

# MONTHLY RATE GUIDE



Effective July 1, 2006

## INDIVIDUAL & FAMILY PLANS

PPO, HMO, Individual Term Life Insurance, Dental & Vision

**Health coverage made easy.**



**Health Net®**  
A BETTER DECISION

# MONTHLY PREMIUM RATES

Finding the rate that applies to you is easy:

1. Find the chart for your region on the following pages.
2. Determine your family category.
3. Select your age group. If you are applying as a married couple or a family, use the age category of the younger spouse and make that person the primary applicant on the application.
4. Select a plan.

## ADMINISTRATIVE FEE

- Simple pay (automatic bank draft) option – no charge
- Credit card billing – no charge
- Monthly billing – \$5 monthly charge

## MODIFIED ISSUE<sup>1</sup>

Q: What is a Modified Issue?

A: Modified Issue helps certain applicants who might normally not be able to obtain coverage, attain it for a higher premium.

Q: How does Health Net calculate Modified Issue premiums?

A: Modified Issue premiums are calculated by multiplying the preferred premium<sup>2</sup> shown in the rate guide by the rate adjustment factor (RAF) of 1.20 or 1.50.

PPO AND HMO		Region 1					
		Los Angeles - Zip Co.					
Tier	Age	ValueChoice 1500 <sup>1</sup>	SimpleChoice HSA	SmartChoice HSA	SimpleChoice 50 <sup>4</sup>	SimpleChoice 35	SimpleChoice 40
Subscriber	1-4	38	39	44	68	75	80
	5-18	38	39	44	68	75	80
	19-24	51	39	65	76	83	88
	25-29	54	39	65	76	83	88
	30-34	62	56	85	86	94	100
	35-39	75	75	97	98	108	114
	40-44	99	105	135	113	123	132
	45-49	111	149	158	158	173	185
	50-54	166	195	211	204	222	238
	55-59	217	247	260	296	323	347
60-64	217	309	325	375	410	439	
Subscriber & Spouse/ Domestic Partner	19-24		68	128	151	165	176
	25-29		68	128	151	165	176
	30-34		94	169	171	187	200
	35-39		129	191	196	215	230
	40-44		180	269	226	248	264
	45-49		264	313	317	347	371
	50-54		355	418	406	443	475
	55-59		471	518	592	647	693
60-64		614	675	750	820	878	
Subscriber	19-24		86		171	187	200

<sup>1</sup> Applies to PPO plans only.

<sup>2</sup> Dental & Vision premium will also be adjusted to include the RAF if you are approved for a PPO Plus plan.

# MEDICAL AND DENTAL RATING REGIONS

The premium is calculated based on the subscriber's home address. Please refer to the regions below to determine the rating region. The areas are determined by ZIP codes/county. Go to [www.healthnet.com](http://www.healthnet.com) and select "Search our Doctor Network" for the HMO providers or PPO preferred providers within our network. If there is a question regarding area availability, please contact your Health Net Account Executive or call 1-800-909-3447.

## PPO RATING REGIONS FOR JULY 1, 2006

**Region 1** Los Angeles - Zip codes beginning with 906-912, 915, 917, 918, 935

**Region 2** Los Angeles - All other zip codes except those listed in Rating Region 1

**Region 3** Merced, Napa, Sacramento, San Joaquin, Sonoma, Stanislaus, Tulare, Western El Dorado<sup>1</sup> and Western Placer<sup>1</sup>

**Region 4** Riverside, San Bernardino, Santa Barbara, and Ventura

**Region 5** Alameda, Contra Costa, Marin, San Francisco, San Mateo, Santa Clara, Santa Cruz, and Solano

**Region 6** Orange and San Diego

**Region 7** Fresno, Kern, and Kings

**Region 8** Alpine, Amador, Butte, Calaveras, Colusa, Del Norte, Eastern El Dorado<sup>2</sup>, Eastern Placer<sup>2</sup>, Glenn, Humboldt, Inyo, Lake, Lassen, Madera, Mariposa, Mendocino, Modoc, Mono, Monterey, Nevada, Plumas, San Benito, Shasta, Sierra, Siskiyou, Sutter, Tehama, Trinity, Tuolumne, Yolo, and Yuba

**Region 9** Imperial and San Luis Obispo

<sup>1</sup>ZIP codes for Western El Dorado include: 95613-14, 95619, 95623, 95630, 95643, 95651, 95664, 95667, 95672, 95682 and 95762 only. ZIP codes for Western Placer County include: 95602-04, 95648, 95650, 95658, 95661, 95663, 95677-78, 95703, 95722, 95736, 95746-47 and 95765. See Region 8 for additional El Dorado County and Placer County ZIP codes.

<sup>2</sup>ZIP codes for Eastern El Dorado include: 95629, 95633-36, 95656, 95684, 95709, 95720-21, 95726, 95735, 96150-52 and 96154-58 only. ZIP codes for Eastern Placer County include: 95631, 95681, 95701, 95713-15, 95717, 95724, 96140-43, 96145, 96148 and 96162 only. See region 3 for additional El Dorado County and Placer County ZIP codes.

<sup>3</sup>ZIP codes for Western El Dorado include: 95623, 95630 and 95762 only. ZIP codes for Western Placer County include: 95602-04, 95648, 95650, 95658, 95661, 95663, 95677-78, 95746-47 and 95765. See Region 8 for additional El Dorado County and Placer County ZIP codes.

