Colonial Colonial	Limi	Limited Medical Health Plan - RFP #14-13	cal Health	n Plan - R	FP #14-13										ŀ				
Pian 1 Pian 2 Pian 1 Pian 2 Pian 1 Pian 2 AC1+ID AC1 AC2 AC3 AC1+ID AC1 Pian 2 Pian 3 Piah Im Gold Silver		SIS	Colo	nia	Colo	nia			SVIT	etra						Crescent			
SALES SALE			Plan 1	Plan 2	Plan 1	Plan 2	AC1-HD	AC1	AC2	AC3	AC1-HD	AC1	Plan 1	Plan 2	Plan 3	Platinum	Gold	Silver	Bronze
Section Sect	Premiums					The state of the state of			400000			11 450	No. of Contracts						N. H. H.
SPRING S	Employee						\$46.51	\$30.36	\$41.05	\$34.15	\$38.52	\$22.85	\$137.00	\$185.00	\$237.00	\$47.00	\$54.00	\$72.00	\$98.00
Nat Nat	Employee & Spouse	10					\$99.12	\$64.72	\$87.48	\$72.79	\$81.15	\$48.71	\$260.00	\$363.00	\$478.00	\$88.00	\$103.00	\$141.00	\$198.00
Under 40	Employee & Children	300					\$76.25	\$49.78	\$67.29	\$55.99	\$60.93	\$37.46	\$254.00	\$338.00	\$424.00	\$73.00	\$86.00	-	\$155.0
Under 40 17-49 17-49 17-49 \$75.98 \$18.73 \$23.97 \$18.90 \$47.76 \$33.07 \$42.96 \$40.65 \$62.45 \$27.50 \$35.19 \$32.45 \$83.64 \$41.84 \$54.18 \$49.30 \$40.49 \$0.59 \$0.59 \$0.59 \$40.49 \$20.59 \$31.61 \$26.20 \$62.85 \$45.31 \$61.55 \$56.20 \$67.22 \$32.07 \$42.83 \$39.10 \$67.22 \$32.07 \$42.83 \$39.10 \$95.11 \$54.09 \$72.77 \$63.70 \$95.11 \$54.09 \$72.77 \$63.70 \$95.11 \$54.09 \$72.77 \$63.70 \$95.11 \$54.20 \$572.77 \$63.70 \$412.81 \$40.24 \$60.64 \$60.64 \$74.60 \$42.81 \$40.24 \$63.38 \$48.20 \$48.20 \$123.81 \$40.24 \$53.38 \$48.20 \$40.24 \$51.20 \$65.25 \$96.90 \$80.95 \$67.27 \$96.90 \$80.95 \$67.27 \$96.90 \$80.95 \$67.29 \$67.10 \$60.25 \$97.01 \$125.99 \$101.40	Employee & Family	Control of the contro					\$138.01	\$90.11	\$121.80	\$101.35	\$109.69	\$67.80	\$368.00	\$508.00	\$657.00	\$109.00	\$129.00	\$177.00	\$249.0
Under 40 17-49 17-49 17-49 \$25.98 \$18.73 \$23.97 \$18.90 \$47.76 \$33.07 \$42.96 \$40.65 \$62.45 \$27.50 \$35.19 \$32.45 \$83.64 \$41.84 \$54.18 \$49.30 \$40.49 \$0.59 \$0.59 \$0.59 \$67.22 \$32.07 \$42.83 \$39.10 \$67.22 \$32.07 \$42.83 \$39.10 \$67.22 \$32.07 \$42.83 \$39.10 \$67.22 \$32.07 \$42.83 \$39.10 \$67.22 \$32.07 \$42.83 \$39.10 \$67.22 \$32.07 \$42.83 \$39.10 \$95.11 \$54.09 \$72.77 \$63.70 \$95.11 \$54.09 \$72.77 \$63.70 \$95.11 \$54.20 \$85.68 \$74.60 \$123.81 \$40.24 \$53.38 \$48.20 \$182.41 \$72.97 \$96.90 \$80.95 \$182.41 \$72.97 \$96.90 <																			
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n \$51.92 \$67.10 \$60.25 \$97.01 \$125.99 \$101.40	Employee & Spouse	2	\$88.23	\$114.77	\$93.30	\$117.80													
\$97.01 \$125.99 \$101.40	Employee & Children		\$51.92	\$67.10	\$60.25	\$75.85													
	Employee & Family		\$97.01	\$125.99	\$101.40	\$127.80													

Outpatient Surgerical Facility	Surgical Benefit	#	Outpatient Services		#	Rehab Unit	#	Nursing Facilty	#	Mental Health	#	Substance Abuse	#	ICU	#	Hospital Stay	#	Coverages per confinement	Inpatient	#	Amount	ER	#	Wellness Benefit	#	Outpatient Diagnostic Testing	Outpatient			
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			CYM 1500	500-1000;	15	100												\$1,500						\$50				Plan 2	Colonial	
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\$250	\$400							\$50	5	\$50	5	\$100	5	\$200	5	\$100				Ľ	\$100				2	\$100		AC3	Symetra	
