

Iowa Comprehensive Health Association (HIPIOWA)
2017 Monthly Individual Premium Rates - effective 1/1/2017
Medicare Carveout Plan \$1,000 Deductible
Without Prescription Drug Benefits¹

| Rate Class Age \ Gender | Non Tobacco User | | Tobacco User | |
|----------------------------|------------------|----------|--------------|----------|
| | Male | Female | Male | Female |
| 0 - 17 | \$98.10 | \$108.37 | \$113.31 | \$125.17 |
| 18 | \$103.14 | \$122.91 | \$119.13 | \$141.96 |
| 19 | \$108.18 | \$137.46 | \$124.95 | \$158.76 |
| 20 | \$113.41 | \$151.99 | \$130.99 | \$175.56 |
| 21 | \$118.45 | \$166.54 | \$136.81 | \$192.36 |
| 22 | \$123.49 | \$181.08 | \$142.63 | \$209.14 |
| 23 | \$125.43 | \$185.53 | \$144.87 | \$214.29 |
| 24 | \$127.77 | \$190.77 | \$147.57 | \$220.33 |
| 25 | \$129.90 | \$195.81 | \$150.03 | \$226.15 |
| 26 | \$131.44 | \$198.91 | \$151.81 | \$229.74 |
| 27 | \$132.03 | \$198.91 | \$152.49 | \$229.74 |
| 28 | \$134.94 | \$205.51 | \$156.12 | \$237.78 |
| 29 | \$137.07 | \$208.99 | \$158.86 | \$242.22 |
| 30 | \$138.61 | \$210.73 | \$160.93 | \$244.66 |
| 31 | \$139.98 | \$211.90 | \$162.79 | \$246.45 |
| 32 | \$141.72 | \$213.84 | \$165.10 | \$249.12 |
| 33 | \$145.02 | \$219.66 | \$169.24 | \$256.35 |
| 34 | \$148.32 | \$225.28 | \$173.38 | \$263.35 |
| 35 | \$151.60 | \$230.71 | \$177.52 | \$270.16 |
| 36 | \$155.29 | \$236.71 | \$182.16 | \$277.66 |
| 37 | \$159.36 | \$243.51 | \$187.24 | \$286.12 |
| 38 | \$165.57 | \$246.99 | \$194.71 | \$290.46 |
| 39 | \$171.78 | \$251.46 | \$202.18 | \$295.96 |
| 40 | \$178.56 | \$256.50 | \$210.34 | \$302.16 |
| 41 | \$185.73 | \$261.15 | \$218.97 | \$307.89 |
| 42 | \$193.87 | \$265.21 | \$228.78 | \$312.96 |
| 43 | \$199.11 | \$271.03 | \$235.35 | \$320.37 |
| 44 | \$205.51 | \$276.27 | \$243.33 | \$327.10 |
| 45 | \$212.29 | \$281.31 | \$251.77 | \$333.63 |
| 46 | \$219.27 | \$286.54 | \$260.49 | \$340.41 |
| 47 | \$225.67 | \$292.17 | \$268.56 | \$347.68 |
| 48 | \$233.23 | \$295.47 | \$278.49 | \$352.78 |
| 49 | \$240.60 | \$299.14 | \$288.24 | \$358.38 |
| 50 | \$247.77 | \$303.03 | \$297.82 | \$364.24 |
| 51 | \$255.33 | \$306.70 | \$307.93 | \$369.88 |
| 52 | \$263.08 | \$309.61 | \$318.33 | \$374.64 |
| 53 | \$272.59 | \$316.02 | \$330.93 | \$383.65 |
| 54 | \$282.09 | \$321.84 | \$343.59 | \$391.99 |
| 55 | \$291.97 | \$327.25 | \$356.79 | \$399.90 |
| 56 | \$302.25 | \$333.07 | \$370.56 | \$408.34 |
| 57 | \$313.11 | \$339.87 | \$385.12 | \$418.03 |
| 58 | \$330.16 | \$345.48 | \$406.11 | \$424.93 |
| 59 | \$347.43 | \$351.88 | \$427.33 | \$432.82 |
| 60 | \$365.26 | \$358.66 | \$449.28 | \$441.16 |
| 61 | \$384.64 | \$365.65 | \$473.11 | \$449.76 |
| 62 | \$406.17 | \$372.43 | \$499.59 | \$458.10 |
| 63 | \$425.74 | \$379.21 | \$523.66 | \$466.44 |
| 64 | \$446.29 | \$386.40 | \$548.94 | \$475.27 |

Age/Rate is calculated as age upon enrollment, then attained age on January 1st.

¹This plan covers Drugs that are covered by Medicare Parts A or B only. There are no regular Prescription Drug Benefits.