



**RATE SHEET**  
*Fairleigh Dickinson University*

<u>Base Plan</u>		<u>Options</u>	
Facility Monthly Benefit	<b>\$1,000</b>	Accelerated	<b>YES</b>
Home Monthly Benefit	<b>\$1,000</b>	Payment	<b>Compound Uncapped</b>
Facility Benefit Duration	<b>3 Years</b>	Inflation Protection	
Home Benefit	<b>100%</b>		
Lifetime Maximum	<b>\$36,000</b>		
Elimination Period	<b>90 Days</b>		
Home Care Level	<b>Professional</b>		

*This rate sheet shows the cost per \$1,000 of coverage*

*Calculate your Premium:*

$$\frac{\text{Rate for Plan Chosen}}{\text{Facility Monthly Benefit Amount}} \times \text{Facility Monthly Benefit Amount} \div \$1,000 = \text{Your Premium}$$

**Monthly Rates**

Insurance Age	Plan 1	Plan 2	Plan 3	Plan 4
	Base Plan	Base Plan With Accelerated Option	Base Plan With Compound Inflation Option	Base Plan With Accelerated Compound Inflation Option
18-30	8.90	13.40	59.70	92.30
31	8.90	13.40	60.60	93.60
32	8.90	13.50	62.10	96.40
33	9.20	14.00	63.50	98.60
34	9.50	14.40	65.40	101.40
35	9.80	15.60	67.60	109.90
36	10.00	15.90	69.20	112.50
37	10.30	16.40	70.60	114.80
38	10.80	17.30	72.60	118.10
39	11.40	18.30	75.50	123.40
40	11.70	18.80	76.60	125.40
41	12.40	19.90	79.70	130.60
42	12.80	20.60	81.90	134.90
43	13.40	21.60	84.30	138.60
44	14.00	22.70	87.10	144.00
45	14.70	26.20	90.50	163.90
46	15.10	27.00	92.00	167.50
47	15.90	28.60	94.00	172.40
48	16.60	30.10	96.50	178.80
49	17.20	31.60	99.30	186.00
50	18.10	33.60	100.90	191.00
51	19.30	35.30	104.70	195.40
52	20.20	36.60	108.10	199.10
53	21.10	37.80	110.50	200.90
54	21.80	38.50	113.00	202.60
55	23.30	40.60	117.60	208.50
56	24.40	42.10	121.80	213.10
57	26.30	44.70	127.50	219.90
58	27.80	46.40	132.20	223.80
59	29.40	48.60	136.90	228.60



**RATE SHEET**  
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<u>Base Plan</u> Facility Monthly Benefit Home Monthly Benefit Facility Benefit Duration Home Benefit Lifetime Maximum Elimination Period Home Care Level	<b>\$1,000</b> <b>\$1,000</b> <b>3 Years</b> <b>100%</b> <b>\$36,000</b> <b>90 Days</b> <b>Professional</b>	<u>Options</u> Accelerated Payment Inflation Protection	<b>YES</b> <b>Compound Uncapped</b>
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*This rate sheet shows the cost per \$1,000 of coverage*

**Calculate your Premium:**

$$\frac{\text{Rate for Plan Chosen}}{\text{Facility Monthly Benefit Amount}} \times \text{Facility Monthly Benefit Amount} \div \$1,000 = \text{Your Premium}$$

**Monthly Rates**

Insurance Age	Plan 1	Plan 2	Plan 3	Plan 4
	Base Plan	Base Plan With Accelerated Option	Base Plan With Compound Inflation Option	Base Plan With Accelerated Compound Inflation Option
60	31.50	51.30	142.80	235.10
61	33.80	54.40	151.70	246.50
62	37.20	59.00	163.40	261.70
63	40.10	62.70	172.00	271.30
64	43.60	67.20	184.40	286.20
65	49.20	70.80	203.40	294.10
66	54.00	76.30	218.40	310.00
67	59.90	83.70	237.90	333.40
68	65.90	90.30	255.20	351.10
69	72.80	98.60	276.70	375.80
70	80.30	102.60	296.80	380.40
71	88.80	112.70	323.90	412.20
72	98.20	123.00	351.30	441.10
73	108.40	133.90	379.90	470.00
74	119.20	146.30	410.10	504.10
75	143.50	162.40	484.50	548.70
76	157.20	176.40	524.50	589.00
77	171.80	192.80	562.10	631.50
78	188.10	209.50	607.20	676.70
79	206.10	227.80	652.10	721.00
80	225.70	236.20	704.60	737.50



