

Individual Term Life Insurance

Individual Term Life Insurance plans for individuals and their spouses are now available from **Health Net Life Insurance Company**, an affiliate of Health Net of Arizona, Inc.

Monthly Term Life Insurance Rates

Primary Insured's Age	Cost per \$1,000	Cost per \$15,000	Cost per \$30,000	Cost per \$50,000
19-29	\$0.19	\$2.85	\$5.70	\$9.50
30-39	\$0.22	\$3.30	\$6.60	\$11.00
40-49	\$0.50	\$7.50	\$15.00	\$25.00
50-59	\$1.37	\$20.55	\$41.10	\$68.50
60-64	\$2.00	\$30.00	\$60.00	\$100.00

Individual Term Life Insurance

Individual Term Life Insurance is available for you and/or your spouse in the following amounts: \$15,000, \$30,000 and \$50,000.

To purchase the life insurance option(s), you must apply for and enroll in an Individual & Family HMO or PPO plan. However, you are not required to purchase life insurance to enroll in an HMO or PPO plan.

Terms

The life insurance benefits are only available in conjunction with the purchase of an Individual & Family HMO or PPO plan.

If you wish to purchase life insurance, you must purchase a minimum coverage of \$15,000 for any insured.

The maximum life insurance benefit for any insured or spouse is \$50,000.

Any insured must be at least 19 years old in order to purchase life insurance.

Evidence of Insurability is required for all Individual Term Life Insurance amounts. Coverage will not become effective until approved in writing by Health Net Life Insurance Company.

Health Net of Arizona, Inc.

2800 N. 44th St., Suite 900
Phoenix, AZ 85008-1553

950 N. Finance Center Dr.
Tucson, AZ 85710-1362

Customer Contact Center
Monday–Friday, 7:00 a.m. to 6:00 p.m.

1-800-289-2818

Hearing Impaired Assistance
Monday–Friday, 7:00 a.m. to 6:00 p.m.

TTY 1-800-977-6757

www.health.net

Underwritten by Health Net Life Insurance Company and administered by Health Net of Arizona. Health Net, Inc. is the parent company of both Health Net of Arizona and Health Net Life Insurance Company.

HEALTH CARE PLANS FOR
INDIVIDUALS AND FAMILIES

Monthly
premiums

Rates effective

November 1, 2003



Health Net®

HMO plans

Cochise, Maricopa, Pinal and Santa Cruz counties

Age	A42000TO \$300/\$150		ATB000TO \$250; 80%		A45000TU \$1,000; 70%	
	Male	Female	Male	Female	Male	Female
Under 2	\$302	\$302	\$249	\$249	\$201	\$201
2-6	90	90	74	74	60	60
7-10	90	90	74	74	60	60
11-14	90	90	74	74	60	60
15-17	89	89	73	73	59	59
18-24	101	209	83	172	67	139
25-29	92	254	76	209	61	169
30-34	111	257	91	212	74	172
35-39	140	262	115	216	93	174
40-44	193	266	159	219	129	177
45-49	253	310	208	255	168	207
50-54	345	346	284	285	230	231
55-59	430	439	354	361	286	293
60-64	517	456	426	375	345	304
65+	1,127	985	928	811	751	657

Pima County

Age	A42000TO \$300/\$150		ATB000TO \$250; 80%		A45000TU \$1,000; 70%	
	Male	Female	Male	Female	Male	Female
Under 2	\$296	\$296	\$261	\$261	\$197	\$197
2-6	88	88	78	78	59	59
7-10	88	88	78	78	59	59
11-14	88	88	78	78	59	59
15-17	87	87	77	77	58	58
18-24	99	205	87	181	66	136
25-29	90	249	79	220	60	166
30-34	109	252	96	222	73	169
35-39	137	257	121	227	91	170
40-44	189	261	167	230	126	173
45-49	248	304	219	268	165	203
50-54	338	339	298	299	225	226
55-59	421	430	371	379	280	287
60-64	507	447	447	394	338	298
65+	1,104	965	974	851	736	644

