	\$1,235.60	\$1,454.94
64	\$673.95	\$746.41	\$1,298.65	\$1,505.21

ConnectiCare® 2009 Rates *January – December 2009 Effective Dates*



Revised 12/08

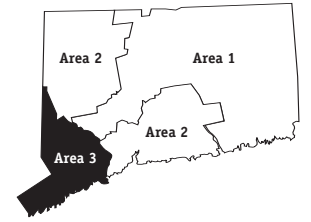
POS 25/35 Hospital Copay \$500 w/10/20/35 Rx

(POS-OA-25-35-AJLA)

All policyholders may be subject to a rate increase at their renewal date.
Rates are calculated as of the Applicant's age as of the effective date.

Area 3 (Fairfield County)

Fairfield County: Bethel, Bridgeport, Brookfield, Danbury, Darien, Easton, Fairfield, Greenwich, Monroe, New Canaan, New Fairfield, Newtown, Norwalk, Shelton, Sherman, Stamford, Stratford, Redding, Ridgefield, Trumbull, Weston, Westport, Wilton



\$1,000 Rx Benefit Max

Age	Individual Female	Individual Male	Individual +1 Dependent	Family
0-20	\$287.88	\$206.30	\$512.39	\$861.55
21	\$290.25	\$208.74	\$515.28	\$868.41
22	\$292.62	\$211.19	\$518.16	\$875.31
23	\$294.99	\$213.67	\$521.00	\$882.21
24	\$297.40	\$216.11	\$523.88	\$889.06
25	\$299.78	\$218.60	\$526.77	\$895.96
26	\$302.15	\$221.05	\$529.62	\$902.86
27	\$304.52	\$223.53	\$532.50	\$909.76
28	\$306.89	\$225.96	\$535.39	\$916.62
29	\$309.26	\$228.45	\$538.23	\$923.52
30	\$311.66	\$230.90	\$541.11	\$930.42
31	\$320.29	\$244.66	\$542.87	\$953.92
32	\$328.95	\$258.42	\$544.65	\$977.47
33	\$337.55	\$272.17	\$546.40	\$1,000.98
34	\$346.21	\$285.94	\$548.15	\$1,024.52
35	\$349.56	\$292.11	\$554.04	\$1,031.67
36	\$351.24	\$295.18	\$556.99	\$1,035.26
37	\$352.92	\$298.27	\$559.91	\$1,038.83
38	\$354.61	\$301.34	\$562.87	\$1,042.41
39	\$359.63	\$310.62	\$571.70	\$1,053.13
40	\$366.31	\$322.92	\$583.45	\$1,067.48
41	\$373.03	\$335.25	\$595.24	\$1,081.79
42	\$379.75	\$347.59	\$606.99	\$1,096.10
43	\$388.61	\$358.53	\$621.70	\$1,106.03
44	\$397.53	\$369.49	\$636.42	\$1,115.91
45	\$406.39	\$380.44	\$651.16	\$1,125.84
46	\$415.30	\$391.39	\$665.87	\$1,135.74
47	\$424.17	\$402.33	\$680.58	\$1,145.67
48	\$451.94	\$425.22	\$736.61	\$1,183.69
49	\$479.76	\$448.07	\$792.64	\$1,221.73
50	\$507.53	\$470.96	\$848.62	\$1,259.77
51	\$535.34	\$493.80	\$904.65	\$1,297.79
52	\$563.12	\$516.69	\$960.67	\$1,335.83
53	\$592.72	\$549.66	\$1,019.44	\$1,392.15
54	\$622.33	\$582.62	\$1,078.24	\$1,448.43
55	\$651.93	\$615.61	\$1,137.01	\$1,504.75
56	\$681.54	\$648.57	\$1,195.81	\$1,561.04
57	\$711.12	\$681.54	\$1,254.58	\$1,617.35
58	\$738.73	\$724.96	\$1,322.04	\$1,675.28
59	\$766.32	\$768.40	\$1,389.49	\$1,733.17
60	\$793.88	\$811.87	\$1,456.93	\$1,791.09
61	\$821.48	\$855.31	\$1,524.39	\$1,848.98
62	\$849.07	\$898.75	\$1,591.84	\$1,906.91
63	\$881.98	\$956.05	\$1,677.43	\$1,975.20
64	\$914.94	\$1,013.31	\$1,763.02	\$2,043.45

\$2,000 Rx Benefit Max

Age	Individual Female	Individual Male	Individual +1 Dependent	Family
0-20	\$296.15	\$212.22	\$527.11	\$886.31
21	\$298.60	\$214.74	\$530.09	\$893.36
22	\$301.04	\$217.26	\$533.05	\$900.46
23	\$303.47	\$219.82	\$535.97	\$907.56
24	\$305.95	\$222.32	\$538.93	\$914.62
25	\$308.40	\$224.88	\$541.91	\$921.71
26	\$310.84	\$227.40	\$544.83	\$928.81
27	\$313.26	\$229.95	\$547.80	\$935.91
28	\$315.70	\$232.47	\$550.77	\$942.96
29	\$318.15	\$235.02	\$553.70	\$950.07
30	\$320.63	\$237.54	\$556.66	\$957.16
31	\$329.49	\$251.69	\$558.47	\$981.34
32	\$338.39	\$265.84	\$560.31	\$1,005.56
33	\$347.25	\$280.00	\$562.11	\$1,029.75
34	\$356.15	\$294.16	\$563.91	\$1,053.96
35	\$359.60	\$300.51	\$569.95	\$1,061.32
36	\$361.33	\$303.65	\$573.00	\$1,065.01
37	\$363.06	\$306.85	\$576.00	\$1,068.68
38	\$364.79	\$310.01	\$579.04	\$1,072.37
39	\$369.97	\$319.54	\$588.13	\$1,083.40
40	\$376.84	\$332.20	\$600.21	\$1,098.16
41	\$383.75	\$344.89	\$612.35	\$1,112.89
42	\$390.66	\$357.58	\$624.44	\$1,127.60
43	\$399.78	\$368.83	\$639.57	\$1,137.81
44	\$408.95	\$380.11	\$654.71	\$1,147.98
45	\$418.07	\$391.37	\$669.87	\$1,158.20
46	\$427.24	\$402.64	\$685.01	\$1,168.38
47	\$436.36	\$413.90	\$700.13	\$1,178.60
48	\$464.93	\$437.45	\$757.78	\$1,217.72
49	\$493.55	\$460.95	\$815.42	\$1,256.84
50	\$522.12	\$484.50	\$873.02	\$1,295.97
51	\$550.73	\$508.00	\$930.66	\$1,335.09
52	\$579.31	\$531.54	\$988.29	\$1,374.22
53	\$609.76	\$565.46	\$1,048.74	\$1,432.16
54	\$640.21	\$599.36	\$1,109.23	\$1,490.06
55	\$670.67	\$633.30	\$1,169.69	\$1,548.00
56	\$701.12	\$667.21	\$1,230.18	\$1,605.90
57	\$731.56	\$701.12	\$1,290.64	\$1,663.84
58	\$759.96	\$745.79	\$1,360.03	\$1,723.42
59	\$788.35	\$790.48	\$1,429.41	\$1,782.98
60	\$816.69	\$835.20	\$1,498.80	\$1,842.56
61	\$845.08	\$879.89	\$1,568.19	\$1,902.12
62	\$873.47	\$924.57	\$1,637.59	\$1,961.71
63	\$907.34	\$983.52	\$1,725.64	\$2,031.96
64	\$941.23	\$1,042.43	\$1,813.70	\$2,102.18

