

BASE PLAN:		OPTIONS:	
FACILITY MONTHLY BENEFIT	\$1000	HOME CARE LEVEL	Home, Community-Based and Immediate Family Member Care
HOME MONTHLY BENEFIT	\$500	INFLATION PROTECTION	SIMPLE CAPPED
FACILITY BEN DURATION	3 YEARS		
HOME BENEFIT	50%		
LIFETIME MAXIMUM	\$36,000		
ELIMINATION PERIOD	90 DAYS		
HOME CARE LEVEL	HOME AND COMMUNITY-BASED		
	CARE		

	PLAN 1	PLAN 2	PLAN 3	PLAN 4
INSURANCE AGE	BASE PLAN	BASE PLAN WITH HOME, COMM-BASED AND IMMEDIATE FAMILY MEMBER CARE OPTION	BASE PLAN WITH SIMPLE INFLATION OPTION	BASE PLAN WITH HOME, COMM-BASED AND IMMEDIATE FAMILY MEMBER CARE SIMPLE INFLATION OPTIONS
18-30	3.70	5.60	5.10	7.70
31	3.70	5.60	5.20	7.90
32	3.70	5.70	5.40	8.20
33	3.80	5.80	5.50	8.30
34	3.90	5.90	5.70	8.70
35	4.10	6.10	5.90	8.80
36	4.20	6.30	6.40	9.40
37	4.30	6.50	6.50	9.70
38	4.60	6.80	6.90	10.10
39	4.80	7.10	7.30	10.70
40	5.00	7.30	7.50	11.00
41	5.10	7.60	7.80	11.60
42	5.40	8.00	8.40	12.30
43	5.60	8.20	8.70	12.70
44	5.90	8.70	9.30	13.50
45	6.20	9.10	9.70	14.10
46	6.50	9.60	10.20	14.90
47	6.70	10.00	10.60	15.60
48	7.10	10.60	11.20	16.60
49	7.40	11.20	11.80	17.60
50	7.80	11.80	12.50	18.60
51	8.40	12.60	13.20	19.60
52	8.70	13.30	13.90	20.70
53	9.40	14.20	14.80	22.00
54	9.70	14.90	15.50	23.20
55	10.40	15.90	16.30	24.20
56	11.00	16.90	17.20	25.60
57	11.90	18.20	18.50	27.30



BASE PLAN:		OPTIONS:	
FACILITY MONTHLY BENEFIT	\$1000	HOME CARE LEVEL	Home, Community-Based
			and Immediate Family
			Member Care
HOME MONTHLY BENEFIT	\$500	INFLATION PROTECTION	SIMPLE CAPPED
FACILITY BEN DURATION	3 YEARS		
HOME BENEFIT	50%		
LIFETIME MAXIMUM	\$36,000		
ELIMINATION PERIOD	60 DAYS		
HOME CARE LEVEL	HOME AND		
	COMMUNITY-BASED		
	CARE		

	PLAN 1	PLAN 2	PLAN 3	PLAN 4
INSURANCE AGE	BASE PLAN	BASE PLAN WITH HOME, COMM-BASED AND IMMEDIATE FAMILY MEMBER CARE OPTION	BASE PLAN WITH SIMPLE INFLATION OPTION	BASE PLAN WITH HOME, COMM-BASED AND IMMEDIATE FAMILY MEMBER CARE SIMPLE INFLATION OPTIONS
58	12.70	19.30	19.80	29.20
59	13.60	20.70	21.30	31.30
60	14.70	22.20	22.70	33.20
61	16.00	23.90	24.60	35.70
62	17.60	26.10	26.90	38.70
63	19.20	28.20	29.10	41.50
64	21.10	30.70	31.70	44.90
65	23.90	34.20	35.90	49.80
66	26.50	37.30	39.40	53.80
67	29.40	40.70	43.30	58.50
68	32.50	44.30	47.20	62.90
69	36.00	48.40	52.10	68.30
70	39.90	52.90	56.90	73.80
71	44.30	57.90	62.60	80.20
72	49.10	63.40	68.80	87.30
73	54.50	69.60	75.20	94.30
74	60.10	75.90	82.50	102.40
75	72.50	90.60	98.00	120.70
76	79.60	98.50	106.90	130.50
77	87.30	107.00	115.60	140.00
78	95.80	116.50	125.80	151.10
79	104.90	126.50	135.90	162.00
80	115.30	137.70	148.20	175.10
81	127.00	150.30	162.10	189.70
82	140.80	165.30	176.80	205.80
83	155.50	181.70	193.90	224.50
84	171.30	199.00	210.20	242.30



