



QUICK NET SELECT
SHORT-TERM
COVERAGE
BY THE DAY
OR MONTH

Health coverage made easy.

Effective January 1, 2010



Health Net®
A BETTER DECISION

IT'S A FAST-MOVING WORLD.

Keep up with Quick Net Select from Health Net.

TWO KINDS OF SHORT-TERM HEALTH COVERAGE FOR PEOPLE ON THE GO – DAILY AND MONTHLY

Health insurance plans need to keep pace with today's new realities. And Quick Net Select does, with short-term coverage for people who are:

- In a life transition.
- Between jobs.
- Taking a leave from work.
- No longer eligible for their parents' health plan.
- Traveling.
- Entering the job market.

Quick Net Select PPO insurance plans are underwritten by Health Net Life Insurance Company.



When you need it,
we're there.

SEE ANY DOCTOR, INCLUDING SPECIALISTS!

Quick Net Select from Health Net is a PPO (preferred physician organization) insurance plan. You can receive care from any of Health Net's 61,000 contracted network physicians in California. Or you can see any out-of-network physician at higher out-of-pocket costs. The choice is yours! To find a PPO provider, go to www.healthnet.com and click on *ProviderSearch*.

QUICK NET MEANS COMPREHENSIVE CARE

Once you have paid your deductible with Quick Net Select, you receive comprehensive coverage, including doctor office visits, emergency care, hospitalization and surgery, even prescription coverage.¹

DEDUCTIBLE WAIVER FOR ACCIDENTS

If you have an accident while you are covered on a Quick Net Select policy, we will waive the deductible. For more detailed information, refer to your insurance policy.

¹This brochure is a summary only. The policy itself should be consulted to determine governing contractual provisions.

In-network benefits at a glance

All services are subject to deductible except for Prescription coverage. Amounts shown are insured's responsibility.

Lifetime maximum payable: \$2 million

	QUICK NET SELECT 750	QUICK NET SELECT 1,000	QUICK NET SELECT 2,000	QUICK NET SELECT 4,500
Deductible ¹	\$750	\$1,000	\$2,000	\$4,500
Out-of-pocket maximum ²	\$1,750	\$2,000	\$3,000	\$4,500
Office visits	20%	25%	30%	40%
Preventive care	not covered	not covered	not covered	not covered
Inpatient hospital care	20%	25%	30%	40%
Emergency room	\$100 copay + 20%	\$100 copay + 25%	\$100 copay + 30%	\$100 copay + 40%
X-ray and laboratory	20%	25%	30%	40%
Outpatient services	20%	25%	30%	40%
Prescription coverage	\$20 generic only	\$20 generic only	\$20 generic only	\$20 generic only

¹A deductible is the amount of money you need to pay out-of-pocket for covered medical services before benefits become payable by Health Net. Family deductible is met when three family members meet their individual deductible.

²The maximum amount you will pay for covered services and supplies in a benefit period in addition to the deductible. Family out-of-pocket maximum is met when three family members meet their individual out-of-pocket maximum.

For more detailed information, refer to the policy documents.

Enrollment is as easy as 1-2-3!

1. Just select when you want your coverage to start and how long you want your coverage to last, from 30 to 185 days or six months.
2. Choose either Quick Net Select Daily or Quick Net Select Monthly. There are no changes or refunds once your policy is in force.¹
3. Fill out the application, include your premium payment by check or credit card² and send to Health Net. For Quick Net Select Daily, send in the full amount owed; for Quick Net Select Monthly, send in your first month's premium. You will be billed for the subsequent months until you cancel your policy or your coverage ends.

We'll let you know within a few days if your application has been approved.

LENGTH OF COVERAGE	QUICK NET SELECT DAILY	QUICK NET SELECT MONTHLY
Minimum coverage time	30 days	1 month
Maximum coverage time	185 days	6 months

Specific provisions apply to renewability. Please refer to your policy for details.

¹There are no changes allowed beyond the 10-day free look period. No exceptions will be made.

²Your check will be held in trust while your application is reviewed by Health Net. Applications submitted without payment or with partial payment will be pended until payment is received. If payment is not received within two weeks of the application signature date, the application will be withdrawn. Cashing your check does not mean your application is approved. If rejected, your money will be returned to you.

HOW TO CALCULATE YOUR PREMIUM

Inside this brochure you'll find rates for your area. To find your rate:

1. Select the regional rate page for the county where you live.
2. Find the heading that fits the number of people in your family you want to cover.
3. Select the type of coverage you want: Quick Net Select Daily or Quick Net Select Monthly.
4. Choose your plan.
5. Find the dollar amount on the chart that corresponds to your coverage and deductible.
6. **If you are choosing Quick Net Select Daily**, multiply the number on the chart by the number of days of coverage for which you are applying. Daily applicants need to send in a premium for their entire length of coverage.

EXAMPLE OF QUICK NET SELECT DAILY PREMIUM CALCULATION

Brian, 32 and Kimberly, 28, live in Los Angeles County (Region 1). They choose the **Quick Net Select Daily \$1,000 deductible** plan. They select **85 days** of coverage.

Subscriber + Spouse rate, based on age of younger spouse/ domestic partner (age 28)

Per day rate = \$3.98

\$3.98 x 85 days = \$338.30 (Total premium due)

7. **If you are choosing Quick Net Select Monthly**, the amount on the chart is your monthly premium. The first month's premium is required for processing.

PAYMENT OPTIONS

- check
- credit card

Send your payments and application to:
Health Net Individual & Family Enrollment
P.O. Box 1150
Rancho Cordova, CA 95741-1150

Certification requirements

Certain covered services require prior approval from Health Net Life Insurance Company. Refer to your policy for services requiring pre-certification.

Eligibility

You and your applying family members are eligible for a short-term plan if:

- You are a U.S. citizen or permanent resident of the United States and have resided in the United States for at least six months.
- You meet the application and underwriting requirements.
- You are older than 30 days or less than 65 years old on your policy effective date and are not totally disabled or eligible for Medicare.
- Persons under 1 year of age on the policy effective date must be enrolled as a dependent.
- Persons over 65 years old on the policy effective date are not eligible for coverage.
- You do not have other medical or hospital coverage, including enrollment in an HMO or health care insurance plan.
- You or any family member is not pregnant at the time of application.
- You or any applying family members do not train for or participate in:
 1. a team or individual sports activity as a professional;
 2. national or international competition as an amateur; or
 3. a collegiate sports activity.
- You or any applying family members are not enrolled in training for or engaged in an occupation involving unusual hazards, and are not covered by Workers' Compensation insurance.

