

# IHA HEALTH PLAN



## Monthly Rates

Preferred ♦ Preferred Plus ♦ Standard ♦ Standard Plus

Effective 5-1-2021 to 04-30-2022

LEVEL	TIERS						
Preferred		1500	2500	3500	5000	5000	7350
		Classic	Classic	Classic	Classic	HSA	Value
	Member	\$692.92	\$645.38	\$577.12	\$536.95	\$497.45	\$436.91
	Member + Spouse	\$1,329.17	\$1,234.11	\$1,097.56	\$1,017.25	\$938.26	\$817.17
	Member + Child	\$1,209.63	\$1,124.07	\$1,001.18	\$928.90	\$857.79	\$748.81
Member + Family	\$1,970.95	\$1,828.34	\$1,623.52	\$1,503.05	\$1,384.56	\$1,202.93	
Preferred Plus		1500	2500	3500	5000	5000	7350
		Classic	Classic	Classic	Classic	HSA	Value
	Member	\$775.45	\$721.35	\$648.19	\$602.12	\$556.79	\$487.32
	Member + Spouse	\$1,494.23	\$1,386.03	\$1,239.72	\$1,147.56	\$1,056.91	\$917.97
	Member + Child	\$1,358.17	\$1,260.80	\$1,129.12	\$1,046.18	\$964.59	\$839.54
Member + Family	\$2,218.52	\$2,056.23	\$1,836.76	\$1,698.53	\$1,562.56	\$1,354.14	
Standard		1500	2500	3500	5000	5000	7350
		Classic	Classic	Classic	Classic	HSA	Value
	Member	\$869.24	\$807.69	\$719.27	\$667.27	\$616.12	\$537.72
	Member + Spouse	\$1,681.81	\$1,558.71	\$1,381.88	\$1,277.88	\$1,175.58	\$1,018.79
	Member + Child	\$1,527.00	\$1,416.21	\$1,257.06	\$1,163.46	\$1,071.39	\$930.27
Member + Family	\$2,499.90	\$2,315.25	\$2,050.00	\$1,894.00	\$1,740.55	\$1,505.35	
Standard Plus		1500	2500	3500	5000	5000	7350
		Classic	Classic	Classic	Classic	HSA	Value
	Member	\$1,097.61	\$1,017.90	\$903.40	\$836.06	\$769.81	\$668.28
	Member + Spouse	\$2,138.55	\$1,979.13	\$1,750.13	\$1,615.45	\$1,482.98	\$1,279.92
	Member + Child	\$1,938.07	\$1,794.58	\$1,588.49	\$1,467.27	\$1,348.04	\$1,165.29
Member + Family	\$3,185.02	\$2,945.88	\$2,602.38	\$2,400.37	\$2,201.64	\$1,897.05	

All of the above rate tiers are subject to underwriting and are based on health conditions disclosed on the submitted application.

Some applications may be "declined to quote". All rates are determined after Underwriting is completed.

Above rates do not include a \$5 monthly processing fee.