



# OREGON INDIVIDUAL RATES

Effective May 1, 2009 - July 31, 2009

Rates apply to the following counties in Oregon: Benton, Crook, Deschutes, Grant, Hood River, Jefferson, Linn, Marion, Polk, Sherman, Wasco, Wheeler, Klamath (only zip codes 97731, 97733, 97737) , Lake (only zip codes 97735, 97638, 97641).

## Clear Access PPO Plans

		Age:	0-17	18-20	21-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65+
<b>\$500 Deductible</b>	Individual Only	\$144	\$147	\$164	\$187	\$214	\$233	\$289	\$345	\$413	\$495	\$567	\$619	
	Individual + Spouse	\$289	\$295	\$337	\$393	\$447	\$477	\$578	\$688	\$827	\$989	\$1,135	\$1,240	
	Individual & Child(ren)	\$252	\$259	\$287	\$346	\$394	\$431	\$490	\$533	\$619	\$693	\$766	\$836	
	Family	\$412	\$420	\$468	\$560	\$640	\$686	\$808	\$895	\$991	\$1,139	\$1,248	\$1,363	
<b>\$1,000 Deductible</b>	Individual Only	\$135	\$138	\$154	\$175	\$200	\$218	\$271	\$323	\$387	\$463	\$531	\$580	
	Individual + Spouse	\$271	\$277	\$315	\$368	\$419	\$447	\$541	\$644	\$774	\$927	\$1,063	\$1,162	
	Individual & Child(ren)	\$236	\$242	\$269	\$324	\$369	\$404	\$459	\$499	\$580	\$649	\$718	\$783	
	Family	\$386	\$393	\$438	\$525	\$599	\$643	\$756	\$839	\$928	\$1,067	\$1,169	\$1,277	
<b>\$2,500 Deductible</b>	Individual Only	\$108	\$110	\$123	\$140	\$161	\$175	\$217	\$259	\$310	\$371	\$425	\$465	
	Individual + Spouse	\$217	\$222	\$253	\$295	\$335	\$358	\$434	\$516	\$620	\$743	\$852	\$931	
	Individual & Child(ren)	\$189	\$194	\$216	\$260	\$296	\$323	\$368	\$400	\$465	\$520	\$575	\$628	
	Family	\$309	\$315	\$351	\$420	\$480	\$515	\$606	\$672	\$744	\$855	\$937	\$1,023	
<b>\$5,000 Deductible</b>	Individual Only	\$88	\$90	\$101	\$115	\$131	\$143	\$177	\$212	\$254	\$304	\$348	\$380	
	Individual + Spouse	\$177	\$181	\$207	\$241	\$274	\$293	\$355	\$422	\$507	\$607	\$696	\$761	
	Individual & Child(ren)	\$155	\$159	\$176	\$213	\$242	\$264	\$301	\$327	\$380	\$425	\$470	\$513	
	Family	\$253	\$258	\$287	\$344	\$393	\$421	\$496	\$550	\$608	\$699	\$766	\$837	
<b>\$7,500 Deductible</b>	Individual Only	\$75	\$76	\$85	\$97	\$111	\$121	\$150	\$179	\$215	\$257	\$294	\$322	
	Individual + Spouse	\$150	\$153	\$175	\$204	\$232	\$248	\$300	\$357	\$429	\$514	\$589	\$644	
	Individual & Child(ren)	\$131	\$134	\$149	\$180	\$205	\$224	\$255	\$277	\$322	\$360	\$398	\$434	
	Family	\$214	\$218	\$243	\$291	\$332	\$356	\$419	\$465	\$515	\$592	\$648	\$708	
<b>\$10,000 Deductible</b>	Individual Only	\$67	\$68	\$77	\$87	\$100	\$109	\$135	\$161	\$193	\$231	\$264	\$289	
	Individual + Spouse	\$135	\$138	\$157	\$183	\$208	\$223	\$269	\$321	\$386	\$461	\$529	\$578	
	Individual & Child(ren)	\$118	\$121	\$134	\$162	\$184	\$201	\$229	\$249	\$289	\$323	\$357	\$390	
	Family	\$192	\$196	\$218	\$261	\$298	\$320	\$377	\$418	\$462	\$531	\$582	\$636	

