

# *The Cost and Benefits of Individual Health Insurance Plans*

November 9, 2005



# Individual & Family health insurance

**eHealthInsurance**

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## Introduction and Overview

- eHealthInsurance is the nation's leading source of health insurance for individuals and families. Many of these people are self-employed, are not offered health insurance through their employer, or choose to purchase a plan for themselves in lieu of enrolling in a plan offered by their employer. Its Web site, [eHealthInsurance.com](http://eHealthInsurance.com), features health insurance plans from 140 of the leading health insurance companies across all 50 states, giving consumers a service to compare, apply for and purchase plans available in their zip code. This nationwide perspective enables the company to provide a unique, unbiased analysis of consumer purchasing patterns of health insurance plans from the Individual and Family health insurance market.
- Prior to purchasing a plan from [www.ehealthinsurance.com](http://www.ehealthinsurance.com), more than 46% of our customers were uninsured for at least six months. eHealthInsurance four years ago began issuing reports to inform the market about this subject, as we are one of the few companies or organizations with national source data that accurately reflects consumer buying patterns and purchase prices. As the number of uninsured Americans has reached 45.8 million, the importance of exposing the details of what consumers are choosing to pay, and the benefits they receive for health insurance plans purchased on their own, continues to increase.
- The Cost and Benefits of Individual Health Insurance Plans report was the first report issued by eHealthInsurance, beginning in June, 2001. It is now one of a series of reports created by eHealthInsurance on the Individual and Family health insurance market. The 2005 Cost and Benefits Report has been enhanced and expanded since its last release. In addition to the data points we've provided in previous reports, the expanded version also includes more details on Major Medical Plan premiums and purchased benefits for families, comparisons of premium costs by gender and age, costs of health insurance for children insured individually, and premiums by marital status. This report also provides enhanced details of premiums paid on Short-Term Plans, which are similar to Major Medical Plans except the coverage typically extends for no more than 6 or 12 months, and benefits are often less comprehensive than those provided by a Major Medical Plan.

# Methodology

eHealthInsurance's "2005 Cost and Benefits Report" is based on a sample of more than 80,000 Individual and Family Major Medical and Short-Term health insurance policies sold between January 01, 2004 and April 30, 2005 through [www.ehealthinsurance.com](http://www.ehealthinsurance.com).

This report analyzes monthly premiums paid on these policies in 2005<sup>1</sup> along with the benefits associated with these plans. This report provides in-depth information on Major Medical Plans, and presents key information on costs for Short-Term Plans.

HSA-eligible plans were intentionally excluded from this report. For detailed or comparative information on HSA-eligible plans, please refer to eHealthInsurance's report, "Health Savings Accounts: An 18-Month Review", published in July, 2005.

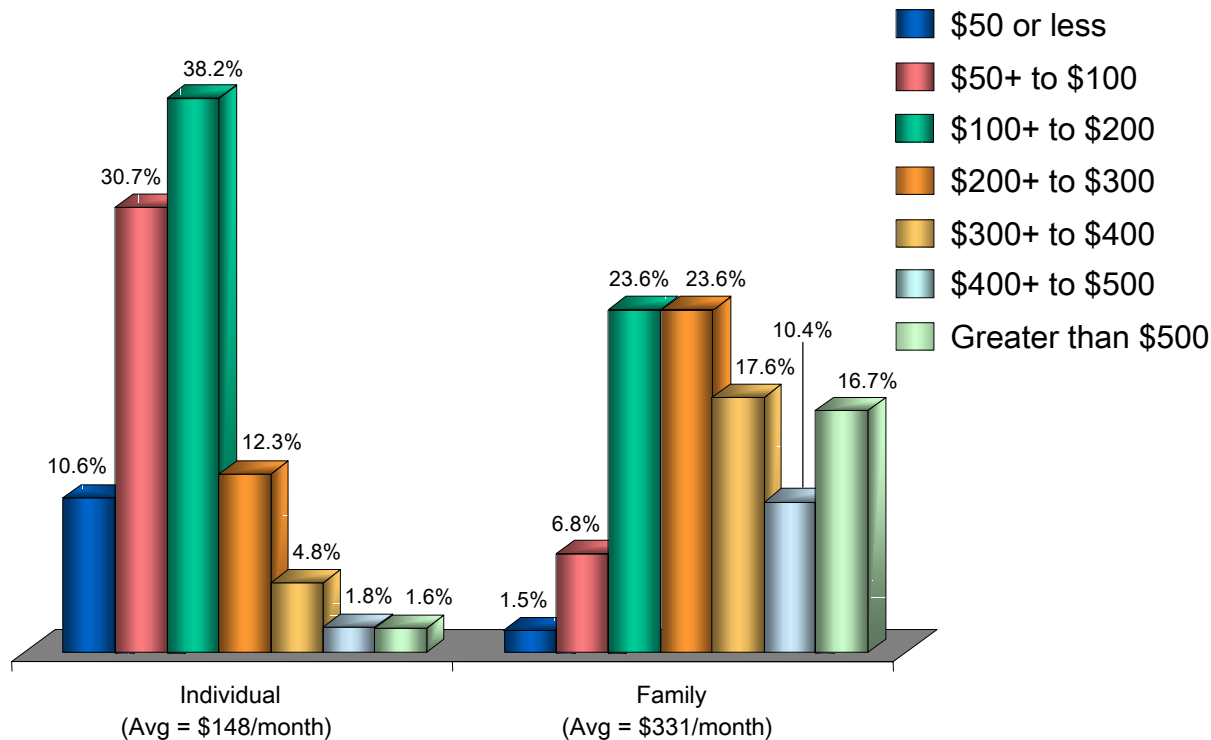
<sup>1</sup> Because premiums were based on 2005 figures, policies sold in 2004 in which payments were not made in 2005 were excluded from the analysis.

## Executive Summary

- Individual Policy holders pay on average \$148 per month for Major Medical coverage. Family Policy holders pay an average monthly premium of \$331, or \$110 per covered member, based on the average of 3.0 members per plan.
- Within Major Medical Plans sold to individuals, women pay a higher average monthly premium than men overall (\$160 vs. \$135), as well as across each age group.
- Within Major Medical Plans sold to families, the average monthly premium is higher for plans whose primary policy holder is a man than a woman, although this is mitigated by the number of members covered: there is no significant difference when evaluated on a cost per member basis.
- The average monthly cost to insure a child on his or her own is \$89.
- The range of average monthly premiums across the US falls between \$98 for Michigan residents and \$379 for New York residents. This represents a monthly disparity of \$281, or \$3,372 per year. New Yorkers are paying on average nearly 4 times as much as residents of Michigan for health insurance.
- For Major Medical Plans sold to individuals, costs differ dramatically by marital status. Divorced customers pay the highest premiums (\$242 per month), but are generally older (43.8 years) and elect plans with greater benefits. Married customers pay more than single customers on average (\$180 vs. \$136). This disparity appears to be driven more by an average age difference (38.9 vs. 28.5), than by significant differences in benefits.
- Sixty percent of Major Medical Plans sold to individuals have a deductible of \$2000 or less, with 35% having a deductible of \$500 or less. Of Family Plans, 50% have a deductible of \$2000 or less.
- Of the Major Medical Plans selected, over 90% offer comprehensive coverage and over 86% are PPOs.
- Almost 40% of Major Medical Plans purchased require no co-payment for office visits.
- Short-Term Policy holders pay an average monthly premium of \$78 for individual coverage and \$192 for family coverage.
- Seventy-four percent of Short-Term Individual Plan holders are under the age of 35, with the largest group, or 40%, between the ages of 25 and 34.