Domestic Partner Eligibility

A Domestic Partnership is defined as two adults who have chosen to share one another's lives in an intimate and committed relationship of mutual caring. A registered domestic partnership is established in California when both persons file a Declaration of Domestic Partnership with the Secretary of State and at the time of the filing it is true that:

- Both persons have a common residence.
- Neither person is married to someone else or is a member of another domestic partnership that has not been terminated, dissolved, or adjudged a nullity.
- The two persons are not related by blood in a way that would prevent them from being married in California.
- Both persons are at least 18 years old.
- Both persons are members of the same sex, or opposite sex couples if one or both persons is over age 62 and is eligible for old age insurance benefits under the Social Security Act.
- Both persons are capable of consenting to the domestic partnership.

Important information

To be eligible for a Guaranteed Issue plan under the Health Insurance Portability and Accountability Act of 1996 (HIPAA), in addition to other requirements, an individual must have been recently covered under an employer plan. A short-term plan is not an employer plan and, therefore, acceptance of a short-term policy will impact eligibility for individual guaranteed issue health insurance under HIPAA.

Deductible waiver for an accident

Accidental injury is any physical harm or disability that is the result of a specific, unexpected or unintentional incident caused by an outside force. The physical harm or disability must have occurred at an identifiable time and place. Accidental injury does not include illness and must be treated in an emergency room or urgent care center; follow-up treatment will be subject to the benefit period deductible. A completed Accident Waiver form must be submitted within 60 days of the accident and is required for the claim to be reviewed. Once approved, the benefit period deductible will be waived. The insured will

continue to pay any charges billed in excess of covered expenses. Contact the Customer Contact Center at 1-800-839-2172 for more information.

This is a non-renewable plan

Health Net's Quick Net plans are non-renewable. However, if you feel there is a need to continue beyond your benefit period, you may re-apply if:

- You meet the application and underwriting requirements.
- There is no significant change in your health.
- The total days of coverage for all Quick Net plans does not exceed 365 days.

A re-application fee of \$10 will be charged.

When does coverage begin?

- If you are approved, your coverage will begin immediately on the effective date you choose, as long as it does not precede the postmark date of your application and is within 30 days of the signature date.
- If your chosen effective date precedes the postmark date, your coverage will become effective the day after the postmark date. If your application is faxed in by 2:00 p.m., your coverage can be effective the day of receipt.
- Applications submitted without payment or with partial payment will be pended until payment is received. If payment is not received within two weeks of the application signature date, the application will be withdrawn.
- If you apply for Health Net's permanent plan after your Quick Net plan is in effect, your Quick Net plan must expire before your permanent plan becomes effective.

Summary of exclusions

Please refer to your policy for a complete list of exclusions and limitations.

Pre-existing conditions,¹ cosmetic services and supplies, dental services, temporomandibular (jaw) joint disorders, refractive eye surgery, optometrics, vision therapy and orthoptics, sex change, reversal of sterilization, treatment of infertility, conception by medical procedure, experimental or investigational procedures, routine physical examinations, hospice care, pregnancy, services related to pregnancy induced under a surrogate parenting agreement, preventive care (including immunizations or inoculations), services not related to covered illness or injury, custodial or domiciliary care or rest cures, inpatient diagnostic admissions, non-eligible hospital confinements, non-eligible institutions, private rooms, private duty nursing, chemical dependency, non-severe mental disorders, hyperkinetic syndromes, learning disabilities, behavioral problems or mental retardation, corrective and support appliances, surgical dressings, orthotics (including foot orthotics), personal or comfort items, air purifiers, air conditioners and humidifiers, hearing aids, educational services or nutritional counseling, sleep studies, treatment of obesity, expenses before coverage begins, expenses after termination of coverage, physician self-treatment, services provided by immediate family members, conditions caused by the insured's commission (or attempted commission) of a felony, conditions caused by release of nuclear energy, any services provided by or for which payment is made by a local, state or federal government agency, rehabilitative services except as stated in your policy, outpatient speech therapy, acupuncture, services or supplies obtained in foreign travel or work assignment, allergy testing and serum, and chiropractic care.

¹A pre-existing condition means an illness, injury or condition which existed during the twelve-month period, when the insurance Policy insures one or two Covered Persons, or six-month period when the insurance Policy insures three or more Covered Persons, immediately prior to the Covered Person's Effective Date. An illness, injury or condition is considered to have existed when the prospective insured:

- a. sought or received professional advice for that illness, injury, or condition; or
- b. received medical care or treatment for that illness, injury or condition. This 6-month period will be reduced by any period of creditable coverage in force during the 63-day period immediately prior to becoming eligible for coverage under the insurance policy.



QUICK NET SELECT MONTHLY AND DAILY RATES

Effective January 1, 2010

Region 1

Los Angeles County

Rates effective January 1, 2010

		QUICK NET SELECT MONTHLY RATES			
		30-185 days			
	AGE	\$750 DED.	\$1,000 DED.	\$2,000 DED.	\$4,500 DED.
SINGLE	1-18	127	87	70	50
	19-24	127	87	70	50
	25-29	145	101	82	58
	30-34	163	115	93	65
	35-39	183	136	111	78
	40-44	211	157	129	90
	45-49	247	197	169	118
	50-54	316	255	208	147
	55-59	398	314	256	179
60-64	504	373	303	211	
APPLICANT & SPOUSE/ DOMESTIC PARTNER	19-24	254	174	141	101
	25-29	290	203	163	115
	30-34	325	231	186	130
	35-39	365	272	222	155
	40-44	421	314	258	180
	45-49	494	395	338	237
	50-54	631	510	416	294
	55-59	796	628	511	358
	60-64	1,009	747	606	422
APPLICANT & CHILD	19-24	235	161	130	93
	25-29	253	175	141	100
	30-34	271	189	152	108
	35-39	291	210	171	120
	40-44	319	231	189	133
	45-49	355	271	228	161
	50-54	424	329	268	190
	55-59	506	388	315	222
	60-64	613	447	363	254
APPLICANT & CHILDREN	19-24	330	227	183	131
	25-29	348	241	194	138
	30-34	366	255	206	145
	35-39	386	276	224	158
	40-44	414	297	242	170
	45-49	450	337	282	199
	50-54	519	395	321	227
	55-59	601	454	368	260
	60-64	707	513	416	292
FAMILY	19-24	457	314	253	182
	25-29	493	343	276	196
	30-34	528	370	298	210
	35-39	568	412	335	236
	40-44	624	454	371	260
	45-49	697	534	450	317
	50-54	834	650	529	374
	55-59	999	768	624	439
	60-64	1,212	886	719	503

