

D D1			0 (
Base Plan			<u>Options</u>	
Facility Monthly Benefi			Home Care Level	Home, Community-Based
Home Monthly Benefit	\$500			and Immediate Family
Facility Benefit Duration	1 3 Years			Member Care
Home Benefit	50%		Inflation Protection	Simple Capped
Lifetime Maximum	\$36,000			1 11
Elimination Period	90 Days			
Home Care Level		d Community		
Home Care Level		d Community-		
	Based Ca			
	This rate	e sheet shows the co	st per \$1,000 of covera	ge
Calculate your Premiun	n:			
	X		÷ \$1,000 =	= (A)
Rate for Plan Chosen	Faci	lity Monthly Benefit	Amount	Your Premium
For Employees Only:	2 3.52	, 1.10110111	7 1 21110 01110	1 0 001 1 1 0 1 1 1 1 1 1 1 1 1 1 1 1 1
For Employees Only.				
	X	3	=	=(B)
Rate for Plan 1	(E	Based on Funded Am	nount)	Employer Paid Amount
(3 Year Duration)			,	
,			A MINUS B	=
				EMPLOYEE'S COST
		Monthly	Rates	
	Plan 1	Plan 2	Plan 3	Plan 4
	1 1411 1	1 1411 2	Tian 5	Base Plan With
		D DI 1171	.1	
		Base Plan Wit		Home, Comm-Based
		Home, Comm-Ba		J
		and Immediate Fa	imily Simple	Member Care
		and initiate ra	iminy Simple	Michigel Care
Insurance		Member Car		
	Base Plan	Member Car	e Inflation	Simple Inflation
Age I	Base Plan 3.20	Member Car Option	e Inflation Option	
Age I 18-30 31	3.20 3.20	Member Car Option 4 . 80 4 . 80	e Inflation Option 6.80 6.90	Simple Inflation Option
Age I 18-30 31 32	3.20 3.20 3.20	Member Car Option 4 . 80 4 . 80 4 . 80	e Inflation Option 6.80 6.90 7.00	Simple Inflation Option 10.30 10.30 10.60
Age I 18-30 31 32 33	3.20 3.20 3.20 3.30	Member Car Option 4 . 80 4 . 80 4 . 80 4 . 90	e Inflation Option 6.80 6.90 7.00 7.10	Simple Inflation Option 10.30 10.30 10.60 10.70
Age I 18-30 31 32 33 34	3.20 3.20 3.20 3.30 3.30	Member Car Option 4.80 4.80 4.80 4.90 5.00	e Inflation Option 6.80 6.90 7.00 7.10 7.70	Simple Inflation Option 10.30 10.30 10.60 10.70 11.50
Age I 18-30 31 32 33 34 35	3.20 3.20 3.20 3.30 3.30 3.50	Member Care Option 4 . 80 4 . 80 4 . 80 4 . 90 5 . 00 5 . 20	e Inflation Option 6.80 6.90 7.00 7.10 7.70 7.90	Simple Inflation Option 10.30 10.30 10.60 11.70
Age I 18-30 31 32 33 34 35 36	3.20 3.20 3.20 3.30 3.30 3.50 3.60	Member Care Option 4 . 80 4 . 80 4 . 80 4 . 90 5 . 00 5 . 20 5 . 30	e Inflation Option 6.80 6.90 7.00 7.10 7.70 7.90 8.20	Simple Inflation Option 10.30 10.30 10.60 11.70 11.70 12.20
Age I 18-30 31 32 33 34 35 36 37 38	3.20 3.20 3.20 3.30 3.30 3.50 3.60 3.70 3.90	Member Care Option 4 . 80 4 . 80 4 . 80 4 . 90 5 . 00 5 . 20 5 . 30 5 . 50 5 . 80	e Inflation Option 6.80 6.90 7.00 7.10 7.70 7.90 8.20 8.50 9.10	Simple Inflation Option 10.30 10.30 10.60 11.70 11.70 12.20 12.70 13.50