## HMO RATING REGIONS FOR JULY 1, 2006

**Region 1** Los Angeles - Zip codes beginning with 906-912, 915, 917, 918, 935

**Region 2** Los Angeles - All other zip codes except those listed in Rating Region 1

**Region 3** Merced, Napa, Sacramento, San Joaquin, Sonoma, Stanislaus, Tulare, Western El Dorado<sup>3</sup> and Western Placer<sup>3</sup>

**Region 4** Riverside, San Bernardino, Santa Barbara, and Ventura

**Region 5** Alameda, Contra Costa, Marin, San Francisco, San Mateo, Santa Clara, Santa Cruz, and Solano

**Region 6** Orange and San Diego

**Region 7** Fresno, Kern, and Kings

**Region 8** Eastern El Dorado<sup>4</sup>, Eastern Placer<sup>4</sup>, Marin and Yolo

## DENTAL AND VISION REGIONS FOR HMO PLUS PLANS<sup>5</sup>

**Region 1** Los Angeles

**Region 2** Sacramento, San Joaquin, Sonoma and Western Placer

**Region 3** Riverside, San Bernardino and Ventura

**Region 4** Alameda, Contra Costa, San Francisco, San Mateo, Santa Clara and Solano

**Region 5** Orange and San Diego

**Region 6** Fresno, Kern

**Region 7** Marin, Eastern Placer and Yolo

<sup>4</sup>ZIP codes for Eastern El Dorado include: 95613-14, 95619, 95629, 95633-36, 95643, 95651, 95656, 95664, 95667, 95672, 95682, 95684, 95709, 95720-21, 95726, 95735, 96150-52 and 96154-58 only. ZIP codes for Eastern Placer County include: 95631, 95681, 95701, 95703, 95713-15, 95717, 95722, 95724, 95736, 96140-43, 96145, 96148 and 96162 only. See region 3 for additional El Dorado County and Placer County ZIP codes.

<sup>5</sup>A Health Net "Plus" plan is a Health Net HMO or PPO plan with Health Net Dental and Vision coverage included. The "Plus" indicates the addition of the optional coverage.

# PPO AND HMO

## Region 1

Los Angeles – Zip codes beginning with 906-912, 915, 917, 918, 935.

Tier	Age	ValueChoice 1500 <sup>1</sup>	SimpleChoice HSA	SmartChoice HSA	SimpleChoice 50	SimpleChoice 35	SimpleChoice 40	SimpleChoice 25	SimpleChoice 15	SimpleValue 50 Generic RX <sup>1</sup>	SimpleValue 50 Combo RX <sup>1</sup>	SimpleValue 40 Generic RX <sup>1</sup>	SimpleValue 40 Combo RX <sup>1</sup>	SimpleValue 30 Generic RX <sup>1</sup>	SimpleValue 30 Combo RX <sup>1</sup>	FirstChoice PPO	HMO 40	HMO 15
Subscriber	1-4	38	39	44	68	75	80	80	107	57	60	62	69	67	74	71	139	152
	5-18	38	39	44	68	75	80	80	107	57	60	62	69	67	74	71	139	140
	19-24	51	39	65	76	83	88	89	118	61	64	66	74	72	80	98	182	252
	25-29	54	39	65	76	83	88	89	118	61	64	66	74	72	80	103	211	296
	30-34	62	56	85	86	94	100	101	133	77	81	83	93	90	101	137	266	365
	35-39	75	75	97	98	108	114	116	153	86	92	93	106	101	114	153	293	399
	40-44	99	105	135	113	123	132	133	176	119	130	129	150	140	162	215	306	422
	45-49	111	149	158	158	173	185	187	248	151	166	163	191	177	206	251	322	463
	50-54	166	195	211	204	222	238	240	317	188	215	204	247	221	267	334	376	512
	55-59	217	247	260	296	323	347	350	462	282	324	305	374	331	404	413	442	615
60-64	217	309	325	375	410	439	442	585	364	405	395	467	428	504	413	442	615	
Subscriber & Spouse/ Domestic Partner	19-24		68	128	151	165	176	178	235							193	355	499
	25-29		68	128	151	165	176	178	235							205	415	586
	30-34		94	169	171	187	200	201	267							270	527	725
	35-39		129	191	196	215	230	232	307							303	579	792
	40-44		180	269	226	248	264	266	353							427	606	838
	45-49		264	313	317	347	371	374	494							499	639	921
	50-54		355	418	406	443	475	480	634							666	745	1,020
	55-59		471	518	592	647	693	699	924							823	878	1,224
60-64		614	675	750	820	878	884	1,170							823	878	1,224	
Subscriber & Child	19-24		86	108	171	187	200	201	267							167	313	391
	25-29		86	108	171	187	200	201	267							172	342	435
	30-34		104	129	174	190	204	206	272							206	399	502
	35-39		125	139	180	197	210	212	281							223	425	536
	40-44		157	178	183	200	215	216	286							285	439	559
	45-49		173	201	227	248	265	267	353							320	455	602
	50-54		220	253	271	296	317	320	424							403	507	651
	55-59		277	303	364	398	426	430	569							482	573	753
60-64		340	372	443	484	518	523	692							482	573	753	
Subscriber & Children	19-24		116	153	245	268	288	290	384							256	446	527
	25-29		116	153	245	268	288	290	384							261	477	572
	30-34		136	173	242	265	284	286	378							294	532	641
	35-39		159	184	249	272	290	293	387							312	559	674
	40-44		197	223	251	274	294	296	392							373	571	698
	45-49		216	245	295	322	344	348	460							408	589	739
	50-54		263	299	339	371	397	400	530							492	641	787
	55-59		320	347	432	473	506	510	675							571	708	890
60-64		374	406	512	559	598	604	799							571	708	890	
Family	19-24		120	209	321	351	376	380	502							356	598	751
	25-29		120	209	321	351	376	380	502							366	658	839
	30-34		152	250	328	359	384	387	512							433	770	976
	35-39		190	272	347	378	405	409	541							466	822	1,044
	40-44		259	350	364	398	426	429	569							590	848	1,089
	45-49		306	394	453	495	530	535	707							662	882	1,173
	50-54		398	500	542	593	635	640	847							828	986	1,271
	55-59		513	599	728	796	853	859	1,137							986	1,121	1,476
60-64		648	757	887	969	1,037	1,046	1,384							986	1,121	1,476	

<sup>1</sup> Subscriber-only plan.

Refer to page 2 for county details, not all counties are available.

# PPO AND HMO

## Region 2

Los Angeles– Zip codes except those listed in Region 1.

