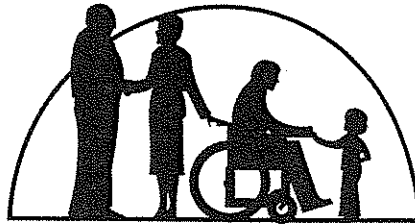


MinnesotaCare Premium Table

July 2005 through June 2006



Minnesota Department of **Human Services**

These tables are intended to approximate the required premium as calculated by the premium calculation program. The premium calculation performed by the system is the official calculation.

These tables do not adequately deal with cases which include children with a minimum monthly premium of \$4.
Use the tables to calculate the adult premium required in these cases.

For example: To approximate the premium for a three-person family (two children who qualify for the \$4 premium and one adult) use the table to calculate the adult premium.
Add \$8 (the \$4 premium for both children).

**MinnesotaCare Premium Table
Family Size 1 - 7/1/05 - 6/30/06**

DHS-4139 7-05

These tables are intended to approximate the required premium as calculated by the premium calculation program.
The premium calculation performed by the system is the official calculation.

| Gross Monthly Income | | Estimated Premium | | |
|----------------------|----------|-------------------|------------------|------------------|
| From | To | 1 Person Covered | 2 People Covered | 3 People Covered |
| \$0.00 | \$46.69 | \$4 | X | X |
| 46.70 | 93.39 | 4 | X | X |
| 93.40 | 140.09 | 4 | X | X |
| 140.10 | 186.79 | 4 | X | X |
| 186.80 | 233.49 | 4 | X | X |
| 233.50 | 280.19 | 4 | X | X |
| 280.20 | 326.89 | 5 | X | X |
| 326.90 | 373.59 | 5 | X | X |
| 373.60 | 420.29 | 6 | X | X |
| 420.30 | 467.00 | 7 | X | X |
| 467.01 | 488.59 | 9 | X | X |
| 488.60 | 510.18 | 9 | X | X |
| 510.19 | 531.76 | 9 | X | X |
| 531.77 | 553.35 | 10 | X | X |
| 553.36 | 574.94 | 10 | X | X |
| 574.95 | 596.53 | 11 | X | X |
| 596.54 | 618.11 | 11 | X | X |
| 618.12 | 639.70 | 11 | X | X |
| 639.71 | 661.29 | 12 | X | X |
| 661.30 | 682.88 | 12 | X | X |
| 682.89 | 704.46 | 16 | X | X |
| 704.47 | 726.05 | 16 | X | X |
| 726.06 | 747.64 | 17 | X | X |
| 747.65 | 769.23 | 17 | X | X |
| 769.24 | 790.81 | 18 | X | X |
| 790.82 | 798.00 | 18 | X | X |
| 798.01 | 833.99 | 23 | X | X |
| 834.00 | 855.58 | 24 | X | X |
| 855.59 | 877.17 | 24 | X | X |
| 877.18 | 898.75 | 25 | X | X |
| 898.76 | 920.34 | 33 | X | X |
| 920.35 | 941.93 | 34 | X | X |
| 941.94 | 963.52 | 34 | X | X |
| 963.53 | 985.10 | 35 | X | X |
| 985.11 | 1,006.69 | 36 | X | X |
| 1,006.70 | 1,028.28 | 37 | X | X |
| 1,028.29 | 1,049.87 | 37 | X | X |
| 1,049.88 | 1,071.45 | 38 | X | X |

**MinnesotaCare Premium Table
Family Size 1 - 7/1/05 - 6/30/06**

DHS-4139 7-05

These tables are intended to approximate the required premium as calculated by the premium calculation program.
The premium calculation performed by the system is the official calculation.

| Gross Monthly Income | | Estimated Premium | | |
|----------------------|----------|-------------------|------------------|------------------|
| From | To | 1 Person Covered | 2 People Covered | 3 People Covered |
| 1,071.46 | 1,093.04 | 39 | X | X |
| 1,093.05 | 1,114.63 | 40 | X | X |
| 1,114.64 | 1,136.22 | 48 | X | X |
| 1,136.23 | 1,157.80 | 49 | X | X |
| 1,157.81 | 1,179.39 | 50 | X | X |
| 1,179.40 | 1,200.98 | 51 | X | X |
| 1,200.99 | 1,222.57 | 52 | X | X |
| 1,222.58 | 1,244.15 | 53 | X | X |
| 1,244.16 | 1,265.74 | 54 | X | X |
| 1,265.75 | 1,287.33 | 55 | X | X |
| 1,287.34 | 1,308.92 | 56 | X | X |
| 1,308.93 | 1,330.50 | 57 | X | X |
| 1,330.51 | 1,352.09 | 71 | X | X |
| 1,352.10 | 1,373.68 | 72 | X | X |
| 1,373.69 | 1,395.27 | 73 | X | X |
| 1,395.28 | 1,416.85 | 75 | X | X |
| 1,416.86 | 1,438.44 | 76 | X | X |
| 1,438.45 | 1,460.03 | 77 | X | X |
| 1,460.04 | 1,481.62 | 78 | X | X |
| 1,481.63 | 1,503.20 | 79 | X | X |
| 1,503.21 | 1,524.79 | 80 | X | X |
| 1,524.80 | 1,546.38 | 81 | X | X |
| 1,546.39 | 1,567.97 | 100 | X | X |
| 1,567.98 | 1,589.55 | 101 | X | X |
| 1,589.56 | 1,595.00 | 102 | X | X |
| 1,595.01 | 1,632.73 | 111 | X | X |
| 1,632.74 | 1,654.32 | 113 | X | X |
| 1,654.33 | 1,675.90 | 115 | X | X |
| 1,675.91 | 1,697.49 | 116 | X | X |
| 1,697.50 | 1,719.08 | 118 | X | X |
| 1,719.09 | 1,740.67 | 119 | X | X |
| 1,740.68 | 1,762.25 | 121 | X | X |
| 1,762.26 | 1,783.84 | 149 | X | X |
| 1,783.85 | 1,805.43 | 151 | X | X |
| 1,805.44 | 1,827.02 | 153 | X | X |
| 1,827.03 | 1,848.60 | 154 | X | X |
| 1,848.61 | 1,870.19 | 156 | X | X |
| 1,870.20 | 1,891.78 | 158 | X | X |

