Connecticut Rates

BASE PLAN:		**OPTIONS:**	
Facility Monthly Benefit	**1,000**	**Home Care Level**	**Total**
Home Monthly Benefit	**500**	**Inflation Protection**	**Simple Uncapped**
Facility Benefit Duration	**3 Years**		
Home Benefit	**50%**		
Lifetime Maximum	**36,000**		
Elimination Period	**90 Days**		
Home Care Level	**Professional**		

Monthly Rates

Insurance Age	Plan 1 Base Plan	Plan 2 Base Plan with Total Home Care Option	Plan 3 Base Plan with Simple Inflation Option	Plan 4 Base Plan with Simple Inflation and Total Home Care Option
18-30	2.50	3.80	4.20	6.20
31	2.50	3.80	4.30	6.40
32	2.50	3.90	4.30	6.50
33	2.60	4.00	4.60	6.80
34	2.70	4.00	4.80	7.00
35	2.70	4.20	4.90	7.20
36	2.90	4.30	5.10	7.40
37	3.00	4.40	5.30	7.80
38	3.10	4.70	5.60	8.20
39	3.20	4.90	5.90	8.50
40	3.40	5.10	6.10	8.80
41	3.50	5.20	6.50	9.20
42	3.60	5.50	6.60	9.60
43	3.90	5.70	7.00	10.00
44	4.00	6.00	7.40	10.50
45	4.30	6.40	7.80	11.00
46	4.40	6.60	8.10	11.40
47	4.70	7.00	8.30	12.00
48	4.90	7.40	8.80	12.70
49	5.20	7.80	9.10	13.30
50	5.50	8.20	9.60	14.00
51	5.90	8.80	10.10	14.80
52	6.10	9.40	10.70	15.60
53	6.50	10.00	11.30	16.50
54	6.90	10.50	11.70	17.20
55	7.30	11.20	12.50	18.20
56	7.80	11.80	13.10	19.10
57	8.50	12.70	14.00	20.40
58	9.00	13.60	14.70	21.40
59	9.60	14.70	15.90	22.90
60	10.40	15.70	16.90	24.30
61	11.40	17.00	18.30	26.10
62	12.60	18.60	19.90	28.20
63	13.80	20.20	21.60	30.40
64	15.20	22.00	23.50	32.80

Connecticut Rates

BASE PLAN:		**OPTIONS:**	
Facility Monthly Benefit	**1,000**	**Home Care Level**	**Total**
Home Monthly Benefit	**500**	**Inflation Protection**	**Simple Uncapped**
Facility Benefit Duration	**3 Years**		
Home Benefit	**50%**		
Lifetime Maximum	**36,000**		
Elimination Period	**90 Days**		
Home Care Level	**Professional**		

Monthly Rates

Insurance Age	Plan 1 Base Plan	Plan 2 Base Plan with Total Home Care Option	Plan 3 Base Plan with Simple Inflation Option	Plan 4 Base Plan with Simple Inflation and Total Home Care Option
65	17.30	24.60	26.50	36.30
66	19.10	26.60	29.10	39.40
67	21.30	29.20	32.00	42.50
68	23.50	31.80	34.80	45.90
69	26.10	34.80	38.10	49.50
70	29.00	38.10	41.60	53.40
71	32.20	41.70	45.80	58.10
72	35.80	45.80	50.40	63.30
73	39.60	50.30	55.10	68.60
74	43.80	55.00	60.60	74.60
75	52.90	65.60	72.00	88.00
76	58.10	71.40	78.10	94.60
77	63.70	77.60	85.00	102.20
78	69.90	84.50	92.00	109.70
79	76.70	91.90	100.10	118.60
80	84.40	100.10	108.40	127.40
81	93.00	109.30	118.70	138.20
82	103.10	120.40	129.50	149.90
83	113.90	132.30	142.10	163.70
84	125.60	145.10	154.20	176.70

Connecticut Rates

BASE PLAN:		OPTIONS:	
Facility Monthly Benefit	1,000	Home Care Level	Total
Home Monthly Benefit	500	Inflation Protection	Simple Uncapped
Facility Benefit Duration	6 Years		
Home Benefit	50%		
Lifetime Maximum	72,000		
Elimination Period	90 Days		
Home Care Level	Professional		

Monthly Rates

Insurance Age	Plan 1 Base Plan	Plan 2 Base Plan with Total Home Care Option	Plan 3 Base Plan with Simple Inflation Option	Plan 4 Base Plan with Simple Inflation and Total Home Care Option
18-30	3.20	5.10	5.60	8.30
31	3.40	5.20	5.70	8.60
32	3.40	5.30	5.90	8.80
33	3.50	5.50	6.10	9.20
34	3.60	5.50	6.40	9.50
35	3.80	5.70	6.60	9.90
36	3.90	5.90	6.90	10.10
37	4.00	6.10	7.20	10.50
38	4.20	6.40	7.50	11.00
39	4.30	6.60	7.80	11.40
40	4.60	6.90	8.10	12.00
41	4.70	7.20	8.50	12.40
42	4.90	7.50	9.00	13.10
43	5.20	7.80	9.20	13.50
44	5.50	8.20	9.90	14.30
45	5.70	8.60	10.30	15.00
46	6.00	9.10	10.70	15.60
47	6.20	9.50	11.20	16.40
48	6.60	10.10	11.80	17.30
49	6.90	10.70	12.20	18.10
50	7.30	11.30	12.90	19.10
51	7.70	11.80	13.40	20.00
52	8.10	12.70	14.20	21.20
53	8.60	13.50	14.80	22.40
54	9.10	14.30	15.50	23.40
55	9.80	15.20	16.40	24.60
56	10.30	16.20	17.30	26.00
57	11.00	17.40	18.30	27.60
58	11.80	18.60	19.40	29.10
59	12.70	20.00	20.80	31.10
60	13.60	21.40	22.00	32.90
61	15.00	23.40	23.90	35.60
62	16.40	25.50	25.90	38.50
63	17.90	27.70	28.20	41.60
64	19.80	30.20	30.40	44.70

