

MONTANA COMPREHENSIVE HEALTH ASSOCIATION
TRADITIONAL PPO PLAN
OPTION 1000
SCHEDULE OF PREMIUMS

EFFECTIVE JANUARY 1, 2008

\$1,000 DEDUCTIBLE

Age	Premium	Age	Premium
0-17	\$203	41	\$502
18	\$333	42	\$518
19	\$334	43	\$537
20	\$336	44	\$556
21	\$338	45	\$576
22	\$339	46	\$597
23	\$342	47	\$619
24	\$345	48	\$641
25	\$348	49	\$664
26	\$351	50	\$689
27	\$353	51	\$714
28	\$361	52	\$740
29	\$368	53	\$765
30	\$376	54	\$791
31	\$384	55	\$818
32	\$392	56	\$846
33	\$402	57	\$875
34	\$412	58	\$909
35	\$421	59	\$943
36	\$431	60	\$978
37	\$442	61	\$1,016
38	\$456	62	\$1,054
39	\$471	63	\$1,069
40	\$486	64 & over	\$1,081

Medicare Carveout

0 — 17	\$58
18 — 65 and over	\$154

Premiums for the single Policyholder are payable according to the above schedule. The age of the Policyholder determines the premiums payable. When your age changes (e.g., turn 50), your rates will be increased to the next band at the next rate renewal increase. Rates are subject to change each January.

To determine your premium, find the correct age band. Your age band is your age as of January 1, 2008

No trend data is available for these plans.

MONTANA COMPREHENSIVE HEALTH ASSOCIATION
TRADITIONAL PPO PLAN
OPTION 2500
SCHEDULE OF PREMIUMS

EFFECTIVE JANUARY 1, 2008

\$2,500 DEDUCTIBLE

Age	Premium	Age	Premium
0-17	\$165	41	\$407
18	\$270	42	\$420
19	\$271	43	\$435
20	\$272	44	\$451
21	\$274	45	\$467
22	\$275	46	\$484
23	\$277	47	\$501
24	\$280	48	\$520
25	\$282	49	\$538
26	\$284	50	\$558
27	\$286	51	\$578
28	\$292	52	\$599
29	\$299	53	\$620
30	\$305	54	\$641
31	\$311	55	\$663
32	\$318	56	\$686
33	\$325	57	\$709
34	\$333	58	\$736
35	\$341	59	\$764
36	\$349	60	\$793
37	\$358	61	\$823
38	\$370	62	\$854
39	\$381	63	\$866
40	\$394	64 & over	\$876

MONTANA COMPREHENSIVE HEALTH ASSOCIATION
TRADITIONAL PPO PLAN
OPTION 5000
SCHEDULE OF PREMIUMS

EFFECTIVE JANUARY 1, 2008

\$5,000 DEDUCTIBLE

Age	Premium	Age	Premium
0-17	\$117	41	\$290
18	\$192	42	\$299
19	\$193	43	\$310
20	\$194	44	\$321
21	\$195	45	\$333
22	\$196	46	\$345
23	\$197	47	\$357
24	\$199	48	\$370
25	\$201	49	\$383
26	\$202	50	\$397
27	\$204	51	\$412
28	\$208	52	\$427
29	\$213	53	\$441
30	\$217	54	\$457
31	\$222	55	\$472
32	\$226	56	\$488
33	\$232	57	\$505
34	\$237	58	\$524
35	\$243	59	\$544
36	\$249	60	\$565
37	\$255	61	\$586
38	\$263	62	\$608
39	\$272	63	\$617
40	\$281	64 & over	\$624

(Over)

MONTANA COMPREHENSIVE HEALTH ASSOCIATION
TRADITIONAL INDEMNITY PLAN
OPTION 1000
SCHEDULE OF PREMIUMS
EFFECTIVE JANUARY 1, 2008
\$1,000 DEDUCTIBLE

Age	Premium	Age	Premium
0-17	\$228	41	\$563
18	\$374	42	\$582
19	\$375	43	\$603
20	\$377	44	\$625
21	\$379	45	\$647
22	\$381	46	\$671
23	\$384	47	\$695
24	\$388	48	\$720
25	\$391	49	\$746
26	\$394	50	\$774
27	\$397	51	\$801
28	\$405	52	\$831
29	\$414	53	\$859
30	\$423	54	\$889
31	\$431	55	\$919
32	\$441	56	\$950
33	\$451	57	\$983
34	\$462	58	\$1,020
35	\$473	59	\$1,059
36	\$484	60	\$1,099
37	\$496	61	\$1,141
38	\$512	62	\$1,184
39	\$529	63	\$1,200
40	\$546	64 & over	\$1,214

Premiums for the single Policyholder are payable according to the above schedule. The age of the Policyholder determines the premiums payable. When your age changes (e.g., turn 50), your rates will be increased to the next band at the next rate renewal increase. Rates are subject to change each January.

To determine your premium, find the correct age band. Your age band is your age as of January 1, 2008.

The trend of premium increase during the preceding five years for the Traditional Indemnity Plan Option 1000 and the Portability Indemnity Plan Option 1000 is 10.6%.