Age I 18-30 31 32 33 34 35 36 37 38 39	3.20 3.20 3.20 3.30 3.30 3.50 3.60 3.70 3.90 4.00	Member Care Option 4.80 4.80 4.80 4.90 5.00 5.20 5.30 5.50 5.80 6.00	e Inflation Option 6.80 6.90 7.00 7.10 7.70 7.90 8.20 8.50 9.10 9.50	Simple Inflation Option 10.30 10.30 10.60 11.70 11.70 12.20 12.70 13.50 14.00
Age I 18-30 31 32 33 34 35 36 37 38 39 40	3.20 3.20 3.20 3.30 3.30 3.50 3.60 3.70 3.90 4.00 4.20	Member Care Option 4.80 4.80 4.80 4.90 5.00 5.20 5.30 5.50 5.80 6.00 6.20	e Inflation Option 6.80 6.90 7.00 7.10 7.70 7.90 8.20 8.50 9.10 9.50 9.70	Simple Inflation Option 10.30 10.30 10.60 11.70 11.70 12.20 12.70 13.50 14.00 14.40
Age I 18-30 31 32 33 34 35 36 37 38 39 40 41	3.20 3.20 3.30 3.30 3.50 3.60 3.70 3.90 4.00 4.20 4.30	Member Care Option 4.80 4.80 4.80 4.90 5.00 5.20 5.30 5.50 5.80 6.00 6.20 6.40	e Inflation Option 6.80 6.90 7.00 7.10 7.70 7.90 8.20 8.50 9.10 9.50 9.70 10.40	Simple Inflation Option 10.30 10.30 10.60 10.70 11.50 11.70 12.20 12.70 13.50 14.00 14.40 15.30
Age I 18-30 31 32 33 34 35 36 37 38 39 40 41	3.20 3.20 3.20 3.30 3.50 3.50 3.70 3.90 4.20 4.20 4.30 4.70	Member Care Option 4.80 4.80 4.80 4.90 5.00 5.20 5.30 5.50 5.80 6.00 6.20 6.40 6.80	e Inflation Option 6.80 6.90 7.00 7.10 7.70 7.90 8.20 8.50 9.10 9.50 9.70 10.40 10.90	Simple Inflation Option 10.30 10.30 10.60 10.70 11.50 11.70 12.20 12.70 13.50 14.00 14.40 15.30 16.00
Age I 18-30 31 32 33 34 35 36 37 38 39 40 41 42 43 44	3.20 3.20 3.20 3.30 3.50 3.50 3.70 3.90 4.20 4.20 4.30 4.70	Member Care Option 4.80 4.80 4.80 4.90 5.00 5.20 5.30 5.50 6.00 6.20 6.40 6.80 7.00 7.40	e Inflation Option 6.80 6.90 7.00 7.10 7.70 7.90 8.20 8.50 9.10 9.50 9.70 10.40 10.90 11.50 12.20	Simple Inflation Option 10.30 10.30 10.60 10.70 11.50 11.70 12.20 12.70 13.50 14.00 14.40 15.30 16.00 16.80 17.80
Age 1 18-30 31 32 33 34 35 36 37 38 39 40 41 42 43 44	3.20 3.20 3.20 3.30 3.50 3.50 3.70 3.90 4.20 4.20 4.30 4.70	Member Care Option 4.80 4.80 4.80 4.90 5.00 5.20 5.30 5.50 5.80 6.00 6.20 6.40 6.80 7.00 7.40 7.80	e Inflation Option 6.80 6.90 7.00 7.10 7.70 7.90 8.20 8.50 9.10 9.50 9.70 10.40 10.90 11.50 12.20 12.80	Simple Inflation Option 10.30 10.30 10.60 10.70 11.50 11.70 12.20 12.70 13.50 14.00 14.40 15.30 16.00 16.80 17.80 18.60
Age 1 18-30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46	3.20 3.20 3.20 3.30 3.50 3.50 3.70 3.90 4.20 4.20 4.30 4.70	Member Care Option 4.80 4.80 4.80 4.90 5.00 5.20 5.30 5.50 6.00 6.20 6.40 6.80 7.00 7.40 7.80 8.10	e Inflation Option 6.80 6.90 7.00 7.10 7.70 7.90 8.20 8.50 9.10 9.50 9.70 10.40 10.90 11.50 12.20 12.80 13.40	Simple Inflation Option 10.30 10.30 10.60 10.70 11.50 11.70 12.20 12.70 13.50 14.00 14.40 15.30 16.00 16.80 17.80 18.60 19.60