**MinnesotaCare Premium Table
Family Size 1 - 7/1/05 - 6/30/06**

DHS-4139 7-05

| These tables are intended to approximate the required premium as calculated by the premium calculation program. The premium calculation performed by the system is the official calculation. | | | | |
|---|-------------------------------------|-------------------|------------------|------------------|
| Gross Monthly Income | | Estimated Premium | | |
| From | To | 1 Person Covered | 2 People Covered | 3 People Covered |
| 1,891.79 | 1,913.37 | 160 | X | X |
| 1,913.38 | 1,934.95 | 162 | X | X |
| 1,934.96 | 1,956.54 | 163 | X | X |
| 1,956.55 | 1,978.13 | 165 | X | X |
| 1,978.14 | 1,999.72 | 195 | X | X |
| 1,999.73 | 2,021.30 | 197 | X | X |
| 2,021.31 | 2,042.89 | 199 | X | X |
| 2,042.90 | 2,064.48 | 201 | X | X |
| 2,064.49 | 2,086.07 | 203 | X | X |
| 2,086.08 | 2,107.65 | 205 | X | X |
| 2,107.66 | 2,129.24 | 208 | X | X |
| 2,129.25 | 2,150.83 | 210 | X | X |
| 2,150.84 | 2,172.42 | 212 | X | X |
| 2,172.43 | 2,194.00 | 214 | X | X |
| 2,194.01 | 2,134.01 and above are not eligible | | | |
| Some current enrollees, whose income exceeds the limit, may continue coverage for a period of time by paying the maximum premium: | | 313 | | |

**MinnesotaCare Premium Table
Family Size 2 - 7/1/05 - 6/30/06**

DHS-4139 7-05

| These tables are intended to approximate the required premium as calculated by the premium calculation program. The premium calculation performed by the system is the official calculation. | | | | |
|---|----------|-------------------|------------------|------------------|
| Gross Monthly Income | | Estimated Premium | | |
| From | To | 1 Person Covered | 2 People Covered | 3 People Covered |
| \$0.00 | \$58.29 | \$4 | \$8 | X |
| 58.30 | 116.59 | 4 | 8 | X |
| 116.60 | 174.89 | 4 | 8 | X |
| 174.90 | 233.19 | 4 | 8 | X |
| 233.20 | 291.49 | 4 | 8 | X |
| 291.50 | 349.79 | 4 | 8 | X |
| 349.80 | 408.09 | 4 | 8 | X |
| 408.10 | 466.39 | 4 | 8 | X |
| 466.40 | 524.69 | 4 | 8 | X |
| 524.70 | 583.00 | 4 | 8 | X |
| 583.01 | 612.49 | 5 | 11 | X |
| 612.50 | 641.98 | 6 | 11 | X |
| 641.99 | 671.46 | 6 | 12 | X |
| 671.47 | 700.95 | 6 | 12 | X |
| 700.96 | 730.44 | 6 | 13 | X |
| 730.45 | 759.93 | 7 | 13 | X |
| 759.94 | 789.41 | 7 | 14 | X |
| 789.42 | 818.90 | 7 | 14 | X |
| 818.91 | 848.39 | 8 | 15 | X |
| 848.40 | 877.88 | 8 | 16 | X |
| 877.89 | 907.36 | 10 | 21 | X |
| 907.37 | 936.85 | 11 | 21 | X |
| 936.86 | 966.34 | 11 | 22 | X |
| 966.35 | 995.83 | 11 | 23 | X |
| 995.84 | 1,025.31 | 12 | 23 | X |
| 1,025.32 | 1,054.80 | 12 | 24 | X |
| 1,054.81 | 1,070.00 | 12 | 24 | X |
| 1,070.01 | 1,113.78 | 15 | 31 | X |
| 1,113.79 | 1,143.26 | 16 | 32 | X |
| 1,143.27 | 1,172.75 | 16 | 32 | X |
| 1,172.76 | 1,202.24 | 21 | 43 | X |
| 1,202.25 | 1,231.73 | 22 | 44 | X |
| 1,231.74 | 1,261.21 | 22 | 45 | X |
| 1,261.22 | 1,290.70 | 23 | 46 | X |
| 1,290.71 | 1,320.19 | 23 | 47 | X |
| 1,320.20 | 1,349.68 | 24 | 48 | X |
| 1,349.69 | 1,379.16 | 25 | 49 | X |
| 1,379.17 | 1,408.65 | 25 | 50 | X |

