

STATE OF OREGON
Small Employer Health Insurance Carriers
Geographic Average Rates (GARs) — Part A
4th QUARTER 2005

| CARRIERS | AREAS | BASIC PLAN | | | | INDEMNITY PLAN | | | | PPO PLAN | | | | POINT OF SERVICE PLAN | | | |
|--|-----------|------------|---------|---------|---------|----------------|---------|---------|---------|----------|---------|---------|---------|-----------------------|---------|---------|-------|
| | | EE | EE/SP | EE/FAM | EE/CH | EE | EE/SP | EE/FAM | EE/CH | EE | EE/SP | EE/FAM | EE/CH | EE | EE/SP | EE/FAM | EE/CH |
| AETNA LIFE INSURANCE CO. Indemnity | 1 | \$710 | \$1,496 | \$2,149 | \$1,318 | \$660 | \$1,486 | \$2,134 | \$1,309 | \$693 | \$1,558 | \$2,239 | \$1,373 | N/A | N/A | N/A | N/A |
| | 2, 6 | \$616 | \$1,299 | \$1,866 | \$1,144 | \$573 | \$1,290 | \$1,852 | \$1,136 | \$601 | \$1,353 | \$1,943 | \$1,192 | N/A | N/A | N/A | N/A |
| | 3, 5 | \$643 | \$1,355 | \$1,947 | \$1,194 | \$598 | \$1,346 | \$1,933 | \$1,185 | \$627 | \$1,411 | \$2,028 | \$1,243 | N/A | N/A | N/A | N/A |
| | 4 | \$643 | \$1,355 | \$1,947 | \$1,194 | \$598 | \$1,346 | \$1,933 | \$1,185 | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| | 7 | \$670 | \$1,412 | \$2,028 | \$1,244 | \$623 | \$1,402 | \$2,014 | \$1,235 | \$654 | \$1,470 | \$2,112 | \$1,295 | N/A | N/A | N/A | N/A |
| HEALTH NET of OREGON HCSC-HMDI | 1 | \$393 | \$846 | \$1,102 | \$748 | N/A | N/A | N/A | N/A | \$406 | \$874 | \$1,138 | \$772 | \$416 | \$895 | \$1,166 | \$791 |
| | 2 | \$472 | \$1,015 | \$1,322 | \$897 | N/A | N/A | N/A | N/A | \$441 | \$948 | \$1,235 | \$838 | \$500 | \$1,074 | \$1,399 | \$949 |
| | 3, 4 | \$413 | \$888 | \$1,157 | \$785 | N/A | N/A | N/A | N/A | \$406 | \$874 | \$1,138 | \$772 | \$437 | \$940 | \$1,224 | \$831 |
| | 5 | \$433 | \$930 | \$1,212 | \$822 | N/A | N/A | N/A | N/A | \$441 | \$948 | \$1,235 | \$838 | \$458 | \$985 | \$1,282 | \$870 |
| | 6 | \$452 | \$973 | \$1,267 | \$860 | N/A | N/A | N/A | N/A | \$458 | \$985 | \$1,283 | \$870 | \$479 | \$1,029 | \$1,341 | \$910 |
| | 7 | \$472 | \$1,015 | \$1,322 | \$897 | N/A | N/A | N/A | N/A | \$458 | \$985 | \$1,283 | \$870 | \$500 | \$1,074 | \$1,399 | \$949 |
| | 7 | \$472 | \$1,015 | \$1,322 | \$897 | N/A | N/A | N/A | N/A | \$458 | \$985 | \$1,283 | \$870 | \$500 | \$1,074 | \$1,399 | \$949 |
| JOHN ALDEN INSURANCE CO. Indemnity | 1 | \$483 | \$1,165 | \$1,575 | \$869 | \$562 | \$1,316 | \$1,780 | \$982 | \$492 | \$1,381 | \$1,867 | \$1,030 | N/A | N/A | N/A | N/A |
| | 2 thru 7 | \$483 | \$1,105 | \$1,448 | \$825 | \$562 | \$1,288 | \$1,687 | \$962 | \$492 | \$1,126 | \$1,475 | \$841 | N/A | N/A | N/A | N/A |
| KAISER FOUNDATION HEALTH PLAN OF THE NORTHWEST HCSC-HMDI | 1,2,3,5,6 | \$287 | \$574 | \$861 | \$517 | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| LIFEWISE HEALTH PLAN OF OREGON Indemnity | 1 | \$430 | \$970 | \$1,342 | \$772 | N/A | N/A | N/A | N/A | \$390 | \$879 | \$1,216 | \$699 | N/A | N/A | N/A | N/A |
| | 2 | \$400 | \$903 | \$1,248 | \$718 | N/A | N/A | N/A | N/A | \$391 | \$883 | \$1,221 | \$702 | N/A | N/A | N/A | N/A |
| | 3 | \$395 | \$890 | \$1,231 | \$708 | N/A | N/A | N/A | N/A | \$367 | \$827 | \$1,144 | \$658 | N/A | N/A | N/A | N/A |
| | 4 | \$405 | \$913 | \$1,263 | \$727 | N/A | N/A | N/A | N/A | \$420 | \$948 | \$1,311 | \$754 | N/A | N/A | N/A | N/A |
| | 5 | \$449 | \$1,012 | \$1,399 | \$805 | N/A | N/A | N/A | N/A | \$441 | \$993 | \$1,374 | \$790 | N/A | N/A | N/A | N/A |
| | 6 | \$425 | \$958 | \$1,325 | \$762 | N/A | N/A | N/A | N/A | \$432 | \$975 | \$1,348 | \$775 | N/A | N/A | N/A | N/A |
| | 7 | \$465 | \$1,049 | \$1,451 | \$834 | N/A | N/A | N/A | N/A | \$452 | \$1,019 | \$1,409 | \$810 | N/A | N/A | N/A | N/A |
| ODS HEALTH PLAN HCSC-HMDI | 1 | \$440 | \$947 | \$1,277 | \$726 | N/A | N/A | N/A | N/A | \$377 | \$811 | \$1,095 | \$622 | N/A | N/A | N/A | N/A |
| | 2 | \$429 | \$922 | \$1,244 | \$708 | N/A | N/A | N/A | N/A | \$368 | \$790 | \$1,066 | \$607 | N/A | N/A | N/A | N/A |
| | 3 | \$395 | \$850 | \$1,146 | \$652 | N/A | N/A | N/A | N/A | \$339 | \$728 | \$982 | \$559 | N/A | N/A | N/A | N/A |
| | 4, 5, 6 | \$429 | \$922 | \$1,244 | \$708 | N/A | N/A | N/A | N/A | \$368 | \$790 | \$1,066 | \$607 | N/A | N/A | N/A | N/A |
| | 7 | \$452 | \$971 | \$1,310 | \$745 | N/A | N/A | N/A | N/A | \$387 | \$832 | \$1,122 | \$638 | N/A | N/A | N/A | N/A |
| PACIFICARE LIFE ASSURANCE Indemnity | 1 | \$514 | \$1,249 | \$1,952 | \$1,447 | \$563 | \$1,370 | \$2,141 | \$1,587 | \$277 | \$673 | \$1,052 | \$780 | N/A | N/A | N/A | N/A |
| | 2 | \$514 | \$1,249 | \$1,952 | \$1,447 | \$563 | \$1,370 | \$2,141 | \$1,587 | \$282 | \$687 | \$1,074 | \$796 | N/A | N/A | N/A | N/A |
| | 3 | \$514 | \$1,249 | \$1,952 | \$1,447 | \$563 | \$1,370 | \$2,141 | \$1,587 | \$276 | \$672 | \$1,050 | \$778 | N/A | N/A | N/A | N/A |
| | 4 | \$514 | \$1,249 | \$1,952 | \$1,447 | \$563 | \$1,370 | \$2,141 | \$1,587 | \$356 | \$866 | \$1,354 | \$1,004 | N/A | N/A | N/A | N/A |
| | 5 | \$514 | \$1,249 | \$1,952 | \$1,447 | \$563 | \$1,370 | \$2,141 | \$1,587 | \$357 | \$869 | \$1,358 | \$1,006 | N/A | N/A | N/A | N/A |
| | 6 | \$514 | \$1,249 | \$1,952 | \$1,447 | \$563 | \$1,370 | \$2,141 | \$1,587 | \$339 | \$825 | \$1,289 | \$955 | N/A | N/A | N/A | N/A |
| | 7 | \$514 | \$1,249 | \$1,952 | \$1,447 | \$563 | \$1,370 | \$2,141 | \$1,587 | \$336 | \$817 | \$1,277 | \$946 | N/A | N/A | N/A | N/A |