## Clear Premier POS Plans

		Age:	0-17	18-20	21-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65+
<b>\$500 Deductible</b>	Individual Only	\$150	\$153	\$172	\$195	\$223	\$243	\$302	\$360	\$431	\$516	\$591	\$646	
	Individual + Spouse	\$302	\$308	\$352	\$410	\$466	\$498	\$603	\$718	\$863	\$1,033	\$1,185	\$1,294	
	Individual & Child(ren)	\$263	\$270	\$300	\$362	\$412	\$450	\$511	\$556	\$646	\$723	\$800	\$873	
	Family	\$430	\$438	\$488	\$585	\$668	\$716	\$843	\$935	\$1,035	\$1,190	\$1,303	\$1,423	
<b>\$1,000 Deductible</b>	Individual Only	\$140	\$143	\$160	\$182	\$209	\$227	\$282	\$337	\$404	\$483	\$553	\$605	
	Individual + Spouse	\$282	\$288	\$329	\$383	\$436	\$466	\$564	\$672	\$807	\$966	\$1,108	\$1,211	
	Individual & Child(ren)	\$246	\$252	\$280	\$338	\$385	\$421	\$478	\$520	\$605	\$676	\$748	\$816	
	Family	\$402	\$410	\$457	\$547	\$625	\$670	\$788	\$874	\$968	\$1,113	\$1,219	\$1,331	
<b>\$1,500 Deductible</b>	Individual Only	\$135	\$138	\$154	\$175	\$200	\$218	\$271	\$323	\$387	\$463	\$531	\$580	
	Individual + Spouse	\$271	\$277	\$315	\$368	\$419	\$447	\$541	\$644	\$774	\$927	\$1,063	\$1,162	
	Individual & Child(ren)	\$236	\$242	\$269	\$324	\$369	\$404	\$459	\$499	\$580	\$649	\$718	\$783	
	Family	\$386	\$393	\$438	\$525	\$599	\$643	\$756	\$839	\$928	\$1,067	\$1,169	\$1,277	
<b>\$2,500 Deductible</b>	Individual Only	\$113	\$116	\$129	\$147	\$168	\$183	\$227	\$271	\$325	\$389	\$446	\$487	
	Individual + Spouse	\$227	\$232	\$265	\$309	\$352	\$375	\$455	\$541	\$650	\$779	\$893	\$976	
	Individual & Child(ren)	\$198	\$203	\$226	\$272	\$310	\$339	\$386	\$419	\$487	\$545	\$603	\$658	
	Family	\$324	\$330	\$368	\$441	\$504	\$540	\$635	\$704	\$780	\$897	\$982	\$1,072	

## Clear Savings (HSA-Qualified) PPO Plans

		Age:	0-17	18-20	21-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65+
<b>\$1,500 Deductible</b>	Individual Only		\$114	\$116	\$130	\$148	\$170	\$185	\$229	\$273	\$328	\$392	\$449	\$491
	Individual + Spouse		\$229	\$234	\$267	\$311	\$354	\$378	\$458	\$545	\$655	\$785	\$900	\$983
	Individual & Child(ren)		\$200	\$205	\$228	\$275	\$313	\$342	\$388	\$423	\$491	\$549	\$607	\$663
	Family		\$326	\$333	\$371	\$444	\$507	\$544	\$640	\$710	\$786	\$903	\$990	\$1,081
<b>\$2,500 Deductible</b>	Individual Only		\$97	\$100	\$111	\$127	\$145	\$158	\$196	\$234	\$280	\$335	\$384	\$420
	Individual + Spouse		\$196	\$200	\$228	\$266	\$303	\$324	\$392	\$466	\$561	\$671	\$769	\$841
	Individual & Child(ren)		\$171	\$175	\$195	\$235	\$267	\$292	\$332	\$361	\$420	\$470	\$519	\$567
	Family		\$279	\$285	\$317	\$380	\$434	\$465	\$548	\$607	\$672	\$773	\$846	\$924
<b>\$3,500 Deductible</b>	Individual Only		\$102	\$104	\$117	\$133	\$152	\$165	\$205	\$245	\$293	\$351	\$402	\$439
	Individual + Spouse		\$205	\$210	\$239	\$279	\$317	\$339	\$410	\$488	\$587	\$702	\$805	\$880
	Individual & Child(ren)		\$179	\$183	\$204	\$246	\$280	\$306	\$348	\$378	\$439	\$492	\$544	\$594
	Family		\$292	\$298	\$332	\$398	\$454	\$487	\$573	\$635	\$703	\$809	\$886	\$967
<b>\$5,500 Deductible</b>	Individual Only		\$83	\$85	\$95	\$108	\$123	\$134	\$167	\$199	\$238	\$285	\$327	\$357
	Individual + Spouse		\$167	\$170	\$194	\$226	\$258	\$275	\$333	\$397	\$477	\$571	\$655	\$715
	Individual & Child(ren)		\$145	\$149	\$166	\$200	\$227	\$249	\$283	\$307	\$357	\$400	\$442	\$482
	Family		\$238	\$242	\$270	\$323	\$369	\$396	\$466	\$516	\$572	\$657	\$720	\$786