BASE PLAN:		OPTIONS:	
FACILITY MONTHLY BENEFIT	\$1000	HOME CARE LEVEL	Home, Community-Based and Immediate Family
			Member Care
HOME MONTHLY BENEFIT	\$500	INFLATION PROTECTION	SIMPLE CAPPED
FACILITY BEN DURATION	6 YEARS		
HOME BENEFIT	50%		
LIFETIME MAXIMUM	\$72,000		
ELIMINATION PERIOD	60 DAYS		
HOME CARE LEVEL	HOME AND COMMUNITY- BASED CARE		

	PLAN 1	PLAN 2	PLAN 3	PLAN 4
INSURANCE AGE	BASE PLAN	BASE PLAN WITH HOME, COMM-BASED AND IMMEDIATE FAMILY MEMBER CARE OPTION	BASE PLAN WITH SIMPLE INFLATION OPTION	BASE PLAN WITH HOME, COMM-BASED AND IMMEDIATE FAMILY MEMBER CARE SIMPLE INFLATION OPTIONS
18-30	4.80	7.40	6.80	10.40
31	4.90	7.50	6.90	10.50
32	5.00	7.60	7.20	11.00
33	5.20	7.80	7.50	11.30
34	5.30	8.10	7.70	11.70
35	5.50	8.30	8.10	12.20
36	5.70	8.60	8.40	12.70
37	5.90	8.80	8.80	13.10
38	6.10	9.20	9.20	13.80
39	6.30	9.50	9.60	14.40
40	6.60	9.90	10.10	15.10
41	6.80	10.30	10.50	15.70
42	7.10	10.80	11.10	16.50
43	7.50	11.30	11.60	17.30
44	7.90	11.90	12.30	18.30
45	8.40	12.50	13.20	19.30
46	8.70	13.10	13.60	20.20
47	9.10	13.80	14.40	21.40
48	9.60	14.60	15.00	22.50
49	9.90	15.20	15.70	23.80
50	10.50	16.20	16.60	25.10
51	10.90	17.00	17.40	26.50
52	11.60	18.10	18.40	28.10
53	12.30	19.20	19.50	29.80
54	13.00	20.40	20.50	31.40
55	13.80	21.80	21.60	33.10
56	14.70	23.10	22.90	34.90
57	15.60	24.70	24.40	37.40



BASE PLAN:		OPTIONS:	
FACILITY MONTHLY BENEFIT	\$1000	HOME CARE LEVEL	Home, Community-Based
			and Immediate Family
			Member Care
HOME MONTHLY BENEFIT	\$500	INFLATION PROTECTION	SIMPLE CAPPED
FACILITY BEN DURATION	6 YEARS		
HOME BENEFIT	50%		
LIFETIME MAXIMUM	\$72,000		
ELIMINATION PERIOD	60 DAYS		
HOME CARE LEVEL	HOME AND COMMUNITY-		
	BASED CARE		

	PLAN 1	PLAN 2	PLAN 3	PLAN 4
INSURANCE AGE	BASE PLAN	BASE PLAN WITH HOME, COMM-BASED AND IMMEDIATE FAMILY MEMBER CARE OPTION	BASE PLAN WITH SIMPLE INFLATION OPTION	BASE PLAN WITH HOME, COMM-BASED AND IMMEDIATE FAMILY MEMBER CARE SIMPLE INFLATION OPTIONS
58	16.80	26.40	26.10	39.80
56 59	17.90	28.30	27.70	42.40
60	19.20	30.20	27.70	45.10
61	21.00	33.00	32.20	48.80
62	23.00	35.90	35.10	52.90
63	25.10	38.90	37.80	56.80
64	27.50	42.40	41.30	61.60
65	31.00	47.20	41.30	68.30
66	34.40			
	0 11 10	51.60	50.80	73.80
67	38.10	56.40	56.10	80.50
68	42.00	61.40	61.10	86.60
69	46.50	67.00	67.00	93.90
70	51.40	73.30	73.10	101.50
71	57.10	80.40	80.30	110.60
72	63.20	88.00	88.20	120.20
73	69.70	96.30	96.10	129.80
74	77.10	105.40	105.40	141.10
75	92.60	125.70	124.90	166.30
76	101.60	136.70	136.10	179.70
77	111.40	148.70	147.10	193.00
78	122.10	161.80	160.20	208.70
79	133.80	176.00	172.90	223.90
80	146.60	191.40	188.00	241.70
81	161.20	208.70	205.00	261.60
82	178.30	229.50	223.40	283.90
83	196.60	252.10	244.50	309.40
84	216.10	276.00	264.60	334.10