# Major Medical Plan Premiums

## Monthly Premiums for Major Medical Plans



Source: eHealthInsurance

- The average monthly premium for Individual Plans is \$148, or \$1772 annually
- The average monthly premium for Family Plans is \$331, or \$3976 annually

Forty-one percent of Individual Policy holders pay \$100 or less per month for coverage. Additionally, 80% of Individual Policy holders pay \$200 or less per month.

Fifty-five percent of Family Plans cost \$300 or less per month, or \$100 or less per member, based on the average of 3.0 members per policy.

## Individual Plan Premiums By Age

Age of Primary Policy Holder	Avg Monthly Premium	Avg Increase From Prior Age Group	% of Uninsured Population	% of U.S. Population	% of Individual Policies
<18	\$ 89	N/A	18.0%	25.4%	8.0 %
18-24	\$ 109	\$ 20	19.1%	9.6%	26.1 %
25-34	\$ 130	\$ 21	22.2%	13.5%	34.3 %
35-44	\$ 173	\$ 42	17.7%	14.9%	16.1 %
45-54	\$ 228	\$ 55	13.7%	14.4%	9.9 %
55-64	\$ 300	\$ 72	8.6%	10.1%	5.7 %
65+	N/A	N/A	0.6%	12.1%	N/A
<b>Total</b>	<b>\$ 148</b>	<b>\$ 1,772</b>	<b>100 %</b>	<b>100 %</b>	<b>100 %</b>

Source: eHealthInsurance

- Sixty-eight percent of Individual Plan policy holders are under the age of 35. The largest age group, or 34%, are within the ages 25-34, and pay an average monthly premium of \$130
- The next largest age group, or 26%, are within the ages of 18-24 and pay an average monthly premium of \$109
- Children under the age of 18 currently comprise 8% of all Individual Plans

According to the U.S. Census Bureau more than 59% of the uninsured are under the age of 35.

Sixty-eight percent of eHealthInsurance customers are under 35.

This segment pays an average monthly premium of \$117.



## Family Plan Premiums By Age

Age of Primary Policy Holder	Avg Monthly Premium	Avg. Members on Policy	Avg Cost per Member	% of Family Policies
<18	\$ 129	2.24	\$ 58	2.6%
18-24	\$ 207	2.36	\$ 88	5.4%
25-34	\$ 292	2.92	\$ 100	31.2%
35-44	\$ 347	3.39	\$ 102	34.4%
45-54	\$ 384	3.02	\$ 127	19.3%
55-64	\$ 451	2.27	\$ 199	7.1%
<b>Total</b>	<b>\$ 331</b>	<b>3.00</b>	<b>\$ 110</b>	<b>100 %</b>

Source: eHealthInsurance

Sixty-five percent of Family Plans are sold to policy holders in the 25-44 age segment. While the average monthly premium is higher for the 35-44 age group than for those between the ages of 25-34, there is no significant difference when evaluated on a cost per member basis.

- Compared to Individual Policy holders, the primary policy holder among Family Plans is slightly older, with the largest group, or 34%, comprised of customers between the ages of 35-44. Customers in this age group pay \$347 per month on average, just above the overall average monthly premium of \$331 for family policies.
- Primary policy holders within the ages of 25-44 comprise over 65% of all Family Plans and pay an average monthly cost per member of around \$100.

Note: Family Plans are policies covering 2 or more individuals. Under Family Plans when the primary policy holder is under 18, all covered members are under 18.

"Primary policy holder" is the individual who is listed first on the application and was the main applicant for the plan.

## Individual Plan Premiums By Gender and Age

	<18	18-24	25-34	35-44	45-54	55-64	Overall
<b>Women</b>							
Monthly Premium	\$ 90	\$ 118	\$ 141	\$ 186	\$ 235	\$ 305	\$ 160
% of Policies	7.9%	26.4%	32.5%	15.3%	10.3%	7.6%	49.5%
<b>Men</b>							
Monthly Premium	\$ 88	\$ 100	\$ 121	\$ 161	\$ 221	\$ 290	\$ 135
% of Policies	8.1%	25.8%	36.0%	16.8%	9.5%	3.8%	50.5%

Source: *eHealthInsurance*

- Within Individual Plans, women pay a significantly higher monthly premium than men overall (\$160 vs. \$135)
- This discrepancy is greatest within the 35-44 year age group, where women pay \$25, or 16%, more than similarly aged men, on average

Note: Under “% of Policies”, the percentage for women overall (49.5%) and the percentage for men overall (50.5%) total 100%. The percentages within each gender also total 100%, indicating the age distribution for each gender.

Among Major Medical Plans sold to individuals, women are slightly older than men on average (31.2 years vs. 30.0 years).

Women have higher premiums within every age category.

See Benefits Section (page 22) for more details on differences by gender.

## Family Plan Premiums By Gender and Age

	<18	18-24	25-34	35-44	45-54	55-64	Overall
<b>Women</b>							
Monthly Premium	\$ 134	\$ 203	\$ 283	\$ 328	\$ 363	\$ 444	\$ 306
Avg Members on Policy	2.29	2.29	2.81	3.12	2.77	2.16	2.83
Avg Cost per Member	\$ 59	\$ 89	\$ 101	\$ 105	\$ 131	\$ 206	\$ 108
% of Policies	3.1%	7.4%	36.5%	34.4%	15.2%	3.4%	39.7%
<b>Men</b>							
Monthly Premium	\$ 125	\$ 212	\$ 300	\$ 359	\$ 394	\$ 453	\$ 348
Avg Members on Policy	2.19	2.45	3.01	3.56	3.14	2.30	3.12
Avg Cost per Member	\$ 57	\$ 87	\$ 100	\$ 101	\$ 125	\$ 197	\$ 112
% of Policies	2.2%	4.0%	27.8%	34.5%	22.1%	9.4%	60.3%

Source: **eHealthInsurance**

- On average, there are more members on a policy when the primary policy holder is male rather than female (3.12 vs. 2.83, overall)

Note: Under “% of Policies”, the percentage for women overall (39.7%) and the percentage for men (60.3%) overall total 100%. The percentages within each gender also total 100%, indicating the age distribution for each gender.