## Clear Quality POS Plan

		Age:	0-17	18-20	21-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65+
<b>\$2,500 Deductible</b>	Individual Only		\$93	\$95	\$107	\$121	\$139	\$151	\$188	\$224	\$269	\$322	\$368	\$402
	Individual + Spouse		\$188	\$192	\$219	\$255	\$290	\$310	\$375	\$447	\$537	\$643	\$738	\$806
	Individual & Child(ren)		\$164	\$168	\$187	\$225	\$256	\$280	\$318	\$346	\$402	\$450	\$498	\$544
	Family		\$268	\$273	\$304	\$364	\$416	\$446	\$525	\$582	\$644	\$741	\$811	\$886

## Clear Value POS Plan

		Age:	0-17	18-20	21-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65+
<b>\$5,000 Deductible</b>	Individual Only		\$89	\$91	\$102	\$116	\$133	\$145	\$180	\$215	\$257	\$308	\$353	\$385
	Individual + Spouse		\$180	\$184	\$210	\$244	\$278	\$297	\$360	\$428	\$515	\$616	\$706	\$772
	Individual & Child(ren)		\$157	\$161	\$179	\$216	\$245	\$268	\$305	\$332	\$385	\$431	\$477	\$521
	Family		\$256	\$261	\$291	\$349	\$398	\$427	\$503	\$557	\$617	\$709	\$777	\$848

## Clear & Simple POS Plan

		Age:	0-17	18-20	21-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65+
<b>\$10,000 Deductible</b>	Individual Only		\$48	\$49	\$55	\$63	\$72	\$79	\$97	\$116	\$139	\$167	\$191	\$209
	Individual + Spouse		\$97	\$100	\$113	\$132	\$151	\$161	\$195	\$232	\$279	\$333	\$382	\$418
	Individual & Child(ren)		\$85	\$87	\$97	\$117	\$133	\$145	\$165	\$180	\$209	\$233	\$258	\$282
	Family		\$139	\$141	\$158	\$189	\$216	\$231	\$272	\$302	\$334	\$384	\$421	\$459



# OREGON INDIVIDUAL RATES

Effective February 1, 2009 - April 30, 2009

Rates apply to the following counties in Oregon: Benton, Crook, Deschutes, Grant, Hood River, Jefferson, Linn, Marion, Polk, Sherman, Wasco, Wheeler, Klamath (only zip codes 97731, 97733, 97737), Lake (only zip codes 97735, 97638, 97641).