MinnesotaCare Premium Table
Family Size 2 - 7/1/05 - 6/30/06

DHS-4139 7-05

| These tables are intended to approximate the required premium as calculated by the premium calculation program. The premium calculation performed by the system is the official calculation. | | | | |
|---|----------|-------------------|------------------|------------------|
| Gross Monthly Income | | Estimated Premium | | |
| From | To | 1 Person Covered | 2 People Covered | 3 People Covered |
| 1,408.66 | 1,438.14 | 26 | 51 | X |
| 1,438.15 | 1,467.63 | 26 | 52 | X |
| 1,467.64 | 1,497.11 | 32 | 64 | X |
| 1,497.12 | 1,526.60 | 33 | 65 | X |
| 1,526.61 | 1,556.09 | 33 | 66 | X |
| 1,556.10 | 1,585.58 | 34 | 68 | X |
| 1,585.59 | 1,615.06 | 34 | 69 | X |
| 1,615.07 | 1,644.55 | 35 | 70 | X |
| 1,644.56 | 1,674.04 | 36 | 71 | X |
| 1,674.05 | 1,703.53 | 36 | 73 | X |
| 1,703.54 | 1,733.01 | 37 | 74 | X |
| 1,733.02 | 1,762.50 | 38 | 75 | X |
| 1,762.51 | 1,791.99 | 47 | 94 | X |
| 1,792.00 | 1,821.48 | 48 | 96 | X |
| 1,821.49 | 1,850.96 | 49 | 97 | X |
| 1,850.97 | 1,880.45 | 49 | 99 | X |
| 1,880.46 | 1,909.94 | 50 | 100 | X |
| 1,909.95 | 1,939.43 | 51 | 102 | X |
| 1,939.44 | 1,968.91 | 52 | 104 | X |
| 1,968.92 | 1,998.40 | 53 | 105 | X |
| 1,998.41 | 2,027.89 | 53 | 107 | X |
| 2,027.90 | 2,057.38 | 54 | 108 | X |
| 2,057.39 | 2,086.86 | 66 | 133 | X |
| 2,086.87 | 2,116.35 | 67 | 135 | X |
| 2,116.36 | 2,139.00 | 68 | 136 | X |
| 2,139.01 | 2,175.33 | 74 | 149 | X |
| 2,175.34 | 2,204.81 | 76 | 151 | X |
| 2,204.82 | 2,234.30 | 77 | 153 | X |
| 2,234.31 | 2,263.79 | 78 | 155 | X |
| 2,263.80 | 2,293.28 | 79 | 157 | X |
| 2,293.29 | 2,322.76 | 80 | 159 | X |
| 2,322.77 | 2,352.25 | 81 | 161 | X |
| 2,352.26 | 2,381.74 | 99 | 199 | X |
| 2,381.75 | 2,411.23 | 101 | 201 | X |
| 2,411.24 | 2,440.71 | 102 | 204 | X |
| 2,440.72 | 2,470.20 | 103 | 206 | X |
| 2,470.21 | 2,499.69 | 104 | 209 | X |
| 2,499.70 | 2,529.18 | 106 | 211 | X |

**MinnesotaCare Premium Table
Family Size 2 - 7/1/05 - 6/30/06**

DHS-4139 7-05

| These tables are intended to approximate the required premium as calculated by the premium calculation program. The premium calculation performed by the system is the official calculation. | | | | |
|---|-------------------------------------|-------------------|------------------|------------------|
| Gross Monthly Income | | Estimated Premium | | |
| From | To | 1 Person Covered | 2 People Covered | 3 People Covered |
| 2,529.19 | 2,558.66 | 107 | 214 | X |
| 2,558.67 | 2,588.15 | 108 | 216 | X |
| 2,588.16 | 2,617.64 | 109 | 219 | X |
| 2,617.65 | 2,647.13 | 111 | 221 | X |
| 2,647.14 | 2,676.61 | 130 | 261 | X |
| 2,676.62 | 2,706.10 | 132 | 264 | X |
| 2,706.11 | 2,735.59 | 133 | 267 | X |
| 2,735.60 | 2,765.08 | 135 | 270 | X |
| 2,765.09 | 2,794.56 | 136 | 272 | X |
| 2,794.57 | 2,824.05 | 138 | 275 | X |
| 2,824.06 | 2,853.54 | 139 | 278 | X |
| 2,853.55 | 2,883.03 | 141 | 281 | X |
| 2,883.04 | 2,912.51 | 142 | 284 | X |
| 2,912.52 | 2,942.00 | 143 | 287 | X |
| 2,942.01 | 2,942.01 and above are not eligible | | | |
| Some current enrollees, whose income exceeds the limit, may continue coverage for a period of time by paying the maximum premium: | | 313 | 626 | |