		QUICK NET SELECT DAILY RATES			
		30-185 days			
	AGE	\$750 DED.	\$1,000 DED.	\$2,000 DED.	\$4,500 DED.
SINGLE	1-18	2.49	1.71	1.38	0.99
	19-24	2.49	1.71	1.38	0.99
	25-29	2.84	1.99	1.60	1.13
	30-34	3.19	2.26	1.82	1.27
	35-39	3.58	2.67	2.18	1.52
	40-44	4.13	3.08	2.53	1.76
	45-49	4.84	3.87	3.31	2.32
	50-54	6.19	5.00	4.08	2.88
	55-59	7.80	6.16	5.01	3.51
60-64	9.89	7.32	5.94	4.14	
APPLICANT & SPOUSE/ DOMESTIC PARTNER	19-24	4.98	3.42	2.76	1.98
	25-29	5.68	3.98	3.20	2.26
	30-34	6.38	4.52	3.64	2.54
	35-39	7.16	5.34	4.36	3.04
	40-44	8.26	6.16	5.06	3.52
	45-49	9.68	7.74	6.62	4.64
	50-54	12.38	10.00	8.16	5.76
	55-59	15.60	12.32	10.02	7.02
	60-64	19.78	14.64	11.88	8.28
APPLICANT & CHILD	19-24	4.61	3.16	2.55	1.83
	25-29	4.96	3.44	2.77	1.97
	30-34	5.31	3.71	2.99	2.11
	35-39	5.70	4.12	3.35	2.36
	40-44	6.25	4.53	3.70	2.60
	45-49	6.96	5.32	4.48	3.16
	50-54	8.31	6.45	5.25	3.72
	55-59	9.92	7.61	6.18	4.35
	60-64	12.01	8.77	7.11	4.98
APPLICANT & CHILDREN	19-24	6.47	4.45	3.59	2.57
	25-29	6.82	4.73	3.81	2.71
	30-34	7.17	5.00	4.03	2.85
	35-39	7.56	5.41	4.39	3.10
	40-44	8.11	5.82	4.74	3.34
	45-49	8.82	6.61	5.52	3.90
	50-54	10.17	7.74	6.29	4.46
	55-59	11.78	8.90	7.22	5.09
	60-64	13.87	10.06	8.15	5.72
FAMILY	19-24	8.96	6.16	4.97	3.56
	25-29	9.66	6.72	5.41	3.84
	30-34	10.36	7.26	5.85	4.12
	35-39	11.14	8.08	6.57	4.62
	40-44	12.24	8.90	7.27	5.10
	45-49	13.66	10.48	8.83	6.22
	50-54	16.36	12.74	10.37	7.34
	55-59	19.58	15.06	12.23	8.60
	60-64	23.76	17.38	14.09	9.86

Region 2¹

Merced, Napa, Sacramento, San Joaquin, Sonoma, Stanislaus,
Tulare, Western El Dorado and Western Placer counties

Rates effective January 1, 2010

		QUICK NET SELECT MONTHLY RATES			
		30-185 days			
AGE		\$750 DED.	\$1,000 DED.	\$2,000 DED.	\$4,500 DED.
SINGLE	1-18	141	92	73	51
	19-24	141	92	73	51
	25-29	162	107	86	61
	30-34	182	121	99	70
	35-39	203	145	117	82
	40-44	235	169	134	92
	45-49	275	215	171	118
	50-54	351	262	207	143
	55-59	443	320	254	178
	60-64	562	378	302	212
APPLICANT & SPOUSE/ DOMESTIC PARTNER	19-24	283	185	147	102
	25-29	323	214	172	121
	30-34	363	243	198	141
	35-39	406	291	234	163
	40-44	469	338	268	185
	45-49	550	430	342	236
	50-54	703	523	414	287
	55-59	886	640	509	356
60-64	1,123	756	604	424	
APPLICANT & CHILD	19-24	261	171	136	94
	25-29	282	186	148	104
	30-34	301	200	161	114
	35-39	323	224	179	125
	40-44	354	247	196	136
	45-49	395	294	233	161
	50-54	471	340	269	187
	55-59	563	398	317	221
	60-64	681	456	364	256
	APPLICANT & CHILDREN	19-24	367	240	191
25-29		388	255	203	142
30-34		407	269	216	152
35-39		429	293	234	163
40-44		461	317	251	174
45-49		501	363	288	199
50-54		577	410	324	225
55-59		669	468	372	260
60-64		787	526	419	294
FAMILY		19-24	508	333	264
	25-29	549	362	290	203
	30-34	589	391	315	222
	35-39	632	439	351	245
	40-44	695	486	386	266
	45-49	776	578	459	317
	50-54	929	671	531	368
	55-59	1,112	787	626	438
	60-64	1,349	904	721	506