Tier	Age	ValueChoice 1500 <sup>1</sup>	SimpleChoice HSA	SmartChoice HSA	SimpleChoice 50	SimpleChoice 35	SimpleChoice 40	SimpleChoice 25	SimpleChoice 15	SimpleValue 50 Generic RX <sup>1</sup>	SimpleValue 50 Combo RX <sup>1</sup>	SimpleValue 40 Generic RX <sup>1</sup>	SimpleValue 40 Combo RX <sup>1</sup>	SimpleValue 30 Generic RX <sup>1</sup>	SimpleValue 30 Combo RX <sup>1</sup>	FirstChoice PPO	HMO 40	HMO 15
Subscriber	1–4	43	40	48	77	85	91	91	121	57	60	62	69	67	74	82	139	152
	5–18	43	40	48	77	85	91	91	121	57	60	62	69	67	74	82	139	140
	19–24	59	40	71	86	94	100	101	134	61	64	66	74	72	80	112	182	252
	25–29	61	40	71	86	94	100	101	134	61	64	66	74	72	80	118	211	296
	30–34	71	59	92	97	106	114	115	151	77	81	83	93	90	101	156	266	365
	35–39	85	80	104	111	122	130	131	174	86	92	93	106	101	114	175	293	399
	40–44	113	111	146	129	140	150	151	200	119	130	129	150	140	162	246	306	422
	45–49	127	155	170	180	196	210	212	281	151	166	163	191	177	206	287	322	463
	50–54	190	199	228	231	252	270	272	360	188	215	204	247	221	267	382	376	512
	55–59	248	253	281	336	367	393	397	525	282	324	305	374	331	404	472	442	615
60–64	248	328	364	426	466	498	502	664	364	405	395	467	428	504	472	442	615	
Subscriber & Spouse/ Domestic Partner	19–24		69	138	171	187	200	202	267							221	355	499
	25–29		69	138	171	187	200	202	267							234	415	586
	30–34		100	182	194	212	227	229	304							308	527	725
	35–39		137	206	222	244	261	264	348							347	579	792
	40–44		191	290	256	281	300	302	401							488	606	838
	45–49		275	338	360	393	421	425	561							570	639	921
	50–54		363	452	461	503	540	545	719							761	745	1,020
	55–59		483	560	672	734	787	793	1,049							941	878	1,224
60–64		652	756	852	931	997	1,004	1,329							941	878	1,224	
Subscriber & Child	19–24		88	116	194	212	227	229	304							191	313	391
	25–29		88	116	194	212	227	229	304							197	342	435
	30–34		110	139	197	216	231	234	309							235	399	502
	35–39		133	150	205	224	239	241	318							254	425	536
	40–44		166	192	207	227	244	245	325							325	439	559
	45–49		180	217	257	281	301	304	401							366	455	602
	50–54		224	274	307	336	360	363	481							461	507	651
	55–59		284	328	413	452	483	488	646							551	573	753
60–64		361	417	503	550	588	593	786							551	573	753	
Subscriber & Children	19–24		119	166	279	305	327	330	436							293	446	527
	25–29		119	166	279	305	327	330	436							299	477	572
	30–34		143	187	275	301	322	325	430							336	532	641
	35–39		170	199	282	309	330	332	440							356	559	674
	40–44		208	241	285	311	333	336	445							426	571	698
	45–49		224	265	335	366	391	395	522							467	589	739
	50–54		268	323	385	421	451	455	602							563	641	787
	55–59		327	376	491	537	575	580	767							653	708	890
60–64		397	456	581	634	679	686	907							653	708	890	
Family	19–24		123	226	365	398	427	431	570							407	598	751
	25–29		123	226	365	398	427	431	570							419	658	839
	30–34		160	270	372	407	436	440	581							494	770	976
	35–39		203	294	393	430	460	465	615							533	822	1,044
	40–44		273	378	413	452	483	487	646							674	848	1,089
	45–49		318	426	515	562	602	607	803							756	882	1,173
	50–54		407	540	616	673	721	727	962							947	986	1,271
	55–59		526	648	827	904	968	975	1,291							1,127	1,121	1,476
60–64		688	848	1,007	1,100	1,178	1,188	1,571							1,127	1,121	1,476	

<sup>1</sup> Subscriber-only plan.

Refer to page 2 for county details, not all counties are available.

# PPO AND HMO

## Region 3

Merced, Napa Sacramento, San Joaquin, Sonoma, Stanislaus, Tulare, Western El Dorado and Western Placer counties.