Age and gender refer to the primary policy holder.

Although it appears that male primary policy holders are paying a higher premium, there is no significant difference between Family Policies held by men, and those held by women, when evaluated on a cost per member basis.

# Family Plan Premiums By Number of Members on Policy

Members on Policy	Monthly Premium	Incremental Cost per Member	Avg Cost per Member	% of Family Policies
2	\$ 274	\$ 126	\$ 137	44.9 %
3	\$ 338	\$ 64	\$ 113	23.5 %
4	\$ 394	\$ 56	\$ 99	21.4 %
5	\$ 428	\$ 33	\$ 86	7.4 %
6+	\$ 457	\$ 29	\$ 76	2.7 %
<b>Total</b>	<b>\$ 331</b>	<b>N/A</b>	<b>\$ 110</b>	<b>100 %</b>

Source: eHealthInsurance

**Average Number of Members Per Policy = 3.00**

The average number of members per Family Plan is 3.0.

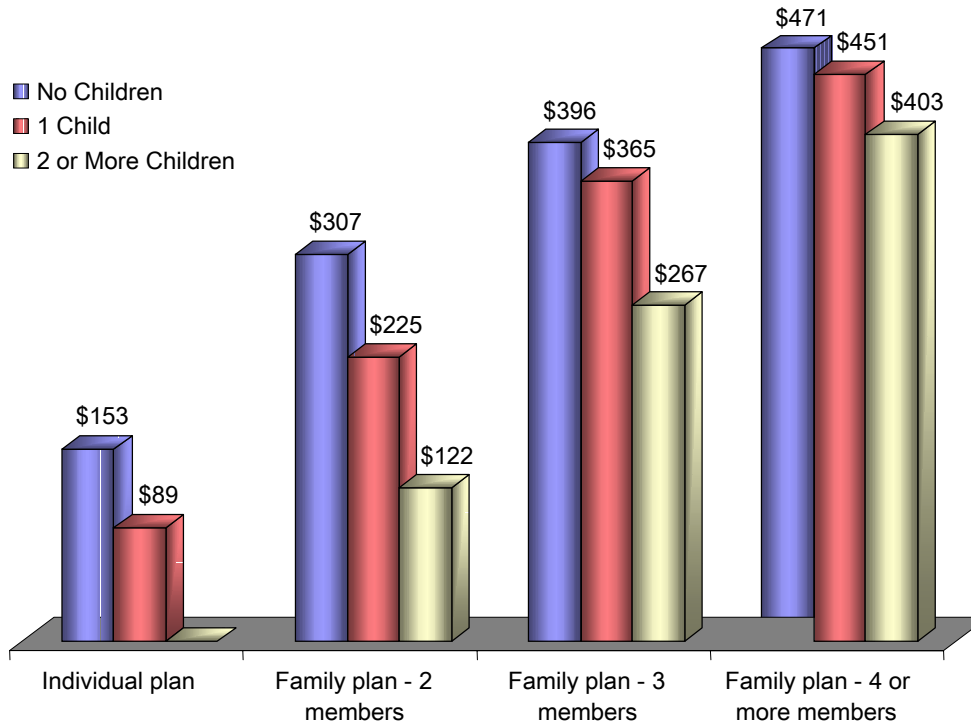
The largest portion, or 45%, of Family Plans are 2-member policies.

- The incremental cost to add a new member to a policy decreases as the number of members on the policy increases. This decrease is most dramatic after two members
- On average, policies covering three individuals cost \$113 per member per month, compared to \$86 per month for five individuals. This figure reflects a 24% decrease from the cost of a 3 member plan

Note: For policies with 6 or more members, the average cost per member was calculated by dividing the monthly premium by 6. This represents the maximum average cost per member for this group. The overall average cost per member was calculated using the average member per policy figure of 3.0.

The incremental cost per member for 2 person policies is based on the average monthly premium for Individual Plans.

## Premium Cost of Plans with Children



Source: [eHealthInsurance](#)

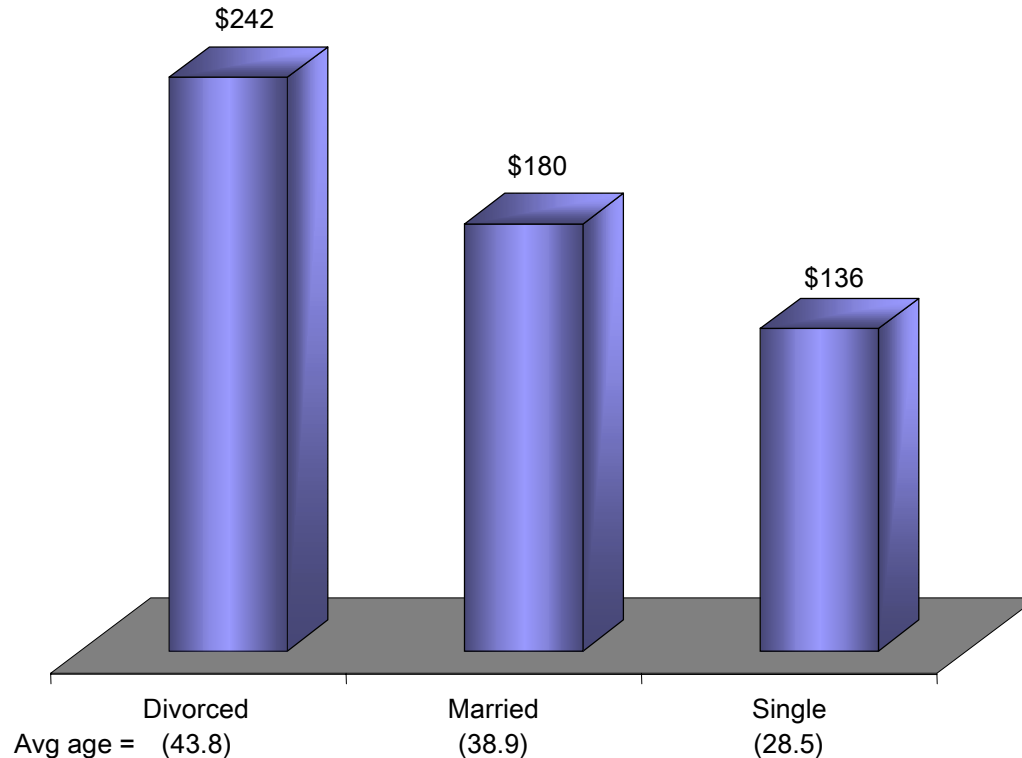
The average cost to insure a child individually is \$89 per month.

