



Health Net®

Health Net Health Plan of Oregon, Inc.

**Individual and Family PPO Plan
80% / 50% Coinsurance**

Monthly Premium Rates Effective July 1, 2001

Your premium rate is based on where you live and on the age of the oldest person covered by your plan.

Subscriber & Child(ren) is defined as the Subscriber and one or more Children.

Subscriber & Family is defined as the Subscriber, Spouse and one or more Children.

Rates for Clackamas, Multnomah, Washington and Yamhill Counties

Monthly rates for IFP PPO 80%/50% coinsurance without optional preventive care benefits

Age	\$ 500 deductible				\$ 2,500 deductible			
	Subscriber	Subscriber & Spouse	Subscriber & Child(ren)	Subscriber & Family	Subscriber	Subscriber & Spouse	Subscriber & Child(ren)	Subscriber & Family
Under 19 years	\$ 82.40	\$ 164.81	\$ 134.08	\$ 237.05	\$ 54.64	\$ 109.29	\$ 88.91	\$ 157.19
19 – 24 years	\$ 93.46	\$ 186.94	\$ 152.09	\$ 266.48	\$ 61.98	\$ 123.96	\$ 100.85	\$ 176.70
25 – 29 years	\$ 109.43	\$ 218.87	\$ 175.32	\$ 286.32	\$ 72.62	\$ 145.25	\$ 116.35	\$ 190.01
30 – 34 years	\$ 128.10	\$ 256.18	\$ 212.28	\$ 329.59	\$ 85.03	\$ 170.06	\$ 140.92	\$ 218.79
35 – 39 years	\$ 148.09	\$ 296.17	\$ 254.96	\$ 385.92	\$ 98.31	\$ 196.61	\$ 169.25	\$ 256.19
40 – 44 years	\$ 166.58	\$ 333.16	\$ 289.90	\$ 420.80	\$ 110.64	\$ 221.28	\$ 192.54	\$ 279.48
45 – 49 years	\$ 185.96	\$ 371.92	\$ 323.62	\$ 455.37	\$ 123.51	\$ 247.01	\$ 214.94	\$ 302.44
50 – 54 years	\$ 205.69	\$ 411.40	\$ 351.73	\$ 490.28	\$ 136.49	\$ 272.98	\$ 233.39	\$ 325.33
55 – 59 years	\$ 236.93	\$ 473.88	\$ 395.58	\$ 545.82	\$ 157.22	\$ 314.45	\$ 262.49	\$ 362.18
60 – 64 years	\$ 273.68	\$ 547.36	\$ 443.53	\$ 611.95	\$ 181.52	\$ 363.04	\$ 294.17	\$ 405.87
65 years +	\$ 309.49	\$ 618.99	\$ 493.38	\$ 680.74	\$ 205.27	\$ 410.54	\$ 327.23	\$ 451.50

Rates for Benton, Clatsop, Columbia, Crook, Deschutes, Hood River, Jefferson, Lane*, Linn, Marion, Polk, Wasco Counties

Monthly rates for IFP PPO 80%/50% coinsurance without optional preventive care benefits

Age	\$ 500 deductible*				\$ 2,500 deductible			
	Subscriber	Subscriber & Spouse	Subscriber & Child(ren)	Subscriber & Family	Subscriber	Subscriber & Spouse	Subscriber & Child(ren)	Subscriber & Family
Under 19 years	\$ 92.96	\$ 185.94	\$ 151.27	\$ 267.44	\$ 61.65	\$ 123.30	\$ 100.31	\$ 177.34
19 – 24 years	\$ 105.45	\$ 210.91	\$ 171.59	\$ 300.64	\$ 69.92	\$ 139.86	\$ 113.78	\$ 199.36
25 – 29 years	\$ 123.46	\$ 246.93	\$ 197.80	\$ 323.03	\$ 81.94	\$ 163.87	\$ 131.27	\$ 214.38
30 – 34 years	\$ 144.52	\$ 289.02	\$ 239.50	\$ 371.84	\$ 95.94	\$ 191.86	\$ 158.99	\$ 246.84
35 – 39 years	\$ 167.08	\$ 334.15	\$ 287.64	\$ 435.39	\$ 110.91	\$ 221.82	\$ 190.95	\$ 289.03
40 – 44 years	\$ 187.94	\$ 375.88	\$ 327.07	\$ 474.75	\$ 124.82	\$ 249.64	\$ 217.23	\$ 315.31
45 – 49 years	\$ 209.80	\$ 419.60	\$ 365.11	\$ 513.75	\$ 139.34	\$ 278.68	\$ 242.49	\$ 341.21
50 – 54 years	\$ 232.06	\$ 464.14	\$ 396.82	\$ 553.14	\$ 153.99	\$ 307.98	\$ 263.31	\$ 367.04
55 – 59 years	\$ 267.31	\$ 534.64	\$ 446.30	\$ 615.80	\$ 177.37	\$ 354.76	\$ 296.14	\$ 408.61
60 – 64 years	\$ 308.77	\$ 617.53	\$ 500.39	\$ 690.40	\$ 204.79	\$ 409.58	\$ 331.88	\$ 457.91
65 years +	\$ 349.17	\$ 698.34	\$ 556.64	\$ 768.01	\$ 231.59	\$ 463.17	\$ 369.19	\$ 509.38

*\$ 500 deductible is not available in Lane County

Optional Preventive Care Benefits are available for infants and for children to age 18 for an additional premium of \$15.07 per month. This option is available only to these categories: Subscriber & Child(ren); Subscriber & Family.