

Attachment A

**Idaho Individual High Risk Reinsurance Pool
Mandated Plan Street Premium Rates
Monthly Premium Rates For Policies Issued or Renewed Effective 1/1/2024**

Age/Gender	Non-Smoker Rates						Smoker Rates					
	Basic	Standard	Cat A	Cat B	HSA-S	HSA-F	Basic	Standard	Cat A	Cat B	HSA-S	HSA-F
<i>Unisex</i>												
0-14	\$ 256	\$ 294	\$ 270	\$ 245	\$ 298	\$ 298	\$ 307	\$ 352	\$ 325	\$ 294	\$ 358	\$ 358
15	278	320	295	266	325	325	334	384	353	320	390	390
16	287	330	304	275	335	335	345	396	364	330	402	402
17	296	340	313	283	345	345	355	408	375	340	414	414
18	305	350	323	292	356	356	366	420	387	350	427	427
19	315	361	333	301	367	367	377	433	399	361	440	440
20	324	372	343	310	378	378	389	447	412	372	454	454
21	334	384	354	320	390	390	401	461	424	384	468	468
22	334	384	354	320	390	390	401	461	424	384	468	468
23	334	384	354	320	390	390	401	461	424	384	468	468
24	334	384	354	320	390	390	401	461	424	384	468	468
25	336	385	355	321	391	391	403	462	426	385	470	470
26	342	393	362	327	399	399	411	472	434	393	479	479
27	350	402	371	335	408	408	420	483	445	402	490	490
28	363	417	384	348	424	424	436	501	461	417	508	508
29	374	429	396	358	436	436	449	515	475	429	523	523
30	379	436	401	363	442	442	455	523	482	436	531	531
31	387	445	410	371	452	452	465	534	492	445	542	542
32	395	454	418	378	461	461	474	545	502	454	553	553
33	400	460	424	383	467	467	480	552	508	460	560	560
34	406	466	429	388	473	473	487	559	515	466	568	568
35	408	469	432	391	476	476	490	563	518	469	572	572
36	411	472	435	393	479	479	493	566	522	472	575	575
37	414	475	438	396	482	482	497	570	525	475	579	579
38	416	478	441	398	486	486	500	574	529	478	583	583
39	422	484	446	404	492	492	506	581	535	484	590	590
40	427	490	452	409	498	498	513	589	542	490	598	598
41	435	500	460	416	507	507	522	600	552	500	609	609
42	443	508	468	424	516	516	531	610	562	508	620	620
43	454	521	480	434	529	529	544	625	576	521	635	635
44	467	536	494	447	544	544	560	643	593	536	653	653
45	483	554	511	462	563	563	579	665	613	554	675	675
46	501	576	530	480	585	585	602	691	636	576	702	702
47	522	600	553	500	609	609	627	720	663	600	731	731
48	546	627	578	523	637	637	656	753	694	627	765	765
49	570	655	603	546	665	665	684	786	724	655	798	798
50	597	685	631	571	696	696	716	822	758	685	835	835
51	623	716	659	596	727	727	748	859	791	716	872	872
52	652	749	690	624	761	761	783	899	828	749	913	913
53	682	783	721	652	795	795	818	939	865	783	954	954
54	714	819	755	683	832	832	856	983	906	819	999	999
55	745	856	788	713	869	869	894	1,027	946	856	1,043	1,043
56	780	895	825	746	909	909	936	1,074	990	895	1,091	1,091
57	815	935	862	779	950	950	977	1,122	1,034	935	1,140	1,140
58	852	978	901	815	993	993	1,022	1,173	1,081	978	1,192	1,192
59	870	999	920	832	1,014	1,014	1,044	1,199	1,104	999	1,217	1,217
60	907	1,042	960	868	1,058	1,058	1,089	1,250	1,151	1,042	1,269	1,269
61	939	1,078	993	899	1,095	1,095	1,127	1,294	1,192	1,078	1,314	1,314
62	960	1,103	1,016	919	1,120	1,120	1,152	1,323	1,219	1,103	1,344	1,344
63	987	1,133	1,044	944	1,150	1,150	1,184	1,359	1,252	1,133	1,381	1,381
64	1,003	1,151	1,061	959	1,169	1,169	1,203	1,382	1,273	1,151	1,403	1,403
65+	1,003	1,151	1,061	959	1,169	1,169	1,203	1,382	1,273	1,151	1,403	1,403

Note: These rates are to apply for twelve months from issue.

This work product was prepared solely to provide assistance to the Idaho Individual High Risk Reinsurance Pool. Milliman does not intend to benefit and assumes no duty or liability to other parties who receive this work. Milliman recommends any third party recipient be aided by its own actuary or other qualified professional when reviewing the Milliman work product.