\$3,000 Rx Benefit Max

Age	Individual Female	Individual Male	Individual +1 Dependent	Family
0-20	\$300.21	\$215.13	\$534.34	\$898.46
21	\$302.69	\$217.68	\$537.35	\$905.62
22	\$305.16	\$220.23	\$540.36	\$912.81
23	\$307.63	\$222.83	\$543.33	\$920.01
24	\$310.15	\$225.37	\$546.33	\$927.16
25	\$312.62	\$227.96	\$549.34	\$934.35
26	\$315.09	\$230.51	\$552.31	\$941.55
27	\$317.57	\$233.11	\$555.31	\$948.74
28	\$320.04	\$235.65	\$558.32	\$955.90
29	\$322.51	\$238.24	\$561.29	\$963.09
30	\$325.03	\$240.79	\$564.30	\$970.29
31	\$334.01	\$255.15	\$566.13	\$994.80
32	\$343.03	\$269.50	\$567.99	\$1,019.35
33	\$352.01	\$283.84	\$569.82	\$1,043.87
34	\$361.04	\$298.20	\$571.64	\$1,068.42
35	\$364.54	\$304.62	\$577.77	\$1,075.88
36	\$366.29	\$307.83	\$580.85	\$1,079.61
37	\$368.04	\$311.05	\$583.90	\$1,083.34
38	\$369.79	\$314.25	\$586.98	\$1,087.07
39	\$375.04	\$323.92	\$596.20	\$1,098.26
40	\$382.02	\$336.75	\$608.45	\$1,113.22
41	\$389.02	\$349.62	\$620.74	\$1,128.14
42	\$396.01	\$362.48	\$633.01	\$1,143.06
43	\$405.26	\$373.90	\$648.34	\$1,153.41
44	\$414.55	\$385.32	\$663.68	\$1,163.73
45	\$423.81	\$396.73	\$679.06	\$1,174.09
46	\$433.10	\$408.16	\$694.40	\$1,184.40
47	\$442.34	\$419.57	\$709.74	\$1,194.76
48	\$471.31	\$443.44	\$768.17	\$1,234.42
49	\$500.32	\$467.27	\$826.61	\$1,274.08
50	\$529.27	\$491.13	\$884.99	\$1,313.74
51	\$558.28	\$514.96	\$943.42	\$1,353.40
52	\$587.25	\$538.83	\$1,001.84	\$1,393.07
53	\$618.12	\$573.21	\$1,063.12	\$1,451.81
54	\$648.99	\$607.58	\$1,124.45	\$1,510.49
55	\$679.87	\$641.99	\$1,185.73	\$1,569.23
56	\$710.74	\$676.36	\$1,247.04	\$1,627.93
57	\$741.60	\$710.74	\$1,308.34	\$1,686.66
58	\$770.38	\$756.02	\$1,378.68	\$1,747.05
59	\$799.16	\$801.32	\$1,449.02	\$1,807.44
60	\$827.90	\$846.66	\$1,519.36	\$1,867.84
61	\$856.67	\$891.96	\$1,589.71	\$1,928.20
62	\$885.45	\$937.25	\$1,660.04	\$1,988.62
63	\$919.78	\$997.02	\$1,749.30	\$2,059.83
64	\$954.15	\$1,056.73	\$1,838.57	\$2,131.01

ConnectiCare® 2009 Rates *January – December 2009 Effective Dates*



Revised 12/08

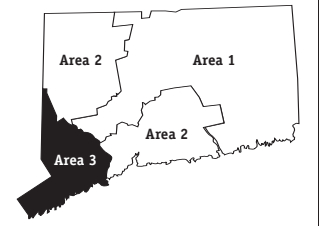
POS 25/35 Hospital Copay \$500 w/15/25/40 Rx

(POS-OA-25-35-AJLA)

All policyholders may be subject to a rate increase at their renewal date.
Rates are calculated as of the Applicant's age as of the effective date.

Area 3 (Fairfield County)

Fairfield County: Bethel, Bridgeport, Brookfield, Danbury, Darien, Easton, Fairfield, Greenwich, Monroe, New Canaan, New Fairfield, Newtown, Norwalk, Shelton, Sherman, Stamford, Stratford, Redding, Ridgefield, Trumbull, Weston, Westport, Wilton



\$1,000 Rx Benefit Max

Age	Individual Female	Individual Male	Individual +1 Dependent	Family
0-20	\$285.08	\$204.30	\$507.40	\$853.17
21	\$287.43	\$206.71	\$510.26	\$859.96
22	\$289.78	\$209.14	\$513.12	\$866.79
23	\$292.12	\$211.59	\$515.93	\$873.63
24	\$294.51	\$214.02	\$518.79	\$880.42
25	\$296.87	\$216.47	\$521.65	\$887.25
26	\$299.22	\$218.90	\$524.47	\$894.09
27	\$301.56	\$221.35	\$527.32	\$900.92
28	\$303.91	\$223.78	\$530.18	\$907.70
29	\$306.25	\$226.23	\$533.00	\$914.54
30	\$308.64	\$228.66	\$535.85	\$921.37
31	\$317.17	\$242.28	\$537.59	\$944.65
32	\$325.74	\$255.91	\$539.35	\$967.96
33	\$334.26	\$269.53	\$541.09	\$991.25
34	\$342.84	\$283.17	\$542.82	\$1,014.55
35	\$346.16	\$289.27	\$548.64	\$1,021.64
36	\$347.83	\$292.31	\$551.57	\$1,025.18
37	\$349.49	\$295.37	\$554.46	\$1,028.72
38	\$351.16	\$298.41	\$557.39	\$1,032.26
39	\$356.13	\$307.59	\$566.14	\$1,042.89
40	\$362.75	\$319.78	\$577.77	\$1,057.10
41	\$369.40	\$331.99	\$589.45	\$1,071.27
42	\$376.05	\$344.21	\$601.09	\$1,085.44
43	\$384.83	\$355.04	\$615.65	\$1,095.27
44	\$393.66	\$365.89	\$630.22	\$1,105.06
45	\$402.43	\$376.73	\$644.82	\$1,114.89
46	\$411.27	\$387.58	\$659.40	\$1,124.69
47	\$420.04	\$398.42	\$673.95	\$1,134.52
48	\$447.54	\$421.09	\$729.45	\$1,172.18
49	\$475.09	\$443.72	\$784.93	\$1,209.85
50	\$502.60	\$466.38	\$840.37	\$1,247.51
51	\$530.14	\$489.00	\$895.86	\$1,285.17
52	\$557.64	\$511.66	\$951.33	\$1,322.83
53	\$586.96	\$544.32	\$1,009.53	\$1,378.62
54	\$616.27	\$576.95	\$1,067.76	\$1,434.34
55	\$645.59	\$609.63	\$1,125.95	\$1,490.12
56	\$674.90	\$642.26	\$1,184.17	\$1,545.85
57	\$704.20	\$674.90	\$1,242.37	\$1,601.62
58	\$731.54	\$717.91	\$1,309.17	\$1,658.98
59	\$758.87	\$760.93	\$1,375.97	\$1,716.32
60	\$786.16	\$803.97	\$1,442.76	\$1,773.67
61	\$813.49	\$846.98	\$1,509.56	\$1,830.99
62	\$840.80	\$890.00	\$1,576.36	\$1,888.37
63	\$873.40	\$946.75	\$1,661.11	\$1,955.98
64	\$906.05	\$1,003.45	\$1,745.88	\$2,023.58

