

Monthly & EFT Base Rates

(All rates based on age last birthday)

		100% / 75%										80% / 50%												
		\$1,050 Ded.*		\$1,500 Ded.*		\$2,100 Ded.*		\$2,700 Ded.*		\$3,500 Ded.*		\$5,000 Ded.*		\$1,050 Ded.*		\$1,500 Ded.*		\$2,100 Ded.*		\$2,700 Ded.*		\$3,500 Ded.*		
Age		Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Age	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
18-24		60.55	97.28	48.76	80.98	40.96	68.02	35.60	59.12	30.23	50.21	25.36	42.11	18-24	55.71	89.50	44.86	74.50	37.68	62.58	32.75	54.39	27.81	46.19
25		64.52	100.26	51.37	83.59	43.15	70.22	37.50	61.02	31.85	51.83	26.71	43.47	25	59.36	92.24	47.26	76.91	39.70	64.60	34.50	56.14	29.30	47.68
26		67.50	104.23	54.86	87.08	46.08	73.14	40.05	63.57	34.01	53.99	28.53	45.28	26	62.10	95.89	50.47	80.11	42.39	67.29	36.84	58.48	31.29	49.67
27		71.47	107.21	57.47	90.56	48.28	76.07	41.95	66.11	35.63	56.15	29.88	47.09	27	65.75	98.63	52.87	83.31	44.41	69.98	38.60	60.82	32.78	51.65
28		73.46	112.17	60.08	94.91	50.47	79.73	43.86	69.29	37.25	58.85	31.24	49.35	28	67.58	103.20	55.28	87.32	46.43	73.35	40.35	63.74	34.27	54.14
29		77.43	115.15	63.57	98.40	53.40	82.65	46.40	71.83	39.41	61.01	33.05	51.17	29	71.23	105.94	58.48	90.52	49.12	76.04	42.69	66.08	36.26	56.13
30		81.40	120.11	66.18	103.62	55.59	87.04	48.31	75.64	41.03	64.24	34.41	53.88	30	74.89	110.50	60.88	95.33	51.14	80.08	44.45	69.59	37.75	59.11
31		84.38	125.08	69.66	107.97	58.52	90.70	50.85	78.82	43.19	66.94	36.22	56.15	31	77.63	115.07	64.09	99.34	53.83	83.44	46.78	72.52	39.73	61.59
32		88.35	130.04	73.14	112.33	61.44	94.36	53.40	82.00	45.35	69.64	38.03	58.41	32	81.28	119.64	67.29	103.34	56.53	86.81	49.12	75.44	41.72	64.07
33		92.32	135.00	77.50	117.55	65.10	98.74	56.57	85.81	48.05	72.88	40.30	61.13	33	84.93	124.20	71.30	108.15	59.89	90.84	52.05	78.95	44.20	67.05
34		96.29	139.97	81.85	122.78	68.76	103.13	59.75	89.63	50.75	76.12	42.56	63.84	34	88.59	128.77	75.30	112.96	63.25	94.88	54.97	82.46	46.69	70.03
35		101.25	144.93	86.21	128.00	72.41	107.52	62.93	93.44	53.45	79.36	44.83	66.56	35	93.15	133.34	79.31	117.76	66.62	98.92	57.90	85.97	49.17	73.01
36		106.22	149.89	91.43	133.23	76.80	111.91	66.74	97.26	56.69	82.60	47.54	69.28	36	97.72	137.90	84.12	122.57	70.66	102.96	61.40	89.47	52.15	75.99
37		113.16	155.85	97.53	139.32	81.92	117.03	71.19	101.70	60.47	86.38	50.71	72.45	37	104.11	143.38	89.72	128.18	75.37	107.67	65.50	93.57	55.63	79.47
38		119.12	160.81	103.62	145.42	87.04	122.15	75.64	106.15	64.24	90.16	53.88	75.62	38	109.59	147.95	95.33	133.78	80.08	112.38	69.59	97.66	59.11	82.95
39		125.08	167.76	109.72	151.51	92.16	127.27	80.09	110.60	68.02	93.94	57.05	78.79	39	115.07	154.34	100.94	139.39	84.79	117.09	73.69	101.76	62.58	86.42
40		131.03	172.72	115.81	156.74	97.28	131.66	84.54	114.42	71.80	97.18	60.22	81.50	40	120.55	158.91	106.55	144.20	89.50	121.13	77.78	105.26	66.06	89.40
41		137.98	179.67	122.78	162.83	103.13	136.78	89.63	118.87	76.12	100.96	63.84	84.67	41	126.94	165.30	112.96	149.81	94.88	125.84	82.46	109.36	70.03	92.88
42		143.94	184.64	130.61	170.67	109.72	143.36	95.35	124.59	80.98	105.81	67.92	88.75	42	132.42	169.87	120.17	157.02	100.94	131.89	87.72	114.62	74.50	97.35
43		150.89	190.59	139.32	178.51	117.03	149.95	101.70	130.31	86.38	110.67	72.45	92.82	43	138.81	175.34	128.18	164.23	107.67	137.95	93.57	119.88	79.47	101.82
44		159.82	196.55	148.03	184.60	124.34	155.07	108.06	134.76	91.78	114.45	76.98	95.99	44	147.03	180.82	136.19	169.83	114.40	142.66	99.42	123.98	84.44	105.30