The average cost to insure 2 children is \$122 per month, or \$61 per child.

The average incremental cost to add an adult to an existing plan is \$154 per month compared to \$72 to add a child.

- The cost of coverage for an individual child is 58% of the cost of coverage for an adult

## Individual Plan Premiums By Marital Status



Source: **eHealthInsurance**

- There is a significant difference in costs with respect to marital status, with divorced customers paying the highest average premium (\$242), and singles paying the lowest (\$136)

While marital status heavily impacts monthly premiums, age is an important factor in explaining the difference.

Divorced customers pay a higher premium due to the specific benefits included in their selected plans.

See Benefits Section (page 23) for more detail.

# Individual Plan Premiums By State Source: eHealthInsurance

State	Avg Monthly Premium	Avg Age	Percent Uninsured
AK*	\$ 157	30.1	17.0%
AL*	\$ 180	28.0	13.5%
AR	\$ 123	33.0	16.4%
AZ	\$ 122	29.6	17.1%
CA	\$ 130	29.8	18.7%
CO	\$ 124	30.3	17.0%
CT	\$ 161	34.4	11.6%
DC	\$ 191	31.1	13.3%
DE*	\$ 150	32.1	14.5%
FL	\$ 162	30.8	19.9%
GA	\$ 134	31.0	17.4%
IA*	\$ 100	31.0	9.5%
ID*	\$ 140	36.0	15.4%
IL	\$ 130	30.4	14.0%
IN	\$ 125	30.1	14.2%
KS	\$ 120	29.1	11.1%
KY	\$ 122	29.8	14.3%
LA*	\$ 178	28.1	17.2%
MD	\$ 175	29.8	14.6%
MI	\$ 98	29.8	11.6%
MN	\$ 154	32.1	8.9%
MO	\$ 108	28.6	12.6%

State	Avg Monthly Premium	Avg Age	Percent Uninsured
MS*	\$ 142	33.0	17.1%
MT*	\$ 135	30.0	19.1%
NC	\$ 200	30.8	15.7%
ND*	\$ 198	37.3	11.2%
NE	\$ 108	27.4	11.4%
NJ	\$ 245	33.1	15.3%
NM	\$ 145	33.8	21.0%
NV	\$ 156	31.9	18.5%
NY	\$ 379	40.3	14.2%
OH	\$ 128	30.0	11.4%
OK*	\$ 129	32.3	19.9%
OR	\$ 157	30.3	16.5%
PA	\$ 153	28.8	11.9%
SC	\$ 141	31.5	14.7%
SD*	\$ 123	27.1	12.0%
TN	\$ 128	29.8	14.1%
TX	\$ 121	29.2	25.0%
UT	\$ 102	28.7	14.1%
VA	\$ 149	30.5	14.4%
WA	\$ 218	33.8	13.0%
WI	\$ 124	31.3	10.4%
WY*	\$ 107	25.4	14.0%

Note: Of the sample of 80,000, states denoted with an asterisk do not have a sufficient number of policies to determine the average monthly premium at an 80% confidence level for those particular states.

Due to the nature of reporting from carriers for Tennessee, the average monthly premium for Tennessee was projected from the average monthly premium for BOTH Individual and Family Plans (combined) and not just Individual Plans.

States where eHealthInsurance Services, Inc. did not sell Major Medical Plans at the time of the data analysis are: Hawaii, Massachusetts, Maine, New Hampshire, Rhode Island, Vermont, and West Virginia.

Data source of "Percent Uninsured" is US Census Bureau: *Current Population Survey, 2005 Annual Social and Economic Supplement, July 19, 2005*

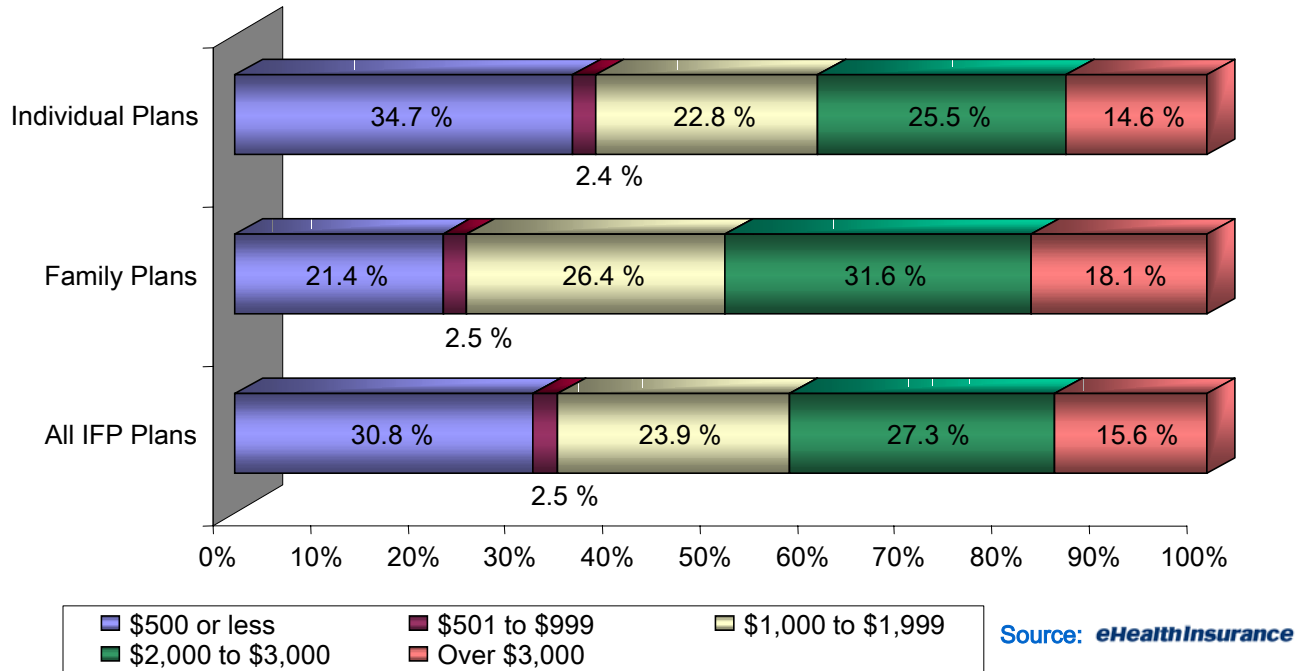
The range of average monthly premiums falls between \$98 for Michigan and \$379 for New York. This represents a difference of \$281, or 287% increase in cost.

For more detailed state data, please see Appendix A.