## Clear Access PPO Plans

		Age: 0-17	18-20	21-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65+
<b>\$500 Deductible</b>	Individual Only	\$140	\$143	\$159	\$182	\$207	\$226	\$281	\$335	\$402	\$482	\$552	\$603
	Individual + Spouse	\$281	\$287	\$327	\$381	\$435	\$464	\$561	\$670	\$804	\$963	\$1,102	\$1,204
	Individual & Child(ren)	\$246	\$250	\$279	\$336	\$383	\$419	\$477	\$518	\$603	\$673	\$745	\$813
	Family	\$400	\$408	\$454	\$545	\$622	\$668	\$784	\$871	\$963	\$1,107	\$1,213	\$1,325
<b>\$1,000 Deductible</b>	Individual Only	\$131	\$134	\$149	\$170	\$194	\$212	\$263	\$314	\$376	\$451	\$517	\$565
	Individual + Spouse	\$263	\$269	\$306	\$357	\$408	\$435	\$526	\$627	\$753	\$902	\$1,032	\$1,128
	Individual & Child(ren)	\$230	\$234	\$261	\$315	\$358	\$393	\$447	\$485	\$565	\$630	\$697	\$762
	Family	\$375	\$382	\$426	\$511	\$582	\$626	\$735	\$815	\$902	\$1,037	\$1,137	\$1,241
<b>\$2,500 Deductible</b>	Individual Only	\$105	\$108	\$120	\$136	\$156	\$170	\$211	\$251	\$302	\$361	\$414	\$452
	Individual + Spouse	\$211	\$215	\$245	\$286	\$327	\$348	\$421	\$503	\$603	\$723	\$827	\$904
	Individual & Child(ren)	\$184	\$188	\$209	\$253	\$287	\$315	\$358	\$389	\$452	\$505	\$559	\$610
	Family	\$300	\$306	\$341	\$409	\$467	\$501	\$589	\$653	\$723	\$831	\$911	\$994
<b>\$5,000 Deductible</b>	Individual Only	\$86	\$88	\$98	\$112	\$127	\$139	\$172	\$206	\$247	\$296	\$339	\$370
	Individual + Spouse	\$172	\$176	\$201	\$234	\$267	\$285	\$344	\$411	\$493	\$591	\$676	\$739
	Individual & Child(ren)	\$151	\$154	\$171	\$206	\$235	\$257	\$293	\$318	\$370	\$413	\$457	\$499
	Family	\$246	\$251	\$279	\$335	\$382	\$410	\$482	\$534	\$591	\$679	\$745	\$813
<b>\$7,500 Deductible</b>	Individual Only	\$73	\$75	\$83	\$94	\$108	\$118	\$146	\$174	\$209	\$250	\$287	\$313
	Individual + Spouse	\$146	\$149	\$170	\$198	\$226	\$241	\$292	\$348	\$417	\$500	\$572	\$625
	Individual & Child(ren)	\$128	\$130	\$145	\$175	\$199	\$218	\$248	\$269	\$313	\$350	\$387	\$422
	Family	\$208	\$212	\$236	\$283	\$323	\$347	\$407	\$452	\$500	\$575	\$630	\$688
<b>\$10,000 Deductible</b>	Individual Only	\$65	\$67	\$74	\$85	\$97	\$106	\$131	\$156	\$187	\$225	\$257	\$281
	Individual + Spouse	\$131	\$134	\$152	\$178	\$203	\$216	\$262	\$312	\$375	\$449	\$514	\$561
	Individual & Child(ren)	\$115	\$117	\$130	\$157	\$178	\$196	\$222	\$242	\$281	\$314	\$347	\$379
	Family	\$187	\$190	\$212	\$254	\$290	\$312	\$366	\$406	\$449	\$516	\$566	\$618

## Clear Premier POS Plans

		Age: 0-17	18-20	21-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65+
<b>\$500 Deductible</b>	Individual Only	\$146	\$150	\$166	\$190	\$216	\$236	\$293	\$350	\$419	\$503	\$576	\$629
	Individual + Spouse	\$293	\$300	\$341	\$398	\$454	\$484	\$586	\$699	\$839	\$1,005	\$1,150	\$1,257
	Individual & Child(ren)	\$256	\$261	\$291	\$351	\$399	\$438	\$498	\$541	\$629	\$702	\$777	\$849
	Family	\$418	\$426	\$474	\$569	\$649	\$697	\$819	\$909	\$1,005	\$1,155	\$1,267	\$1,383
<b>\$1,000 Deductible</b>	Individual Only	\$137	\$140	\$156	\$177	\$202	\$221	\$274	\$327	\$392	\$470	\$539	\$588
	Individual + Spouse	\$274	\$280	\$319	\$372	\$425	\$453	\$548	\$654	\$785	\$940	\$1,076	\$1,175
	Individual & Child(ren)	\$240	\$244	\$272	\$328	\$374	\$409	\$465	\$506	\$588	\$657	\$727	\$794
	Family	\$391	\$399	\$444	\$532	\$607	\$652	\$766	\$850	\$940	\$1,080	\$1,185	\$1,294
<b>\$1,500 Deductible</b>	Individual Only	\$131	\$134	\$149	\$170	\$194	\$212	\$263	\$314	\$376	\$451	\$517	\$565
	Individual + Spouse	\$263	\$269	\$306	\$357	\$408	\$435	\$526	\$627	\$753	\$902	\$1,032	\$1,128
	Individual & Child(ren)	\$230	\$234	\$261	\$315	\$358	\$393	\$447	\$485	\$565	\$630	\$697	\$762
	Family	\$375	\$382	\$426	\$511	\$582	\$626	\$735	\$815	\$902	\$1,037	\$1,137	\$1,241
<b>\$2,500 Deductible</b>	Individual Only	\$110	\$113	\$125	\$143	\$163	\$178	\$221	\$263	\$316	\$379	\$434	\$474
	Individual + Spouse	\$221	\$226	\$257	\$300	\$342	\$365	\$442	\$527	\$632	\$758	\$867	\$947
	Individual & Child(ren)	\$193	\$197	\$220	\$265	\$301	\$330	\$375	\$408	\$474	\$529	\$586	\$640
	Family	\$315	\$321	\$358	\$429	\$489	\$526	\$617	\$685	\$758	\$871	\$955	\$1,043