45		168.75	202.50	157.61	190.70	132.39	160.19	115.05	139.21	97.72	118.23	81.96	99.16	45	155.25	186.30	145.00	175.44	121.80	147.37	105.85	128.07	89.90	108.77
46		177.69	209.45	167.19	198.53	140.44	166.77	122.05	144.93	103.66	123.09	86.94	103.24	46	163.47	192.70	153.81	182.65	129.20	153.43	112.28	133.34	95.36	113.24
47		187.61	216.40	176.76	205.50	148.48	172.62	129.04	150.01	109.59	127.41	91.92	106.86	47	172.61	199.09	162.62	189.06	136.60	158.81	118.72	138.01	100.83	117.22
48		197.54	222.36	186.34	211.60	156.53	177.74	136.03	154.46	115.53	131.19	96.90	110.03	48	181.74	204.57	171.44	194.67	144.01	163.52	125.15	142.11	106.29	120.69
49		210.45	230.30	198.53	219.43	166.77	184.32	144.93	160.19	123.09	136.05	103.24	114.10	49	193.61	211.88	182.65	201.88	153.43	169.58	133.34	147.37	113.24	125.16
50		225.34	239.23	213.34	229.01	179.20	192.37	155.74	167.18	132.27	141.99	110.94	119.09	50	207.31	220.09	196.27	210.69	164.87	176.98	143.28	153.80	121.69	130.63
51		241.22	250.15	229.01	240.33	192.37	201.88	167.18	175.44	141.99	149.00	119.09	124.97	51	221.92	230.14	210.69	221.10	176.98	185.73	153.80	161.41	130.63	137.08
52		257.10	260.08	244.68	249.91	205.53	209.92	178.62	182.43	151.70	154.94	127.24	129.95	52	236.53	239.27	225.11	229.92	189.09	193.13	164.33	167.84	139.57	142.55
53		273.98	268.02	262.97	258.62	220.89	217.24	191.97	188.79	163.04	160.34	136.74	134.48	53	252.06	246.58	241.93	237.93	203.22	199.86	176.61	173.69	150.00	147.51
54		291.84	276.95	280.39	267.32	235.52	224.55	204.68	195.15	173.84	165.74	145.80	139.01	54	268.50	254.80	257.95	245.94	216.68	206.59	188.31	179.53	159.93	152.48
55		309.71	285.89	297.80	276.03	250.15	231.87	217.39	201.50	184.64	171.14	154.86	143.54	55	284.94	263.02	273.98	253.95	230.14	213.32	200.00	185.38	169.87	157.45
56		326.59	294.82	315.22	284.74	264.78	239.18	230.11	207.86	195.43	176.54	163.91	148.06	56	300.46	271.24	290.00	261.96	243.60	220.05	211.70	191.23	179.80	162.42
57		342.47	302.76	332.63	294.32	279.41	247.23	242.82	214.85	206.23	182.48	172.97	153.05	57	315.07	278.54	306.02	270.77	257.06	227.45	223.39	197.66	189.73	167.88
58		360.34	313.68	350.05	303.90	294.04	255.27	255.53	221.84	217.03	188.42	182.02	158.03	58	331.51	288.59	322.04	279.58	270.52	234.85	235.09	204.10	199.67	173.34
59		377.21	324.60	366.59	314.34	307.94	264.05	267.61	229.47	227.29	194.89	190.63	163.46	59	347.04	298.63	337.26	289.20	283.30	242.93	246.20	211.11	209.10	179.30
60		392.10	333.54	381.39	323.92	320.37	272.10	278.42	236.46	236.46	200.83	198.32	168.44	60	360.74	306.85	350.88	298.01	294.74	250.33	256.14	217.55	217.55	184.77
61		408.98	344.46	397.94	334.37	334.27	280.87	290.49	244.09	246.72	207.31	206.93	173.87	61	376.26	316.90	366.10	307.62	307.53	258.40	267.26	224.56	226.98	190.73
62		424.86	354.38	413.61	344.82	347.43	289.65	301.94	251.72	256.44	213.79	215.08	179.31	62	390.87	326.03	380.52	317.24	319.64	266.48	277.78	231.58	235.92	196.69
63		440.74	366.29	429.29	356.14	360.60	299.16	313.38	259.98	266.16	220.81	223.23	185.19	63	405.49	336.99	394.94	327.65	331.75	275.23	288.31	239.18	244.86	203.14
64		455.63	377.21	443.22	366.59	372.30	307.94	323.55	267.61	274.79	227.29	230.47	190.63	64	419.18	347.04	407.76	337.26	342.52	283.30	297.66	246.20	252.81	209.10
Key Child		61.55	61.55	53.99	53.99	45.35	45.35	39.41	39.41	33.47	33.47	28.07	28.07	Key Child	56.62	56.62	49.67	49.67	41.72	41.72	36.26	36.26	30.79	30.79
**Child Dep.		63.45	63.45	55.66	55.66	46.75	46.75	40.63	40.63	34.51	34.51	28.94	28.94	**Child Dep.	58.37	58.37	51.20	51.20	43.01	43.01	37.38	37.38	31.75	31.75