All other counties

Age	A42000TO \$300/\$150		ATB000TO \$250; 80%		A45000TU \$1,000; 70%	
	Male	Female	Male	Female	Male	Female
Under 2	\$471	\$471	\$442	\$442	\$313	\$313
2-6	140	140	131	131	94	94
7-10	140	140	131	131	94	94
11-14	140	140	131	131	94	94
15-17	139	139	130	130	92	92
18-24	157	326	147	306	104	217
25-29	143	396	134	372	95	263
30-34	173	401	162	376	115	268
35-39	218	409	205	384	145	271
40-44	301	415	282	389	201	276
45-49	394	483	370	453	262	323
50-54	538	539	505	506	359	360
55-59	670	684	629	642	446	457
60-64	806	711	756	667	538	474
65+	1,757	1,536	1,648	1,441	1,171	1,024

Family coverage

Dependent children enrolled with a parent can be covered as a dependent child through age 24. When children no longer qualify as a dependent, they can transition to their own contract on the same product and deductible without having to pass medical health underwriting again.

Child-only coverage

Children can be covered without a parent through 18 years. Each child will receive a separate rate based upon his/her age, sex and residence. At age 19, children will transition to an adult contract on the same product and deductible without having to pass medical health underwriting.

Insurance Rates Effective November 1, 2003

PPO plans

Cochise, Maricopa, Pinal and Santa Cruz counties

Age	ABD1203R \$500; 90/60%		ABE1213R \$500; 80/60%		ABF1223R \$1,000; 90/60%		ABG1233R \$1,000; 80/60%	
	Male	Female	Male	Female	Male	Female	Male	Female
Under 2	\$220	\$220	\$206	\$206	\$194	\$194	\$174	\$174
2-6	74	74	69	69	65	65	59	59
7-10	75	75	71	71	66	66	59	59
11-14	74	74	69	69	65	65	58	58
15-17	72	83	67	78	63	73	57	66
18-24	84	134	78	125	73	118	66	106
25-29	75	122	70	114	65	107	59	96
30-34	90	131	85	123	79	115	71	104
35-39	113	148	106	139	100	130	89	117
40-44	157	161	147	151	138	142	124	127
45-49	205	241	192	225	180	212	162	190
50-54	282	284	264	265	247	249	222	224
55-59	347	359	325	335	305	315	274	283
60-64	421	373	394	349	370	328	332	294
65+	920	805	861	753	808	707	726	635

Pima County

Age	ABD1203R \$500; 90/60%		ABE1213R \$500; 80/60%		ABF1223R \$1,000; 90/60%		ABG1233R \$1,000; 80/60%	
	Male	Female	Male	Female	Male	Female	Male	Female
Under 2	\$216	\$216	\$202	\$202	\$190	\$190	\$170	\$170
2-6	73	73	68	68	64	64	58	58
7-10	73	73	70	70	65	65	58	58
11-14	73	73	68	68	64	64	57	57
15-17	71	81	66	76	62	72	56	65
18-24	82	131	76	122	72	116	65	104
25-29	73	120	69	112	64	105	58	94
30-34	88	128	83	121	77	113	70	102
35-39	111	145	104	136	98	127	87	115
40-44	154	158	144	148	135	139	121	124
45-49	201	236	188	220	176	208	159	186
50-54	276	278	259	260	242	244	218	219
55-59	340	352	318	328	299	309	268	277
60-64	412	365	386	342	363	321	325	288
65+	901	789	844	738	792	693	711	622

All other counties

Age	ABD1203R \$500; 90/60%		ABE1213R \$500; 80/60%		ABF1223R \$1,000; 90/60%		ABG1233R \$1,000; 80/60%	
	Male	Female	Male	Female	Male	Female	Male	Female
Under 2	\$264	\$264	\$247	\$247	\$233	\$233	\$209	\$209
2-6	89	89	83	83	78	78	71	71
7-10	90	90	85	85	79	79	71	71
11-14	89	89	83	83	78	78	70	70
15-17	86	100	80	94	76	88	68	79
18-24	101	161	94	150	88	142	79	127
25-29	90	146	84	137	78	128	71	115
30-34	108	157	102	148	95	138	85	125
35-39	136	178	127	167	120	156	107	140
40-44	188	193	176	181	166	170	149	152
45-49	246	289	230	270	216	254	194	228
50-54	338	341	317	318	296	299	266	269
55-59	416	431	390	402	366	378	329	340
60-64	505	448	473	419	444	394	398	353
65+	1,104	966	1,033	904	970	848	871	762