\$2,000 Rx Benefit Max

Age	Individual Female	Individual Male	Individual +1 Dependent	Family
0-20	\$291.97	\$209.23	\$519.67	\$873.80
21	\$294.38	\$211.70	\$522.61	\$880.75
22	\$296.78	\$214.19	\$525.53	\$887.76
23	\$299.19	\$216.71	\$528.41	\$894.75
24	\$301.64	\$219.19	\$531.33	\$901.70
25	\$304.04	\$221.70	\$534.26	\$908.70
26	\$306.45	\$224.19	\$537.15	\$915.70
27	\$308.84	\$226.71	\$540.07	\$922.70
28	\$311.26	\$229.18	\$542.99	\$929.66
29	\$313.66	\$231.70	\$545.88	\$936.65
30	\$316.10	\$234.19	\$548.80	\$943.65
31	\$324.83	\$248.14	\$550.59	\$967.49
32	\$333.62	\$262.10	\$552.40	\$991.37
33	\$342.35	\$276.05	\$554.18	\$1,015.22
34	\$351.12	\$290.01	\$555.95	\$1,039.08
35	\$354.52	\$296.26	\$561.91	\$1,046.34
36	\$356.23	\$299.37	\$564.91	\$1,049.97
37	\$357.93	\$302.51	\$567.87	\$1,053.60
38	\$359.64	\$305.63	\$570.87	\$1,057.23
39	\$364.74	\$315.03	\$579.83	\$1,068.11
40	\$371.52	\$327.51	\$591.75	\$1,082.67
41	\$378.33	\$340.02	\$603.70	\$1,097.17
42	\$385.14	\$352.53	\$615.62	\$1,111.68
43	\$394.14	\$363.63	\$630.54	\$1,121.75
44	\$403.18	\$374.75	\$645.47	\$1,131.78
45	\$412.17	\$385.84	\$660.42	\$1,141.85
46	\$421.21	\$396.96	\$675.34	\$1,151.88
47	\$430.20	\$408.06	\$690.25	\$1,161.95
48	\$458.36	\$431.27	\$747.08	\$1,200.53
49	\$486.59	\$454.44	\$803.91	\$1,239.10
50	\$514.75	\$477.66	\$860.69	\$1,277.68
51	\$542.95	\$500.82	\$917.52	\$1,316.24
52	\$571.12	\$524.04	\$974.33	\$1,354.82
53	\$601.15	\$557.48	\$1,033.93	\$1,411.95
54	\$631.18	\$590.90	\$1,093.58	\$1,469.02
55	\$661.20	\$624.37	\$1,153.18	\$1,526.15
56	\$691.23	\$657.79	\$1,212.81	\$1,583.23
57	\$721.24	\$691.23	\$1,272.42	\$1,640.35
58	\$749.23	\$735.27	\$1,340.83	\$1,699.09
59	\$777.22	\$779.33	\$1,409.24	\$1,757.81
60	\$805.17	\$823.41	\$1,477.65	\$1,816.56
61	\$833.15	\$867.47	\$1,546.07	\$1,875.27
62	\$861.14	\$911.52	\$1,614.47	\$1,934.03
63	\$894.52	\$969.64	\$1,701.28	\$2,003.28
64	\$927.95	\$1,027.72	\$1,788.09	\$2,072.51

\$3,000 Rx Benefit Max

Age	Individual Female	Individual Male	Individual +1 Dependent	Family
0-20	\$295.27	\$211.59	\$525.54	\$883.66
21	\$297.70	\$214.10	\$528.50	\$890.70
22	\$300.13	\$216.61	\$531.46	\$897.77
23	\$302.56	\$219.16	\$534.37	\$904.85
24	\$305.04	\$221.66	\$537.33	\$911.89
25	\$307.47	\$224.20	\$540.30	\$918.96
26	\$309.91	\$226.72	\$543.22	\$926.05
27	\$312.34	\$229.27	\$546.17	\$933.12
28	\$314.77	\$231.77	\$549.13	\$940.15
29	\$317.20	\$234.32	\$552.05	\$947.23
30	\$319.67	\$236.83	\$555.00	\$954.31
31	\$328.51	\$250.94	\$556.80	\$978.41
32	\$337.38	\$265.05	\$558.63	\$1,002.55
33	\$346.21	\$279.17	\$560.44	\$1,026.68
34	\$355.09	\$293.28	\$562.23	\$1,050.82
35	\$358.53	\$299.60	\$568.25	\$1,058.16
36	\$360.25	\$302.75	\$571.29	\$1,061.83
37	\$361.97	\$305.93	\$574.28	\$1,065.50
38	\$363.70	\$309.08	\$577.31	\$1,069.17
39	\$368.87	\$318.59	\$586.38	\$1,080.17
40	\$375.72	\$331.21	\$598.42	\$1,094.89
41	\$382.61	\$343.86	\$610.52	\$1,109.56
42	\$389.50	\$356.51	\$622.58	\$1,124.23
43	\$398.59	\$367.74	\$637.66	\$1,134.41
44	\$407.73	\$378.97	\$652.75	\$1,144.56
45	\$416.82	\$390.20	\$667.88	\$1,154.75
46	\$425.96	\$401.44	\$682.97	\$1,164.89
47	\$435.05	\$412.66	\$698.05	\$1,175.07
48	\$463.54	\$436.14	\$755.52	\$1,214.09
49	\$492.07	\$459.57	\$812.99	\$1,253.09
50	\$520.56	\$483.05	\$870.41	\$1,292.10
51	\$549.09	\$506.48	\$927.88	\$1,331.10
52	\$577.58	\$529.95	\$985.33	\$1,370.12
53	\$607.94	\$563.77	\$1,045.61	\$1,427.89
54	\$638.30	\$597.57	\$1,105.92	\$1,485.61
55	\$668.66	\$631.42	\$1,166.20	\$1,543.38
56	\$699.02	\$665.22	\$1,226.50	\$1,601.11
57	\$729.38	\$699.02	\$1,286.78	\$1,658.87
58	\$757.69	\$743.57	\$1,355.97	\$1,718.28
59	\$785.99	\$788.12	\$1,425.15	\$1,777.66
60	\$814.26	\$832.71	\$1,494.33	\$1,837.07
61	\$842.55	\$877.26	\$1,563.52	\$1,896.45
62	\$870.86	\$921.81	\$1,632.70	\$1,955.87
63	\$904.63	\$980.59	\$1,720.49	\$2,025.90
64	\$938.43	\$1,039.33	\$1,808.28	\$2,095.91

ConnectiCare® 2009 Rates *January – December 2009 Effective Dates*



Revised 12/08

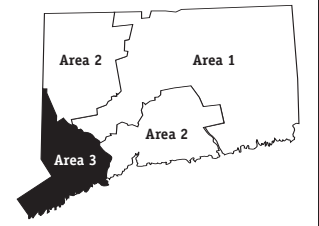
POS 30/45 Hosp. Ded. \$2,000 Individual/\$4,000 Family w/10/20/35 Rx

(POS-OA-30-45-DJMA)

All policyholders may be subject to a rate increase at their renewal date.
Rates are calculated as of the Applicant's age as of the effective date.

Area 3 (Fairfield County)

Fairfield County: Bethel, Bridgeport, Brookfield, Danbury, Darien, Easton, Fairfield, Greenwich, Monroe, New Canaan, New Fairfield, Newtown, Norwalk, Shelton, Sherman, Stamford, Stratford, Redding, Ridgefield, Trumbull, Weston, Westport, Wilton