Premium Guarantee

American Community guarantees your rate to be level for the first 12 months of coverage under this policy. The premium may be adjusted to reflect requested policy changes which would include an address change.

* Out-of-Network Deductible 2x In-Network Deductible shown above.

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County	Area Factor	Network Factors	
		SuperMed Factor	PHCS Factor
Adams	0.90	1.114	1.102
Allen	0.90	1.107	1.107
Ashland	0.95	1.088	1.102
Ashtabula	0.90	0.919	1.139
Athens	0.90	1.088	1.102
Auglaize	0.90	1.107	1.107
Belmont	0.90	1.111	1.111
Brown	0.95	0.985	1.090
Butler	1.05	1.034	1.090
Carroll	0.86	0.955	1.101
Champaign	0.90	1.114	1.102
Clark	1.00	1.049	1.074
Clermont	1.05	0.985	1.090
Clinton	0.90	1.114	1.102
Columbiana	0.82	1.002	1.105
Coshocton	0.95	1.071	1.102
Crawford	0.90	1.101	1.101
Cuyahoga	1.05	0.919	1.139
Darke	0.90	1.114	1.102
Defiance	0.95	1.074	1.102
Delaware	0.95	0.926	1.138
Erie	1.28	1.020	1.104
Fairfield	0.90	0.926	1.138
Fayette	0.90	1.114	1.102
Franklin	0.95	0.926	1.138
Fulton	1.10	0.846	1.070
Gallia	0.90	1.088	1.102
Geauga	0.95	0.919	1.139
Greene	0.95	1.049	1.074
Guernsey	0.95	1.071	1.102
Hamilton	1.00	0.985	1.090
Hancock	0.95	1.074	1.102
Hardin	0.95	1.074	1.102
Harrison	0.95	1.071	1.102
Henry	0.95	1.074	1.102

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3

County	Area Factor	Network Factors	
		SuperMed Factor	PHCS Factor
Highland	0.90	1.114	1.102
Hocking	0.90	1.088	1.102
Holmes	0.95	1.071	1.102
Huron	1.00	1.074	1.102
Jackson	0.90	1.088	1.102
Jefferson	0.90	0.909	1.102
Knox	0.90	1.088	1.102
Lake	0.95	0.919	1.139
Lawrence	1.00	1.148	1.074
Licking	0.95	0.926	1.138
Logan	0.95	1.074	1.102
Lorain	0.95	0.919	1.139
Lucas	1.34	0.846	1.070
Madison	0.95	0.926	1.138
Mahoning	0.82	1.002	1.105
Marion	0.90	1.088	1.102
Medina	1.05	0.919	1.139
Meigs	0.90	1.088	1.102
Mercer	0.95	1.074	1.102
Miami	0.95	1.049	1.074
Monroe	0.95	1.071	1.102
Montgomery	1.16	1.049	1.074
Morgan	0.95	1.071	1.102
Morrow	0.90	1.088	1.102
Muskingum	1.05	1.071	1.102
Noble	0.95	1.071	1.102
Ottawa	0.95	1.020	1.104
Paulding	0.95	1.074	1.102
Perry	0.95	1.088	1.102
Pickaway	0.90	0.926	1.138
Pike	0.90	1.088	1.102
Portage	1.00	0.920	1.080
Preble	0.90	1.114	1.102
Putnam	0.95	1.074	1.102