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<u>Base Plan</u>		<u>Options</u>	
Facility Monthly Benefit	<b>\$1,000</b>	Accelerated	<b>YES</b>
Home Monthly Benefit	<b>\$1,000</b>	Payment	<b>Compound Uncapped</b>
Facility Benefit Duration	<b>6 Years</b>	Inflation Protection	
Home Benefit	<b>100%</b>		
Lifetime Maximum	<b>\$72,000</b>		
Elimination Period	<b>90 Days</b>		
Home Care Level	<b>Professional</b>		

*This rate sheet shows the cost per \$1,000 of coverage*

**Calculate your Premium:**

$$\frac{\text{Rate for Plan Chosen}}{\text{Facility Monthly Benefit Amount}} \times \text{Facility Monthly Benefit Amount} \div \$1,000 = \text{Your Premium}$$

**Monthly Rates**

Insurance Age	Plan 1	Plan 2	Plan 3	Plan 4
	Base Plan	Base Plan With Accelerated Option	Base Plan With Compound Inflation Option	Base Plan With Accelerated Compound Inflation Option
18-30	11.60	17.60	79.70	122.90
31	11.90	18.10	82.00	126.60
32	12.30	18.60	84.10	130.20
33	12.60	19.10	86.50	134.10
34	12.90	19.50	88.30	136.70
35	13.50	21.40	91.00	147.50
36	13.70	21.80	92.80	150.50
37	14.10	22.50	95.30	154.70
38	14.70	23.50	98.70	160.20
39	15.50	24.70	101.30	164.90
40	15.90	25.30	103.50	168.60
41	16.30	26.10	105.80	172.90
42	17.30	27.90	110.30	181.00
43	18.00	29.00	113.20	185.60
44	18.80	30.50	117.10	192.90
45	20.00	35.40	120.80	217.80
46	20.90	37.20	124.50	225.80
47	21.60	38.70	126.10	230.00
48	22.90	41.40	130.00	239.80
49	23.40	42.80	132.90	247.70
50	24.40	45.10	135.50	255.00
51	25.80	47.00	139.60	259.60
52	27.00	48.60	144.10	264.20
53	28.40	50.60	147.90	267.70
54	29.90	52.40	152.20	271.60
55	31.40	54.40	156.40	275.80
56	33.00	56.50	162.00	282.10
57	35.20	59.40	167.90	288.40
58	37.10	61.70	175.10	295.10
59	39.50	64.80	182.10	302.20



**RATE SHEET**  
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<u>Base Plan</u> Facility Monthly Benefit Home Monthly Benefit Facility Benefit Duration Home Benefit Lifetime Maximum Elimination Period Home Care Level	<b>\$1,000</b> <b>\$1,000</b> <b>6 Years</b> <b>100%</b> <b>\$72,000</b> <b>90 Days</b> <b>Professional</b>	<u>Options</u> Accelerated Payment Inflation Protection	<b>YES</b> <b>Compound Uncapped</b>
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*This rate sheet shows the cost per \$1,000 of coverage*

**Calculate your Premium:**

$$\frac{\text{Rate for Plan Chosen}}{\text{Facility Monthly Benefit Amount}} \times \text{Facility Monthly Benefit Amount} \div \$1,000 = \text{Your Premium}$$

**Monthly Rates**

Insurance Age	Plan 1	Plan 2	Plan 3	Plan 4
	Base Plan	Base Plan With Accelerated Option	Base Plan With Compound Inflation Option	Base Plan With Accelerated Compound Inflation Option
60	41.90	67.80	189.20	309.70
61	45.50	72.80	201.40	325.60
62	49.20	77.60	214.80	342.10
63	53.40	83.10	226.80	356.00
64	57.90	88.80	242.30	374.30
65	64.90	92.80	266.30	383.30
66	71.60	100.50	286.70	405.00
67	79.00	109.80	311.60	434.90
68	86.80	118.50	334.50	458.20
69	95.70	129.00	360.80	487.90
70	105.20	133.90	386.90	493.90
71	116.60	147.30	422.10	534.90
72	128.60	160.50	457.40	572.30
73	141.70	174.40	493.30	608.10
74	156.20	191.00	533.90	653.80
75	187.30	211.30	628.40	709.90
76	205.00	229.30	679.10	760.50
77	224.50	251.20	729.60	817.30
78	245.40	272.60	786.90	874.90
79	268.40	296.00	844.50	931.70
80	293.70	306.70	911.50	952.40