**MinnesotaCare Premium Table
Family Size 3 - 7/1/05 - 6/30/06**

DHS-4139 7-05

These tables are intended to approximate the required premium as calculated by the premium calculation program.
The premium calculation performed by the system is the official calculation.

| Gross Monthly Income | | Estimated Premium | | |
|----------------------|----------|-------------------|------------------|------------------|
| From | To | 1 Person Covered | 2 People Covered | 3 People Covered |
| \$0.00 | \$70.89 | \$4 | \$8 | \$12 |
| 70.90 | 141.79 | 4 | 8 | 12 |
| 141.80 | 212.69 | 4 | 8 | 12 |
| 212.70 | 283.59 | 4 | 8 | 12 |
| 283.60 | 354.49 | 4 | 8 | 12 |
| 354.50 | 425.39 | 4 | 8 | 12 |
| 425.40 | 496.29 | 4 | 8 | 12 |
| 496.30 | 567.19 | 4 | 8 | 12 |
| 567.20 | 638.09 | 4 | 8 | 12 |
| 638.10 | 709.00 | 4 | 8 | 12 |
| 709.01 | 746.26 | 4 | 9 | 13 |
| 746.27 | 783.53 | 5 | 9 | 14 |
| 783.54 | 820.79 | 5 | 10 | 14 |
| 820.80 | 858.05 | 5 | 10 | 15 |
| 858.06 | 895.31 | 5 | 11 | 16 |
| 895.32 | 932.58 | 5 | 11 | 16 |
| 932.59 | 969.84 | 6 | 11 | 17 |
| 969.85 | 1,007.10 | 6 | 12 | 18 |
| 1,007.11 | 1,044.36 | 6 | 12 | 18 |
| 1,044.37 | 1,081.63 | 6 | 13 | 19 |
| 1,081.64 | 1,118.89 | 8 | 17 | 25 |
| 1,118.90 | 1,156.15 | 9 | 17 | 26 |
| 1,156.16 | 1,193.41 | 9 | 18 | 27 |
| 1,193.42 | 1,230.68 | 9 | 19 | 28 |
| 1,230.69 | 1,267.94 | 10 | 19 | 29 |
| 1,267.95 | 1,305.20 | 10 | 20 | 30 |
| 1,305.21 | 1,342.00 | 10 | 20 | 30 |
| 1,342.01 | 1,379.73 | 13 | 25 | 38 |
| 1,379.74 | 1,416.99 | 13 | 26 | 39 |
| 1,417.00 | 1,454.25 | 13 | 27 | 40 |
| 1,454.26 | 1,491.51 | 18 | 35 | 53 |
| 1,491.52 | 1,528.78 | 18 | 36 | 54 |
| 1,528.79 | 1,566.04 | 19 | 37 | 56 |
| 1,566.05 | 1,603.30 | 19 | 38 | 57 |
| 1,603.31 | 1,640.56 | 19 | 39 | 58 |
| 1,640.57 | 1,677.83 | 20 | 40 | 60 |
| 1,677.84 | 1,715.09 | 20 | 41 | 61 |
| 1,715.10 | 1,752.35 | 21 | 42 | 62 |

MinnesotaCare Premium Table
Family Size 3 - 7/1/05 - 6/30/06

DHS-4139 7-05

These tables are intended to approximate the required premium as calculated by the premium calculation program.
 The premium calculation performed by the system is the official calculation.