# Major Medical Plan Benefits



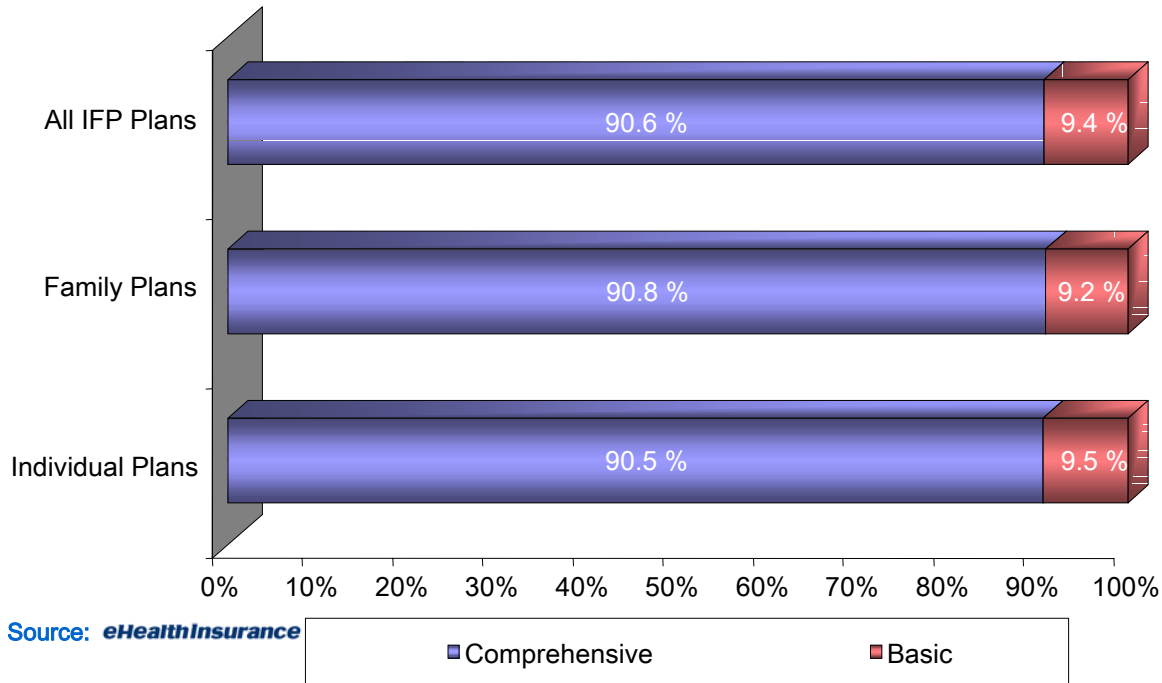
# Deductible Level



Sixty-three percent of Individual Plans and 50% of Family Plans have deductible levels that meet the requirements applied to plans that are eligible to be paired with a Health Savings Account (\$1000 for individuals and \$2000 for families).

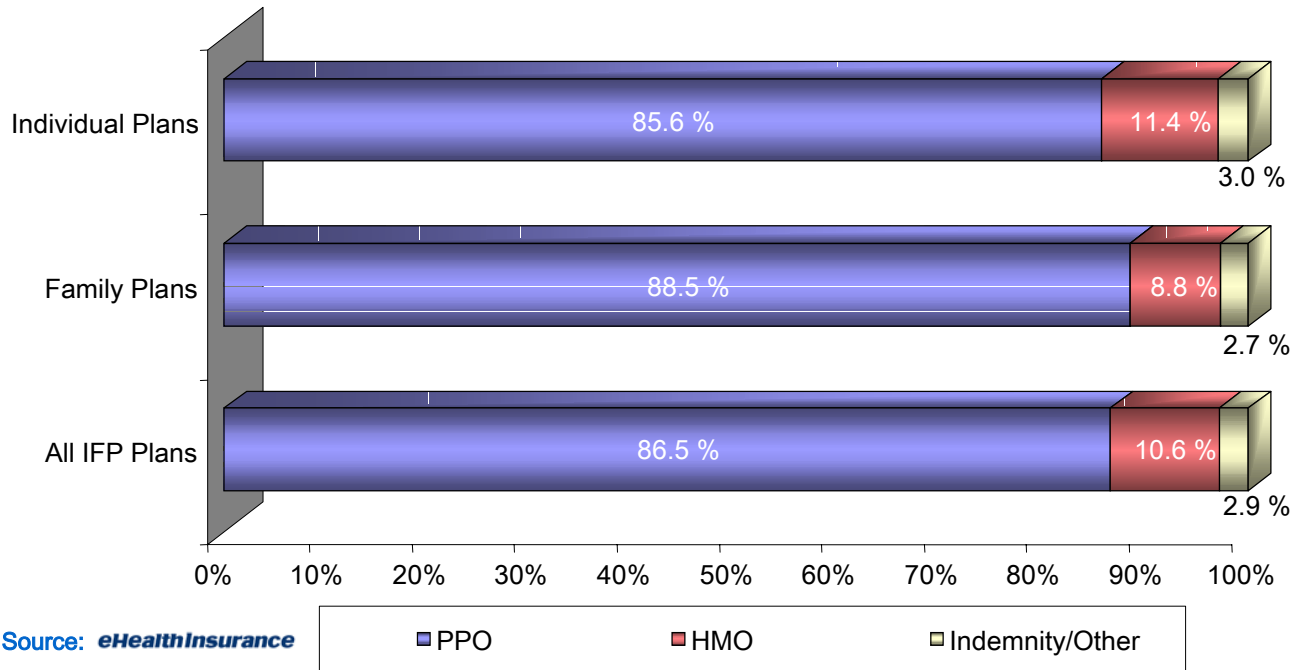
- Thirty-five percent of Individual plans, and 21% of Family Plans have deductibles of \$500 or less

# Coverage Level



Among both Individual and Family Plans, approximately 91% offer comprehensive coverage, which include: Inpatient Care, Outpatient Care, Lab and Test benefits.

# Type of Product



Source: eHealthInsurance

Eighty-five percent of individuals and families have purchased PPO plans.

PPO: A type of managed care health insurance plan that allows you, as a member, to visit whatever in-network physician or healthcare provider you wish without first requiring a referral from a primary care physician. Services will typically be covered at a higher benefit level when rendered by a network provider.

HMO: A health insurance plan or organization that provides a wide range of comprehensive healthcare services through a network of doctors, hospitals, labs, etc. who agree to provide services to HMO members at a pre-negotiated rate.