PPO plans

Cochise, Maricopa, Pinal and Santa Cruz counties

Age	ABH1243S \$2,500; 80/60%		ABJ1253S \$5,000; 80/60%		ABM1283S \$5,000; 50/30%		ABQ1313S No Copay \$2,500 80/60%	
	Male	Female	Male	Female	Male	Female	Male	Female
Under 2	\$138	\$138	\$108	\$108	\$102	\$102	\$129	\$129
2-6	47	47	36	36	34	34	44	44
7-10	47	47	37	37	35	35	44	44
11-14	46	46	36	36	34	34	43	43
15-17	45	52	35	41	33	39	42	49
18-24	52	84	41	65	39	62	49	78
25-29	47	76	36	60	35	57	44	71
30-34	57	82	44	64	42	61	53	77
35-39	71	93	55	72	53	69	66	87
40-44	98	101	77	79	73	75	92	94
45-49	129	151	100	118	95	112	120	141
50-54	176	178	137	138	131	131	165	166
55-59	217	224	169	175	161	166	203	210
60-64	264	234	205	182	195	173	246	219
65+	576	504	449	393	427	373	539	471

Pima County

Age	ABH1243S \$2,500; 80/60%		ABJ1253S \$5,000; 80/60%		ABM1283S \$5,000; 50/30%		ABQ1313S No Copay \$2,500 80/60%	
	Male	Female	Male	Female	Male	Female	Male	Female
Under 2	\$135	\$135	\$106	\$106	\$100	\$100	\$126	\$126
2-6	46	46	35	35	33	33	43	43
7-10	46	46	36	36	34	34	43	43
11-14	45	45	35	35	33	33	42	42
15-17	44	51	34	40	32	38	41	48
18-24	51	82	40	64	38	61	48	76
25-29	46	74	35	59	34	56	43	70
30-34	56	80	43	63	41	60	52	75
35-39	70	91	54	71	52	68	65	85
40-44	96	99	75	77	72	73	90	92
45-49	126	148	98	116	93	110	118	138
50-54	172	174	134	135	128	128	162	163
55-59	213	219	166	171	158	163	199	206
60-64	259	229	201	178	191	170	241	215
65+	564	494	440	385	418	365	528	461

All other counties

Age	ABH1243S \$2,500; 80/60%		ABJ1253S \$5,000; 80/60%		ABM1283S \$5,000; 50/30%		ABQ1313S No Copay \$2,500 80/60%	
	Male	Female	Male	Female	Male	Female	Male	Female
Under 2	\$166	\$166	\$130	\$130	\$122	\$122	\$155	\$155
2-6	56	56	43	43	41	41	53	53
7-10	56	56	44	44	42	42	53	53
11-14	55	55	43	43	41	41	52	52
15-17	54	62	42	49	40	47	50	59
18-24	62	101	49	78	47	74	59	94
25-29	56	91	43	72	42	68	53	85
30-34	68	98	53	77	50	73	64	92
35-39	85	112	66	86	64	83	79	104
40-44	118	121	92	95	88	90	110	113
45-49	155	181	120	142	114	134	144	169
50-54	211	214	164	166	157	157	198	199
55-59	260	269	203	210	193	199	244	252
60-64	317	281	246	218	234	208	295	263
65+	691	605	539	472	512	448	647	565

Important reminders

- Please answer each question, complete each blank on the application form, and sign and date the application, or we will need to mail it back to you for completion.
- Rates are calculated by adding the rates for each individual.

**Call 602-474-8111 or
1-888-463-4875
with any questions**