Tier	Age	ValueChoice 1500 <sup>1</sup>	SimpleChoice HSA	SmartChoice HSA	SimpleChoice 50	SimpleChoice 35	SimpleChoice 40	SimpleChoice 25	SimpleChoice 15	SimpleValue 50 Generic RX <sup>1</sup>	SimpleValue 50 Combo RX <sup>1</sup>	SimpleValue 40 Generic RX <sup>1</sup>	SimpleValue 40 Combo RX <sup>1</sup>	SimpleValue 30 Generic RX <sup>1</sup>	SimpleValue 30 Combo RX <sup>1</sup>	FirstChoice PPO	HMO 40	HMO 15
Subscriber	1-4	36	39	40	65	71	77	77	90	57	59	62	68	67	73	66	150	174
	5-18	36	39	40	65	71	77	77	90	57	59	62	68	67	73	66	150	157
	19-24	49	39	56	72	79	84	85	100	62	63	67	73	72	79	90	194	286
	25-29	51	39	56	72	79	84	85	100	62	63	67	73	72	79	93	226	339
	30-34	61	57	74	82	89	96	96	114	77	79	84	92	91	99	121	288	420
	35-39	72	76	83	94	103	110	110	131	87	90	94	104	102	112	138	314	458
	40-44	93	107	117	108	118	126	127	150	120	128	130	147	142	159	193	330	483
	45-49	106	144	157	151	165	177	179	210	152	162	165	187	179	202	227	348	527
	50-54	158	190	207	194	212	227	229	269	190	211	206	243	224	262	302	403	582
55-59	207	244	266	283	309	331	333	392	285	318	308	367	334	396	373	475	699	
60-64	207	316	344	359	392	420	423	498	368	398	399	458	432	495	373	475	699	
Subscriber & Spouse/ Domestic Partner	19-24		68	111	144	157	169	170	200							177	381	566
	25-29		68	111	144	157	169	170	200							185	444	672
	30-34		96	145	163	179	191	193	227							240	570	834
	35-39		130	165	187	205	219	222	260							274	621	909
	40-44		184	232	216	236	253	254	300							384	654	960
	45-49		255	271	302	331	354	357	420							450	691	1,048
	50-54		346	364	387	424	454	458	538							602	799	1,160
	55-59		466	490	566	619	662	668	785							742	945	1,392
60-64		628	660	716	783	838	845	994							742	945	1,392	
Subscriber & Child	19-24		86	95	163	179	191	193	227							153	337	442
	25-29		86	95	163	179	191	193	227							158	368	494
	30-34		106	111	167	182	194	197	231							185	430	575
	35-39		127	121	171	188	201	203	239							201	456	614
	40-44		160	154	175	191	204	206	242							256	474	640
	45-49		168	174	216	236	253	255	300							290	491	685
	50-54		214	221	259	283	303	306	360							366	545	738
	55-59		274	283	348	380	408	410	483							436	619	856
60-64		348	359	423	463	495	500	588							436	619	856	
Subscriber & Children	19-24		116	135	235	257	275	277	326							235	483	600
	25-29		116	135	235	257	275	277	326							239	513	651
	30-34		139	151	231	253	271	273	321							267	577	733
	35-39		162	161	237	259	277	279	329							283	603	771
	40-44		201	194	240	263	281	283	333							339	619	795
	45-49		208	214	282	308	330	332	391							371	637	839
	50-54		256	261	324	355	379	382	450							447	691	895
	55-59		316	322	412	452	483	487	573							517	763	1,011
60-64		382	389	488	534	572	577	677							517	763	1,011	
Family	19-24		120	184	307	336	360	362	426							327	644	852
	25-29		120	184	307	336	360	362	426							335	708	957
	30-34		154	216	313	342	367	369	434							391	833	1,119
	35-39		192	236	331	362	387	391	459							423	885	1,194
	40-44		263	304	348	380	406	410	482							535	917	1,246
	45-49		296	344	433	472	506	511	601							600	953	1,333
	50-54		388	436	518	566	607	611	719							752	1,063	1,445
	55-59		507	521	695	760	814	821	965							892	1,207	1,677
60-64		663	681	846	926	990	999	1,175							892	1,207	1,677	

<sup>1</sup> Subscriber-only plan.

Refer to page 2 for county details, not all counties are available.

# PPO AND HMO

## Region 4

Riverside, San Bernardino, Santa Barbara, and Ventura counties.

Tier	Age	ValueChoice 1500 <sup>1</sup>	SimpleChoice HSA	SmartChoice HSA	SimpleChoice 50	SimpleChoice 35	SimpleChoice 40	SimpleChoice 25	SimpleChoice 15	SimpleValue 50 Generic RX <sup>1</sup>	SimpleValue 50 Combo RX <sup>1</sup>	SimpleValue 40 Generic RX <sup>1</sup>	SimpleValue 40 Combo RX <sup>1</sup>	SimpleValue 30 Generic RX <sup>1</sup>	SimpleValue 30 Combo RX <sup>1</sup>	FirstChoice PPO	HMO 40	HMO 15
Subscriber	1-4	37	38	42	61	67	72	73	96	48	50	52	55	56	59	69	147	164
	5-18	37	38	42	61	67	72	73	96	48	50	52	55	56	59	69	147	151
	19-24	51	39	60	68	74	80	80	107	52	54	56	59	61	64	92	197	273
	25-29	52	39	60	68	74	80	80	107	52	54	56	59	61	64	98	227	322
	30-34	62	56	78	77	85	90	91	121	65	67	70	74	76	80	129	292	397
	35-39	74	74	88	89	97	104	104	139	73	75	79	84	86	91	145	319	436
	40-44	95	105	123	102	112	120	121	159	101	104	109	119	118	129	204	335	460
	45-49	108	143	145	143	157	168	169	223	127	132	138	152	150	164	238	354	502
	50-54	160	186	192	183	200	215	217	287	159	171	172	197	187	213	316	410	561
	55-59	210	239	247	267	293	313	317	418	238	258	258	298	280	322	391	484	676
60-64	210	308	318	339	370	397	400	530	308	323	333	372	362	402	391	484	676	
Subscriber & Spouse/ Domestic Partner	19-24		68	116	137	149	159	161	213							183	388	539
	25-29		68	116	137	149	159	161	213							193	448	640
	30-34		94	153	155	169	181	182	241							254	577	791
	35-39		127	173	177	194	207	210	277							287	631	866
	40-44		180	245	204	223	240	241	319							405	661	914
	45-49		254	287	287	313	335	338	447							475	701	1,001
	50-54		339	381	367	402	429	434	573							631	812	1,116
	55-59		456	472	536	585	627	632	836							778	963	1,345
60-64		612	633	679	742	794	801	1,059							778	963	1,345	
Subscriber & Child	19-24		86	98	155	169	181	182	241							159	339	422
	25-29		86	98	155	169	181	182	241							164	368	472
	30-34		104	117	157	173	185	186	246							195	431	547
	35-39		123	128	163	177	191	192	254							212	462	584
	40-44		157	163	165	181	193	195	258							270	475	609
	45-49		167	184	205	224	240	242	320							305	495	652
	50-54		210	232	246	269	287	289	382							383	551	710
	55-59		268	276	330	360	386	388	514							458	627	824
60-64		339	349	400	439	469	474	626							458	627	824	
Subscriber & Children	19-24		116	140	222	243	260	263	348							245	483	571
	25-29		116	140	222	243	260	263	348							251	512	620
	30-34		136	159	219	240	257	259	342							281	577	697
	35-39		157	168	224	246	263	265	350							298	604	734
	40-44		197	205	227	248	266	269	355							356	619	757
	45-49		207	226	266	291	312	314	416							391	639	802
	50-54		250	273	307	336	360	362	480							469	696	859
	55-59		309	318	391	428	458	462	610							543	769	973
60-64		373	384	463	506	541	546	722							543	769	973	
Family	19-24		120	192	290	318	341	343	453							340	649	812
	25-29		120	192	290	318	341	343	453							351	708	911
	30-34		152	229	296	324	347	350	463							412	835	1,063
	35-39		187	249	313	343	367	369	489							445	892	1,137
	40-44		259	319	330	360	385	388	514							562	922	1,185
	45-49		294	363	410	448	480	483	639							631	961	1,274
	50-54		380	457	490	536	574	579	766							788	1,073	1,388
	55-59		497	546	659	721	771	778	1,029							936	1,222	1,618
60-64		646	710	802	876	939	946	1,252							936	1,222	1,618	

<sup>1</sup> Subscriber-only plan.