| CARRIERS | AREAS | BASIC PLAN | | | | INDEMNITY PLAN | | | | PPO PLAN | | | | POINT OF SERVICE PLAN | | | |
|--|------------|--|-------|---------|---------|---|-------|--------|-------|---|-------|---------|-------|---|-------|---------|-------|
| | | EE | EE/SP | EE/FAM | EE/CH | EE | EE/SP | EE/FAM | EE/CH | EE | EE/SP | EE/FAM | EE/CH | EE | EE/SP | EE/FAM | EE/CH |
| | | No Ded, 50/50%, \$3750 Individual/ \$7500 Family Stop-Loss, Rx \$15/50%, \$1,000,000 Lifetime Max | | | | Ded \$500 Indiv/\$1500 Family, 80/20%, \$2000 Stop-Loss, 50% Rx \$1,000,000 Lifetime Max | | | | Ded \$500 Indiv/\$1500 Family; 90/70%; \$2000 Stop-loss; 50% RX \$1,000,000 Lifetime Max | | | | Deductible \$500/ \$15 office visit/ 80% benefit / \$1000 out-of-pocket per indiv., no RX | | | |
| PACIFICARE of OREGON HCSC-HMDI | 1, 5 | \$382 | \$928 | \$1,451 | \$1,075 | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| | 2 | \$378 | \$920 | \$1,438 | \$1,066 | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| | 3 | \$390 | \$948 | \$1,482 | \$1,098 | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| PACIFICSOURCE HEALTH PLANS HCSC-HMDI | 1, 2, 3, 7 | \$250 | \$575 | \$712 | \$462 | \$298 | \$686 | \$850 | \$552 | N/A | N/A | N/A | N/A | \$314 | \$722 | \$894 | \$581 |
| | 4, 5, 6 | \$262 | \$604 | \$748 | \$485 | \$311 | \$715 | \$886 | \$575 | N/A | N/A | N/A | N/A | \$327 | \$753 | \$933 | \$606 |
| PHP HEALTH PLAN HCSC-HMDI | 4 | \$436 | \$873 | \$1,222 | \$785 | N/A | N/A | N/A | N/A | \$337 | \$673 | \$942 | \$606 | N/A | N/A | N/A | N/A |
| PROVIDENCE HEALTH PLAN HCSC-HMDI | 1, 5 | \$311 | \$739 | \$1,047 | \$609 | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | \$285 | \$676 | \$959 | \$557 |
| | 2 | \$338 | \$803 | \$1,139 | \$662 | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | \$314 | \$745 | \$1,057 | \$614 |
| | 3 | \$327 | \$777 | \$1,102 | \$641 | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | \$302 | \$718 | \$1,017 | \$591 |
| | 4, 6 | \$345 | \$820 | \$1,162 | \$676 | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | \$321 | \$763 | \$1,081 | \$629 |
| REGENCE BLUE CROSS BLUE SHIELD OF OREGON HCSC-HMDI | 1 thru 7 | \$382 | \$803 | \$1,147 | \$627 | N/A | N/A | N/A | N/A | \$345 | \$724 | \$1,035 | \$566 | N/A | N/A | N/A | N/A |