		QUICK NET SELECT DAILY RATES			
		30-185 days			
AGE		\$750 DED.	\$1,000 DED.	\$2,000 DED.	\$4,500 DED.
SINGLE	1-18	2.77	1.81	1.44	1.00
	19-24	2.77	1.81	1.44	1.00
	25-29	3.17	2.10	1.69	1.19
	30-34	3.56	2.38	1.94	1.38
	35-39	3.98	2.85	2.29	1.60
	40-44	4.60	3.31	2.63	1.81
	45-49	5.39	4.22	3.35	2.31
	50-54	6.89	5.13	4.06	2.81
	55-59	8.69	6.27	4.99	3.49
	60-64	11.01	7.41	5.92	4.16
APPLICANT & SPOUSE/ DOMESTIC PARTNER	19-24	5.54	3.62	2.88	2.00
	25-29	6.34	4.20	3.38	2.38
	30-34	7.12	4.76	3.88	2.76
	35-39	7.96	5.70	4.58	3.20
	40-44	9.20	6.62	5.26	3.62
	45-49	10.78	8.44	6.70	4.62
	50-54	13.78	10.26	8.12	5.62
	55-59	17.38	12.54	9.98	6.98
60-64	22.02	14.82	11.84	8.32	
APPLICANT & CHILD	19-24	5.12	3.35	2.66	1.85
	25-29	5.52	3.64	2.91	2.04
	30-34	5.91	3.92	3.16	2.23
	35-39	6.33	4.39	3.51	2.45
	40-44	6.95	4.85	3.85	2.66
	45-49	7.74	5.76	4.57	3.16
	50-54	9.24	6.67	5.28	3.66
	55-59	11.04	7.81	6.21	4.34
	60-64	13.36	8.95	7.14	5.01
	APPLICANT & CHILDREN	19-24	7.20	4.71	3.74
25-29		7.60	5.00	3.99	2.79
30-34		7.99	5.28	4.24	2.98
35-39		8.41	5.75	4.59	3.20
40-44		9.03	6.21	4.93	3.41
45-49		9.82	7.12	5.65	3.91
50-54		11.32	8.03	6.36	4.41
55-59		13.12	9.17	7.29	5.09
60-64		15.44	10.31	8.22	5.76
FAMILY		19-24	9.97	6.52	5.18
	25-29	10.77	7.10	5.68	3.98
	30-34	11.55	7.66	6.18	4.36
	35-39	12.39	8.60	6.88	4.80
	40-44	13.63	9.52	7.56	5.22
	45-49	15.21	11.34	9.00	6.22
	50-54	18.21	13.16	10.42	7.22
	55-59	21.81	15.44	12.28	8.58
	60-64	26.45	17.72	14.14	9.92

¹ZIP codes for western El Dorado include: 95623, 95630 and 95762 only. See region 7 for additional El Dorado County ZIP codes. ZIP codes for western Placer County include: 95602-04, 95648, 95650,

95658, 95661, 95663, 95677-78, 95746-47 and 95765 only. See region 7 for additional Placer County ZIP codes.

Region 3

Riverside, San Bernardino, Santa Barbara and
Ventura counties

Rates effective January 1, 2010

		QUICK NET SELECT MONTHLY RATES			
		30-185 days			
AGE		\$750 DED.	\$1,000 DED.	\$2,000 DED.	\$4,500 DED.
SINGLE	1-18	127	83	67	46
	19-24	127	83	67	46
	25-29	145	95	77	54
	30-34	163	107	86	61
	35-39	183	130	103	72
	40-44	211	153	119	83
	45-49	247	194	153	107
	50-54	316	236	187	132
	55-59	398	289	227	160
	60-64	504	341	268	188
APPLICANT & SPOUSE/ DOMESTIC PARTNER	19-24	254	165	135	92
	25-29	290	190	153	107
	30-34	325	214	171	122
	35-39	365	260	205	144
	40-44	421	306	239	165
	45-49	494	389	306	214
	50-54	631	471	373	263
	55-59	796	577	455	320
60-64	1,009	682	536	376	
APPLICANT & CHILD	19-24	235	153	124	85
	25-29	253	165	134	93
	30-34	271	177	143	100
	35-39	291	200	160	111
	40-44	319	223	176	122
	45-49	355	265	210	146
	50-54	424	306	244	171
	55-59	506	359	285	199
	60-64	613	412	325	227
	APPLICANT & CHILDREN	19-24	330	215	175
25-29		348	227	184	127
30-34		366	239	193	135
35-39		386	262	210	145
40-44		414	285	227	156
45-49		450	326	261	181
50-54		519	368	294	205
55-59		601	421	335	234
60-64		707	473	375	262
FAMILY		19-24	457	297	242
	25-29	493	322	261	181
	30-34	528	346	279	196
	35-39	568	392	313	217
	40-44	624	438	346	239
	45-49	697	521	414	288
	50-54	834	603	481	337
	55-59	999	709	563	394
	60-64	1,212	814	643	450

		QUICK NET SELECT DAILY RATES			
		30-185 days			
AGE		\$750 DED.	\$1,000 DED.	\$2,000 DED.	\$4,500 DED.
SINGLE	1-18	2.49	1.62	1.32	0.90
	19-24	2.49	1.62	1.32	0.90
	25-29	2.84	1.86	1.50	1.05
	30-34	3.19	2.10	1.68	1.20
	35-39	3.58	2.55	2.01	1.41
	40-44	4.13	3.00	2.34	1.62
	45-49	4.84	3.81	3.00	2.10
	50-54	6.19	4.62	3.66	2.58
	55-59	7.80	5.66	4.46	3.14
	60-64	9.89	6.69	5.25	3.69
APPLICANT & SPOUSE/ DOMESTIC PARTNER	19-24	4.98	3.24	2.64	1.80
	25-29	5.68	3.72	3.00	2.10
	30-34	6.38	4.20	3.36	2.40
	35-39	7.16	5.10	4.02	2.82
	40-44	8.26	6.00	4.68	3.24
	45-49	9.68	7.62	6.00	4.20
	50-54	12.38	9.24	7.32	5.16
	55-59	15.60	11.32	8.92	6.28
60-64	19.78	13.38	10.50	7.38	
APPLICANT & CHILD	19-24	4.61	3.00	2.44	1.67
	25-29	4.96	3.24	2.62	1.82
	30-34	5.31	3.48	2.80	1.97
	35-39	5.70	3.93	3.13	2.18
	40-44	6.25	4.38	3.46	2.39
	45-49	6.96	5.19	4.12	2.87
	50-54	8.31	6.00	4.78	3.35
	55-59	9.92	7.04	5.58	3.91
	60-64	12.01	8.07	6.37	4.46
	APPLICANT & CHILDREN	19-24	6.47	4.21	3.43
25-29		6.82	4.45	3.61	2.49
30-34		7.17	4.69	3.79	2.64
35-39		7.56	5.14	4.12	2.85
40-44		8.11	5.59	4.45	3.06
45-49		8.82	6.40	5.11	3.54
50-54		10.17	7.21	5.77	4.02
55-59		11.78	8.25	6.57	4.58
60-64		13.87	9.28	7.36	5.13
FAMILY		19-24	8.96	5.83	4.75
	25-29	9.66	6.31	5.11	3.54
	30-34	10.36	6.79	5.47	3.84
	35-39	11.14	7.69	6.13	4.26
	40-44	12.24	8.59	6.79	4.68
	45-49	13.66	10.21	8.11	5.64
	50-54	16.36	11.83	9.43	6.60
	55-59	19.58	13.91	11.03	7.72
	60-64	23.76	15.97	12.61	8.82