Age 1 18-30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47	3.20 3.20 3.20 3.30 3.50 3.50 3.60 3.70 4.00 4.20 4.30 4.60 4.70 5.30 5.50 5.70	Member Care Option 4.80 4.80 4.80 4.90 5.00 5.20 5.30 5.50 6.00 6.20 6.40 6.80 7.00 7.40 7.80 8.10 8.50	e Inflation Option 6.80 6.90 7.00 7.10 7.70 7.90 8.20 8.50 9.10 9.50 9.70 10.40 10.90 11.50 12.20 12.80 13.40 14.20	Simple Inflation Option 10.30 10.30 10.60 10.70 11.50 11.70 12.20 12.70 13.50 14.00 14.40 15.30 16.00 16.80 17.80 18.60 19.60 20.70
Age 1 18-30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48	3.20 3.20 3.30 3.30 3.50 3.60 3.70 3.90 4.20 4.30 4.60 4.70 5.30 5.50 5.70 6.00	Member Care Option 4.80 4.80 4.80 4.90 5.00 5.20 5.30 5.50 6.00 6.20 6.40 6.80 7.00 7.40 7.80 8.10 8.50 9.00	e Inflation Option 6.80 6.90 7.00 7.10 7.70 7.90 8.20 8.50 9.10 9.50 9.70 10.40 10.90 11.50 12.20 12.80 13.40 14.20 14.90	Simple Inflation Option 10.30 10.30 10.60 10.70 11.50 11.70 12.20 12.70 13.50 14.00 14.40 15.30 16.00 16.80 17.80 18.60 19.60 20.70 21.90
Age 1 18-30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49	3.20 3.20 3.20 3.30 3.50 3.50 3.60 3.70 4.00 4.20 4.30 4.60 4.70 5.30 5.50 5.70 6.00 6.30	Member Care Option 4.80 4.80 4.80 4.90 5.00 5.20 5.30 5.50 5.80 6.00 6.20 6.40 6.80 7.00 7.40 7.80 8.10 8.50 9.00	e Inflation Option 6.80 6.90 7.00 7.10 7.70 7.90 8.20 8.50 9.10 9.50 9.70 10.40 10.90 11.50 12.20 12.80 13.40 14.20 14.90 15.60	Simple Inflation Option 10.30 10.30 10.60 10.70 11.50 11.70 12.20 12.70 13.50 14.00 14.40 15.30 16.00 16.80 17.80 18.60 19.60 20.70 21.90 23.10
Age 18-30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51	3.20 3.20 3.20 3.30 3.50 3.50 3.60 3.70 4.00 4.20 4.30 4.60 4.70 5.30 5.50 5.70 6.00 6.30 6.60 7.10	Member Care Option 4.80 4.80 4.80 4.90 5.00 5.20 5.30 5.50 5.80 6.00 6.20 6.40 6.80 7.00 7.40 7.80 8.10 8.50 9.00 9.50 10.00 10.70	e Inflation Option 6.80 6.90 7.00 7.10 7.70 7.90 8.20 8.50 9.10 9.50 9.70 10.40 10.90 11.50 12.20 12.80 13.40 14.20 14.90 15.60 16.40 17.40	Simple Inflation Option 10.30 10.30 10.60 10.70 11.50 11.70 12.20 12.70 13.50 14.00 14.40 15.30 16.00 16.80 17.80 18.60 19.60 20.70 21.90 23.10 24.40 25.90
Age 18-30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51	3.20 3.20 3.20 3.30 3.50 3.50 3.70 3.90 4.20 4.30 4.70 5.30 5.50 6.30 6.60 7.10 7.40	Member Care Option 4.80 4.80 4.80 4.90 5.00 5.20 5.30 5.50 5.80 6.00 6.20 6.40 6.80 7.00 7.40 7.80 8.10 8.50 9.00 9.50 10.00 10.70 11.30	e Inflation Option 6.80 6.90 7.00 7.10 7.70 7.90 8.20 8.50 9.10 9.50 9.70 10.40 10.90 11.50 12.20 12.80 13.40 14.20 14.90 15.60 16.40 17.40 18.50	Simple Inflation Option 10.30 10.30 10.60 10.70 11.50 11.70 12.20 12.70 13.50 14.00 14.40 15.30 16.00 16.80 17.80 18.60 19.60 20.70 21.90 23.10 24.40 25.90 27.50