\$1,000 Rx Benefit Max

Age	Individual Female	Individual Male	Individual +1 Dependent	Family
0-20	\$256.02	\$183.47	\$455.68	\$766.21
21	\$258.13	\$185.65	\$458.25	\$772.32
22	\$260.23	\$187.82	\$460.82	\$778.45
23	\$262.35	\$190.03	\$463.35	\$784.59
24	\$264.49	\$192.20	\$465.91	\$790.68
25	\$266.60	\$194.41	\$468.48	\$796.81
26	\$268.71	\$196.59	\$471.01	\$802.95
27	\$270.83	\$198.80	\$473.58	\$809.09
28	\$272.94	\$200.96	\$476.14	\$815.20
29	\$275.04	\$203.17	\$478.67	\$821.32
30	\$277.18	\$205.34	\$481.23	\$827.46
31	\$284.84	\$217.59	\$482.80	\$848.37
32	\$292.54	\$229.83	\$484.39	\$869.30
33	\$300.20	\$242.06	\$485.93	\$890.21
34	\$307.90	\$254.30	\$487.50	\$911.15
35	\$310.88	\$259.79	\$492.73	\$917.52
36	\$312.37	\$262.51	\$495.36	\$920.69
37	\$313.86	\$265.27	\$497.94	\$923.88
38	\$315.36	\$268.00	\$500.58	\$927.05
39	\$319.84	\$276.24	\$508.44	\$936.59
40	\$325.77	\$287.19	\$518.89	\$949.35
41	\$331.75	\$298.15	\$529.37	\$962.08
42	\$337.73	\$309.13	\$539.82	\$974.81
43	\$345.61	\$318.86	\$552.91	\$983.63
44	\$353.54	\$328.60	\$565.99	\$992.43
45	\$361.42	\$338.34	\$579.10	\$1,001.26
46	\$369.33	\$348.08	\$592.18	\$1,010.06
47	\$377.23	\$357.81	\$605.27	\$1,018.89
48	\$401.93	\$378.17	\$655.09	\$1,052.70
49	\$426.67	\$398.49	\$704.93	\$1,086.53
50	\$451.37	\$418.85	\$754.72	\$1,120.37
51	\$476.10	\$439.17	\$804.54	\$1,154.18
52	\$500.81	\$459.52	\$854.37	\$1,188.01
53	\$527.13	\$488.83	\$906.64	\$1,238.10
54	\$553.47	\$518.15	\$958.93	\$1,288.15
55	\$579.79	\$547.49	\$1,011.20	\$1,338.24
56	\$606.12	\$576.80	\$1,063.48	\$1,388.30
57	\$632.44	\$606.12	\$1,115.75	\$1,438.38
58	\$656.98	\$644.73	\$1,175.74	\$1,489.90
59	\$681.52	\$683.37	\$1,235.73	\$1,541.37
60	\$706.03	\$722.03	\$1,295.70	\$1,592.90
61	\$730.57	\$760.66	\$1,355.70	\$1,644.38
62	\$755.11	\$799.29	\$1,415.69	\$1,695.89
63	\$784.39	\$850.25	\$1,491.81	\$1,756.63
64	\$813.70	\$901.18	\$1,567.93	\$1,817.32

\$2,000 Rx Benefit Max

Age	Individual Female	Individual Male	Individual +1 Dependent	Family
0-20	\$264.30	\$189.39	\$470.41	\$790.97
21	\$266.47	\$191.64	\$473.06	\$797.27
22	\$268.65	\$193.89	\$475.71	\$803.60
23	\$270.83	\$196.17	\$478.32	\$809.94
24	\$273.04	\$198.41	\$480.97	\$816.23
25	\$275.22	\$200.69	\$483.62	\$822.56
26	\$277.40	\$202.94	\$486.23	\$828.91
27	\$279.57	\$205.22	\$488.88	\$835.24
28	\$281.75	\$207.46	\$491.52	\$841.54
29	\$283.93	\$209.74	\$494.14	\$847.87
30	\$286.15	\$211.98	\$496.78	\$854.20
31	\$294.05	\$224.62	\$498.40	\$875.79
32	\$301.98	\$237.25	\$500.04	\$897.39
33	\$309.90	\$249.88	\$501.64	\$918.98
34	\$317.84	\$262.51	\$503.26	\$940.59
35	\$320.93	\$268.18	\$508.65	\$947.17
36	\$322.46	\$270.99	\$511.37	\$950.44
37	\$324.01	\$273.85	\$514.04	\$953.73
38	\$325.55	\$276.66	\$516.75	\$957.01
39	\$330.18	\$285.17	\$524.87	\$966.86
40	\$336.31	\$296.47	\$535.65	\$980.03
41	\$342.46	\$307.79	\$546.48	\$993.17
42	\$348.64	\$319.11	\$557.26	\$1,006.31
43	\$356.77	\$329.16	\$570.78	\$1,015.42
44	\$364.96	\$339.23	\$584.28	\$1,024.50
45	\$373.10	\$349.27	\$597.82	\$1,033.62
46	\$381.27	\$359.33	\$611.32	\$1,042.70
47	\$389.41	\$369.38	\$624.82	\$1,051.82
48	\$414.92	\$390.39	\$676.26	\$1,086.73
49	\$440.46	\$411.37	\$727.70	\$1,121.65
50	\$465.95	\$432.39	\$779.11	\$1,156.57
51	\$491.49	\$453.36	\$830.54	\$1,191.48
52	\$517.00	\$474.37	\$881.98	\$1,226.40
53	\$544.17	\$504.63	\$935.94	\$1,278.11
54	\$571.35	\$534.89	\$989.92	\$1,329.78
55	\$598.52	\$565.18	\$1,043.88	\$1,381.49
56	\$625.70	\$595.44	\$1,097.85	\$1,433.16
57	\$652.88	\$625.70	\$1,151.81	\$1,484.87
58	\$678.21	\$665.57	\$1,213.73	\$1,538.05
59	\$703.54	\$705.46	\$1,275.65	\$1,591.19
60	\$728.83	\$745.35	\$1,337.58	\$1,644.37
61	\$754.18	\$785.24	\$1,399.51	\$1,697.52
62	\$779.51	\$825.11	\$1,461.45	\$1,750.69
63	\$809.74	\$877.72	\$1,540.02	\$1,813.39
64	\$839.99	\$930.30	\$1,618.61	\$1,876.05

\$3,000 Rx Benefit Max

Age	Individual Female	Individual Male	Individual +1 Dependent	Family
0-20	\$268.36	\$192.31	\$477.64	\$803.12
21	\$270.56	\$194.59	\$480.33	\$809.53
22	\$272.77	\$196.87	\$483.02	\$815.96
23	\$274.99	\$199.19	\$485.68	\$822.39
24	\$277.23	\$201.47	\$488.37	\$828.77
25	\$279.44	\$203.78	\$491.05	\$835.21
26	\$281.66	\$206.06	\$493.70	\$841.64
27	\$283.88	\$208.38	\$496.39	\$848.07
28	\$286.09	\$210.65	\$499.07	\$854.47
29	\$288.30	\$212.96	\$501.73	\$860.90
30	\$290.54	\$215.24	\$504.42	\$867.33
31	\$298.56	\$228.07	\$506.06	\$889.24
32	\$306.63	\$240.91	\$507.73	\$911.19
33	\$314.67	\$253.72	\$509.35	\$933.10
34	\$322.73	\$266.55	\$510.99	\$955.04
35	\$325.86	\$272.30	\$516.47	\$961.72
36	\$327.42	\$275.17	\$519.23	\$965.05
37	\$328.99	\$278.06	\$521.93	\$968.39
38	\$330.54	\$280.91	\$524.69	\$971.72
39	\$335.25	\$289.55	\$532.94	\$981.72
40	\$341.48	\$301.02	\$543.89	\$995.09
41	\$347.74	\$312.52	\$554.88	\$1,008.43
42	\$353.99	\$324.02	\$565.83	\$1,021.77
43	\$362.26	\$334.23	\$579.54	\$1,031.02
44	\$370.56	\$344.44	\$593.26	\$1,040.24
45	\$378.84	\$354.64	\$607.01	\$1,049.51
46	\$387.13	\$364.85	\$620.71	\$1,058.72
47	\$395.40	\$375.05	\$634.43	\$1,067.98
48	\$421.30	\$396.39	\$686.66	\$1,103.43
49	\$447.23	\$417.69	\$738.89	\$1,138.88
50	\$473.11	\$439.02	\$791.08	\$1,174.34
51	\$499.04	\$460.33	\$843.31	\$1,209.79
52	\$524.94	\$481.66	\$895.54	\$1,245.25
53	\$552.53	\$512.39	\$950.32	\$1,297.75
54	\$580.12	\$543.11	\$1,005.14	\$1,350.22
55	\$607.73	\$573.87	\$1,059.92	\$1,402.72
56	\$635.32	\$604.59	\$1,114.72	\$1,455.19
57	\$662.91	\$635.32	\$1,169.51	\$1,507.68
58	\$688.63	\$675.80	\$1,232.38	\$1,561.68
59	\$714.35	\$716.30	\$1,295.26	\$1,615.64
60	\$740.04	\$756.81	\$1,358.14	\$1,669.64
61	\$765.77	\$797.31	\$1,421.03	\$1,723.60
62	\$791.49	\$837.79	\$1,483.90	\$1,777.60
63	\$822.18	\$891.22	\$1,563.68	\$1,841.26
64	\$852.91	\$944.60	\$1,643.48	\$1,904.89

