



RADIOLOGY PARTNERS dba DESERT RADIOLOGISTS

*Rates Shown are for \$1,000 Facility Monthly Benefit
(You may choose from \$3,000 - \$8,000 in Facility Monthly Benefit)*

Monthly Rates	Plan 1 Long Term Care Facility Prof Home-Comm Care 100% Simple Inflation		Plan 2 Long Term Care Facility Total Home Care 100% Simple Inflation		
	Benefit Duration	6 YR	Lifetime	6 YR	Lifetime
AGE					
18 - 30		10.40	13.70	16.10	21.20
31		11.00	14.40	17.00	22.30
32		11.50	15.10	17.80	23.40
33		12.10	15.90	18.70	24.50
34		12.70	16.70	19.70	25.80
35		13.40	17.50	20.70	27.00
36		14.10	18.40	21.70	28.40
37		14.80	19.30	22.80	29.90
38		15.50	20.30	24.00	31.40
39		16.30	21.30	25.20	32.90
40		17.20	22.40	26.50	34.60
41		17.80	23.10	27.50	35.70
42		18.40	23.80	28.40	36.80
43		19.10	24.60	29.50	38.10
44		19.80	25.50	30.60	39.40
45		20.60	26.40	31.80	40.80
46		21.30	27.30	33.00	42.30
47		22.00	28.20	34.10	43.50
48		23.40	29.70	36.10	46.00
49		24.80	31.50	38.40	48.70
50		26.40	33.40	40.70	51.50
51		28.30	35.70	43.70	55.20
52		30.40	38.30	47.00	59.20
53		32.00	40.20	49.40	62.20
54		33.60	42.30	52.00	65.40
55		35.60	44.70	55.00	69.10
56		37.50	47.10	57.90	72.80
57		39.40	49.50	60.90	76.50
58		42.00	52.70	64.90	81.40
59		45.00	56.30	69.50	87.00
60		48.30	60.30	74.60	93.20
61		52.10	65.20	80.50	100.70
62		56.20	70.30	86.80	108.60
63		59.80	74.80	92.40	115.70
64		63.40	79.40	98.00	122.70
65		68.40	86.40	105.60	133.50
66		72.60	91.90	112.20	142.00
67		79.60	100.70	123.10	155.70
68		85.60	108.40	132.30	167.50
69		91.30	115.50	141.20	178.50
70		98.30	124.40	152.00	192.20
71		105.80	133.40	163.50	206.20
72		114.90	144.50	177.60	223.40
73		124.40	155.90	192.20	241.00
74		134.70	168.30	208.20	260.10
75		145.90	183.80	225.50	284.10
76		159.70	200.60	246.80	310.00
77		175.80	220.20	271.80	340.30
78		190.10	237.00	293.70	366.30
79		205.50	255.40	317.70	394.70
80		220.90	273.20	341.30	422.20