Note: Rates shown are rounded off to the nearest dollar. Monthly or quarterly trend factors may apply to a carrier's GAR listed beyond this date. **The GARs listed are a Carrier's closest equivalent to plans described above.**

Trend Factor Definition: A measure of changes over time in claim costs, claim frequencies, exposures, and other components of insurance costs. The time period of the measurement is normally between 1 to 2 years.

Geographic Areas:

- (1) Clackamas, Multnomah, Washington, and Yamhill
- (2) Benton, Lane, and Linn
- (3) Marion and Polk
- (4) Deschutes, Klamath, and Lake
- (5) Clatsop, Columbia, Coos, Curry, Lincoln, and Tillamook
- (6) Baker, Crook, Gilliam, Grant, Harney, Hood River, Jefferson, Malheur, Morrow, Sherman, Umatilla, Union, Wallowa, Wasco, and Wheeler
- (7) Douglas, Jackson, and Josephine

HMO = Health Maintenance Organization

HCSC = *Health Care Service Contractor

Indemnity = traditional fee-for-service indemnity insurance carrier.

HMDI = Hospital, Medical, Dental & Indemnity

EE = Employee; EE/SP = Employee and Spouse; EE/FAM = Employee and Family; EE/CH = Employee and Children

*NOTE: Areas listed may not include service by the carrier in all Counties within the area. Please see our web page for more info at:
<http://www.cbs.state.or.us/ins/docs/healthun/areas.pdf>

**NOTE: There are no longer any HMO Federally Qualified plans in Oregon.

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