

MID-ATLANTIC PERMANENTE MEDICAL GROUP P.C.
088575

Increased Rates 1/1/2022

BASE PLAN:

FACILITY MONTHLY BENEFIT
HOME MONTHLY BENEFIT
FACILITY BEN DURATION
HOME BENEFIT
LIFETIME MAXIMUM
ELIMINATION PERIOD
HOME CARE LEVEL
INFLATION PROTECTION
NON FORFEITURE
ACCELERATED PAYMENT

OPTIONS:

\$1,000
\$1,500
5 YEARS
50%
\$60,000
90 DAYS
TOTAL
SIMPLE
YES

MONTHLY RATES

| INSURANCE AGE | BASE PLAN | 1.1 | INSURANCE AGE | BASE PLAN |
|---------------|-----------|-----|---------------|-----------|
| 18 | 7.60 | | 54 | 19.40 |
| 19 | 7.60 | | 55 | 20.00 |
| 20 | 7.60 | | 56 | 21.30 |
| 21 | 7.60 | | 57 | 22.20 |
| 22 | 7.60 | | 58 | 23.00 |
| 23 | 7.60 | | 59 | 24.20 |
| 24 | 7.60 | | 60 | 25.40 |
| 25 | 7.60 | | 61 | 27.10 |
| 26 | 7.60 | | 62 | 28.70 |
| 27 | 7.60 | | 63 | 30.40 |
| 28 | 7.60 | | 64 | 31.90 |
| 29 | 7.60 | | 65 | 35.10 |
| 30 | 7.60 | | 66 | 37.20 |
| 31 | 8.10 | | 67 | 39.10 |
| 32 | 8.30 | | 68 | 41.40 |
| 33 | 8.50 | | 69 | 44.00 |
| 34 | 9.10 | | 70 | 46.60 |
| 35 | 9.40 | | 71 | 48.70 |
| 36 | 10.00 | | 72 | 52.00 |
| 37 | 10.30 | | 73 | 54.50 |
| 38 | 10.80 | | 74 | 58.10 |
| 39 | 11.00 | | 75 | 64.80 |
| 40 | 11.30 | | 76 | 67.90 |
| 41 | 11.80 | | 77 | 70.40 |
| 42 | 12.10 | | 78 | 73.40 |
| 43 | 12.90 | | 79 | 77.70 |
| 44 | 13.30 | | 80 | 81.10 |
| 45 | 13.40 | | | |
| 46 | 14.30 | | | |
| 47 | 14.70 | | | |
| 48 | 15.50 | | | |
| 49 | 16.00 | | | |
| 50 | 17.10 | | | |
| 51 | 17.60 | | | |
| 52 | 18.80 | | | |
| 53 | 19.00 | | | |