# Office Visit Co-payment

Office Visit Copayment	Individual Plans	Family Plans	All IFP Plans
\$ 0	38.6 %	43.0 %	39.9 %
\$ 10	4.4 %	2.4 %	3.8 %
\$ 15	4.6 %	4.5 %	4.6 %
\$ 20	10.5 %	8.7 %	10.0 %
\$ 25	13.8 %	12.2 %	13.3 %
\$ 30	15.2 %	17.9 %	16.0 %
\$ 35	3.8 %	3.3 %	3.7 %
\$ 40	8.3 %	6.6 %	7.8 %
\$ 45	0.8 %	1.2 %	0.9 %
\$ 50	0.0 %	0.1 %	0.0 %

Source: *eHealthInsurance*

Almost 40% of plans purchased require no co-payment for office visits.

Fifty-eight percent of purchased plans require a co-payment of \$20 or less.

## Specific Plan Benefits

Benefit	Percent of Plans Covering the Following Benefits		
	Individual	Family	All IFP Plans
Chemical Dependency	62.1%	58.5%	61.0%
Chiropractic Care	69.5%	64.0%	67.9%
Emergency Room	99.8%	99.9%	99.8%
Lab X-ray	98.6%	99.3%	98.8%
Maternity	47.4%	42.3%	45.9%
Mental Health	79.5%	77.1%	78.8%
OBGYN	95.0%	95.9%	95.2%
Periodic Health Exams	84.7%	84.8%	84.7%
Prescription Drugs	80.0%	79.7%	79.9%
Discount card *	3.4%	3.7%	3.5%

\* Incremental to Prescription Drug Coverage

Source: [eHealthInsurance](#)

Individuals and families tend to select plans with similar benefits.

However, Individual Policy holders are more likely to purchase plans that offer some level of chemical dependency, chiropractic, and maternity coverage.

- Some level of ER benefits are nearly universal among all plans (99.8% overall). Lab X-ray (98.8%) and OBGYN coverage (95.2%) are also commonly included. In strong contrast, maternity benefits are only covered in 46% of all plans.

# Comparison of Individual Plan Benefits: Men and Women

Benefit	Percent of Plans Covering the Following Benefits	
	Women	Men
Chemical Dependency	63.2%	61.0%
Chiropractic Care	68.7%	70.3%
Emergency Room	99.8%	99.8%
Lab X-ray	98.6%	98.5%
Maternity	49.9%	44.9%
Mental Health	80.4%	78.7%
OBGYN	95.9%	94.0%
Periodic Health Exams	86.3%	83.0%
Prescription Drugs	81.8%	78.2%
Discount card *	3.4%	3.5%

\* Incremental to Prescription Drug Coverage

Deductible	Women	Men
\$500 or less	35.0 %	34.4 %
\$501 to \$999	2.7 %	2.2 %
\$1,000 to \$1,500	21.7 %	23.8 %
\$1,501 to \$1,999	0.0 %	0.0 %
\$2,000 to \$3,000	25.5 %	25.4 %
Over \$3,000	15.0 %	14.2 %
<b>Total</b>	<b>100 %</b>	<b>100 %</b>

Source: eHealthInsurance

On average, plans selected by women are more likely to offer maternity and prescription drug coverage.

Men and women have similar deductibles on their selected plans.

# Comparison of Individual Plan Benefits: Marital Status

	Percent of Plans Covering the Following Benefits		
	Divorced	Married	Single
Chemical Dependency	70.7%	61.8%	59.4%
Chiropractic Care	90.4%	65.3%	66.2%
Emergency Room	100.0%	100.0%	100.0%
Lab X-ray	99.5%	98.7%	97.9%
Maternity	43.0%	43.5%	45.3%
Mental Health	87.8%	81.7%	83.2%
OBGYN	94.9%	97.2%	97.8%
Periodic Health Exams	94.3%	88.1%	88.9%
Prescription Drugs	83.8%	80.7%	83.0%
Discount card *	13.0%	5.3%	4.2%

\* Incremental to Prescription Drug Coverage

Deductible	Divorced	Married	Single
\$500 or less	31.3 %	31.0 %	36.7 %
\$501 to \$999	4.0 %	2.4 %	2.7 %
\$1,000 to \$1,500	21.0 %	19.8 %	18.9 %
\$1,501 to \$1,999	0.0 %	0.0 %	0.0 %
\$2,000 to \$3,000	25.8 %	30.3 %	27.1 %
Over \$3,000	17.9 %	16.4 %	14.5 %

Source: eHealthInsurance

Divorced Individual Plan holders are more likely to elect plans that offer: chemical dependency, chiropractic care, mental health, periodic exams, and prescription discount card benefits.

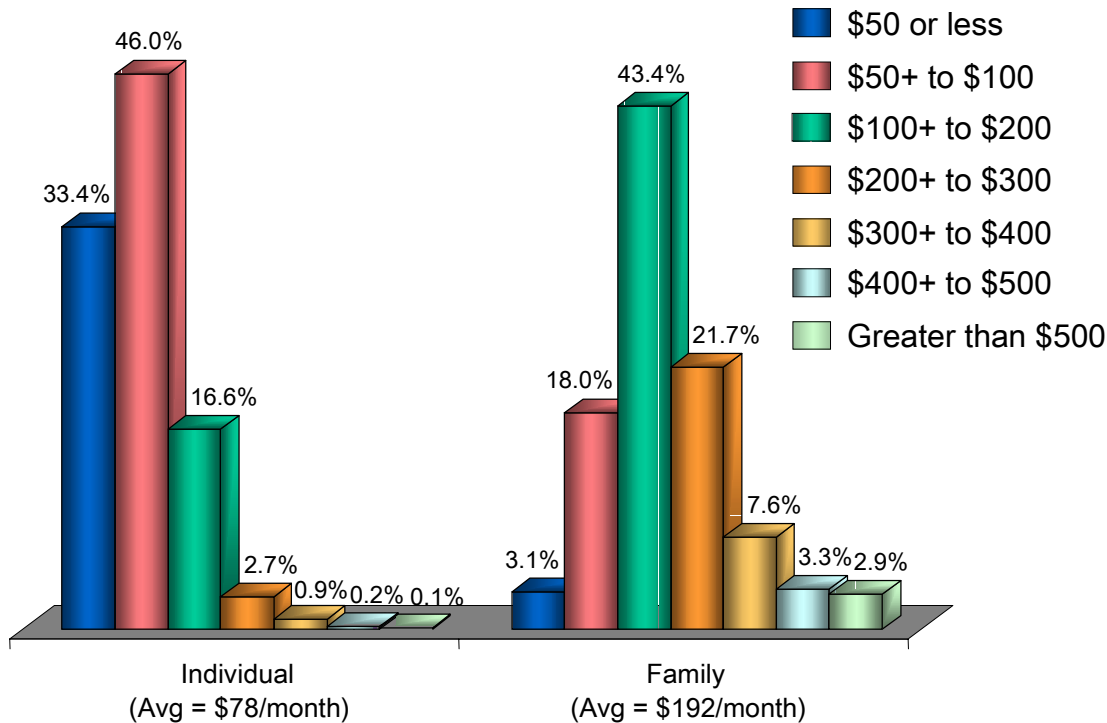
There are very few differences between benefits selected by single and married Individual Plan holders, suggesting benefit selection does not contribute to the difference in average cost of their respective plans.