Age 18-30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53	3.20 3.20 3.20 3.30 3.30 3.50 3.60 3.70 3.90 4.20 4.30 4.60 4.70 5.30 5.50 5.70 6.00 6.60 7.10 7.40 7.90	Member Care Option 4.80 4.80 4.80 4.90 5.00 5.20 5.30 5.50 5.80 6.00 6.20 6.40 6.80 7.00 7.40 7.80 8.10 8.50 9.00 9.50 10.70 11.30 12.10	e Inflation Option 6.80 6.90 7.00 7.10 7.70 7.90 8.20 8.50 9.10 9.50 9.70 10.40 10.90 11.50 12.20 12.80 13.40 14.20 14.90 15.60 16.40 17.40 18.50 19.40	Simple Inflation Option 10.30 10.30 10.60 10.70 11.50 11.70 12.20 12.70 13.50 14.00 14.40 15.30 16.00 16.80 17.80 18.60 19.60 20.70 21.90 22.190 22.10 24.40 25.90 27.50 29.00
Age 18-30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53	3.20 3.20 3.20 3.30 3.50 3.50 3.60 3.70 4.20 4.30 4.60 4.70 5.30 5.50 5.70 6.30 6.60 7.10 7.40 7.90 8.30	Member Care Option 4.80 4.80 4.80 4.90 5.00 5.20 5.30 5.50 5.80 6.00 6.20 6.40 6.80 7.00 7.40 7.80 8.10 8.50 9.00 9.50 10.70 11.30 12.10 12.70	e Inflation Option 6.80 6.90 7.00 7.10 7.70 7.90 8.20 8.50 9.10 9.50 9.70 10.40 10.90 11.50 12.20 12.80 13.40 14.20 14.90 15.60 16.40 17.40 18.50 19.40 20.50	Simple Inflation Option 10.30 10.30 10.60 10.70 11.50 11.70 12.20 12.70 13.50 14.00 14.40 15.30 16.00 16.80 17.80 18.60 19.60 20.70 21.90 22.10 24.40 25.90 27.50 29.00 30.70
Age 18-30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55	3.20 3.20 3.20 3.30 3.50 3.50 3.60 3.70 4.20 4.30 4.60 4.70 5.30 5.50 5.70 6.30 6.60 7.10 7.40 7.90 8.80	Member Care Option 4.80 4.80 4.80 4.90 5.00 5.20 5.30 5.50 5.80 6.00 6.20 6.40 6.80 7.00 7.40 7.80 8.10 8.50 9.00 9.50 10.70 11.30 12.10 12.70 13.50	e Inflation Option 6.80 6.90 7.00 7.10 7.70 7.90 8.20 8.50 9.10 9.50 9.70 10.40 10.90 11.50 12.20 12.80 13.40 14.20 14.90 15.60 16.40 17.40 18.50 19.40 20.50 21.60	Simple Inflation Option 10.30 10.30 10.60 10.70 11.50 11.70 12.20 12.70 13.50 14.00 14.40 15.30 16.00 16.80 17.80 18.60 19.60 20.70 21.90 221.90 221.90 221.90 221.90 23.10 24.40 25.90 27.50 29.00 30.70 32.00
Age 18-30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57	3.20 3.20 3.20 3.30 3.50 3.50 3.60 3.70 4.20 4.30 4.60 4.70 5.30 5.50 5.70 6.30 6.60 7.10 7.40 7.90 8.30	Member Care Option 4.80 4.80 4.80 4.90 5.00 5.20 5.30 5.50 5.80 6.00 6.20 6.40 6.80 7.00 7.40 7.80 8.10 8.50 9.00 9.50 10.70 11.30 12.10 12.70	e Inflation Option 6.80 6.90 7.00 7.10 7.70 7.90 8.20 8.50 9.10 9.50 9.70 10.40 10.90 11.50 12.20 12.80 13.40 14.20 14.90 15.60 16.40 17.40 18.50 19.40 20.50	Simple Inflation Option 10.30 10.30 10.60 10.70 11.50 11.70 12.20 12.70 13.50 14.00 14.40 15.30 16.00 16.80 17.80 18.60 19.60 20.70 21.90 22.10 24.40 25.90 27.50 29.00 30.70