## Clear Savings (HSA-Qualified) PPO Plans

		Age: 0-17	18-20	21-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65+
<b>\$1,500 Deductible</b>	Individual Only	\$111	\$114	\$126	\$144	\$164	\$180	\$222	\$265	\$319	\$382	\$437	\$478
	Individual + Spouse	\$222	\$228	\$259	\$302	\$345	\$368	\$445	\$531	\$637	\$764	\$874	\$954
	Individual & Child(ren)	\$195	\$198	\$221	\$267	\$303	\$332	\$378	\$411	\$478	\$533	\$590	\$645
	Family	\$317	\$324	\$360	\$432	\$493	\$530	\$622	\$690	\$764	\$877	\$962	\$1,051
<b>\$2,500 Deductible</b>	Individual Only	\$95	\$97	\$108	\$123	\$141	\$154	\$190	\$227	\$272	\$326	\$374	\$409
	Individual + Spouse	\$190	\$195	\$222	\$258	\$295	\$315	\$381	\$454	\$545	\$653	\$747	\$816
	Individual & Child(ren)	\$166	\$170	\$189	\$228	\$259	\$284	\$323	\$351	\$409	\$456	\$505	\$551
	Family	\$271	\$277	\$308	\$370	\$422	\$453	\$532	\$590	\$653	\$750	\$823	\$898
<b>\$3,500 Deductible</b>	Individual Only	\$100	\$102	\$113	\$129	\$147	\$161	\$199	\$238	\$285	\$342	\$392	\$428
	Individual + Spouse	\$199	\$204	\$232	\$270	\$309	\$329	\$398	\$475	\$570	\$683	\$782	\$854
	Individual & Child(ren)	\$174	\$178	\$198	\$239	\$272	\$298	\$338	\$368	\$428	\$478	\$528	\$577
	Family	\$284	\$290	\$323	\$387	\$441	\$474	\$557	\$618	\$683	\$785	\$861	\$940
<b>\$5,500 Deductible</b>	Individual Only	\$81	\$83	\$92	\$105	\$120	\$131	\$162	\$193	\$232	\$278	\$318	\$348
	Individual + Spouse	\$162	\$166	\$189	\$220	\$251	\$268	\$324	\$386	\$464	\$556	\$636	\$694
	Individual & Child(ren)	\$142	\$144	\$161	\$194	\$221	\$242	\$275	\$299	\$348	\$388	\$430	\$469
	Family	\$231	\$235	\$262	\$315	\$359	\$385	\$453	\$502	\$556	\$638	\$700	\$764

## Clear Quality POS Plan

		Age: 0-17	18-20	21-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65+
<b>\$2,500 Deductible</b>	Individual Only	\$91	\$93	\$104	\$118	\$135	\$147	\$182	\$218	\$261	\$313	\$359	\$392
	Individual + Spouse	\$182	\$187	\$212	\$248	\$283	\$302	\$365	\$435	\$522	\$626	\$716	\$782
	Individual & Child(ren)	\$160	\$163	\$181	\$219	\$249	\$273	\$310	\$337	\$392	\$437	\$484	\$529
	Family	\$260	\$265	\$295	\$354	\$404	\$434	\$510	\$566	\$626	\$719	\$789	\$861

## Clear Value POS Plan

		Age: 0-17	18-20	21-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65+
<b>\$5,000 Deductible</b>	Individual Only	\$87	\$89	\$99	\$113	\$129	\$141	\$175	\$208	\$250	\$300	\$343	\$375
	Individual + Spouse	\$175	\$179	\$203	\$237	\$271	\$289	\$349	\$417	\$500	\$600	\$686	\$749
	Individual & Child(ren)	\$153	\$156	\$174	\$209	\$238	\$261	\$297	\$323	\$375	\$419	\$464	\$506
	Family	\$249	\$254	\$283	\$339	\$387	\$416	\$488	\$542	\$600	\$689	\$755	\$825

## Clear & Simple POS Plan

		Age: 0-17	18-20	21-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65+
<b>\$10,000 Deductible</b>	Individual Only	\$47	\$48	\$54	\$61	\$70	\$76	\$95	\$113	\$135	\$162	\$186	\$203
	Individual + Spouse	\$95	\$97	\$110	\$128	\$147	\$156	\$189	\$226	\$271	\$325	\$371	\$406
	Individual & Child(ren)	\$83	\$84	\$94	\$113	\$129	\$141	\$161	\$175	\$203	\$227	\$251	\$274
	Family	\$135	\$138	\$153	\$184	\$210	\$225	\$264	\$293	\$325	\$373	\$409	\$447