Region 4

Alameda, Contra Costa, Marin, San Francisco, San Mateo,
Santa Clara, Santa Cruz and Solano counties

Rates effective January 1, 2010

		QUICK NET SELECT MONTHLY RATES			
		30-185 days			
AGE		\$750 DED.	\$1,000 DED.	\$2,000 DED.	\$4,500 DED.
SINGLE	1-18	131	80	64	46
	19-24	131	80	64	46
	25-29	150	92	73	52
	30-34	168	104	83	58
	35-39	189	124	99	70
	40-44	218	144	116	83
	45-49	255	184	148	104
	50-54	326	223	181	125
	55-59	412	273	221	154
60-64	522	322	262	182	
APPLICANT & SPOUSE/ DOMESTIC PARTNER	19-24	262	159	129	92
	25-29	300	184	147	104
	30-34	337	208	165	116
	35-39	377	248	199	141
	40-44	437	288	233	165
	45-49	510	367	297	208
	50-54	653	447	361	251
	55-59	823	546	443	307
	60-64	1,043	644	523	363
APPLICANT & CHILD	19-24	242	147	119	85
	25-29	261	160	128	91
	30-34	279	172	137	97
	35-39	300	192	154	110
	40-44	329	212	171	122
	45-49	366	251	203	143
	50-54	438	291	235	165
	55-59	523	341	276	193
	60-64	633	390	316	221
APPLICANT & CHILDREN	19-24	341	207	167	119
	25-29	360	219	176	125
	30-34	378	232	186	132
	35-39	398	251	202	144
	40-44	428	271	219	156
	45-49	465	311	251	177
	50-54	536	351	284	199
	55-59	621	400	324	227
	60-64	731	449	365	255
FAMILY	19-24	472	287	232	165
	25-29	509	311	250	177
	30-34	546	336	268	190
	35-39	587	375	302	214
	40-44	646	415	336	239
	45-49	720	495	400	282
	50-54	862	574	464	324
	55-59	1,033	673	546	380
	60-64	1,253	771	626	437

		QUICK NET SELECT DAILY RATES			
		30-185 days			
AGE		\$750 DED.	\$1,000 DED.	\$2,000 DED.	\$4,500 DED.
SINGLE	1-18	2.57	1.56	1.26	0.90
	19-24	2.57	1.56	1.26	0.90
	25-29	2.94	1.80	1.44	1.02
	30-34	3.30	2.04	1.62	1.14
	35-39	3.70	2.43	1.95	1.38
	40-44	4.28	2.82	2.28	1.62
	45-49	5.00	3.60	2.91	2.04
	50-54	6.40	4.38	3.54	2.46
	55-59	8.07	5.35	4.34	3.01
60-64	10.23	6.31	5.13	3.56	
APPLICANT & SPOUSE/ DOMESTIC PARTNER	19-24	5.14	3.12	2.52	1.80
	25-29	5.88	3.60	2.88	2.04
	30-34	6.60	4.08	3.24	2.28
	35-39	7.40	4.86	3.90	2.76
	40-44	8.56	5.64	4.56	3.24
	45-49	10.00	7.20	5.82	4.08
	50-54	12.80	8.76	7.08	4.92
	55-59	16.14	10.70	8.68	6.02
	60-64	20.46	12.62	10.26	7.12
APPLICANT & CHILD	19-24	4.75	2.89	2.33	1.67
	25-29	5.12	3.13	2.51	1.79
	30-34	5.48	3.37	2.69	1.91
	35-39	5.88	3.76	3.02	2.15
	40-44	6.46	4.15	3.35	2.39
	45-49	7.18	4.93	3.98	2.81
	50-54	8.58	5.71	4.61	3.23
	55-59	10.25	6.68	5.41	3.78
	60-64	12.41	7.64	6.20	4.33
APPLICANT & CHILDREN	19-24	6.68	4.06	3.28	2.34
	25-29	7.05	4.30	3.46	2.46
	30-34	7.41	4.54	3.64	2.58
	35-39	7.81	4.93	3.97	2.82
	40-44	8.39	5.32	4.30	3.06
	45-49	9.11	6.10	4.93	3.48
	50-54	10.51	6.88	5.56	3.90
	55-59	12.18	7.85	6.36	4.45
	60-64	14.34	8.81	7.15	5.00
FAMILY	19-24	9.25	5.62	4.54	3.24
	25-29	9.99	6.10	4.90	3.48
	30-34	10.71	6.58	5.26	3.72
	35-39	11.51	7.36	5.92	4.20
	40-44	12.67	8.14	6.58	4.68
	45-49	14.11	9.70	7.84	5.52
	50-54	16.91	11.26	9.10	6.36
	55-59	20.25	13.20	10.70	7.46
	60-64	24.57	15.12	12.28	8.56

Region 5

Orange and San Diego counties

Rates effective January 1, 2010

		QUICK NET SELECT MONTHLY RATES			
		30-185 days			
AGE		\$750 DED.	\$1,000 DED.	\$2,000 DED.	\$4,500 DED.
SINGLE	1-18	127	83	67	46
	19-24	127	83	67	46
	25-29	145	95	77	54
	30-34	163	107	86	61
	35-39	183	130	103	72
	40-44	211	153	119	83
	45-49	247	194	153	107
	50-54	316	236	187	132
	55-59	398	289	227	160
60-64	504	341	268	188	
APPLICANT & SPOUSE/ DOMESTIC PARTNER	19-24	254	165	135	92
	25-29	290	190	153	107
	30-34	325	214	171	122
	35-39	365	260	205	144
	40-44	421	306	239	165
	45-49	494	389	306	214
	50-54	631	471	373	263
	55-59	796	577	455	320
	60-64	1,009	682	536	376
APPLICANT & CHILD	19-24	235	153	124	85
	25-29	253	165	134	93
	30-34	271	177	143	100
	35-39	291	200	160	111
	40-44	319	223	176	122
	45-49	355	265	210	146
	50-54	424	306	244	171
	55-59	506	359	285	199
	60-64	613	412	325	227
APPLICANT & CHILDREN	19-24	330	215	175	119
	25-29	348	227	184	127
	30-34	366	239	193	135
	35-39	386	262	210	145
	40-44	414	285	227	156
	45-49	450	326	261	181
	50-54	519	368	294	205
	55-59	601	421	335	234
	60-64	707	473	375	262
FAMILY	19-24	457	297	242	165
	25-29	493	322	261	181
	30-34	528	346	279	196
	35-39	568	392	313	217
	40-44	624	438	346	239
	45-49	697	521	414	288
	50-54	834	603	481	337
	55-59	999	709	563	394
	60-64	1,212	814	643	450