Single Individual Plan holders are more likely to have a deductible of \$500 or less.

# Short Term Plan Premiums



## Monthly Premiums for Short Term Plans



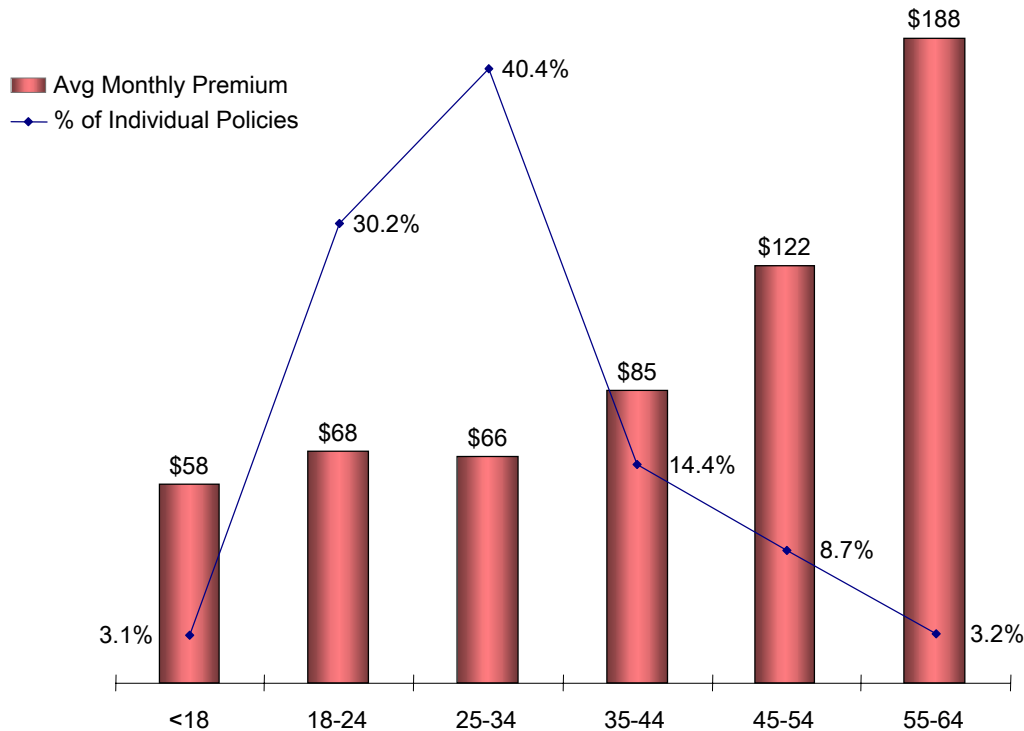
Source: eHealthInsurance

Short-Term plans are less expensive than Major Medical Plans; an individual can receive coverage for less than \$80 per month, on average.

Seventy-nine percent of all Short-Term Individual Plan holders are paying \$100 per month or less.

- The average monthly premium for Individual Plans is \$78
- The average monthly premium for Family Plans is \$192

## Short Term Individual Plan Premiums By Age

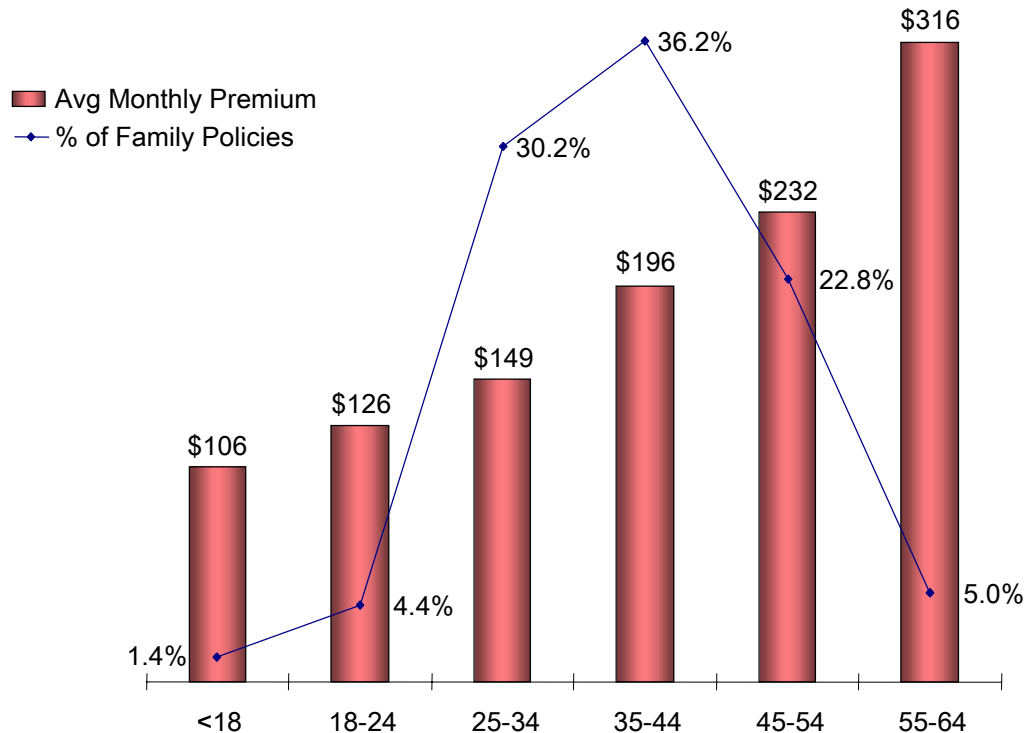


Source: eHealthInsurance

Seventy-four percent of Short-Term Individual Plan holders are under the age of 35, with the largest group, or 40%, between 25 and 34.

Unlike Major Medical Plans, there is little variation in premiums for Short-Term Plans for Individual Plan holders under the age of 35.

# Short Term Family Plan Premiums By Age



Source: eHealthInsurance

Note: Under Family Plans "age" refers to the primary policy holder.

Two-thirds of the primary policy holders of Short-Term Family Plans are between the ages of 25 and 44.

As with Major Medical Plans, among Short-Term Family Plans, the increase in monthly premiums has a direct correlation to the age of the primary policy holder.