ConnectiCare® 2009 Rates *January – December 2009 Effective Dates*



Revised 12/08

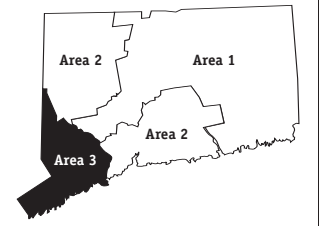
POS 30/45 Hosp. Ded. \$2,000 Individual/\$4,000 Family w/15/25/40 Rx

(POS-OA-30-45-DJMA)

All policyholders may be subject to a rate increase at their renewal date.
Rates are calculated as of the Applicant's age as of the effective date.

Area 3 (Fairfield County)

Fairfield County: Bethel, Bridgeport, Brookfield, Danbury, Darien, Easton, Fairfield, Greenwich, Monroe, New Canaan, New Fairfield, Newtown, Norwalk, Shelton, Sherman, Stamford, Stratford, Redding, Ridgefield, Trumbull, Weston, Westport, Wilton



\$1,000 Rx Benefit Max

Age	Individual Female	Individual Male	Individual +1 Dependent	Family
0-20	\$253.22	\$181.47	\$450.70	\$757.83
21	\$255.31	\$183.61	\$453.23	\$763.87
22	\$257.39	\$185.77	\$455.79	\$769.93
23	\$259.48	\$187.95	\$458.28	\$776.01
24	\$261.60	\$190.11	\$460.82	\$782.04
25	\$263.68	\$192.28	\$463.36	\$788.10
26	\$265.78	\$194.44	\$465.86	\$794.18
27	\$267.87	\$196.62	\$468.40	\$800.24
28	\$269.95	\$198.77	\$470.93	\$806.28
29	\$272.03	\$200.95	\$473.44	\$812.35
30	\$274.16	\$203.10	\$475.97	\$818.41
31	\$281.73	\$215.21	\$477.52	\$839.09
32	\$289.33	\$227.32	\$479.08	\$859.80
33	\$296.92	\$239.41	\$480.62	\$880.48
34	\$304.53	\$251.52	\$482.17	\$901.18
35	\$307.48	\$256.95	\$487.34	\$907.48
36	\$308.96	\$259.64	\$489.94	\$910.62
37	\$310.43	\$262.37	\$492.50	\$913.77
38	\$311.91	\$265.07	\$495.10	\$916.91
39	\$316.34	\$273.22	\$502.87	\$926.35
40	\$322.21	\$284.04	\$513.21	\$938.97
41	\$328.12	\$294.89	\$523.58	\$951.55
42	\$334.04	\$305.75	\$533.91	\$964.14
43	\$341.83	\$315.37	\$546.86	\$972.88
44	\$349.67	\$325.01	\$559.80	\$981.58
45	\$357.47	\$334.64	\$572.77	\$990.31
46	\$365.30	\$344.27	\$585.71	\$999.01
47	\$373.10	\$353.90	\$598.65	\$1,007.75
48	\$397.54	\$374.04	\$647.93	\$1,041.19
49	\$422.01	\$394.14	\$697.21	\$1,074.66
50	\$446.43	\$414.27	\$746.46	\$1,108.11
51	\$470.90	\$434.36	\$795.75	\$1,141.56
52	\$495.33	\$454.49	\$845.03	\$1,175.01
53	\$521.37	\$483.49	\$896.72	\$1,224.56
54	\$547.41	\$512.48	\$948.45	\$1,274.07
55	\$573.45	\$541.51	\$1,000.14	\$1,323.60
56	\$599.48	\$570.49	\$1,051.85	\$1,373.11
57	\$625.52	\$599.48	\$1,103.54	\$1,422.65
58	\$649.79	\$637.69	\$1,162.87	\$1,473.61
59	\$674.07	\$675.90	\$1,222.21	\$1,524.52
60	\$698.30	\$714.13	\$1,281.54	\$1,575.47
61	\$722.59	\$752.34	\$1,340.88	\$1,626.39
62	\$746.85	\$790.54	\$1,400.21	\$1,677.34
63	\$775.81	\$840.95	\$1,475.49	\$1,737.41
64	\$804.80	\$891.32	\$1,550.79	\$1,797.46

\$2,000 Rx Benefit Max

Age	Individual Female	Individual Male	Individual +1 Dependent	Family
0-20	\$260.11	\$186.40	\$462.97	\$778.46
21	\$262.26	\$188.61	\$465.58	\$784.66
22	\$264.40	\$190.82	\$468.19	\$790.90
23	\$266.54	\$193.07	\$470.76	\$797.13
24	\$268.72	\$195.28	\$473.36	\$803.32
25	\$270.86	\$197.52	\$475.97	\$809.56
26	\$273.02	\$199.74	\$478.54	\$815.80
27	\$275.16	\$201.97	\$481.15	\$822.03
28	\$277.30	\$204.17	\$483.75	\$828.23
29	\$279.44	\$206.42	\$486.32	\$834.45
30	\$281.62	\$208.63	\$488.93	\$840.69
31	\$289.39	\$221.07	\$490.51	\$861.93
32	\$297.21	\$233.51	\$492.13	\$883.21
33	\$305.01	\$245.93	\$493.71	\$904.45
34	\$312.81	\$258.36	\$495.30	\$925.71
35	\$315.85	\$263.94	\$500.61	\$932.18
36	\$317.36	\$266.71	\$503.28	\$935.41
37	\$318.88	\$269.52	\$505.90	\$938.65
38	\$320.40	\$272.28	\$508.58	\$941.87
39	\$324.95	\$280.66	\$516.56	\$951.57
40	\$330.98	\$291.78	\$527.19	\$964.54
41	\$337.05	\$302.92	\$537.84	\$977.46
42	\$343.12	\$314.07	\$548.45	\$990.39
43	\$351.13	\$323.96	\$561.75	\$999.36
44	\$359.19	\$333.86	\$575.04	\$1,008.30
45	\$367.21	\$343.75	\$588.37	\$1,017.27
46	\$375.25	\$353.65	\$601.65	\$1,026.20
47	\$383.26	\$363.54	\$614.94	\$1,035.18
48	\$408.36	\$384.21	\$665.57	\$1,069.54
49	\$433.50	\$404.87	\$716.19	\$1,103.91
50	\$458.59	\$425.55	\$766.79	\$1,138.28
51	\$483.72	\$446.19	\$817.40	\$1,172.63
52	\$508.81	\$466.87	\$868.03	\$1,207.00
53	\$535.56	\$496.65	\$921.13	\$1,257.89
54	\$562.31	\$526.43	\$974.27	\$1,308.74
55	\$589.06	\$556.24	\$1,027.37	\$1,359.63
56	\$615.81	\$586.03	\$1,080.49	\$1,410.48
57	\$642.55	\$615.81	\$1,133.59	\$1,461.37
58	\$667.48	\$655.04	\$1,194.53	\$1,513.72
59	\$692.42	\$694.30	\$1,255.48	\$1,566.02
60	\$717.31	\$733.57	\$1,316.43	\$1,618.36
61	\$742.25	\$772.82	\$1,377.38	\$1,670.67
62	\$767.19	\$812.06	\$1,438.33	\$1,723.00
63	\$796.93	\$863.84	\$1,515.66	\$1,784.71
64	\$826.71	\$915.58	\$1,593.00	\$1,846.38