| Gross Monthly Income | | Estimated Premium | | |
|----------------------|----------|-------------------|------------------|------------------|
| From | To | 1 Person Covered | 2 People Covered | 3 People Covered |
| 1,752.36 | 1,789.61 | 21 | 43 | 64 |
| 1,789.62 | 1,826.89 | 22 | 43 | 65 |
| 1,826.90 | 1,864.15 | 26 | 53 | 79 |
| 1,864.16 | 1,901.41 | 27 | 54 | 81 |
| 1,901.42 | 1,938.67 | 28 | 55 | 83 |
| 1,938.68 | 1,975.94 | 28 | 56 | 84 |
| 1,975.95 | 2,013.20 | 29 | 57 | 86 |
| 2,013.21 | 2,050.46 | 29 | 58 | 87 |
| 2,050.47 | 2,087.72 | 30 | 59 | 89 |
| 2,087.73 | 2,124.99 | 30 | 60 | 91 |
| 2,125.00 | 2,162.25 | 31 | 61 | 92 |
| 2,162.26 | 2,199.50 | 31 | 63 | 94 |
| 2,199.51 | 2,236.76 | 39 | 78 | 118 |
| 2,236.77 | 2,274.03 | 40 | 80 | 120 |
| 2,274.04 | 2,311.29 | 41 | 81 | 122 |
| 2,311.30 | 2,348.55 | 41 | 82 | 123 |
| 2,348.56 | 2,385.81 | 42 | 84 | 125 |
| 2,385.82 | 2,423.08 | 42 | 85 | 127 |
| 2,423.09 | 2,460.34 | 43 | 86 | 129 |
| 2,460.35 | 2,497.60 | 44 | 88 | 131 |
| 2,497.61 | 2,534.86 | 44 | 89 | 133 |
| 2,534.87 | 2,572.14 | 45 | 90 | 135 |
| 2,572.15 | 2,609.40 | 55 | 111 | 166 |
| 2,609.41 | 2,646.66 | 56 | 112 | 168 |
| 2,646.67 | 2,683.00 | 57 | 114 | 171 |
| 2,683.01 | 2,721.19 | 62 | 124 | 186 |
| 2,721.20 | 2,758.45 | 63 | 126 | 189 |
| 2,758.46 | 2,795.71 | 64 | 128 | 192 |
| 2,795.72 | 2,832.97 | 65 | 129 | 194 |
| 2,832.98 | 2,870.24 | 66 | 131 | 197 |
| 2,870.25 | 2,907.50 | 66 | 133 | 199 |
| 2,907.51 | 2,944.75 | 67 | 135 | 202 |
| 2,944.76 | 2,982.01 | 83 | 166 | 249 |
| 2,982.02 | 3,019.28 | 84 | 168 | 252 |
| 3,019.29 | 3,056.54 | 85 | 170 | 255 |
| 3,056.55 | 3,093.80 | 86 | 172 | 258 |
| 3,093.81 | 3,131.06 | 87 | 174 | 261 |
| 3,131.07 | 3,168.33 | 88 | 176 | 265 |

**MinnesotaCare Premium Table
Family Size 3 - 7/1/05 - 6/30/06**

DHS-4139 7-05

| These tables are intended to approximate the required premium as calculated by the premium calculation program. The premium calculation performed by the system is the official calculation. | | | | |
|---|-------------------------------------|-------------------|------------------|------------------|
| Gross Monthly Income | | Estimated Premium | | |
| From | To | 1 Person Covered | 2 People Covered | 3 People Covered |
| 3,168.34 | 3,205.59 | 89 | 178 | 268 |
| 3,205.60 | 3,242.85 | 90 | 181 | 271 |
| 3,242.86 | 3,280.11 | 91 | 183 | 274 |
| 3,280.12 | 3,317.39 | 92 | 185 | 277 |
| 3,317.40 | 3,354.65 | 109 | 218 | 327 |
| 3,354.66 | 3,391.91 | 110 | 220 | 331 |
| 3,391.92 | 3,429.17 | 111 | 223 | 334 |
| 3,429.18 | 3,466.43 | 113 | 225 | 338 |
| 3,466.44 | 3,503.70 | 114 | 228 | 342 |
| 3,503.71 | 3,540.96 | 115 | 230 | 345 |
| 3,540.97 | 3,578.22 | 116 | 233 | 349 |
| 3,578.23 | 3,615.48 | 117 | 235 | 352 |
| 3,615.49 | 3,652.75 | 119 | 237 | 356 |
| 3,652.76 | 3,690.00 | 120 | 240 | 360 |
| 3,690.01 | 3,690.01 and above are not eligible | | | |
| Some current enrollees, whose income exceeds the limit, may continue coverage for a period of time by paying the maximum premium: | | 313 | 626 | 939 |