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Facility Monthly Benefit	<b>\$1,000</b>	Accelerated	<b>YES</b>
Home Monthly Benefit	<b>\$1,000</b>	Payment	<b>Compound Uncapped</b>
Facility Benefit Duration	<b>Unlimited</b>	Inflation Protection	
Home Benefit	<b>100%</b>		
Lifetime Maximum	<b>Unlimited</b>		
Elimination Period	<b>90 Days</b>		
Home Care Level	<b>Professional</b>		

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**Monthly Rates**

Insurance Age	Plan 1	Plan 2	Plan 3	Plan 4
	Base Plan	Base Plan With Accelerated Option	Base Plan With Compound Inflation Option	Base Plan With Accelerated Compound Inflation Option
18-30	16.70	25.10	110.40	169.00
31	16.70	25.10	112.40	172.10
32	17.30	26.10	115.90	178.10
33	17.60	26.50	118.40	181.90
34	17.70	26.70	120.10	184.60
35	18.30	28.90	123.70	199.00
36	19.00	29.90	126.50	203.50
37	19.90	31.40	130.70	210.30
38	20.30	32.00	133.50	214.80
39	21.10	33.50	137.50	222.20
40	22.00	34.90	141.70	229.00
41	23.00	36.50	145.50	235.90
42	23.90	38.10	149.80	243.40
43	24.90	39.70	153.90	250.20
44	26.20	41.90	158.90	259.30
45	27.50	48.20	163.60	292.40
46	28.70	50.60	167.80	301.40
47	29.80	52.80	170.90	309.20
48	31.10	55.70	175.90	321.40
49	32.20	58.30	178.90	330.20
50	33.80	61.80	183.20	341.70
51	35.10	63.50	188.30	346.80
52	37.00	65.80	193.00	350.30
53	38.80	68.40	199.20	356.90
54	40.60	70.40	203.90	360.30
55	42.30	72.60	208.00	363.30
56	44.80	75.80	215.20	371.10
57	47.50	79.30	224.00	380.70
58	50.00	82.00	231.50	386.30
59	53.10	86.00	240.60	395.80



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*Fairleigh Dickinson University*

<u>Base Plan</u> Facility Monthly Benefit Home Monthly Benefit Facility Benefit Duration Home Benefit Lifetime Maximum Elimination Period Home Care Level	<b>\$1,000</b> <b>\$1,000</b> <b>Unlimited</b> <b>100%</b> <b>Unlimited</b> <b>90 Days</b> <b>Professional</b>	<u>Options</u> Accelerated Payment Inflation Protection	<b>YES</b> <b>Compound Uncapped</b>
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**Monthly Rates**

Insurance Age	Plan 1	Plan 2	Plan 3	Plan 4
	Base Plan	Base Plan With Accelerated Option	Base Plan With Compound Inflation Option	Base Plan With Accelerated Compound Inflation Option
60	56.20	89.90	249.20	404.10
61	60.70	96.10	263.90	422.90
62	65.50	102.30	281.00	443.70
63	70.70	108.90	296.40	461.10
64	76.10	115.50	313.80	480.70
65	84.90	120.40	343.90	491.30
66	93.90	130.80	372.30	521.90
67	103.30	142.30	401.60	556.50
68	113.60	153.90	431.20	586.90
69	124.90	167.20	465.10	625.10
70	137.50	173.90	500.70	635.30
71	151.70	190.50	543.70	684.90
72	166.90	207.10	587.70	731.50
73	183.10	224.20	633.10	776.90
74	201.10	244.80	682.30	832.10
75	240.90	270.90	801.80	902.90
76	263.50	293.80	867.10	967.90
77	288.10	321.30	931.10	1039.60
78	314.30	348.10	1000.90	1109.70
79	343.00	377.30	1072.80	1180.90
80	374.50	390.20	1156.30	1205.70