Age 18-30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58	3.20 3.20 3.20 3.30 3.50 3.50 3.70 4.00 4.20 4.30 4.60 4.70 5.30 5.70 6.30 6.10 7.40 7.40 7.40 8.80 9.30	Member Care Option 4.80 4.80 4.80 4.90 5.00 5.20 5.30 5.50 5.80 6.00 6.20 6.40 6.80 7.00 7.40 7.80 8.10 8.50 9.00 9.50 10.70 11.30 12.70 13.50 14.30	e Inflation Option 6.80 6.90 7.00 7.10 7.70 7.90 8.20 8.50 9.10 9.50 9.70 10.40 10.90 11.50 12.20 12.80 13.40 14.20 14.90 15.60 16.40 17.40 18.50 19.40 20.50 21.60 22.90	Simple Inflation Option 10.30 10.60 10.70 11.50 11.70 12.20 12.70 13.50 14.00 14.40 15.30 16.00 16.80 17.80 18.60 19.60 20.70 21.90 22.90 22.90 22.50 29.00 30.70 32.00 33.90



Calculate your Premium: Rate for Plan Chosen For Employees Only: Rate for Plan 1 (3 Year Duration) Pla	Facility Monthly Bend	= Amount)	Your Premium		
Rate for Plan Chosen For Employees Only: Rate for Plan 1 (3 Year Duration)	Facility Monthly Bendary	÷ \$1,000 = efit Amount = Amount)	Your Premium (B)		
Rate for Plan Chosen For Employees Only: Rate for Plan 1 (3 Year Duration)	Facility Monthly Bendary	efit Amount = Amount)	Your Premium (B)		
Rate for Plan 1 (3 Year Duration)		Amount)			
,		A MINUS B =			
Pla					
Pla 		hly Rates			
	n 1 Plan 2 Base Plan V	Plan 3	Plan 4 Base Plan With Home, Comm-Based		
	Home, Comm		· ·		
	and Immediate		Member Care		
Insurance	Member C		Simple Inflation		
Age Base		Option	Option		
60 12.5		30.00	43.80		
61 13.6 62 15.0 63 16.3	50 20.30 00 22.20 30 24.00	32.50 35.60 38.40	47.10 51.20 54.80		
64 17.9 65 20.3 66 22.5	30 29.10 50 31.70	41.80 47.50 51.90	59.10 65.80 71.00		
67 25.0 68 27.0 69 30.0 70 33.9	37.70 30 41.20	57.20 62.40 68.90 75.30	77.30 83.10 90.30 97.60		
70 33.3 71 37.7 72 41.7 73 46.3	70 49.20 70 53.90	82.60 90.90 99.40	106.00 115.30 124.70		
74 51.3 75 61.6 76 67.6	LO 64.60 50 77.10	109.00 129.60 141.40	135.50 159.70 172.50		
77 74.2 78 81.4 79 89.2 80 98.0	20 91.00	152.90 166.40 179.80	185.20 199.90 214.30		



Base Plan			Options	
Facility Monthly Benefi	t \$1,000	I	Home Care Level	Home, Community-Based
Home Monthly Benefit	\$500			and Immediate Family
Facility Benefit Duration				Member Care
Home Benefit	50%		Inflation Protection	Simple Capped
Lifetime Maximum	\$72,000			Simple Suppeu
Elimination Period	90 Days			
Home Care Level		nd Community-		
Tionic Care Level	Based Ca	•		
			t per \$1,000 of covera	 σρ
Calculate your Premiur		e silver silving the cost	per \$1,000 of coveru	8-
J	X		÷ \$1,000 =	= (A)
Rate for Plan Chosen		lity Monthly Benefit A		Your Premium
	raci	inty Monthly Denemi A	Amount	1 our 1 tennum
For Employees Only:				
	X	3		(B)
Rate for Plan 1	(E	Based on Funded Amo	unt)	Employer Paid Amount