								\$200	ر.	\$200	ъ	\$400	G	\$800	ر ت	\$400											HSA	AC1-HD		
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\$100	\$1,000												30	\$500	150	\$250	2	\$250		נו	\$100		2	\$100				Plan 1		
\$300	\$2,000												30	\$1,000	150	\$500	2	\$500		בו	\$100		2	\$100				Plan 2		
\$400	\$2,500									Yes			30	\$2,000	150	\$1,000	2	\$1,000		1	\$100		2	\$100				Plan 3		
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Employee \$25.98 \$18.73 \$23.97 \$18.90 \$23.90 Employee & Spouse \$47.76 \$33.07 \$42.96 \$40.65 \$51.30 Employee & Children \$62.45 \$27.50 \$35.19 \$32.45 \$40.85 Employee & Family \$83.64 \$41.84 \$54.18 \$49.30 \$62.15 Employee & Family \$0-59 50-59 50-59 50-59 Employee \$34.21 \$23.30 \$31.61 \$26.20 \$33.10	\$25.98 \$18.73 \$23.97 \$18.90 \$47.76 \$33.07 \$42.96 \$40.65 n \$62.45 \$27.50 \$35.19 \$32.45 \$83.64 \$41.84 \$54.18 \$49.30 40-49 50-59 50-59 50-59	\$25.98 \$18.73 \$23.97 \$18.90 \$47.76 \$33.07 \$42.96 \$40.65 n \$62.45 \$27.50 \$35.19 \$32.45 \$83.64 \$41.84 \$54.18 \$49.30	\$25.98 \$18.73 \$23.97 \$18.90 \$47.76 \$33.07 \$42.96 \$40.65 n \$62.45 \$27.50 \$35.19 \$32.45 \$83.64 \$41.84 \$54.18 \$49.30	\$25.98 \$18.73 \$23.97 \$18.90 \$47.76 \$33.07 \$42.96 \$40.65 n \$62.45 \$27.50 \$35.19 \$32.45	\$25.98 \$18.73 \$23.97 \$18.90 \$47.76 \$33.07 \$42.96 \$40.65	\$25.98 \$18.73 \$23.97 \$18.90 \$47.76 \$33.07 \$42.96 \$40.65	\$25.98 \$18.73 \$23.97 \$18.90	 Under 40 17-49 17-49 17-49	Employee & Family \$138.01 \$90.11	Employee & Children \$76.25 \$49.78	Employee & Spouse \$99.12 \$64.72	Employee \$46.51 \$30.36	Premiums	Child	Spouse	Employee	Critical Illness Benefit	# 1 1	Coverage per occurrence \$300 \$300	Accident	# 12 8	Amount \$5 \$5	Generic	# 6 6	Amount \$20 \$10	Brand Name	Prescriptions	Surgical Anesthesia \$125 max \$100 max		surgical surgical	25% of 25% of
									\$101.35 \$109.69	\$55.99 \$60.93	\$72.79 \$81.15	\$34.15 \$38.52		\$1,250	\$5,000	\$5,000		<u></u>	\$300 \$2,000	4 4	∞	\$5		5	\$10			\$100 max	benefit,	surgical	25% of
									9 \$67.80		\$48.71	\$22.85						H	\$1,500												
									\$368.00	\$254.00	\$260.00	\$137.00												\$1				\$250 max	benefit,	surgical	25% of
									\$508.00	\$338.00	\$363.00	\$185.00										\$10		\$1200 Ann. Max	\$30			\$500 max	benefit,	surgical	25% of
									\$657.00	\$424.00	\$478.00	\$237.00												ax				\$625 max	benefit,	surgical	25% of
									\$109.00	\$73.00	\$88.00	\$47.00							\$500												

Employee & Children Employee & Family Employee & Spouse Employee & Children Employee & Family Employee & Spouse Employee & Spouse Employee & Family	\$67.22 \$95.11 50+ \$71.85 \$132.02 \$123.81 \$182.41	\$32.07 \$54.09 60-64 \$31.47 \$64.20 \$40.24 \$72.97 65+ \$43.15 \$88.23 \$51.92 \$97.01	\$42.83 \$72.77 60-64 \$42.16 \$85.68 \$53.38 \$96.90 65+ \$55.88 \$114.77 \$67.10 \$125.99	\$39.10 \$63.70 60-64 \$34.15 \$74.60 \$48.20 \$80.95 \$65+ \$42.85 \$93.30 \$60.25 \$101.40	\$49.30 \$80.35 60-64 \$43.15 \$94.10 \$60.60 \$102.05 \$117.80 \$75.85 \$127.80	12 N	12 Months		+++++++++++++++++++++++++++++++++++++++		
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-1825%		-656%	-960%	-1245%	-1486%	-403%	-400%	-76	-767%	7% -222%	
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