Refer to page 2 for county details, not all counties are available.

# PPO AND HMO

## Region 5

Alameda, Contra Costa, Marin, San Francisco, San Mateo, Santa Clara, Santa Cruz, and Solano counties.

Tier	Age	ValueChoice 1500 <sup>1</sup>	SimpleChoice HSA	SmartChoice HSA	SimpleChoice 50	SimpleChoice 35	SimpleChoice 40	SimpleChoice 25	SimpleChoice 15	SimpleValue 50 Generic RX <sup>1</sup>	SimpleValue 50 Combo RX <sup>1</sup>	SimpleValue 40 Generic RX <sup>1</sup>	SimpleValue 40 Combo RX <sup>1</sup>	SimpleValue 30 Generic RX <sup>1</sup>	SimpleValue 30 Combo RX <sup>1</sup>	FirstChoice PPO	HMO 40	HMO 15
Subscriber	1-4	34	39	41	62	68	73	73	91	53	55	57	61	62	66	67	168	185
	5-18	34	39	41	62	68	73	73	91	53	55	57	61	62	66	67	168	168
	19-24	49	39	57	70	76	80	82	101	57	59	62	66	67	71	91	221	307
	25-29	51	39	57	70	76	80	82	101	57	59	62	66	67	71	94	260	366
	30-34	60	56	76	78	85	91	92	114	71	74	77	83	84	90	125	328	452
	35-39	69	75	85	90	98	106	106	131	80	84	87	94	94	102	140	360	491
	40-44	92	103	121	103	113	121	122	151	111	116	120	133	130	144	199	376	518
	45-49	103	141	166	145	158	169	170	211	140	147	152	170	165	183	230	399	563
	50-54	153	195	230	186	203	217	219	271	175	191	190	220	206	238	307	458	625
55-59	201	239	282	271	296	317	319	394	262	289	284	333	308	359	382	545	755	
60-64	201	309	365	343	375	402	404	500	339	360	367	416	398	449	382	545	755	
Subscriber & Spouse/ Domestic Partner	19-24		68	112	138	151	162	163	201							178	434	607
	25-29		68	112	138	151	162	163	201							186	513	727
	30-34		94	150	156	171	183	185	228							248	650	899
	35-39		129	168	180	197	210	212	261							279	713	977
	40-44		177	240	206	225	242	243	301							397	745	1,030
	45-49		250	277	289	317	338	342	422							458	790	1,121
	50-54		355	371	372	405	434	438	542							612	911	1,246
	55-59		456	477	541	592	633	639	790							760	1,083	1,504
60-64		614	642	686	749	802	809	1,000							760	1,083	1,504	
Subscriber & Child	19-24		86	96	156	170	182	185	228							155	381	474
	25-29		86	96	156	170	182	185	228							159	420	534
	30-34		104	115	159	174	186	188	233							190	490	619
	35-39		125	124	164	180	193	194	240							206	521	660
	40-44		154	159	167	182	195	198	243							263	535	686
	45-49		164	178	207	227	242	245	302							294	559	731
	50-54		220	239	248	271	290	293	362							371	620	793
	55-59		268	291	333	364	390	393	486							446	707	921
60-64		340	369	405	442	474	478	591							446	707	921	
Subscriber & Children	19-24		116	136	224	246	263	265	329							238	545	642
	25-29		116	136	224	246	263	265	329							243	583	701
	30-34		136	154	222	242	259	261	324							274	654	786
	35-39		159	164	227	248	265	267	331							289	685	828
	40-44		193	200	229	251	269	271	335							347	699	853
	45-49		204	219	270	295	315	318	393							378	723	899
	50-54		263	282	311	339	363	366	453							455	784	961
	55-59		309	331	396	432	463	466	577							529	870	1,089
60-64		374	401	468	511	547	552	682							529	870	1,089	
Family	19-24		120	186	294	321	344	347	428							331	731	913
	25-29		120	186	294	321	344	347	428							339	810	1,033
	30-34		152	223	300	327	350	354	438							401	948	1,203
	35-39		190	242	317	347	370	374	462							432	1,010	1,284
	40-44		254	312	333	363	390	393	486							548	1,040	1,334
	45-49		290	350	414	453	484	489	604							611	1,085	1,426
	50-54		398	443	496	542	580	585	724							765	1,207	1,551
	55-59		497	534	665	728	779	785	972							913	1,379	1,808
60-64		648	696	811	886	948	957	1,182							913	1,379	1,808	

<sup>1</sup> Subscriber-only plan.

Refer to page 2 for county details, not all counties are available.

# PPO AND HMO

## Region 6

Orange and San Diego counties.