		QUICK NET SELECT DAILY RATES			
		30-185 days			
AGE		\$750 DED.	\$1,000 DED.	\$2,000 DED.	\$4,500 DED.
SINGLE	1-18	2.49	1.62	1.32	0.90
	19-24	2.49	1.62	1.32	0.90
	25-29	2.84	1.86	1.50	1.05
	30-34	3.19	2.10	1.68	1.20
	35-39	3.58	2.55	2.01	1.41
	40-44	4.13	3.00	2.34	1.62
	45-49	4.84	3.81	3.00	2.10
	50-54	6.19	4.62	3.66	2.58
	55-59	7.80	5.66	4.46	3.14
60-64	9.89	6.69	5.25	3.69	
APPLICANT & SPOUSE/ DOMESTIC PARTNER	19-24	4.98	3.24	2.64	1.80
	25-29	5.68	3.72	3.00	2.10
	30-34	6.38	4.20	3.36	2.40
	35-39	7.16	5.10	4.02	2.82
	40-44	8.26	6.00	4.68	3.24
	45-49	9.68	7.62	6.00	4.20
	50-54	12.38	9.24	7.32	5.16
	55-59	15.60	11.32	8.92	6.28
	60-64	19.78	13.38	10.50	7.38
APPLICANT & CHILD	19-24	4.61	3.00	2.44	1.67
	25-29	4.96	3.24	2.62	1.82
	30-34	5.31	3.48	2.80	1.97
	35-39	5.70	3.93	3.13	2.18
	40-44	6.25	4.38	3.46	2.39
	45-49	6.96	5.19	4.12	2.87
	50-54	8.31	6.00	4.78	3.35
	55-59	9.92	7.04	5.58	3.91
	60-64	12.01	8.07	6.37	4.46
APPLICANT & CHILDREN	19-24	6.47	4.21	3.43	2.34
	25-29	6.82	4.45	3.61	2.49
	30-34	7.17	4.69	3.79	2.64
	35-39	7.56	5.14	4.12	2.85
	40-44	8.11	5.59	4.45	3.06
	45-49	8.82	6.40	5.11	3.54
	50-54	10.17	7.21	5.77	4.02
	55-59	11.78	8.25	6.57	4.58
	60-64	13.87	9.28	7.36	5.13
FAMILY	19-24	8.96	5.83	4.75	3.24
	25-29	9.66	6.31	5.11	3.54
	30-34	10.36	6.79	5.47	3.84
	35-39	11.14	7.69	6.13	4.26
	40-44	12.24	8.59	6.79	4.68
	45-49	13.66	10.21	8.11	5.64
	50-54	16.36	11.83	9.43	6.60
	55-59	19.58	13.91	11.03	7.72
	60-64	23.76	15.97	12.61	8.82

Region 6

Fresno, Kern and Kings counties

Rates effective January 1, 2010

		QUICK NET SELECT MONTHLY RATES			
		30-185 days			
AGE		\$750 DED.	\$1,000 DED.	\$2,000 DED.	\$4,500 DED.
SINGLE	1-18	131	89	70	49
	19-24	131	89	70	49
	25-29	150	103	83	58
	30-34	168	116	95	67
	35-39	189	139	112	78
	40-44	218	162	129	89
	45-49	255	207	164	113
	50-54	326	251	199	138
	55-59	412	308	245	171
60-64	522	364	290	204	
APPLICANT & SPOUSE/ DOMESTIC PARTNER	19-24	262	177	141	98
	25-29	300	205	165	116
	30-34	337	233	190	135
	35-39	377	278	223	156
	40-44	437	324	257	177
	45-49	510	413	327	226
	50-54	653	502	398	275
	55-59	823	615	490	342
	60-64	1,043	727	580	408
APPLICANT & CHILD	19-24	242	164	130	91
	25-29	261	178	142	100
	30-34	279	192	155	109
	35-39	300	215	171	120
	40-44	329	238	188	131
	45-49	366	282	223	155
	50-54	438	326	259	180
	55-59	523	383	304	213
	60-64	633	439	350	246
APPLICANT & CHILDREN	19-24	341	231	183	128
	25-29	360	244	195	137
	30-34	378	258	208	146
	35-39	398	281	224	157
	40-44	428	304	241	167
	45-49	465	348	276	192
	50-54	536	393	312	216
	55-59	621	449	358	249
	60-64	731	505	403	283
FAMILY	19-24	472	319	253	176
	25-29	509	347	278	195
	30-34	546	374	302	213
	35-39	587	420	336	235
	40-44	646	466	370	256
	45-49	720	555	440	305
	50-54	862	644	511	354
	55-59	1,033	757	602	420
	60-64	1,253	869	693	487