\$3,000 Rx Benefit Max

Age	Individual Female	Individual Male	Individual +1 Dependent	Family
0-20	\$263.41	\$188.76	\$468.83	\$788.33
21	\$265.58	\$191.00	\$471.47	\$794.61
22	\$267.75	\$193.24	\$474.13	\$800.92
23	\$269.92	\$195.51	\$476.72	\$807.24
24	\$272.12	\$197.75	\$479.37	\$813.51
25	\$274.29	\$200.02	\$482.00	\$819.82
26	\$276.48	\$202.26	\$484.61	\$826.14
27	\$278.65	\$204.54	\$487.25	\$832.45
28	\$280.81	\$206.76	\$489.88	\$838.73
29	\$282.98	\$209.04	\$492.49	\$845.03
30	\$285.19	\$211.28	\$495.12	\$851.35
31	\$293.07	\$223.87	\$496.73	\$872.85
32	\$300.98	\$236.46	\$498.36	\$894.39
33	\$308.87	\$249.05	\$499.97	\$915.91
34	\$316.78	\$261.64	\$501.58	\$937.45
35	\$319.86	\$267.28	\$506.95	\$944.00
36	\$321.38	\$270.09	\$509.66	\$947.27
37	\$322.92	\$272.94	\$512.32	\$950.54
38	\$324.46	\$275.74	\$515.02	\$953.81
39	\$329.07	\$284.21	\$523.11	\$963.63
40	\$335.18	\$295.47	\$533.86	\$976.76
41	\$341.32	\$306.76	\$544.66	\$989.84
42	\$347.48	\$318.05	\$555.40	\$1,002.94
43	\$355.58	\$328.06	\$568.87	\$1,012.02
44	\$363.74	\$338.09	\$582.33	\$1,021.08
45	\$371.86	\$348.10	\$595.83	\$1,030.17
46	\$380.00	\$358.13	\$609.28	\$1,039.21
47	\$388.11	\$368.14	\$622.74	\$1,048.30
48	\$413.54	\$389.09	\$674.01	\$1,083.09
49	\$438.98	\$409.99	\$725.27	\$1,117.89
50	\$464.40	\$430.94	\$776.51	\$1,152.70
51	\$489.85	\$451.85	\$827.77	\$1,187.49
52	\$515.27	\$472.78	\$879.03	\$1,222.30
53	\$542.35	\$502.94	\$932.80	\$1,273.83
54	\$569.44	\$533.10	\$986.62	\$1,325.33
55	\$596.52	\$563.30	\$1,040.39	\$1,376.87
56	\$623.60	\$593.46	\$1,094.18	\$1,428.37
57	\$650.70	\$623.60	\$1,147.95	\$1,479.90
58	\$675.94	\$663.35	\$1,209.67	\$1,532.91
59	\$701.19	\$703.09	\$1,271.39	\$1,585.86
60	\$726.40	\$742.87	\$1,333.11	\$1,638.87
61	\$751.65	\$782.62	\$1,394.84	\$1,691.85
62	\$776.91	\$822.35	\$1,456.56	\$1,744.84
63	\$807.03	\$874.79	\$1,534.87	\$1,807.34
64	\$837.19	\$927.20	\$1,613.19	\$1,869.78



Revised 12/08

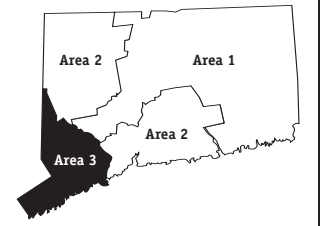
POS Upfront Deductible \$500 Individual/\$1,000 Family w/ No Rx

(POS-OA-25-35-UFRA w/ No Rx)

All policyholders may be subject to a rate increase at their renewal date.
Rates are calculated as of the Applicant's age as of the effective date.

Area 3 (Fairfield County)

Fairfield County: Bethel, Bridgeport, Brookfield, Danbury, Darien, Easton, Fairfield, Greenwich, Monroe, New Canaan, New Fairfield, Newtown, Norwalk, Shelton, Sherman, Stamford, Stratford, Redding, Ridgefield, Trumbull, Weston, Westport, Wilton



Age	Individual Female	Individual Male	Individual +1 Dependent	Family
0-20	\$251.89	\$180.51	\$448.34	\$753.84
21	\$253.96	\$182.65	\$450.85	\$759.85
22	\$256.04	\$184.78	\$453.37	\$765.88
23	\$258.12	\$186.96	\$455.87	\$771.92
24	\$260.22	\$189.10	\$458.39	\$777.92
25	\$262.30	\$191.27	\$460.92	\$783.96
26	\$264.38	\$193.41	\$463.41	\$789.99
27	\$266.45	\$195.58	\$465.93	\$796.03
28	\$268.53	\$197.72	\$468.45	\$802.04
29	\$270.61	\$199.90	\$470.94	\$808.07
30	\$272.71	\$202.04	\$473.47	\$814.11
31	\$280.24	\$214.08	\$475.00	\$834.68
32	\$287.82	\$226.12	\$476.56	\$855.28
33	\$295.35	\$238.16	\$478.10	\$875.84
34	\$302.92	\$250.20	\$479.63	\$896.44
35	\$305.86	\$255.59	\$484.77	\$902.70
36	\$307.33	\$258.27	\$487.36	\$905.83
37	\$308.79	\$260.99	\$489.91	\$908.96
38	\$310.27	\$263.67	\$492.50	\$912.09
39	\$314.68	\$271.79	\$500.23	\$921.48
40	\$320.52	\$282.54	\$510.51	\$934.03
41	\$326.39	\$293.34	\$520.82	\$946.54
42	\$332.27	\$304.13	\$531.11	\$959.06
43	\$340.03	\$313.72	\$543.98	\$967.76
44	\$347.83	\$323.30	\$556.85	\$976.41
45	\$355.58	\$332.88	\$569.76	\$985.10
46	\$363.38	\$342.46	\$582.63	\$993.75
47	\$371.13	\$352.04	\$595.50	\$1,002.44
48	\$395.44	\$372.06	\$644.52	\$1,035.72
49	\$419.78	\$392.06	\$693.55	\$1,069.00
50	\$444.08	\$412.08	\$742.53	\$1,102.27
51	\$468.42	\$432.07	\$791.56	\$1,135.55
52	\$492.72	\$452.10	\$840.58	\$1,168.83
53	\$518.63	\$480.94	\$892.00	\$1,218.11
54	\$544.53	\$509.78	\$943.45	\$1,267.36
55	\$570.42	\$538.65	\$994.87	\$1,316.63
56	\$596.33	\$567.49	\$1,046.32	\$1,365.88
57	\$622.23	\$596.33	\$1,097.74	\$1,415.17
58	\$646.37	\$634.33	\$1,156.75	\$1,465.84
59	\$670.51	\$672.34	\$1,215.78	\$1,516.50
60	\$694.63	\$710.37	\$1,274.80	\$1,567.18
61	\$718.78	\$748.38	\$1,333.82	\$1,617.83
62	\$742.92	\$786.38	\$1,392.83	\$1,668.52
63	\$771.73	\$836.53	\$1,467.73	\$1,728.27
64	\$800.56	\$886.64	\$1,542.63	\$1,787.99



Revised 12/08

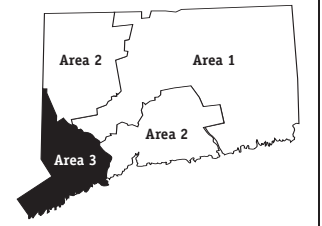
POS Upfront Deductible \$1,000 Individual/\$2,000 Family w/ No Rx

(POS-0A-25-35-UFGA w/ No Rx)

All policyholders may be subject to a rate increase at their renewal date.
Rates are calculated as of the Applicant's age as of the effective date.