Tier	Age	ValueChoice 1500 <sup>1</sup>	SimpleChoice HSA	SmartChoice HSA	SimpleChoice 50	SimpleChoice 35	SimpleChoice 40	SimpleChoice 25	SimpleChoice 15	SimpleValue 50 Generic RX <sup>1</sup>	SimpleValue 50 Combo RX <sup>1</sup>	SimpleValue 40 Generic RX <sup>1</sup>	SimpleValue 40 Combo RX <sup>1</sup>	SimpleValue 30 Generic RX <sup>1</sup>	SimpleValue 30 Combo RX <sup>1</sup>	FirstChoice PPO	HMO 40	HMO 15
Subscriber	1-4	39	39	44	67	73	78	79	97	53	55	57	61	62	66	74	147	164
	5-18	39	39	44	67	73	78	79	97	53	55	57	61	62	66	74	147	150
	19-24	54	39	64	74	80	86	88	107	57	59	62	66	67	71	101	197	272
	25-29	55	39	64	74	80	86	88	107	57	59	62	66	67	71	106	227	322
	30-34	64	56	84	84	91	98	100	121	71	74	77	83	84	90	139	288	396
	35-39	77	75	95	96	106	113	114	139	80	84	87	94	94	102	156	314	434
	40-44	102	105	133	110	121	129	131	161	111	116	120	133	130	144	220	330	454
	45-49	115	149	156	155	170	182	183	224	140	147	152	170	165	183	256	349	499
	50-54	170	195	208	199	218	233	235	288	175	191	190	220	206	238	344	406	558
55-59	224	247	256	290	318	339	343	420	262	289	284	333	308	359	423	480	670	
60-64	224	309	320	368	402	430	434	531	339	361	367	416	398	449	423	480	670	
Subscriber & Spouse/ Domestic Partner	19-24		68	126	147	162	173	175	213							199	387	537
	25-29		68	126	147	162	173	175	213							209	448	641
	30-34		94	166	168	183	197	198	242							275	570	787
	35-39		129	187	193	211	225	228	278							310	622	860
	40-44		180	264	222	242	259	261	320							438	653	905
	45-49		264	309	311	339	363	367	448							512	692	993
	50-54		355	415	398	435	466	470	576							686	807	1,109
	55-59		471	511	580	635	680	686	839							844	956	1,336
60-64		614	666	735	805	861	868	1,062							844	956	1,336	
Subscriber & Child	19-24		86	106	168	183	197	198	242							172	337	419
	25-29		86	106	168	183	197	198	242							177	368	472
	30-34		104	126	170	187	200	201	247							210	429	545
	35-39		125	137	176	193	206	209	255							228	456	581
	40-44		157	176	180	197	210	212	259							292	472	604
	45-49		173	199	222	243	260	263	321							329	490	649
	50-54		220	252	266	291	312	314	384							416	548	707
	55-59		277	300	357	391	418	422	516							496	622	819
60-64		340	368	435	475	508	513	628							496	622	819	
Subscriber & Children	19-24		116	152	241	264	282	284	349							264	480	568
	25-29		116	152	241	264	282	284	349							270	512	620
	30-34		136	172	237	260	278	281	343							302	572	695
	35-39		159	183	243	266	285	288	351							321	601	729
	40-44		197	221	246	270	288	290	356							384	615	752
	45-49		216	243	289	315	338	341	417							421	633	795
	50-54		263	296	333	364	390	393	481							508	691	854
	55-59		320	344	424	464	496	500	613							588	768	966
60-64		374	402	501	548	588	592	724							588	768	966	
Family	19-24		120	207	315	344	369	372	456							368	646	809
	25-29		120	207	315	344	369	372	456							378	708	911
	30-34		152	247	321	351	376	379	464							444	830	1,058
	35-39		190	268	339	372	398	400	490							478	885	1,131
	40-44		259	345	357	391	418	421	516							606	912	1,175
	45-49		306	390	444	486	520	524	641							681	952	1,265
	50-54		398	496	532	582	622	628	769							855	1,067	1,380
	55-59		513	592	715	781	836	843	1,032							1,013	1,218	1,606
60-64		648	748	869	951	1,018	1,026	1,255							1,013	1,218	1,606	

<sup>1</sup> Subscriber-only plan.

Refer to page 2 for county details, not all counties are available.

# PPO AND HMO

## Region 7

Fresno, Kern, and Kings counties.

Tier	Age	ValueChoice 1500 <sup>1</sup>	SimpleChoice HSA	SmartChoice HSA	SimpleChoice 50	SimpleChoice 35	SimpleChoice 40	SimpleChoice 25	SimpleChoice 15	SimpleValue 50 Generic RX <sup>1</sup>	SimpleValue 50 Combo RX <sup>1</sup>	SimpleValue 40 Generic RX <sup>1</sup>	SimpleValue 40 Combo RX <sup>1</sup>	SimpleValue 30 Generic RX <sup>1</sup>	SimpleValue 30 Combo RX <sup>1</sup>	FirstChoice PPO	HMO 40	HMO 15
Subscriber	1-4	37	44	41	65	71	77	77	91	57	60	62	69	67	75	67	156	168
	5-18	37	44	41	65	71	77	77	91	57	60	62	69	67	75	67	156	155
	19-24	49	43	57	72	79	84	85	101	62	64	67	74	72	80	91	202	280
	25-29	51	43	57	72	79	84	85	101	62	64	67	74	72	80	94	237	334
	30-34	60	63	76	82	89	96	96	114	77	81	84	93	91	101	125	302	413
	35-39	69	84	101	94	102	109	110	131	87	92	94	106	102	115	140	333	450
	40-44	92	117	141	108	118	126	127	150	120	130	130	150	142	162	197	344	474
	45-49	103	159	192	151	165	176	179	211	152	166	165	191	179	206	230	366	519
	50-54	154	207	250	194	212	227	229	270	190	215	206	248	224	267	306	424	572
55-59	202	266	321	283	309	331	333	394	285	325	308	374	334	404	377	497	688	
60-64	202	347	419	359	391	418	422	499	368	405	399	468	432	505	377	497	688	
Subscriber & Spouse/ Domestic Partner	19-24		75	112	144	157	169	170	200							178	399	555
	25-29		75	112	144	157	169	170	200							186	467	663
	30-34		106	150	163	179	191	193	228							248	598	820
	35-39		144	204	187	205	219	221	261							279	658	895
	40-44		201	285	216	236	253	254	301							390	685	943
	45-49		282	400	302	330	354	356	421							458	726	1,031
	50-54		377	535	387	423	453	457	541							611	839	1,138
	55-59		508	721	565	617	662	667	788							752	988	1,369
60-64		690	979	716	783	838	845	998							752	988	1,369	
Subscriber & Child	19-24		95	142	163	179	191	193	228							155	352	434
	25-29		95	142	163	179	191	193	228							159	385	488
	30-34		117	175	167	182	194	197	231							190	451	566
	35-39		140	209	171	188	201	203	240							206	480	604
	40-44		175	261	175	191	204	206	243							261	494	628
	45-49		185	276	216	236	253	255	301							294	515	670
	50-54		234	349	259	283	303	306	361							370	571	725
	55-59		299	446	348	380	406	410	484							442	646	840
60-64		382	570	423	463	495	499	590							442	646	840	
Subscriber & Children	19-24		127	136	235	257	275	277	327							238	501	585
	25-29		127	136	235	257	275	277	327							243	535	641
	30-34		153	164	231	253	271	273	323							274	603	719
	35-39		179	192	237	259	277	279	330							289	631	756
	40-44		220	236	240	261	281	283	335							344	644	781
	45-49		230	247	282	307	329	332	392							378	666	824
	50-54		279	300	324	354	379	382	452							454	721	878
	55-59		344	370	412	451	483	487	576							525	796	994
60-64		420	452	488	534	571	576	681							525	796	994	
Family	19-24		132	186	307	336	359	362	428							331	670	833
	25-29		132	186	307	336	359	362	428							339	739	943
	30-34		171	223	313	342	366	369	436							401	871	1,099
	35-39		213	242	331	361	387	390	460							432	930	1,174
	40-44		288	309	348	380	406	410	484							543	956	1,222
	45-49		327	350	433	472	506	510	603							611	999	1,309
	50-54		423	442	518	566	605	611	722							762	1,112	1,417
	55-59		553	578	695	760	814	820	969							905	1,260	1,648
	60-64		727	760	846	924	990	999	1,180							905	1,260	1,648