		QUICK NET SELECT DAILY RATES			
		30-185 days			
AGE		\$750 DED.	\$1,000 DED.	\$2,000 DED.	\$4,500 DED.
SINGLE	1-18	2.57	1.74	1.38	0.96
	19-24	2.57	1.74	1.38	0.96
	25-29	2.94	2.01	1.62	1.14
	30-34	3.30	2.28	1.86	1.32
	35-39	3.70	2.73	2.19	1.53
	40-44	4.28	3.18	2.52	1.74
	45-49	5.00	4.05	3.21	2.22
	50-54	6.40	4.92	3.90	2.70
	55-59	8.07	6.03	4.80	3.35
60-64	10.23	7.13	5.69	4.00	
APPLICANT & SPOUSE/ DOMESTIC PARTNER	19-24	5.14	3.48	2.76	1.92
	25-29	5.88	4.02	3.24	2.28
	30-34	6.60	4.56	3.72	2.64
	35-39	7.40	5.46	4.38	3.06
	40-44	8.56	6.36	5.04	3.48
	45-49	10.00	8.10	6.42	4.44
	50-54	12.80	9.84	7.80	5.40
	55-59	16.14	12.06	9.60	6.70
	60-64	20.46	14.26	11.38	8.00
APPLICANT & CHILD	19-24	4.75	3.22	2.55	1.78
	25-29	5.12	3.49	2.79	1.96
	30-34	5.48	3.76	3.03	2.14
	35-39	5.88	4.21	3.36	2.35
	40-44	6.46	4.66	3.69	2.56
	45-49	7.18	5.53	4.38	3.04
	50-54	8.58	6.40	5.07	3.52
	55-59	10.25	7.51	5.97	4.17
	60-64	12.41	8.61	6.86	4.82
APPLICANT & CHILDREN	19-24	6.68	4.52	3.59	2.50
	25-29	7.05	4.79	3.83	2.68
	30-34	7.41	5.06	4.07	2.86
	35-39	7.81	5.51	4.40	3.07
	40-44	8.39	5.96	4.73	3.28
	45-49	9.11	6.83	5.42	3.76
	50-54	10.51	7.70	6.11	4.24
	55-59	12.18	8.81	7.01	4.89
	60-64	14.34	9.91	7.90	5.54
FAMILY	19-24	9.25	6.26	4.97	3.46
	25-29	9.99	6.80	5.45	3.82
	30-34	10.71	7.34	5.93	4.18
	35-39	11.51	8.24	6.59	4.60
	40-44	12.67	9.14	7.25	5.02
	45-49	14.11	10.88	8.63	5.98
	50-54	16.91	12.62	10.01	6.94
	55-59	20.25	14.84	11.81	8.24
	60-64	24.57	17.04	13.59	9.54

Region 7²

Alpine, Amador, Butte, Calaveras, Colusa, Del Norte, Eastern El Dorado, Eastern Placer, Glenn, Humboldt, Inyo, Lake, Lassen,

Rates effective January 1, 2010

		QUICK NET SELECT MONTHLY RATES			
		30-185 days			
AGE		\$750 DED.	\$1,000 DED.	\$2,000 DED.	\$4,500 DED.
SINGLE	1-18	157	95	77	55
	19-24	157	95	77	55
	25-29	180	110	89	63
	30-34	202	125	101	70
	35-39	226	148	121	84
	40-44	261	171	141	98
	45-49	305	219	179	125
	50-54	391	266	217	153
	55-59	493	328	267	187
60-64	625	389	316	220	
APPLICANT & SPOUSE/ DOMESTIC PARTNER	19-24	314	190	153	110
	25-29	359	220	177	125
	30-34	404	251	202	141
	35-39	452	297	242	168
	40-44	522	343	282	196
	45-49	611	438	358	251
	50-54	782	532	435	306
	55-59	986	656	533	373
	60-64	1,250	778	631	440
APPLICANT & CHILD	19-24	291	175	142	102
	25-29	313	191	154	110
	30-34	336	206	166	117
	35-39	360	229	186	131
	40-44	395	252	206	145
	45-49	439	299	244	172
	50-54	525	347	283	200
	55-59	627	409	332	234
	60-64	758	470	381	267
APPLICANT & CHILDREN	19-24	409	247	199	143
	25-29	431	262	211	151
	30-34	453	277	223	159
	35-39	477	300	243	172
	40-44	513	323	263	186
	45-49	557	371	301	214
	50-54	643	418	340	241
	55-59	745	480	389	275
	60-64	876	541	438	308
FAMILY	19-24	566	342	275	198
	25-29	610	372	300	214
	30-34	655	403	324	229
	35-39	703	449	364	257
	40-44	774	495	404	284
	45-49	862	590	480	339
	50-54	1,034	684	557	394
	55-59	1,238	808	656	462
	60-64	1,501	930	754	528

²ZIP codes for eastern El Dorado include: 95613-14, 95619, 95629, 95633-36, 95643, 95651, 95656, 95664, 95667, 95672, 95682, 95684, 95709, 95720-21, 95726, 95735, 96150-52 and 96154-58 only. See region 2 for additional El Dorado County ZIP codes. ZIP codes for

Madera, Mariposa, Mendocino, Modoc, Mono, Monterey, Nevada, Plumas, San Benito, Shasta, Sierra, Siskiyou, Sutter, Tehama, Trinity, Tuolumne, Yolo and Yuba counties

		QUICK NET SELECT DAILY RATES			
		30-185 days			
AGE		\$750 DED.	\$1,000 DED.	\$2,000 DED.	\$4,500 DED.
SINGLE	1-18	3.08	1.86	1.50	1.08
	19-24	3.08	1.86	1.50	1.08
	25-29	3.52	2.16	1.74	1.23
	30-34	3.96	2.46	1.98	1.38
	35-39	4.43	2.91	2.37	1.65
	40-44	5.12	3.36	2.76	1.92
	45-49	5.99	4.29	3.51	2.46
	50-54	7.67	5.22	4.26	3.00
	55-59	9.67	6.43	5.23	3.66
60-64	12.25	7.63	6.19	4.31	
APPLICANT & SPOUSE/ DOMESTIC PARTNER	19-24	6.16	3.72	3.00	2.16
	25-29	7.04	4.32	3.48	2.46
	30-34	7.92	4.92	3.96	2.76
	35-39	8.86	5.82	4.74	3.30
	40-44	10.24	6.72	5.52	3.84
	45-49	11.98	8.58	7.02	4.92
	50-54	15.34	10.44	8.52	6.00
	55-59	19.34	12.86	10.46	7.32
	60-64	24.50	15.26	12.38	8.62
APPLICANT & CHILD	19-24	5.70	3.44	2.78	2.00
	25-29	6.14	3.74	3.02	2.15
	30-34	6.58	4.04	3.26	2.30
	35-39	7.05	4.49	3.65	2.57
	40-44	7.74	4.94	4.04	2.84
	45-49	8.61	5.87	4.79	3.38
	50-54	10.29	6.80	5.54	3.92
	55-59	12.29	8.01	6.51	4.58
	60-64	14.87	9.21	7.47	5.23
APPLICANT & CHILDREN	19-24	8.01	4.84	3.90	2.81
	25-29	8.45	5.14	4.14	2.96
	30-34	8.89	5.44	4.38	3.11
	35-39	9.36	5.89	4.77	3.38
	40-44	10.05	6.34	5.16	3.65
	45-49	10.92	7.27	5.91	4.19
	50-54	12.60	8.20	6.66	4.73
	55-59	14.60	9.41	7.63	5.39
	60-64	17.18	10.61	8.59	6.04
FAMILY	19-24	11.09	6.70	5.40	3.89
	25-29	11.97	7.30	5.88	4.19
	30-34	12.85	7.90	6.36	4.49
	35-39	13.79	8.80	7.14	5.03
	40-44	15.17	9.70	7.92	5.57
	45-49	16.91	11.56	9.42	6.65
	50-54	20.27	13.42	10.92	7.73
	55-59	24.27	15.84	12.86	9.05
	60-64	29.43	18.24	14.78	10.35