Area 3 (Fairfield County)

Fairfield County: Bethel, Bridgeport, Brookfield, Danbury, Darien, Easton, Fairfield, Greenwich, Monroe, New Canaan, New Fairfield, Newtown, Norwalk, Shelton, Sherman, Stamford, Stratford, Redding, Ridgefield, Trumbull, Weston, Westport, Wilton



Age	Individual Female	Individual Male	Individual +1 Dependent	Family
0-20	\$220.49	\$158.01	\$392.45	\$659.88
21	\$222.31	\$159.88	\$394.66	\$665.13
22	\$224.12	\$161.75	\$396.87	\$670.41
23	\$225.94	\$163.65	\$399.04	\$675.69
24	\$227.79	\$165.53	\$401.25	\$680.96
25	\$229.60	\$167.43	\$403.46	\$686.24
26	\$231.42	\$169.30	\$405.64	\$691.52
27	\$233.24	\$171.21	\$407.85	\$696.80
28	\$235.05	\$173.08	\$410.06	\$702.06
29	\$236.88	\$174.97	\$412.23	\$707.34
30	\$238.72	\$176.84	\$414.44	\$712.63
31	\$245.31	\$187.39	\$415.79	\$730.63
32	\$251.94	\$197.92	\$417.16	\$748.66
33	\$258.53	\$208.47	\$418.50	\$766.67
34	\$265.16	\$219.00	\$419.85	\$784.69
35	\$267.74	\$223.74	\$424.35	\$790.18
36	\$269.02	\$226.08	\$426.61	\$792.92
37	\$270.31	\$228.46	\$428.84	\$795.65
38	\$271.59	\$230.81	\$431.11	\$798.39
39	\$275.45	\$237.90	\$437.87	\$806.62
40	\$280.57	\$247.33	\$446.88	\$817.60
41	\$285.71	\$256.77	\$455.91	\$828.56
42	\$290.85	\$266.23	\$464.91	\$839.52
43	\$297.65	\$274.62	\$476.17	\$847.12
44	\$304.47	\$283.00	\$487.44	\$854.70
45	\$311.27	\$291.39	\$498.74	\$862.30
46	\$318.09	\$299.78	\$510.01	\$869.88
47	\$324.88	\$308.16	\$521.27	\$877.49
48	\$346.15	\$325.69	\$564.18	\$906.62
49	\$367.45	\$343.19	\$607.09	\$935.75
50	\$388.73	\$360.71	\$649.97	\$964.88
51	\$410.04	\$378.22	\$692.89	\$994.01
52	\$431.31	\$395.75	\$735.81	\$1,023.13
53	\$453.97	\$420.99	\$780.81	\$1,066.27
54	\$476.65	\$446.23	\$825.85	\$1,109.37
55	\$499.32	\$471.50	\$870.86	\$1,152.52
56	\$521.99	\$496.75	\$915.90	\$1,195.62
57	\$544.67	\$521.99	\$960.91	\$1,238.76
58	\$565.80	\$555.26	\$1,012.57	\$1,283.12
59	\$586.93	\$588.53	\$1,064.23	\$1,327.46
60	\$608.04	\$621.82	\$1,115.89	\$1,371.83
61	\$629.18	\$655.09	\$1,167.55	\$1,416.16
62	\$650.31	\$688.36	\$1,219.22	\$1,460.53
63	\$675.53	\$732.25	\$1,284.77	\$1,512.83
64	\$700.77	\$776.11	\$1,350.33	\$1,565.12



Revised 12/08

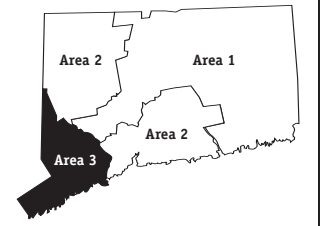
POS Upfront Deductible \$2,000 Individual/\$4,000 Family w/ No Rx

(POS-0A-25-35-UFTA w/ No Rx)

All policyholders may be subject to a rate increase at their renewal date.
Rates are calculated as of the Applicant's age as of the effective date.

Area 3 (Fairfield County)

Fairfield County: Bethel, Bridgeport, Brookfield, Danbury, Darien, Easton, Fairfield, Greenwich, Monroe, New Canaan, New Fairfield, Newtown, Norwalk, Shelton, Sherman, Stamford, Stratford, Redding, Ridgefield, Trumbull, Weston, Westport, Wilton



Age	Individual Female	Individual Male	Individual +1 Dependent	Family
0-20	\$183.43	\$131.45	\$326.48	\$548.96
21	\$184.94	\$133.01	\$328.32	\$553.33
22	\$186.45	\$134.56	\$330.16	\$557.73
23	\$187.96	\$136.14	\$331.97	\$562.12
24	\$189.50	\$137.70	\$333.81	\$566.49
25	\$191.01	\$139.29	\$335.64	\$570.89
26	\$192.52	\$140.84	\$337.46	\$575.29
27	\$194.04	\$142.42	\$339.30	\$579.68
28	\$195.54	\$143.98	\$341.13	\$584.05
29	\$197.06	\$145.57	\$342.95	\$588.45
30	\$198.60	\$147.12	\$344.78	\$592.84
31	\$204.08	\$155.89	\$345.90	\$607.82
32	\$209.59	\$164.66	\$347.04	\$622.82
33	\$215.08	\$173.42	\$348.15	\$637.80
34	\$220.59	\$182.20	\$349.27	\$652.80
35	\$222.73	\$186.13	\$353.02	\$657.36
36	\$223.81	\$188.08	\$354.90	\$659.63
37	\$224.88	\$190.06	\$356.76	\$661.91
38	\$225.94	\$192.01	\$358.65	\$664.19
39	\$229.15	\$197.91	\$364.27	\$671.03
40	\$233.40	\$205.75	\$371.77	\$680.17
41	\$237.69	\$213.62	\$379.28	\$689.29
42	\$241.96	\$221.48	\$386.77	\$698.41
43	\$247.61	\$228.46	\$396.13	\$704.73
44	\$253.29	\$235.43	\$405.51	\$711.03
45	\$258.94	\$242.41	\$414.90	\$717.36
46	\$264.62	\$249.38	\$424.27	\$723.66
47	\$270.27	\$256.37	\$433.65	\$729.99
48	\$287.97	\$270.94	\$469.35	\$754.23
49	\$305.69	\$285.51	\$505.05	\$778.46
50	\$323.39	\$300.08	\$540.72	\$802.69
51	\$341.11	\$314.65	\$576.43	\$826.92
52	\$358.81	\$329.22	\$612.12	\$851.16
53	\$377.67	\$350.23	\$649.57	\$887.04
54	\$396.53	\$371.23	\$687.03	\$922.91
55	\$415.39	\$392.25	\$724.48	\$958.79
56	\$434.26	\$413.25	\$761.94	\$994.66
57	\$453.12	\$434.26	\$799.39	\$1,030.54
58	\$470.70	\$461.93	\$842.37	\$1,067.45
59	\$488.28	\$489.61	\$885.34	\$1,104.34
60	\$505.84	\$517.30	\$928.33	\$1,141.24
61	\$523.42	\$544.98	\$971.31	\$1,178.13
62	\$541.01	\$572.66	\$1,014.28	\$1,215.04
63	\$561.98	\$609.17	\$1,068.82	\$1,258.55
64	\$582.98	\$645.66	\$1,123.36	\$1,302.05

ConnectiCare® 2009 Rates *January – December 2009 Effective Dates*



Revised 12/08

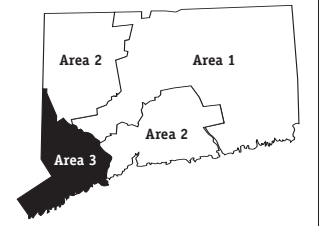
POS 25/35 Hospital Copay \$500 w/ No Rx

(POS-OA-25-35-AJLA w/ No Rx)

All policyholders may be subject to a rate increase at their renewal date.
Rates are calculated as of the Applicant's age as of the effective date.