<sup>1</sup> Subscriber-only plan.

Refer to page 2 for county details, not all counties are available.

Tier	Age	ValueChoice 1500 <sup>1</sup>	SimpleChoice HSA	SmartChoice HSA	SimpleChoice 50	SimpleChoice 35	SimpleChoice 40	SimpleChoice 25	SimpleChoice 15	SimpleValue 50 Generic RX <sup>1</sup>	SimpleValue 50 Combo RX <sup>1</sup>	SimpleValue 40 Generic RX <sup>1</sup>	SimpleValue 40 Combo RX <sup>1</sup>	SimpleValue 30 Generic RX <sup>1</sup>	SimpleValue 30 Combo RX <sup>1</sup>	FirstChoice PPO	HMO 40	HMO 15
Subscriber	1-4	57	57	71	106	116	123	125	165	81	85	88	98	95	106	117	207	226
	5-18	57	57	71	106	116	123	125	165	81	85	88	98	95	106	117	207	206
	19-24	83	57	101	118	128	137	138	183	87	92	94	106	102	114	156	273	376
	25-29	86	57	101	118	128	137	138	183	87	92	94	106	102	114	166	325	458
	30-34	103	82	132	133	145	156	157	207	109	115	118	133	128	144	218	415	561
	35-39	121	108	150	152	167	179	180	239	123	131	133	151	144	163	246	451	610
	40-44	160	151	209	175	192	205	207	275	170	185	184	214	200	231	345	470	639
	45-49	182	213	246	246	269	288	290	384	215	236	232	272	252	294	405	490	688
	50-54	274	278	329	315	344	369	372	493	268	306	291	353	315	381	542	566	757
	55-59	358	352	406	459	502	538	543	718	401	462	435	533	472	575	669	668	909
60-64	358	439	449	583	637	681	687	909	519	577	562	666	610	719	669	668	909	
Subscriber & Spouse/ Domestic Partner	19-24		99	199	234	257	275	277	366							310	541	746
	25-29		99	199	234	257	275	277	366							329	644	909
	30-34		138	263	265	290	311	313	415							436	823	1,115
	35-39		185	297	305	333	357	360	476							491	895	1,213
	40-44		259	417	351	384	411	414	548							689	936	1,270
	45-49		378	489	492	537	576	580	767							807	975	1,369
	50-54		507	654	631	689	737	745	984							1,081	1,124	1,509
	55-59		672	810	920	1,005	1,076	1,085	1,435							1,336	1,330	1,811
60-64		873	896	1,164	1,273	1,363	1,374	1,819							1,336	1,330	1,811	
Subscriber & Child	19-24		126	168	265	290	311	313	415							271	475	582
	25-29		126	168	265	290	311	313	415							281	527	663
	30-34		153	201	271	296	317	319	422							333	616	765
	35-39		180	219	279	306	327	330	436							361	653	816
	40-44		226	278	284	311	332	336	444							460	672	843
	45-49		248	315	351	385	411	415	549							520	692	894
	50-54		314	397	421	460	493	498	657							657	764	963
	55-59		395	475	566	619	662	668	884							784	870	1,115
60-64		483	518	688	753	806	812	1,074							784	870	1,115	
Subscriber & Children	19-24		169	240	381	417	447	451	596							417	677	786
	25-29		169	240	381	417	447	451	596							427	729	868
	30-34		199	273	376	411	440	444	588							481	819	971
	35-39		230	289	385	421	451	454	602							508	854	1,022
	40-44		283	349	390	426	457	460	609							607	874	1,049
	45-49		308	385	458	500	536	540	715							666	894	1,099
	50-54		374	468	528	577	616	622	823							803	969	1,170
	55-59		455	545	671	734	785	793	1,049							930	1,070	1,321
60-64		531	589	794	868	929	938	1,240							930	1,070	1,321	
Family	19-24		175	325	499	546	584	589	779							576	909	1,119
	25-29		175	325	499	546	584	589	779							594	1,013	1,283
	30-34		222	390	510	556	596	601	795							701	1,190	1,488
	35-39		274	424	538	588	629	634	839							757	1,261	1,589
	40-44		372	543	565	617	662	667	882							954	1,303	1,646
	45-49		437	615	704	769	823	830	1,098							1,073	1,342	1,744
	50-54		568	782	843	921	986	994	1,315							1,346	1,489	1,884
	55-59		731	936	1,131	1,237	1,324	1,334	1,766							1,602	1,698	2,186
60-64		920	1,023	1,376	1,505	1,611	1,625	2,150							1,602	1,698	2,186	

<sup>1</sup> Subscriber-only plan.

Refer to page 2 for county details, not all counties are available.

