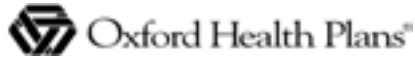


Oxford USASM
New York Small Group
1st Quarter 2003 Rate Sheet



Standard Plan Features include:

- \$50 Emergency Room Copay
- Outpatient Mental Health Care: 30 visits per calendar year
- Short Term Rehabilitation: 90 outpatient visits per condition / lifetime
- Non-Gatekeeper Plan
- 70% UCR
- Dental and Alternative Medicine riders cannot be purchased.*

Plan	Office Visit Copay	OON Deductible	OON Coinsurance	Coinsurance Limit	Family Tier	Medical Only	Vision Rider	Rx 7/20/50C	Rx 5/15/50C	Rx Brand Only Deductible Plans			
										7/20/50C \$50	7/20/50C \$100	5/15/50C \$50	5/15/50C \$100
						Q1 2003	Q1 2003	Q1 2003	Q1 2003	Q1 2003	Q1 2003	Q1 2003	Q1 2003
1	\$10	\$250	30%	\$5,000	Single	\$362.71	\$4.40	\$59.93	\$84.47	\$53.94	\$50.94	\$76.03	\$71.80
					Parent/Child(ren)	\$689.15	\$8.36	\$113.87	\$160.49	\$102.49	\$96.79	\$144.46	\$136.42
					Husband/Wife	\$725.42	\$8.80	\$119.86	\$168.94	\$107.88	\$101.88	\$152.06	\$143.60
					Family	\$1,124.40	\$13.64	\$185.78	\$261.86	\$167.21	\$157.91	\$235.69	\$222.58
2	\$15	\$250	30%	\$5,000	Single	\$356.46	\$4.40	\$59.93	\$84.47	\$53.94	\$50.94	\$76.03	\$71.80
					Parent/Child(ren)	\$677.27	\$8.36	\$113.87	\$160.49	\$102.49	\$96.79	\$144.46	\$136.42
					Husband/Wife	\$712.92	\$8.80	\$119.86	\$168.94	\$107.88	\$101.88	\$152.06	\$143.60
					Family	\$1,105.03	\$13.64	\$185.78	\$261.86	\$167.21	\$157.91	\$235.69	\$222.58
3	\$15	\$500	30%	\$5,000	Single	\$347.58	\$4.40	\$59.93	\$84.47	\$53.94	\$50.94	\$76.03	\$71.80
					Parent/Child(ren)	\$660.40	\$8.36	\$113.87	\$160.49	\$102.49	\$96.79	\$144.46	\$136.42
					Husband/Wife	\$695.16	\$8.80	\$119.86	\$168.94	\$107.88	\$101.88	\$152.06	\$143.60
					Family	\$1,077.50	\$13.64	\$185.78	\$261.86	\$167.21	\$157.91	\$235.69	\$222.58
4	\$15	\$1,000	30%	\$10,000	Single	\$322.31	\$4.40	\$59.93	\$84.47	\$53.94	\$50.94	\$76.03	\$71.80
					Parent/Child(ren)	\$612.39	\$8.36	\$113.87	\$160.49	\$102.49	\$96.79	\$144.46	\$136.42
					Husband/Wife	\$644.62	\$8.80	\$119.86	\$168.94	\$107.88	\$101.88	\$152.06	\$143.60
					Family	\$999.16	\$13.64	\$185.78	\$261.86	\$167.21	\$157.91	\$235.69	\$222.58
5	\$20	\$500	30%	\$10,000	Single	\$333.53	\$4.40	\$59.93	\$84.47	\$53.94	\$50.94	\$76.03	\$71.80
					Parent/Child(ren)	\$633.71	\$8.36	\$113.87	\$160.49	\$102.49	\$96.79	\$144.46	\$136.42
					Husband/Wife	\$667.06	\$8.80	\$119.86	\$168.94	\$107.88	\$101.88	\$152.06	\$143.60
					Family	\$1,033.94	\$13.64	\$185.78	\$261.86	\$167.21	\$157.91	\$235.69	\$222.58
6	\$20	\$1,000	30%	\$10,000	Single	\$316.45	\$4.40	\$59.93	\$84.47	\$53.94	\$50.94	\$76.03	\$71.80
					Parent/Child(ren)	\$601.26	\$8.36	\$113.87	\$160.49	\$102.49	\$96.79	\$144.46	\$136.42
					Husband/Wife	\$632.90	\$8.80	\$119.86	\$168.94	\$107.88	\$101.88	\$152.06	\$143.60
					Family	\$981.00	\$13.64	\$185.78	\$261.86	\$167.21	\$157.91	\$235.69	\$222.58

Final rates are subject to State regulatory approval and home office verification