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County	Area Factor	Network Factors	
		SuperMed Factor	PHCS Factor
Richland	0.90	1.101	1.101
Ross	0.90	1.088	1.102
Sandusky	1.05	1.020	1.104
Scioto	0.90	1.088	1.102
Seneca	1.00	1.074	1.102
Shelby	0.95	1.074	1.102
Stark	0.86	0.955	1.101
Summit	0.95	0.920	1.080
Trumbull	0.90	1.002	1.105
Tuscarawas	0.95	1.071	1.102
Union	0.90	1.088	1.102
Van Wert	0.95	1.074	1.102
Vinton	0.90	1.088	1.102
Warren	0.95	0.985	1.090
Washington	0.90	1.097	1.097
Wayne	0.86	0.985	1.090
Williams	0.95	1.074	1.102
Wood	1.10	0.846	1.070
Wyandot	0.95	1.074	1.102

4	HealthClass	Factor
	Preferred	1.0000
	Standard	1.3804

5	Policy Effective Month	Trend Factors	
		Base Rate	Maternity
	January 2007	1.0100	1.0100
	February 2007	1.0201	1.0201
	March 2007	1.0303	1.0303
	April 2007	1.0406	1.0406
	May 2007	1.0510	1.0510
	June 2007	1.0615	1.0615
	July 2007	1.0721	1.0721
	August 2007	1.0829	1.0829
	September 2007	1.0937	1.0937
	October 2007	1.1046	1.1046
	November 2007	1.1157	1.1157
	December 2007	1.1268	1.1268

6	In Network Deductibles* Single/Family	Common Family Deductible Factor	Embedded Family Deductible Factor
	\$1,050/\$2,100	0.8860	NA
	\$1,500/\$3,000	0.8800	NA
	\$2,100/\$4,200	0.8571	1.0000
	\$2,700/\$5,450	0.8356	0.9863
	\$3,500/\$7,000	0.8387	1.0000
	\$5,000/\$10,000	0.8077	1.0000

* Out of network deductible is 2x in network deductible.

7 Optional Benefits

Dental	
Adult	Child**
\$27.83	\$13.92

Maternity Rates (please calculate)						
Deductible (Indv/Family)	\$1,050/ \$2,100	\$1,500/ \$3,000	\$2,100/ \$4,200	\$2,700/ \$5,450	\$3,500/ \$7,000	\$5,000/ \$10,000
Base Rate	\$511.08	\$472.39	\$437.85	\$402.07	\$364.34	\$318.60
Area Factor***	x _____	_____	_____	_____	_____	_____
	= _____	_____	_____	_____	_____	_____
Maternity Trend Factor***	x _____	_____	_____	_____	_____	_____
Total	= _____	_____	_____	_____	_____	_____

** Rates per child (ages 0-21 full-time students) on parent's policy are for first 3 children. No charge for additional children.

*** Use Area Factor and Trend Factor from steps 2 and 5.

Premium Calculations			
	MALE	FEMALE	CHILD/ CHILDREN**
1 Base Rate	_____	_____	_____
2 Area Factor	x _____	x _____	x _____
Step 1 & 2 Total	_____	_____	_____
3 Network Factor	x _____	x _____	x _____
Step 3 Total	_____	_____	_____
4 Health Class Factor	x _____	x _____	x _____
Step 4 Total	_____	_____	_____
5 Trend Factor	x _____	x _____	x _____
Step 5 Total	_____	_____	_____
6 Family Discount Factor	x _____	x _____	x _____
Total Monthly Premium	_____	+ _____	+ _____ = _____
<div style="border: 1px solid black; border-radius: 15px; padding: 10px; margin-bottom: 10px;"> <p style="text-align: center; margin: 0;">To Calculate Other Modes</p> <ul style="list-style-type: none"> Annual - Monthly Premium x 12 Semi-annual - Monthly Premium x 6 Quarterly - Monthly Premium x 3 </div> <p>Administrative Charge: Once approved, an additional billing fee of \$4.75 will be applied for Monthly billing mode (fee is waived for EFT, Quarterly, Semi-Annual, and Annual modes); a \$10 per month billing fee will be charged per List Bill.</p>	7	AD&D	+ 1.00
		Optional Benefits:	
		Dental	+ _____
		Maternity	+ _____
		Total Monthly Premium with Optional Benefits	= _____

** Rates per child (ages 0-18 and full-time students ages 19-21) listed as dependents on the policy are for first 3 children. No charge for additional children.

**For more information, please contact American Community's
National Sales Office at (800) 233-3444 ext. 4717.**