

CeltiCare Preferred For Individuals & Families Plan Standard Rate Quote

Client Name: Healthcare Quote

Resident State: CT

ZIP Code: 06830

Policy Effective Date: 01/01/2009

Billing Mode: Monthly Electronic Fund Transfer

This quote is for:

Primary: 44 year old, male

Spouse: 44 year old, female

RX Option is selected.

Supplemental Accident Option is selected

The actual rate will depend on the applicants' health history and underwriting.

Select PPO Plans

<u>Coverage</u>	<u>Deductible</u>	<u>Primary</u>	<u>Spouse</u>	<u>Dependent</u>	<u>RX</u>	<u>Supp Acc</u>	<u>Term Life</u>	<u>Total</u>
80/20	5000	159.64	178.21	-	24.85	10.20	-	372.90
100/0	5000	190.09	212.18	-	24.85	10.20	-	437.32
80/20	2500	199.60	222.79	-	24.85	10.20	-	457.44
80/20	1500	248.20	277.05	-	24.85	10.20	-	560.30
100/0	2500	264.40	295.12	-	24.85	10.20	-	594.57
80/20	1000	285.86	319.08	-	24.85	10.20	-	639.99
80/20	500	319.44	356.55	-	24.85	10.20	-	711.04

Celtic's non-tobacco rate has been applied to the non-tobacco user(s).

Please Note: When submitting business, a State Specific Application is required in this state.

This rate quote was prepared by Celtic Insurance Company at 8:12 AM on Monday November 10, 2008.

If you have any questions, please call Celtic Insurance Company of 1800insuranceCT.com LLC at (800)477-7990 or fax to (312)332-0441.

CeltiCare Preferred For Individuals & Families Plan Standard Rate Quote

Client Name: Healthcare Quote

Resident State: CT

ZIP Code: 06830

Policy Effective Date: 01/01/2009

Billing Mode: Monthly Electronic Fund Transfer

This quote is for:

Primary: 44 year old, male

Spouse: 44 year old, female

RX Option is selected.

Supplemental Accident Option is selected

The actual rate will depend on the applicants' health history and underwriting.

AnyDoc PPO Plans

<u>Coverage</u>	<u>Deductible</u>	<u>Primary</u>	<u>Spouse</u>	<u>Dependent</u>	<u>RX</u>	<u>Supp Acc</u>	<u>Term Life</u>	<u>Total</u>
80/20	5000	183.83	205.20	-	24.85	10.20	-	424.08
100/0	5000	218.88	244.31	-	24.85	10.20	-	498.24
80/20	2500	229.81	256.54	-	24.85	10.20	-	521.40
80/20	1500	285.77	318.99	-	24.85	10.20	-	639.81
100/0	2500	304.45	339.82	-	24.85	10.20	-	679.32
80/20	1000	329.15	367.40	-	24.85	10.20	-	731.60
80/20	500	367.81	410.56	-	24.85	10.20	-	813.42

Celtic's non-tobacco rate has been applied to the non-tobacco user(s).

Please Note: When submitting business, a State Specific Application is required in this state.

This rate quote was prepared by Celtic Insurance Company at 8:12 AM on Monday November 10, 2008.

If you have any questions, please call Celtic Insurance Company of 1800insuranceCT.com LLC at (800)477-7990 or fax to (312)332-0441.

CeltiCare Preferred For Individuals & Families Plan Standard Rate Quote

Client Name: Healthcare Quote

Resident State: CT

ZIP Code: 06830

Policy Effective Date: 01/01/2009

Billing Mode: Monthly Electronic Fund Transfer

This quote is for:

Primary: 44 year old, male

Spouse: 44 year old, female

RX Option is selected.

Supplemental Accident Option is selected

The actual rate will depend on the applicants' health history and underwriting.

Managed Indemnity Plans

<u>Coverage</u>	<u>Deductible</u>	<u>Primary</u>	<u>Spouse</u>	<u>Dependent</u>	<u>RX</u>	<u>Supp Acc</u>	<u>Term Life</u>	<u>Total</u>
80/20	5000	220.79	246.46	-	24.85	10.20	-	502.30
100/0	5000	262.90	293.46	-	24.85	10.20	-	591.41
80/20	2500	276.04	308.11	-	24.85	10.20	-	619.20
80/20	1500	343.25	383.14	-	24.85	10.20	-	761.44
100/0	2500	365.65	408.16	-	24.85	10.20	-	808.86
80/20	1000	395.34	441.29	-	24.85	10.20	-	871.68
80/20	500	441.77	493.12	-	24.85	10.20	-	969.94

Celtic's non-tobacco rate has been applied to the non-tobacco user(s).

Please Note: When submitting business, a State Specific Application is required in this state.

This rate quote was prepared by Celtic Insurance Company at 8:12 AM on Monday November 10, 2008.

If you have any questions, please call Celtic Insurance Company of 1800insuranceCT.com LLC at (800)477-7990 or fax to (312)332-0441.

Celtic Saver HSA Plan Standard Rate Quote

Client Name: Healthcare Quote

Resident State: CT

ZIP Code: 06830

Policy Effective Date: 01/01/2009

Billing Mode: Monthly Electronic Fund Transfer

This quote is for:

Primary: 44 year old, male

Spouse: 44 year old, female

The actual rate will depend on the applicants' health history and underwriting.

PPO Plans

<u>Coverage</u>	<u>Deductible</u>	<u>Primary</u>	<u>Spouse</u>	<u>Dependent</u>	<u>Preventive</u>	<u>Total</u>
100/0	10000	144.26	161.13	-	23.47	328.86
80/20	5150	149.68	167.20	-	23.47	340.35
80/20	3000	184.89	206.53	-	23.47	414.89
100/0	5150	208.76	233.20	-	23.47	465.43
100/0	3000	258.18	288.38	-	23.47	570.03

Celtic's non-tobacco rate has been applied to the non-tobacco user(s).

Please Note: When submitting business, a State Specific Application is required in this state.

A \$5.00 maintenance fee will be administered per month if you open a Health Savings account.

This rate quote was prepared by Celtic Insurance Company at 8:12 AM on Monday November 10, 2008.

If you have any questions, please call Celtic Insurance Company of 1800insuranceCT.com LLC at (800)477-7990 or fax to (312)332-0441.

Celtic Saver HSA Plan Standard Rate Quote

Client Name: Healthcare Quote

Resident State: CT

ZIP Code: 06830

Policy Effective Date: 01/01/2009

Billing Mode: Monthly Electronic Fund Transfer

This quote is for:

Primary: 44 year old, male

Spouse: 44 year old, female

The actual rate will depend on the applicants' health history and underwriting.

Managed Indemnity Plans

<u>Coverage</u>	<u>Deductible</u>	<u>Primary</u>	<u>Spouse</u>	<u>Dependent</u>	<u>Preventive</u>	<u>Total</u>
100/0	10000	201.97	225.59	-	23.47	451.03
80/20	5150	209.57	234.09	-	23.47	467.13
80/20	3000	258.87	289.15	-	23.47	571.49
100/0	5150	292.26	326.49	-	23.47	642.22
100/0	3000	361.45	403.73	-	23.47	788.65

Celtic's non-tobacco rate has been applied to the non-tobacco user(s).

Please Note: When submitting business, a State Specific Application is required in this state.

A \$5.00 maintenance fee will be administered per month if you open a Health Savings account.

This rate quote was prepared by Celtic Insurance Company at 8:12 AM on Monday November 10, 2008.

If you have any questions, please call Celtic Insurance Company of 1800insuranceCT.com LLC at (800)477-7990 or fax to (312)332-0441.