Personal Health Coverage: Atlantic Rate Schedule

Monthly Rates Effective December 1, 2025

	Age	Health Plan Type			Additional Coverage Options		
		BasicPlan	ExtendaPlan®	OmniPlan®	Basic Prescription Drugs	Dental Care	Hospital Cash
SINGLE	Under 35	$9.50	$27.00	$54.50	$30.00	$60.00	$9.75
	35 - 44	$10.00	$27.00	$56.25	$34.00	$65.50	$10.00
	45 - 54	$10.25	$27.50	$57.50	$40.50	$59.25	$10.25
	55 - 59	$12.00	$27.75	$63.00	$52.50	$55.25	$12.25
	60 - 64	$12.25	$30.00	$65.25	$59.50	$59.50	$15.50
	65 - 69	$13.75	$32.00	$65.25	$27.00	$58.25	$28.75
	70 - 74	$14.50	$36.00	$66.50	$29.75	$58.25	$31.25
	75 - 79	$15.75	$41.50	$70.75	$30.75	$55.50	$34.50
	80 +	$19.50	$43.50	$76.75	$30.50	$58.25	$44.50

	Age	Health Plan Type			Additional Coverage Options		
		BasicPlan	ExtendaPlan	OmniPlan	Basic Prescription Drugs	Dental Care	Hospital Cash
COUPLE	Under 35	$12.50	$41.25	$86.25	$55.75	$117.25	$18.00
	35 - 44	$13.00	$40.00	$88.75	$64.25	$127.00	$19.25
	45 - 54	$13.75	$40.50	$90.75	$76.25	$116.25	$20.50
	55 - 59	$15.50	$42.00	$99.75	$99.50	$108.50	$23.50
	60 - 64	$17.00	$45.75	$103.25	$112.50	$115.50	$29.50
	65 - 69	$20.50	$51.50	$105.25	$52.00	$114.25	$55.00
	70 - 74	$21.50	$56.50	$108.75	$56.00	$114.25	$61.25
	75 - 79	$25.75	$70.00	$121.50	$56.00	$108.50	$65.25
	80 +	$31.00	$80.00	$138.25	$55.50	$114.25	$84.75

	Age	Health Plan Type			Additional Coverage Options		
		BasicPlan	ExtendaPlan	OmniPlan	Basic Prescription Drugs	Dental Care	Hospital Cash
FAMILY	Under 35	$14.75	$48.50	$109.25	$75.00	$168.50	$26.75
	35 - 44	$15.75	$48.50	$113.25	$86.25	$182.75	$28.00
	45 - 54	$16.00	$49.00	$113.25	$103.00	$166.75	$28.75
	55 - 59	$20.00	$52.25	$126.50	$133.50	$156.25	$32.50
	60 - 64	$20.50	$55.50	$131.50	$151.00	$166.25	$38.00
	65 - 69	$23.50	$66.00	$134.00	$69.00	$163.75	$69.00
	70 - 74	$24.75	$72.00	$138.00	$75.25	$163.75	$73.75
	75 - 79	$30.25	$83.00	$146.25	$75.50	$156.50	$78.75
	80 +	$35.75	$90.25	$158.25	$75.25	$163.75	$100.00

When determining your monthly rate:

- Family means three or more.
- For Couple or Family, the oldest person on the application determines the rate.
- For a Family with more than six people, add 30%.
- Additional Coverage Options can only be purchased with a health plan
- Based on your medical history, you may be assessed a premium adjustment, be excluded for certain benefits or be declined coverage.