MinnesotaCare Premium Table
Family Size 4 - 7/1/05 - 6/30/06

DHS-4139 7-05

| These tables are intended to approximate the required premium as calculated by the premium calculation program. The premium calculation performed by the system is the official calculation. | | | | |
|---|----------|-------------------|------------------|------------------|
| Gross Monthly Income | | Estimated Premium | | |
| From | To | 1 Person Covered | 2 People Covered | 3 People Covered |
| \$0.00 | \$82.79 | \$4 | \$8 | \$12 |
| 82.80 | 165.59 | 4 | 8 | 12 |
| 165.60 | 248.39 | 4 | 8 | 12 |
| 248.40 | 331.19 | 4 | 8 | 12 |
| 331.20 | 413.99 | 4 | 8 | 12 |
| 414.00 | 496.79 | 4 | 8 | 12 |
| 496.80 | 579.59 | 4 | 8 | 12 |
| 579.60 | 662.39 | 4 | 8 | 12 |
| 662.40 | 745.19 | 4 | 8 | 12 |
| 745.20 | 828.00 | 4 | 8 | 12 |
| 828.01 | 873.13 | 5 | 10 | 15 |
| 873.14 | 918.25 | 5 | 11 | 16 |
| 918.26 | 963.38 | 6 | 11 | 17 |
| 963.39 | 1,008.50 | 6 | 12 | 18 |
| 1,008.51 | 1,053.63 | 6 | 12 | 19 |
| 1,053.64 | 1,098.75 | 6 | 13 | 19 |
| 1,098.76 | 1,143.88 | 7 | 13 | 20 |
| 1,143.89 | 1,189.00 | 7 | 14 | 21 |
| 1,189.01 | 1,234.13 | 7 | 15 | 22 |
| 1,234.14 | 1,279.25 | 8 | 15 | 23 |
| 1,279.26 | 1,324.38 | 10 | 20 | 30 |
| 1,324.39 | 1,369.50 | 10 | 21 | 31 |
| 1,369.51 | 1,414.63 | 11 | 21 | 32 |
| 1,414.64 | 1,459.75 | 11 | 22 | 33 |
| 1,459.76 | 1,504.88 | 11 | 23 | 34 |
| 1,504.89 | 1,550.00 | 12 | 23 | 35 |
| 1,550.01 | 1,595.13 | 12 | 24 | 36 |
| 1,595.14 | 1,614.00 | 12 | 25 | 37 |
| 1,614.01 | 1,685.38 | 15 | 31 | 46 |
| 1,685.39 | 1,730.50 | 16 | 32 | 48 |
| 1,730.51 | 1,775.63 | 21 | 42 | 63 |
| 1,775.64 | 1,820.75 | 22 | 43 | 65 |
| 1,820.76 | 1,865.88 | 22 | 44 | 66 |
| 1,865.89 | 1,911.00 | 23 | 45 | 68 |
| 1,911.01 | 1,956.13 | 23 | 46 | 70 |
| 1,956.14 | 2,001.25 | 24 | 47 | 71 |
| 2,001.26 | 2,046.38 | 24 | 49 | 73 |
| 2,046.39 | 2,091.50 | 25 | 50 | 74 |

**MinnesotaCare Premium Table
Family Size 4 - 7/1/05 - 6/30/06**

DHS-4139 7-05

| These tables are intended to approximate the required premium as calculated by the premium calculation program. The premium calculation performed by the system is the official calculation. | | | | |
|---|----------|-------------------|------------------|------------------|
| Gross Monthly Income | | Estimated Premium | | |
| From | To | 1 Person Covered | 2 People Covered | 3 People Covered |
| 2,091.51 | 2,136.63 | 25 | 51 | 76 |
| 2,136.64 | 2,181.76 | 26 | 52 | 78 |
| 2,181.77 | 2,226.89 | 32 | 63 | 95 |
| 2,226.90 | 2,272.01 | 32 | 64 | 97 |
| 2,272.02 | 2,317.14 | 33 | 66 | 99 |
| 2,317.15 | 2,362.26 | 34 | 67 | 101 |
| 2,362.27 | 2,407.39 | 34 | 68 | 103 |
| 2,407.40 | 2,452.51 | 35 | 70 | 104 |
| 2,452.52 | 2,497.64 | 35 | 71 | 106 |
| 2,497.65 | 2,542.76 | 36 | 72 | 108 |
| 2,542.77 | 2,587.89 | 37 | 74 | 110 |
| 2,587.90 | 2,633.00 | 37 | 75 | 112 |
| 2,633.01 | 2,678.13 | 47 | 94 | 141 |
| 2,678.14 | 2,723.25 | 48 | 95 | 143 |
| 2,723.26 | 2,768.38 | 49 | 97 | 146 |
| 2,768.39 | 2,813.50 | 49 | 99 | 148 |
| 2,813.51 | 2,858.63 | 50 | 100 | 150 |
| 2,858.64 | 2,903.75 | 51 | 102 | 153 |
| 2,903.76 | 2,948.88 | 52 | 103 | 155 |
| 2,948.89 | 2,994.00 | 52 | 105 | 157 |
| 2,994.01 | 3,039.13 | 53 | 107 | 160 |
| 3,039.14 | 3,084.26 | 54 | 108 | 162 |
| 3,084.27 | 3,129.39 | 66 | 133 | 199 |
| 3,129.40 | 3,174.51 | 67 | 134 | 202 |
| 3,174.52 | 3,219.64 | 68 | 136 | 205 |
| 3,219.65 | 3,227.00 | 69 | 138 | 206 |
| 3,227.01 | 3,309.89 | 75 | 150 | 226 |
| 3,309.90 | 3,355.01 | 77 | 153 | 230 |
| 3,355.02 | 3,400.14 | 78 | 155 | 233 |
| 3,400.15 | 3,445.26 | 79 | 157 | 236 |
| 3,445.27 | 3,490.39 | 80 | 160 | 239 |
| 3,490.40 | 3,535.50 | 81 | 162 | 242 |
| 3,535.51 | 3,580.63 | 100 | 199 | 299 |
| 3,580.64 | 3,625.75 | 101 | 202 | 303 |
| 3,625.76 | 3,670.88 | 102 | 204 | 306 |
| 3,670.89 | 3,716.00 | 103 | 207 | 310 |
| 3,716.01 | 3,761.13 | 105 | 209 | 314 |
| 3,761.14 | 3,806.25 | 106 | 212 | 318 |