BASE PLAN:		OPTIONS:	
FACILITY MONTHLY BENEFIT	\$1000	HOME CARE LEVEL	Home, Community-Based and Immediate Family Member Care
HOME MONTHLY BENEFIT	\$500	INFLATION PROTECTION	SIMPLE CAPPED
FACILITY BEN DURATION	UNLIMITED		
HOME BENEFIT	50%		
LIFETIME MAXIMUM	UNLIMITED		
ELIMINATION PERIOD	90 DAYS		
HOME CARE LEVEL	HOME AND COMMUNITY- BASED CARE		

	PLAN 1	PLAN 2	PLAN 3	PLAN 4
INSURANCE AGE	BASE PLAN	BASE PLAN WITH HOME, COMM-BASED AND IMMEDIATE FAMILY MEMBER CARE OPTION	BASE PLAN WITH SIMPLE INFLATION OPTION	BASE PLAN WITH HOME, COMM-BASED AND IMMEDIATE FAMILY MEMBER CARE SIMPLE INFLATION OPTIONS
18-30	8.00	12.60	11.10	17.50
31	8.00	12.70	11.40	17.90
32	8.30	13.10	12.00	18.70
33	8.40	13.30	12.20	19.10
34	8.60	13.60	12.50	19.70
35	8.80	13.90	13.00	20.40
36	9.10	14.30	13.50	21.20
37	9.50	14.90	14.30	22.20
38	9.80	15.40	14.90	23.10
39	10.20	15.90	15.50	24.00
40	10.60	16.60	16.20	25.10
41	11.20	17.40	17.10	26.40
42	11.60	18.00	17.70	27.50
43	12.10	18.80	18.80	29.00
44	12.70	19.70	19.70	30.40
45	13.30	20.70	20.70	32.00
46	14.00	21.90	21.90	33.70
47	14.50	23.00	22.90	35.70
48	15.40	24.40	24.20	37.90
49	16.00	25.60	25.10	39.80
50	16.80	27.20	26.40	41.90
51	17.60	28.70	27.80	44.40
52	18.60	30.50	29.40	47.10
53	19.70	32.40	30.80	49.80
54	20.70	34.30	32.50	52.70
55	21.70	36.20	33.90	54.80
56	23.10	38.70	35.90	58.20
57	24.60	41.40	38.20	62.20
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Base Plan:		Options:	
Facility Monthly Benefit	\$1000	Home Care Level	Home, Community-Based and Immediate Family Member Care
Home Monthly Benefit	\$500	Inflation Protection	SIMPLE CAPPED
Facility Ben Duration	Unlimited		
Home Benefit	50%		
Lifetime Maximum	Unlimited		
Elimination Period	90 Days		
Home Care Level	Home and Community- Based Care		

	PLAN 1	PLAN 2	PLAN 3	PLAN 4
INSURANCE AGE	BASE PLAN	BASE PLAN WITH HOME, COMM-BASED AND IMMEDIATE FAMILY MEMBER CARE OPTION	BASE PLAN WITH SIMPLE INFLATION OPTION	BASE PLAN WITH HOME, COMM-BASED AND IMMEDIATE FAMILY MEMBER CARE SIMPLE INFLATION OPTIONS
58	00.00	44.00	40.00	00.00
59	26.20	44.30	40.60	66.00
	28.00	47.40	43.20	70.60
60	30.00	50.80	45.90	75.10
61	32.70	55.30	49.80	81.20
62	35.50	60.10	53.90	87.80
63	38.70	65.40	58.10	94.60
64	42.00	70.90	62.90	102.10
65	47.60	79.20	70.70	113.50
66	52.60	86.50	77.30	122.80
67	58.10	94.30	85.00	133.60
68	64.20	103.00	92.60	143.80
69	70.90	112.30	101.70	155.90
70	78.20	122.60	110.90	168.50
71	86.60	134.20	121.40	183.30
72	95.70	146.60	133.00	198.60
73	105.30	159.90	144.50	213.90
74	115.90	174.20	157.90	231.50
75	139.10	207.30	186.80	272.10
76	152.60	225.50	203.80	294.10
77	167.20	245.00	220.00	315.80
78	182.80	266.20	238.90	340.70
79	200.00	289.00	257.80	365.50
80	218.80	313.70	279.70	393.40
81	239.80	340.90	304.40	424.80
82	264.70	373.80	331.00	459.80
83	291.00	408.90	361.00	498.80
84	318.80	445.50	389.60	536.50