## Short Term Plan Premiums by Gender

Individual			
Gender	Avg Monthly Premium	Avg Number of Members	Avg Cost per Member
F	\$ 81	1	\$ 81
M	\$ 75	1	\$ 75

Family			
Gender	Avg Monthly Premium	Avg Number of Members	Avg Cost per Member
F	\$ 175	2.84	\$ 62
M	\$ 201	3.21	\$ 63

Source: [eHealthInsurance](#)

Note: Under Family Plans "gender" refers to the primary policy holder.

As with Major Medical Plans, there is a significant difference in Short-Term Plan premiums between men and women.

On average, women pay 8% more for Short-Term Individual Plans than do men (\$81 vs. \$75).

The reverse is true for Family Plans, where on average male primary policy holders pay 15% more than females (\$201 vs. \$175). However, there is no difference, when evaluated on a cost per member basis.

# Short Term Family Plan Premiums By Number of Members on Policy

Members on Policy	Monthly Premium	Cost per Member	% of Family Policies
2	\$ 159	\$ 80	41.1 %
3	\$ 193	\$ 64	24.3 %
4	\$ 225	\$ 56	23.2 %
5	\$ 240	\$ 48	8.8 %
6+	\$ 239	\$ 40	2.6 %
<b>Total</b>	<b>\$ 192</b>	<b>\$ 64</b>	<b>100 %</b>

**Average Number of Members Per Policy = 3.08**

Source: [eHealthInsurance](#)

At 3.08, the average number of members per Short-Term Plan is marginally higher than that of Major Medical Plans.

The largest portion, or 41%, of all Short-Term Family Plans consist of 2 members.

Appendix A – The 2005 Cost and Benefits Report: State Detail Data (All 50 States)

Health Insurance Premiums for Single Policies by State

State	Population (in Thousands)	% of U.S. Population	% Uninsured (1)	Avg. monthly premium per single: all ages	Avg. annual premium per single: all ages	Avg. age	Guaranteed Issue (2)	Community Rating (3)
California	35,860	12.3%	18.7%	\$130	\$1,560	30		
Texas	22,323	7.7%	25.0%	\$121	\$1,462	29		
New York	19,049	6.5%	14.2%	\$379	\$4,548	40	Yes	Yes
Florida	17,467	6.0%	19.9%	\$162	\$1,944	31		
Illinois	12,295	4.3%	14.0%	\$130	\$1,560	30		
Pennsylvania	12,178	4.2%	11.9%	\$153	\$1,836	29		
Ohio	11,270	3.9%	11.4%	\$128	\$1,536	30		
Michigan	9,972	3.4%	11.6%	\$98	\$1,176	30		
Georgia	8,705	3.0%	17.4%	\$134	\$1,608	31		
New Jersey	8,665	3.0%	15.3%	\$245	\$2,940	33	Yes	Yes
North Carolina	8,431	2.9%	15.7%	\$200	\$2,400	31		
Virginia	7,387	2.5%	14.4%	\$149	\$1,788	31		
Indiana	6,137	2.1%	14.2%	\$125	\$1,500	30		
Washington	6,116	2.1%	13.0%	\$218	\$2,616	34		
Tennessee	5,857	2.0%	14.1%	\$128	\$1,536	30		
Arizona	5,767	2.0%	17.1%	\$122	\$1,464	30		
Missouri	5,615	1.9%	12.6%	\$108	\$1,296	29		
Maryland	5,549	1.9%	14.6%	\$175	\$2,100	30		
Wisconsin	5,465	1.9%	10.4%	\$124	\$1,488	31		
Minnesota	5,125	1.8%	8.9%	\$154	\$1,848	32		
Colorado	4,523	1.6%	17.0%	\$124	\$1,488	30		
Alabama	4,511	1.5%	13.5%	\$180	\$2,160	28		
Louisiana	4,422	1.5%	17.2%	\$178	\$2,136	28		
South Carolina	4,123	1.4%	14.7%	\$141	\$1,692	32		
Kentucky	4,074	1.4%	14.3%	\$122	\$1,464	30		
Oregon	3,582	1.2%	16.5%	\$157	\$1,884	30		
Connecticut	3,493	1.2%	11.6%	\$161	\$1,932	34		
Oklahoma	3,445	1.2%	19.9%	\$129	\$1,548	32		
Iowa	2,906	1.0%	9.5%	\$100	\$1,200	31		
Mississippi	2,888	1.0%	17.1%	\$142	\$1,704	33		
Arkansas	2,731	0.9%	16.4%	\$123	\$1,476	33		
Kansas	2,674	0.9%	11.1%	\$120	\$1,440	30		
Utah	2,394	0.8%	14.1%	\$102	\$1,224	29		
Nevada	2,390	0.8%	18.5%	\$156	\$1,872	32		
New Mexico	1,902	0.7%	21.0%	\$145	\$1,740	34		
Nebraska	1,728	0.6%	11.4%	\$108	\$1,296	27		
Idaho	1,376	0.5%	15.4%	\$140	\$1,680	36		
Montana	912	0.3%	19.1%	\$135	\$1,620	30		
Delaware	827	0.3%	14.5%	\$150	\$1,800	32		
South Dakota	754	0.3%	12.0%	\$123	\$1,476	27		
Alaska	648	0.2%	17.0%	\$157	\$1,884	30		
North Dakota	627	0.2%	11.2%	\$198	\$2,376	37		
Dist. Columbia	547	0.2%	13.3%	\$191	\$2,292	31		
Wyoming	498	0.2%	14.0%	\$107	\$1,284	25		
Subtotal	277,478	95.3%		\$148	\$1,772	31		

States not included:

State	Population (in Thousands)	% of U.S. Population	% Uninsured (1)	Avg. monthly premium per single: all ages	Avg. annual premium per single: all ages	Avg. age	Guaranteed Issue (2)	Community Rating (3)	Other (4)
Massachusetts	6,373	2.2%	11.7%	N/A	N/A	N/A	Yes		
West Virginia	1,793	0.6%	16.4%	N/A	N/A	N/A			Yes
Maine	1,294	0.4%	10.0%	N/A	N/A	N/A	Yes	Yes	
New Hampshire	1,293	0.4%	11.7%	N/A	N/A	N/A	Yes	Yes	
Hawaii	1,290	0.4%	9.6%	N/A	N/A	N/A			Yes
Rhode Island	1,057	0.4%	11.4%	N/A	N/A	N/A	Yes	Yes	
Vermont	617	0.2%	11.2%	N/A	N/A	N/A			
Subtotal	13,677	4.7%							
Total US	291,155								

(1) Data source: "Percent Uninsured" is US Census Bureau; Current Population Survey, 2005 Annual Social and Economic Supplement, July 9, 2005  
 (2) Law requires all applicants to be issued a policy regardless of health  
 (3) Law requires policies to be priced independent of age and/or health  
 (4) State Department of Insurance and/or state-level carriers limit non-adversely affected in order rates.