Connecticut Rates

BASE PLAN:	
Facility Monthly Benefit	1,000
Home Monthly Benefit	500
Facility Benefit Duration	6 Years
Home Benefit	50%
Lifetime Maximum	72,000
Elimination Period	90 Days
Home Care Level	Professional

OPTIONS:	
Home Care Level	Total
Inflation Protection	Simple Uncapped

Monthly Rates

Insurance Age	Plan 1 Base Plan	Plan 2 Base Plan with Total Home Care Option	Plan 3 Base Plan with Simple Inflation Option	Plan 4 Base Plan with Simple Inflation and Total Home Care Option
65	22.40	33.70	34.20	49.50
66	24.80	36.80	37.60	54.00
67	27.40	40.30	41.10	58.10
68	30.40	43.90	44.70	62.90
69	33.50	48.00	48.80	67.60
70	37.20	52.50	53.30	73.20
71	41.30	57.70	58.50	79.80
72	45.80	63.20	64.40	86.70
73	50.60	69.20	70.20	94.10
74	55.90	75.80	77.00	102.00
75	67.20	90.50	91.30	120.40
76	73.80	98.50	98.90	129.60
77	81.00	107.20	107.80	140.00
78	88.80	116.60	116.50	150.50
79	97.20	127.00	126.80	162.60
80	106.70	138.20	136.90	174.60
81	117.30	150.80	149.40	189.20
82	129.90	165.90	162.90	205.40
83	143.30	182.30	178.20	223.90
84	157.40	199.60	193.10	241.80

Connecticut Rates

BASE PLAN:	
Facility Monthly Benefit	1,000
Home Monthly Benefit	500
Facility Benefit Duration	Unlimited
Home Benefit	50%
Lifetime Maximum	Unlimited
Elimination Period	90 Days
Home Care Level	Professional

OPTIONS:	
Home Care Level	Total
Inflation Protection	Simple Uncapped

Monthly Rates

Insurance Age	Plan 1 Base Plan	Plan 2 Base Plan with Total Home Care Option	Plan 3 Base Plan with Simple Inflation Option	Plan 4 Base Plan with Simple Inflation and Total Home Care Option
18-30	4.60	7.30	7.70	11.80
31	4.60	7.30	7.80	12.10
32	4.70	7.50	8.10	12.60
33	4.80	7.70	8.30	12.90
34	4.80	7.80	8.60	13.30
35	5.10	8.10	8.80	13.80
36	5.20	8.20	9.10	14.20
37	5.50	8.60	9.80	14.80
38	5.60	8.80	10.00	15.30
39	5.90	9.20	10.40	15.90
40	6.10	9.60	10.90	16.60
41	6.40	10.00	11.40	17.30
42	6.60	10.40	12.00	18.10
43	6.90	10.80	12.40	18.70
44	7.30	11.40	13.00	19.60
45	7.50	12.00	13.60	20.70
46	7.90	12.60	14.20	21.40
47	8.30	13.30	14.70	22.50
48	8.80	14.00	15.50	23.90
49	9.20	14.80	16.10	25.00
50	9.80	15.70	16.90	26.30
51	10.10	16.60	17.70	27.80
52	10.80	17.70	18.50	29.20
53	11.40	18.80	19.50	30.90
54	12.00	20.00	20.40	32.40
55	12.60	21.10	21.20	33.70
56	13.50	22.60	22.50	35.90
57	14.40	24.20	23.80	38.10
58	15.30	26.00	25.10	40.20
59	16.40	27.80	26.60	42.80
60	17.70	29.80	28.20	45.50
61	19.20	32.50	30.60	49.10
62	20.90	35.40	33.00	53.00
63	22.90	38.60	35.60	57.20
64	25.00	41.90	38.50	61.50

Connecticut Rates

BASE PLAN:		**OPTIONS:**	
Facility Monthly Benefit	**1,000**	**Home Care Level**	**Total**
Home Monthly Benefit	**500**	**Inflation Protection**	**Simple Uncapped**
Facility Benefit Duration	**Unlimited**		
Home Benefit	**50%**		
Lifetime Maximum	**Unlimited**		
Elimination Period	**90 Days**		
Home Care Level	**Professional**		

Monthly Rates

65	28.30	46.80	43.20	68.20
66	31.30	51.20	47.30	74.10
67	34.70	55.90	51.60	80.00
68	38.40	61.10	56.30	86.60
69	42.40	66.70	61.40	93.10
70	46.80	72.80	66.80	100.60
71	51.90	79.80	73.30	109.60
72	57.30	87.20	80.50	118.60
73	63.20	95.20	87.50	128.60
74	69.60	103.70	95.60	138.70
75	83.60	123.60	113.20	163.30
76	91.80	134.60	122.70	175.80
77	100.60	146.20	133.50	189.80
78	110.00	159.00	144.00	203.70
79	120.50	172.60	156.50	219.70
80	131.80	187.50	168.70	235.40
81	144.60	204.00	183.80	254.40
82	159.60	223.60	199.90	275.50
83	175.60	244.80	218.10	299.00
84	192.40	266.80	235.40	321.60