Area 3 (Fairfield County)

Fairfield County: Bethel, Bridgeport, Brookfield, Danbury, Darien, Easton, Fairfield, Greenwich, Monroe, New Canaan, New Fairfield, Newtown, Norwalk, Shelton, Sherman, Stamford, Stratford, Redding, Ridgefield, Trumbull, Weston, Westport, Wilton



Age	Individual Female	Individual Male	Individual +1 Dependent	Family
0-20	\$266.65	\$191.08	\$474.60	\$798.01
21	\$268.84	\$193.34	\$477.27	\$804.36
22	\$271.04	\$195.61	\$479.94	\$810.75
23	\$273.23	\$197.91	\$482.58	\$817.14
24	\$275.47	\$200.17	\$485.24	\$823.49
25	\$277.67	\$202.47	\$487.92	\$829.88
26	\$279.87	\$204.74	\$490.55	\$836.27
27	\$282.06	\$207.04	\$493.22	\$842.67
28	\$284.25	\$209.30	\$495.90	\$849.02
29	\$286.45	\$211.60	\$498.53	\$855.41
30	\$288.68	\$213.87	\$501.20	\$861.80
31	\$296.66	\$226.62	\$502.83	\$883.57
32	\$304.68	\$239.36	\$504.48	\$905.37
33	\$312.65	\$252.10	\$506.11	\$927.16
34	\$320.67	\$264.85	\$507.73	\$948.96
35	\$323.78	\$270.56	\$513.17	\$955.58
36	\$325.33	\$273.40	\$515.91	\$958.90
37	\$326.89	\$276.27	\$518.62	\$962.21
38	\$328.45	\$279.11	\$521.35	\$965.53
39	\$333.11	\$287.70	\$529.54	\$975.46
40	\$339.30	\$299.10	\$540.42	\$988.75
41	\$345.52	\$310.52	\$551.34	\$1,002.01
42	\$351.74	\$321.95	\$562.23	\$1,015.26
43	\$359.95	\$332.09	\$575.85	\$1,024.45
44	\$368.20	\$342.24	\$589.48	\$1,033.61
45	\$376.42	\$352.38	\$603.13	\$1,042.81
46	\$384.67	\$362.52	\$616.76	\$1,051.97
47	\$392.89	\$372.66	\$630.38	\$1,061.17
48	\$418.61	\$393.86	\$682.28	\$1,096.40
49	\$444.38	\$415.02	\$734.18	\$1,131.62
50	\$470.10	\$436.22	\$786.04	\$1,166.85
51	\$495.86	\$457.38	\$837.93	\$1,202.08
52	\$521.59	\$478.59	\$889.82	\$1,237.30
53	\$549.01	\$509.12	\$944.25	\$1,289.48
54	\$576.43	\$539.64	\$998.72	\$1,341.60
55	\$603.85	\$570.21	\$1,053.15	\$1,393.77
56	\$631.27	\$600.73	\$1,107.61	\$1,445.90
57	\$658.68	\$631.27	\$1,162.05	\$1,498.07
58	\$684.24	\$671.49	\$1,224.53	\$1,551.72
59	\$709.80	\$711.73	\$1,287.00	\$1,605.34
60	\$735.33	\$751.99	\$1,349.48	\$1,658.99
61	\$760.89	\$792.22	\$1,411.96	\$1,712.61
62	\$786.44	\$832.46	\$1,474.43	\$1,766.27
63	\$816.94	\$885.54	\$1,553.71	\$1,829.52
64	\$847.46	\$938.58	\$1,633.00	\$1,892.74

ConnectiCare® 2009 Rates *January – December 2009 Effective Dates*



Revised 12/08

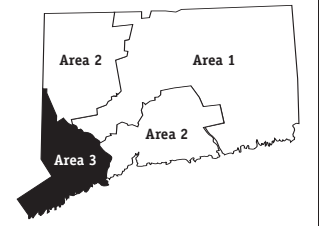
POS 30/45 Hosp. Ded. \$2,000/\$4,000 w/ No Rx

(POS-OA-30-45-DJMA w/ No Rx)

All policyholders may be subject to a rate increase at their renewal date.
Rates are calculated as of the Applicant's age as of the effective date.

Area 3 (Fairfield County)

Fairfield County: Bethel, Bridgeport, Brookfield, Danbury, Darien, Easton, Fairfield, Greenwich, Monroe, New Canaan, New Fairfield, Newtown, Norwalk, Shelton, Sherman, Stamford, Stratford, Redding, Ridgefield, Trumbull, Weston, Westport, Wilton



Age	Individual Female	Individual Male	Individual +1 Dependent	Family
0-20	\$234.79	\$168.25	\$417.89	\$702.67
21	\$236.72	\$170.25	\$420.24	\$708.26
22	\$238.66	\$172.24	\$422.61	\$713.89
23	\$240.59	\$174.27	\$424.93	\$719.52
24	\$242.55	\$176.26	\$427.28	\$725.11
25	\$244.49	\$178.29	\$429.63	\$730.74
26	\$246.43	\$180.28	\$431.95	\$736.37
27	\$248.37	\$182.31	\$434.30	\$741.99
28	\$250.30	\$184.30	\$436.65	\$747.59
29	\$252.23	\$186.32	\$438.97	\$753.21
30	\$254.20	\$188.32	\$441.32	\$758.84
31	\$261.22	\$199.54	\$442.76	\$778.02
32	\$268.27	\$210.77	\$444.21	\$797.21
33	\$275.31	\$221.98	\$445.64	\$816.39
34	\$282.36	\$233.21	\$447.07	\$835.58
35	\$285.10	\$238.24	\$451.87	\$841.42
36	\$286.46	\$240.74	\$454.28	\$844.34
37	\$287.84	\$243.28	\$456.65	\$847.26
38	\$289.20	\$245.77	\$459.06	\$850.17
39	\$293.31	\$253.33	\$466.27	\$858.92
40	\$298.76	\$263.37	\$475.86	\$870.63
41	\$304.23	\$273.42	\$485.48	\$882.29
42	\$309.72	\$283.49	\$495.05	\$893.96
43	\$316.95	\$292.42	\$507.05	\$902.06
44	\$324.21	\$301.35	\$519.05	\$910.13
45	\$331.45	\$310.28	\$531.08	\$918.23
46	\$338.71	\$319.22	\$543.07	\$926.29
47	\$345.94	\$328.14	\$555.07	\$934.39
48	\$368.60	\$346.81	\$600.76	\$965.40
49	\$391.29	\$365.45	\$646.46	\$996.43
50	\$413.93	\$384.11	\$692.13	\$1,027.45
51	\$436.62	\$402.75	\$737.82	\$1,058.46
52	\$459.28	\$421.41	\$783.52	\$1,089.49
53	\$483.42	\$448.30	\$831.45	\$1,135.42
54	\$507.56	\$475.18	\$879.41	\$1,181.32
55	\$531.70	\$502.09	\$927.34	\$1,227.26
56	\$555.85	\$528.97	\$975.29	\$1,273.16
57	\$579.99	\$555.85	\$1,023.22	\$1,319.09
58	\$602.49	\$591.27	\$1,078.23	\$1,366.34
59	\$625.00	\$626.70	\$1,133.24	\$1,413.55
60	\$647.47	\$662.15	\$1,188.25	\$1,460.79
61	\$669.98	\$697.58	\$1,243.28	\$1,508.01
62	\$692.49	\$733.00	\$1,298.29	\$1,555.25
63	\$719.34	\$779.74	\$1,368.09	\$1,610.95
64	\$746.22	\$826.44	\$1,437.90	\$1,666.62