**MinnesotaCare Premium Table
Family Size 4 - 7/1/05 - 6/30/06**

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| These tables are intended to approximate the required premium as calculated by the premium calculation program. The premium calculation performed by the system is the official calculation. | | | | |
|---|-------------------------------------|-------------------|------------------|------------------|
| Gross Monthly Income | | Estimated Premium | | |
| From | To | 1 Person Covered | 2 People Covered | 3 People Covered |
| 3,806.26 | 3,851.38 | 107 | 214 | 322 |
| 3,851.39 | 3,896.50 | 108 | 217 | 325 |
| 3,896.51 | 3,941.63 | 110 | 219 | 329 |
| 3,941.64 | 3,986.76 | 111 | 222 | 333 |
| 3,986.77 | 4,031.89 | 131 | 262 | 393 |
| 4,031.90 | 4,077.01 | 132 | 265 | 397 |
| 4,077.02 | 4,122.14 | 134 | 268 | 402 |
| 4,122.15 | 4,167.26 | 135 | 271 | 406 |
| 4,167.27 | 4,212.39 | 137 | 274 | 411 |
| 4,212.40 | 4,257.51 | 138 | 277 | 415 |
| 4,257.52 | 4,302.64 | 140 | 280 | 419 |
| 4,302.65 | 4,347.76 | 141 | 283 | 424 |
| 4,347.77 | 4,392.89 | 143 | 286 | 428 |
| 4,392.90 | 4,438.00 | 144 | 288 | 433 |
| 4,438.01 | 4,438.01 and above are not eligible | | | |
| Some current enrollees, whose income exceeds the limit, may continue coverage for a period of time by paying the maximum premium: | | 313 | 626 | 939 |

**MinnesotaCare Premium Table
Family Size 5 - 7/1/05 - 6/30/06**

DHS-4139 7-05

| These tables are intended to approximate the required premium as calculated by the premium calculation program. The premium calculation performed by the system is the official calculation. | | | | | |
|---|----------|-------------------|------------------|------------------|--|
| Gross Monthly Income | | Estimated Premium | | | |
| From | To | 1 Person Covered | 2 People Covered | 3 People Covered | |
| \$0.00 | \$92.89 | \$4 | \$8 | \$12 | |
| 92.90 | 185.79 | 4 | 8 | 12 | |
| 185.80 | 278.69 | 4 | 8 | 12 | |
| 278.70 | 371.59 | 4 | 8 | 12 | |
| 371.60 | 464.49 | 4 | 8 | 12 | |
| 464.50 | 557.39 | 4 | 8 | 12 | |
| 557.40 | 650.29 | 4 | 8 | 12 | |
| 650.30 | 743.19 | 4 | 8 | 12 | |
| 743.20 | 836.09 | 4 | 8 | 12 | |
| 836.10 | 929.00 | 4 | 9 | 13 | |
| 929.01 | 982.21 | 6 | 11 | 17 | |
| 982.22 | 1,035.43 | 6 | 12 | 18 | |
| 1,035.44 | 1,088.64 | 6 | 13 | 19 | |
| 1,088.65 | 1,141.85 | 7 | 13 | 20 | |
| 1,141.86 | 1,195.06 | 7 | 14 | 21 | |
| 1,195.07 | 1,248.28 | 7 | 15 | 22 | |
| 1,248.29 | 1,301.49 | 8 | 15 | 23 | |
| 1,301.50 | 1,354.70 | 8 | 16 | 24 | |
| 1,354.71 | 1,407.91 | 8 | 17 | 25 | |
| 1,407.92 | 1,461.13 | 9 | 17 | 26 | |
| 1,461.14 | 1,514.34 | 11 | 23 | 34 | |
| 1,514.35 | 1,567.55 | 12 | 24 | 35 | |
| 1,567.56 | 1,620.76 | 12 | 24 | 37 | |
| 1,620.77 | 1,673.98 | 13 | 25 | 38 | |
| 1,673.99 | 1,727.19 | 13 | 26 | 39 | |
| 1,727.20 | 1,780.40 | 13 | 27 | 40 | |
| 1,780.41 | 1,833.61 | 14 | 28 | 42 | |
| 1,833.62 | 1,886.00 | 14 | 29 | 43 | |
| 1,886.01 | 1,940.04 | 18 | 36 | 54 | |
| 1,940.05 | 1,993.25 | 18 | 37 | 55 | |
| 1,993.26 | 2,046.46 | 24 | 48 | 73 | |
| 2,046.47 | 2,099.68 | 25 | 50 | 75 | |
| 2,099.69 | 2,152.89 | 26 | 51 | 77 | |
| 2,152.90 | 2,206.10 | 26 | 52 | 78 | |
| 2,206.11 | 2,259.31 | 27 | 54 | 80 | |
| 2,259.32 | 2,312.53 | 27 | 55 | 82 | |
| 2,312.54 | 2,365.74 | 28 | 56 | 84 | |
| 2,365.75 | 2,418.95 | 29 | 57 | 86 | |

