

Primary Care Premium Rates

GLOBAL HEALTHCARE PLAN

AETNA
GLOBAL
BENEFITS®

ANNUAL PREMIUM RATES

Age Band	Deductible \$1,000	Deductible \$2,500	Deductible \$5,000	Deductible \$10,000
0 – 17	\$525	\$422	\$333	\$234
18 – 21	\$1,051	\$823	\$663	\$469
22 – 29	\$1,101	\$894	\$697	\$500
30 – 34	\$1,496	\$1,216	\$927	\$693
35 – 39	\$1,568	\$1,294	\$973	\$725
40 – 44	\$1,851	\$1,475	\$1,145	\$828
45 – 49	\$1,939	\$1,527	\$1,203	\$867
50 – 54	\$2,402	\$1,991	\$1,491	\$1,119
55 – 59	\$2,517	\$2,069	\$1,600	\$1,173
60 – 64	\$3,864	\$2,699	\$2,418	\$1,527
65 – 74	N/A	\$4,831	\$3,920	\$2,575

SEMI-ANNUAL PREMIUM RATES

Age Band	Deductible \$1,000	Deductible \$2,500	Deductible \$5,000	Deductible \$10,000
0 – 17	\$295	\$236	\$186	\$131
18 – 21	\$588	\$461	\$372	\$263
22 – 29	\$616	\$501	\$390	\$280
30 – 34	\$838	\$681	\$520	\$389
35 – 39	\$878	\$725	\$545	\$405
40 – 44	\$1,037	\$827	\$641	\$464
45 – 49	\$1,085	\$855	\$673	\$485
50 – 54	\$1,345	\$1,116	\$834	\$626
55 – 59	\$1,409	\$1,158	\$896	\$656
60 – 64	\$2,164	\$1,512	\$1,354	\$855
65 – 74	N/A	\$2,705	\$2,195	\$1,441

EFFECTIVE SEPTEMBER 1, 2009

Premiums are offered in annual or semi-annual installments. Coverage is for a duration of 12 months, whichever payment option you choose.

Rates for new applicants may be subject to change at the time of application. Please consult your representative for the most current rates applicable. All rates are in US dollars.

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Primary Care Tarifas

GLOBAL HEALTHCARE PLAN

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TARIFAS ANUALES

Edades	Deducible \$1,000	Deducible \$2,500	Deducible \$5,000	Deducible \$10,000
0 – 17	\$525	\$422	\$333	\$234
18 – 21	\$1,051	\$823	\$663	\$469
22 – 29	\$1,101	\$894	\$697	\$500
30 – 34	\$1,496	\$1,216	\$927	\$693
35 – 39	\$1,568	\$1,294	\$973	\$725
40 – 44	\$1,851	\$1,475	\$1,145	\$828
45 – 49	\$1,939	\$1,527	\$1,203	\$867
50 – 54	\$2,402	\$1,991	\$1,491	\$1,119
55 – 59	\$2,517	\$2,069	\$1,600	\$1,173
60 – 64	\$3,864	\$2,699	\$2,418	\$1,527
65 – 74	N/A	\$4,831	\$3,920	\$2,575

TARIFAS SEMESTRALES

Edades	Deducible \$1,000	Deducible \$2,500	Deducible \$5,000	Deducible \$10,000
0 – 17	\$295	\$236	\$186	\$131
18 – 21	\$588	\$461	\$372	\$263
22 – 29	\$616	\$501	\$390	\$280
30 – 34	\$838	\$681	\$520	\$389
35 – 39	\$878	\$725	\$545	\$405
40 – 44	\$1,037	\$827	\$641	\$464
45 – 49	\$1,085	\$855	\$673	\$485
50 – 54	\$1,345	\$1,116	\$834	\$626
55 – 59	\$1,409	\$1,158	\$896	\$656
60 – 64	\$2,164	\$1,512	\$1,354	\$855
65 – 74	N/A	\$2,705	\$2,195	\$1,441

A PARTIR DEL 1RO DE SEPTIEMBRE DEL 2009

Las tarifas se aplican a cada una de las personas solicitando cobertura y los pagos se podrán efectuar de forma anual o semestral. Todas las coberturas tienen 12 meses de vigencia, sin importar el método de pago que usted eligió.

Las tarifas para nuevos solicitantes pueden estar sujetas a cambio en el momento de la solicitud. Consulte a su representante para conocer las tarifas más actuales. Las tarifas aparecen en dólares americanos.

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