

MONTHLY PREMIUM RATES

Age	\$1,000 Deductible	\$1,500 Deductible	\$2,500 Deductible	\$5,000 Deductible	\$10,000 Deductible
60	\$366	\$316	\$258	\$212	\$204
61	\$372	\$322	\$265	\$217	\$207
62	\$378	\$328	\$272	\$222	\$210
63	\$384	\$334	\$279	\$227	\$213
64	\$390	\$340	\$286	\$232	\$216
65	\$395	\$344	\$293	\$238	\$221
66	\$413	\$359	\$301	\$246	\$227
67	\$431	\$374	\$309	\$254	\$233
68	\$449	\$389	\$317	\$262	\$239
69	\$467	\$404	\$325	\$270	\$245
70	\$484	\$419	\$335	\$279	\$252
71	\$502	\$433	\$349	\$290	\$260
72	\$520	\$447	\$363	\$301	\$268
73	\$538	\$461	\$377	\$312	\$276
74	\$556	\$475	\$391	\$323	\$284
75	-	\$490	\$408	\$336	\$296
76	-	\$504	\$421	\$345	\$304
77	-	\$518	\$434	\$354	\$312
78	-	\$532	\$447	\$363	\$320
79	-	\$546	\$460	\$372	\$328
80	-	-	\$476	\$381	\$336
81	-	-	\$498	\$424	\$368
82	-	-	\$525	\$467	\$400
83	-	-	\$550	\$510	\$432
84	-	-	\$575	\$553	\$464
85	-	-	-	\$598	\$500
86	-	-	-	\$641	\$534
87	-	-	-	\$684	\$568
88	-	-	-	\$727	\$602
89	-	-	-	\$770	\$636
90	-	-	-	-	\$673
91	-	-	-	-	\$707
92	-	-	-	-	\$741
93	-	-	-	-	\$775
94	-	-	-	-	\$809
95	-	-	-	-	\$843

Additional Calculations:

- For Part A coverage only = above rates x .60
- For Part B coverage only = above rates x .60

This plan is not compliant with the Affordable Care Act

This is not intended to be a complete outline of coverage. Actual wording may change without notice.

Underwriters reserve the right to modify terms and benefits at time of underwriting.