MinnesotaCare Premium Table
Family Size 5 - 7/1/05 - 6/30/06

DHS-4139 7-05

| These tables are intended to approximate the required premium as calculated by the premium calculation program. The premium calculation performed by the system is the official calculation. | | | | |
|---|----------|-------------------|------------------|------------------|
| Gross Monthly Income | | Estimated Premium | | |
| From | To | 1 Person Covered | 2 People Covered | 3 People Covered |
| 2,418.96 | 2,472.16 | 29 | 59 | 88 |
| 2,472.17 | 2,525.38 | 30 | 60 | 90 |
| 2,525.39 | 2,578.59 | 37 | 73 | 110 |
| 2,578.60 | 2,631.80 | 37 | 75 | 112 |
| 2,631.81 | 2,685.01 | 38 | 76 | 114 |
| 2,685.02 | 2,738.23 | 39 | 78 | 117 |
| 2,738.24 | 2,791.44 | 40 | 79 | 119 |
| 2,791.45 | 2,844.65 | 40 | 81 | 121 |
| 2,844.66 | 2,897.86 | 41 | 82 | 123 |
| 2,897.87 | 2,951.08 | 42 | 84 | 126 |
| 2,951.09 | 3,004.29 | 43 | 85 | 128 |
| 3,004.30 | 3,057.50 | 43 | 87 | 130 |
| 3,057.51 | 3,110.71 | 54 | 109 | 163 |
| 3,110.72 | 3,163.93 | 55 | 111 | 166 |
| 3,163.94 | 3,217.14 | 56 | 113 | 169 |
| 3,217.15 | 3,270.35 | 57 | 115 | 172 |
| 3,270.36 | 3,323.56 | 58 | 116 | 175 |
| 3,323.57 | 3,376.78 | 59 | 118 | 178 |
| 3,376.79 | 3,429.99 | 60 | 120 | 180 |
| 3,430.00 | 3,483.20 | 61 | 122 | 183 |
| 3,483.21 | 3,536.41 | 62 | 124 | 186 |
| 3,536.42 | 3,589.64 | 63 | 126 | 189 |
| 3,589.65 | 3,642.85 | 77 | 154 | 231 |
| 3,642.86 | 3,696.06 | 78 | 157 | 235 |
| 3,696.07 | 3,749.27 | 79 | 159 | 238 |
| 3,749.28 | 3,771.00 | 80 | 160 | 241 |
| 3,771.01 | 3,855.70 | 88 | 175 | 263 |
| 3,855.71 | 3,908.91 | 89 | 179 | 268 |
| 3,908.92 | 3,962.12 | 91 | 181 | 272 |
| 3,962.13 | 4,015.34 | 92 | 183 | 275 |
| 4,015.35 | 4,068.55 | 93 | 186 | 279 |
| 4,068.56 | 4,121.75 | 94 | 188 | 283 |
| 4,121.76 | 4,174.96 | 116 | 232 | 348 |
| 4,174.97 | 4,228.18 | 118 | 235 | 353 |
| 4,228.19 | 4,281.39 | 119 | 238 | 357 |
| 4,281.40 | 4,334.60 | 121 | 241 | 362 |
| 4,334.61 | 4,387.81 | 122 | 244 | 366 |
| 4,387.82 | 4,441.03 | 124 | 247 | 371 |

**MinnesotaCare Premium Table
Family Size 5 - 7/1/05 - 6/30/06**

DHS-4139 7-05

| These tables are intended to approximate the required premium as calculated by the premium calculation program. The premium calculation performed by the system is the official calculation. | | | | |
|---|-------------------------------------|-------------------|------------------|------------------|
| Gross Monthly Income | | Estimated Premium | | |
| From | To | 1 Person Covered | 2 People Covered | 3 People Covered |
| 4,441.04 | 4,494.24 | 125 | 250 | 375 |
| 4,494.25 | 4,547.45 | 127 | 253 | 380 |
| 4,547.46 | 4,600.66 | 128 | 256 | 384 |
| 4,600.67 | 4,653.88 | 130 | 259 | 389 |
| 4,653.89 | 4,707.09 | 153 | 306 | 459 |
| 4,707.10 | 4,760.30 | 155 | 309 | 464 |
| 4,760.31 | 4,813.51 | 156 | 313 | 469 |
| 4,813.52 | 4,866.73 | 158 | 316 | 474 |
| 4,866.74 | 4,919.94 | 160 | 320 | 480 |
| 4,919.95 | 4,973.15 | 162 | 323 | 485 |
| 4,973.16 | 5,026.36 | 163 | 327 | 490 |
| 5,026.37 | 5,079.58 | 165 | 330 | 495 |
| 5,079.59 | 5,132.79 | 167 | 334 | 500 |
| 5,132.80 | 5,186.00 | 169 | 337 | 506 |
| 5,186.01 | 5,186.01 and above are not eligible | | | |
| Some current enrollees, whose income exceeds the limit, may continue coverage for a period of time by paying the maximim premium: | | 313 | 626 | 939 |