eastern Placer County include: 95631, 95681, 95701, 95703, 95713-15, 95717, 95724, 95736, 96140-43, 96145-46, 96148, and 96162 only. See region 2 for additional Placer County ZIP codes.

Region 8

Imperial and San Luis Obispo counties

Rates effective January 1, 2010

		QUICK NET SELECT MONTHLY RATES			
		30-185 days			
	AGE	\$750 DED.	\$1,000 DED.	\$2,000 DED.	\$4,500 DED.
SINGLE	1-18	157	95	77	55
	19-24	157	95	77	55
	25-29	180	110	89	63
	30-34	202	125	101	70
	35-39	226	148	121	84
	40-44	261	171	141	98
	45-49	305	219	179	125
	50-54	391	266	217	153
	55-59	493	328	267	187
60-64	625	389	316	220	
APPLICANT & SPOUSE/ DOMESTIC PARTNER	19-24	314	190	153	110
	25-29	359	220	177	125
	30-34	404	251	202	141
	35-39	452	297	242	168
	40-44	522	343	282	196
	45-49	611	438	358	251
	50-54	782	532	435	306
	55-59	986	656	533	373
	60-64	1,250	778	631	440
APPLICANT & CHILD	19-24	291	175	142	102
	25-29	313	191	154	110
	30-34	336	206	166	117
	35-39	360	229	186	131
	40-44	395	252	206	145
	45-49	439	299	244	172
	50-54	525	347	283	200
	55-59	627	409	332	234
	60-64	758	470	381	267
APPLICANT & CHILDREN	19-24	409	247	199	143
	25-29	431	262	211	151
	30-34	453	277	223	159
	35-39	477	300	243	172
	40-44	513	323	263	186
	45-49	557	371	301	214
	50-54	643	418	340	241
	55-59	745	480	389	275
	60-64	876	541	438	308
FAMILY	19-24	566	342	275	198
	25-29	610	372	300	214
	30-34	655	403	324	229
	35-39	703	449	364	257
	40-44	774	495	404	284
	45-49	862	590	480	339
	50-54	1,034	684	557	394
	55-59	1,238	808	656	462
	60-64	1,501	930	754	528

		QUICK NET SELECT DAILY RATES			
		30-185 days			
	AGE	\$750 DED.	\$1,000 DED.	\$2,000 DED.	\$4,500 DED.
SINGLE	1-18	3.08	1.86	1.50	1.08
	19-24	3.08	1.86	1.50	1.08
	25-29	3.52	2.16	1.74	1.23
	30-34	3.96	2.46	1.98	1.38
	35-39	4.43	2.91	2.37	1.65
	40-44	5.12	3.36	2.76	1.92
	45-49	5.99	4.29	3.51	2.46
	50-54	7.67	5.22	4.26	3.00
	55-59	9.67	6.43	5.23	3.66
60-64	12.25	7.63	6.19	4.31	
APPLICANT & SPOUSE/ DOMESTIC PARTNER	19-24	6.16	3.72	3.00	2.16
	25-29	7.04	4.32	3.48	2.46
	30-34	7.92	4.92	3.96	2.76
	35-39	8.86	5.82	4.74	3.30
	40-44	10.24	6.72	5.52	3.84
	45-49	11.98	8.58	7.02	4.92
	50-54	15.34	10.44	8.52	6.00
	55-59	19.34	12.86	10.46	7.32
	60-64	24.50	15.26	12.38	8.62
APPLICANT & CHILD	19-24	5.70	3.44	2.78	2.00
	25-29	6.14	3.74	3.02	2.15
	30-34	6.58	4.04	3.26	2.30
	35-39	7.05	4.49	3.65	2.57
	40-44	7.74	4.94	4.04	2.84
	45-49	8.61	5.87	4.79	3.38
	50-54	10.29	6.80	5.54	3.92
	55-59	12.29	8.01	6.51	4.58
	60-64	14.87	9.21	7.47	5.23
APPLICANT & CHILDREN	19-24	8.01	4.84	3.90	2.81
	25-29	8.45	5.14	4.14	2.96
	30-34	8.89	5.44	4.38	3.11
	35-39	9.36	5.89	4.77	3.38
	40-44	10.05	6.34	5.16	3.65
	45-49	10.92	7.27	5.91	4.19
	50-54	12.60	8.20	6.66	4.73
	55-59	14.60	9.41	7.63	5.39
	60-64	17.18	10.61	8.59	6.04
FAMILY	19-24	11.09	6.70	5.40	3.89
	25-29	11.97	7.30	5.88	4.19
	30-34	12.85	7.90	6.36	4.49
	35-39	13.79	8.80	7.14	5.03
	40-44	15.17	9.70	7.92	5.57
	45-49	16.91	11.56	9.42	6.65
	50-54	20.27	13.42	10.92	7.73
	55-59	24.27	15.84	12.86	9.05
	60-64	29.43	18.24	14.78	10.35

For more information please contact:

Health Net

Post Office Box 1150

Rancho Cordova, California 95741-1150

Individual & Family Plans:

1-800-909-3447 (English)

1-877-891-9050 (Cantonese)

1-800-331-1777 (Spanish)

1-877-891-9053 (Mandarin)

1-877-339-8596 (Korean)

1-877-891-9051 (Tagalog)

1-877-339-8621 (Vietnamese)

Telecommunications device for
the hearing and speech impaired

1-800-995-0852

www.healthnet.com

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