

HEALTH PLAN OF NEVADA, INC.

RENEWAL RATES

CITY OF LAS VEGAS

DATE QUOTED: AUGUST 27, 2007

RATES EFFECTIVE: JANUARY 1, 2008

Health and Prescription Plan

Monthly Premium For:	Current Plan with Current Rates	Renewal Plan with Renewal Rates
	HPN 10 \$5/\$25/\$45 Rx	HPN 10 \$5/\$25\$45Rx
Employee Only	\$264.68	\$277.92
Employee + One Dependent	\$510.85	\$536.40
Employee + Two or More Dependents	\$653.75	\$686.44
Percentage Increase		5%

**Plan Mail Order Pharmacy*

Preferred Maintenance Covered Drug: The Insured pays twice the applicable Drug Fee as outlined above, up to a 90-day Therapeutic Supply, for Preferred Generic or Brand Name Covered Drugs.

STATEMENT OF QUALIFICATION

This renewal offer is subject to change in the event that any of the information used in development is subsequently found to be materially inaccurate.