



ICSVEBA (Imperial County Schools Of Voluntary Employees Benefits Association)

BASE PLAN:		OPTIONS:	
FACILITY MONTHLY BENEFIT	\$1000	HOME CARE LEVEL	TOTAL
		INFLATION PROTECTION	SIMPLE CAPPED
FACILITY BEN DURATION	3 YEARS	HOME MONTHLY BENEFIT	\$500
		HOME BENEFIT	50%
LIFETIME MAXIMUM	\$36,000		
ELIMINATION PERIOD	90 DAYS		

MONTHLY RATES

INSURANCE AGE	PLAN 1	PLAN 2	PLAN 3	PLAN 4
	BASE PLAN	BASE PLAN WITH TOTAL HOME CARE OPTION	BASE PLAN WITH SIMPLE INFLATION OPTION	BASE PLAN WITH SIMPLE INFLATION TOTAL HOME CARE OPTION
18-30	4.20	13.70	7.80	24.20
31	4.60	14.70	8.40	25.70
32	4.70	15.20	8.40	26.40
33	5.00	15.80	9.30	27.80
34	5.50	16.80	10.30	29.60
35	5.60	17.30	10.30	30.40
36	6.00	18.40	11.10	32.60
37	6.50	19.20	12.10	34.10
38	7.00	20.40	13.00	36.20
39	7.40	21.50	13.90	38.30
40	7.90	22.80	14.50	39.90
41	8.30	23.90	15.40	42.00
42	8.80	25.40	16.30	44.70
43	9.40	26.90	17.40	47.20
44	10.30	28.70	19.20	50.10
45	10.70	30.20	20.20	52.90
46	11.80	32.20	21.70	56.10
47	12.70	34.40	23.50	59.70
48	13.60	36.60	25.50	63.50
49	14.60	38.80	26.90	66.60
50	15.50	41.20	28.80	70.50
51	17.10	44.20	31.40	75.20
52	18.60	47.60	34.30	80.80
53	20.10	50.80	37.00	85.50
54	22.10	54.60	40.40	91.60
55	23.70	58.40	43.20	96.90
56	26.80	63.80	48.30	105.10
57	29.80	69.40	53.80	114.10



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58	32.90	75.30	59.00	122.70
59	37.10	82.10	65.80	132.70
60	41.10	88.90	72.40	142.50
61	46.40	97.10	81.60	155.20
62	52.30	105.90	90.70	168.00
63	58.80	115.30	100.50	180.90
64	66.40	125.80	112.10	195.50
65	78.20	141.30	131.30	218.90
66	87.40	152.60	144.20	233.90
67	97.60	164.80	159.00	250.40
68	109.30	178.80	174.70	268.00
69	122.10	193.90	193.00	288.60
70	136.00	210.10	210.60	307.70
71	159.40	237.60	243.70	344.40