

Exhibit 3
SoloCare Tobacco Rate Sheets
SoloCare Rate Sheets for Rating Area 9, Whitfield County

Plan	Silver 40017
Plan Marketing Name	SoloCare Vitruvian Plus Silver HMO 130008
Plan ID	83761GA0130008
Vitruvian Plus HMO	
Age	
0-14	\$326.05
15	\$355.04
16	\$366.12
17	\$377.20
18	\$389.13
19	\$401.07
20	\$413.43
21	\$447.53
22	\$447.53
23	\$447.53
24	\$447.53
25	\$449.32
26	\$458.27
27	\$469.01
28	\$486.46
29	\$500.78
30	\$507.94
31	\$518.68
32	\$529.42
33	\$536.14
34	\$543.30
35	\$546.88
36	\$550.46
37	\$554.04
38	\$557.62
39	\$564.78
40	\$571.94
41	\$582.68
42	\$592.97
43	\$607.29
44	\$625.19
45	\$646.23
46	\$671.29
47	\$699.48
48	\$731.70
49	\$763.48
50	\$799.28
51	\$834.63
52	\$873.57
53	\$912.95
54	\$955.47
55	\$997.98
56	\$1,044.08
57	\$1,090.62
58	\$1,140.29
59	\$1,164.91
60	\$1,214.58
61	\$1,257.55
62	\$1,285.74
63	\$1,321.09
64 and over	\$1,342.58