Tier	Age	ValueChoice 1500 <sup>1</sup>	SimpleChoice HSA	SmartChoice HSA	SimpleChoice 50	SimpleChoice 35	SimpleChoice 40	SimpleChoice 25	SimpleChoice 15	SimpleValue 50 Generic RX <sup>1</sup>	SimpleValue 50 Combo RX <sup>1</sup>	SimpleValue 40 Generic RX <sup>1</sup>	SimpleValue 40 Combo RX <sup>1</sup>	SimpleValue 30 Generic RX <sup>1</sup>	SimpleValue 30 Combo RX <sup>1</sup>	FirstChoice PPO
Subscriber	1-4	57	57	71	106	116	123	125	165	81	85	88	98	95	106	117
	5-18	57	57	71	106	116	123	125	165	81	85	88	98	95	106	117
	19-24	83	57	101	118	128	137	138	183	87	92	94	106	102	114	156
	25-29	86	57	101	118	128	137	138	183	87	92	94	106	102	114	166
	30-34	103	82	132	133	145	156	157	207	109	115	118	133	128	144	218
	35-39	121	108	150	152	167	179	180	239	123	131	133	151	144	163	246
	40-44	160	151	209	175	192	205	207	275	170	185	184	214	200	231	345
	45-49	182	213	246	246	269	288	290	384	215	236	232	272	252	294	405
	50-54	274	278	329	315	344	369	372	493	268	306	291	353	315	381	542
	55-59	358	352	406	459	502	538	543	718	401	462	435	533	472	575	669
60-64	358	439	449	583	637	681	687	909	519	577	562	666	610	719	669	
Subscriber & Spouse/ Domestic Partner	19-24		99	199	234	257	275	277	366							310
	25-29		99	199	234	257	275	277	366							329
	30-34		138	263	265	290	311	313	415							436
	35-39		185	297	305	333	357	360	476							491
	40-44		259	417	351	384	411	414	548							689
	45-49		378	489	492	537	576	580	767							807
	50-54		507	654	631	689	737	745	984							1,081
	55-59		672	810	920	1,005	1,076	1,085	1,435							1,336
60-64		873	896	1,164	1,273	1,363	1,374	1,819							1,336	
Subscriber & Child	19-24		126	168	265	290	311	313	415							271
	25-29		126	168	265	290	311	313	415							281
	30-34		153	201	271	296	317	319	422							333
	35-39		180	219	279	306	327	330	436							361
	40-44		226	278	284	311	332	336	444							460
	45-49		248	315	351	385	411	415	549							520
	50-54		314	397	421	460	493	498	657							657
	55-59		395	475	566	619	662	668	884							784
60-64		483	518	688	753	806	812	1,074							784	
Subscriber & Children	19-24		169	240	381	417	447	451	596							417
	25-29		169	240	381	417	447	451	596							427
	30-34		199	273	376	411	440	444	588							481
	35-39		230	289	385	421	451	454	602							508
	40-44		283	349	390	426	457	460	609							607
	45-49		308	385	458	500	536	540	715							666
	50-54		374	468	528	577	616	622	823							803
	55-59		455	545	671	734	785	793	1,049							930
60-64		531	589	794	868	929	938	1,240							930	
Family	19-24		175	325	499	546	584	589	779							576
	25-29		175	325	499	546	584	589	779							594
	30-34		222	390	510	556	596	601	795							701
	35-39		274	424	538	588	629	634	839							757
	40-44		372	543	565	617	662	667	882							954
	45-49		437	615	704	769	823	830	1,098							1,073
	50-54		568	782	843	921	986	994	1,315							1,346
	55-59		731	936	1,131	1,237	1,324	1,334	1,766							1,602
60-64		920	1,023	1,376	1,505	1,611	1,625	2,150							1,602	

<sup>1</sup> Subscriber-only plan.

Refer to page 2 for county details, not all counties are available.

# INDIVIDUAL TERM LIFE INSURANCE<sup>1</sup>

Health Net Life Insurance Company is pleased to offer affordable Individual Term Life Insurance in the following amounts: \$15,000, \$30,000 and \$50,000.

## MONTHLY TERM LIFE INSURANCE RATES

Age of primary insured	Cost per \$1,000	Total monthly cost		
		\$15,000	\$30,000	\$50,000
19–29	\$0.19	\$2.85	\$5.70	\$9.50
30–39	\$0.22	\$3.30	\$6.60	\$11.00
40–49	\$0.50	\$7.50	\$15.00	\$25.00
50–59	\$1.37	\$20.55	\$41.10	\$68.50
60–64	\$2.00	\$30.00	\$60.00	\$100.00

If you have, or are applying for, health insurance with Health Net, there is no additional information required to review your eligibility for Individual Term Life Insurance. Coverage will not become effective until approved in writing by Health Net Life Insurance Company.

## TERMS

- If you wish to purchase life insurance, you must purchase a minimum coverage of \$15,000.
- The maximum life insurance benefit is \$50,000.
- You must be at least 19 years old in order to purchase Individual Term Life Insurance.
- Term Life Insurance is not available for applicants applying for HIPAA guarantee issue coverage, those being offered modified issue plans or Quick Net plans.

# DENTAL AND VISION

## DENTAL AND VISION WITH HEALTH NET PPO PLANS<sup>1</sup>

Available with all PPO Plus Plans	
Subscriber	\$25
Subscriber and Spouse	\$50
Subscriber and Child	\$50
Subscriber and Children	\$75
Family	\$100

## DENTAL AND VISION WITH HEALTH NET HMO PLANS<sup>2</sup>

Available with all HMO Plus Plans	
Subscriber	\$9
Subscriber and Spouse	\$18
Subscriber and Child	\$18
Subscriber and Children	\$27
Family	\$36

<sup>1</sup> PPO plans, Individual Term Life Insurance and PPO Dental and Vision plans underwritten by Health Net Life Insurance Company.

<sup>2</sup> HMO plans, HMO Dental and Vision plans are underwritten by Health Net of California.

**For more information, please contact:**

Health Net  
Post Office Box 1150  
Rancho Cordova, California 95741-1150

Individual & Family Plans:

**1-800-909-3447**

1-800-331-1777 (Spanish)

1-877-891-9053 (Mandarin)

1-877-891-9050 (Cantonese)

1-877-339-8596 (Korean)

1-877-891-9051 (Tagalog)

1-877-339-8621 (Vietnamese)

Telecommunications Device  
for the Hearing and Speech Impaired:

**1-800-995-0852**

Visit [www.healthnet.com](http://www.healthnet.com)

**for the most up-to-date listings**



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