(3 Year Duration)			A MINUS B =	_
			A MINUS B	EMPLOYEE'S COST
		Monthly I	Datas	EMPLOYEE'S COST
	Plan 1	<u>Monthly F</u> Plan 2	Plan 3	Plan 4
	rian i	Fian 2	Pian 3	Base Plan With
		Dage Dlan W:4h		
		Base Plan With		Home, Comm-Based
		Home, Comm-Bas		•
.		and Immediate Fan		Member Care
Insurance	D DI	Member Care	Inflation	Simple Inflation
Age 1	Base Plan 4.10	Option 6.30	Option 9 9 9 9	Option 13.50
31	4.10	6.40	8.80 9.10	13.50
32	4.20	6.50	9.50	14.50
33	4.40	6.70	10.00	14.90
34 35	4.50 4.60	6.80 7.00	10.10 10.60	15.30 16.00
36	4.80	7.30	11.10	16.70
37	5.00	7.50	11.50	17.30
38 39	5.20 5.40	7.80 8.10	12.10 12.70	18.30 19.00
40	5.60	8.40	13.30	19.90
41	5.80	8.70	13.80	20.50
42 43	6.10 6.40	9.20 9.60	14.70 15.40	21.80 22.90
44	6.70	10.10	16.10	23.90
45	7.10	10.60	17.20	25.20
46 47	7.40 7.80	11.10 11.70	18.00 18.90	26.70 28.20
48	8.20	12.40	19.90	29.80
49	8.40	12.90	20.70	31.40
50 51	8.90 9.30	13.80 14.40	21.80 22.90	33.00 35.00
52	9.90	15.40	24.20	37.00
			05 00	39.60
22	10.50	16.30	25.90	
54	10.50 11.00	17.30	27.10	41.60
54 55 56	10.50 11.00 11.80			
54 55 56 57	10.50 11.00 11.80 12.50 13.30	17.30 18.50 19.60 21.00	27.10 28.50 30.20 32.20	41.60 43.50 46.20 49.40
54 55 56 57 58	10.50 11.00 11.80 12.50	17.30 18.50 19.60	27.10 28.50 30.20	41.60 43.50 46.20



Base Plan			<u>Options</u>	
Facility Monthly Benefi	t \$1,000		Home Care Level	Home, Community-Based
Home Monthly Benefit	\$500			and Immediate Family
Facility Benefit Duration	n 6 Years			Member Care
Home Benefit	50%		Inflation Protection	Simple Capped
Lifetime Maximum	\$72,000			
Elimination Period	90 Days			
Home Care Level		nd Community-		
	Based Ca	•		
	This rate	e sheet shows the co	st per \$1,000 of covera	ige
Calculate your Premiun				
	X		÷ \$1,000 =	= (A)
Rate for Plan Chosen		lity Monthly Benefit		Your Premium
For Employees Only:	1 401			2 0 0 1 2 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1
1 or Employees Only.	37	2		
D (C D1 1	X	3		=
Rate for Plan 1 (3 Year Duration)	(E	Based on Funded Am	nount)	Employer Paid Amount
(3 Teal Duration)			A MINUS B	=
			M WIII (OS B	EMPLOYEE'S COST
		Monthly	Rates	
	Plan 1	Plan 2	Plan 3	Plan 4
				Base Plan With
		Base Plan Wit	th	Home, Comm-Based
		Home, Comm-Ba	ased Base Plan Wi	
		and Immediate Fa		Member Care
Insurance		Member Car	e Inflation	Simple Inflation
Age l	Base Plan	Option	Option	Option
60	16.30	25.70	39.10	59.60
	17.90	28.00	42.50	64.50
62 63	19.60 21.30	30.50 33.10	46.20 49.90	69.70 75.00
	23.40	36.00	54.50	81.30
	26.40	40.10	61.40	90.30
	29.30	43.90	67.10	97.50
	32.40	47.90	74.10	106.40
68 69	35.70 39.50	52.20	80.70	114.50
70	43.70	56.90 62.30	88.60 96.70	124.20 134.20
	48.50	68.30	106.10	146.10
72	53.70	74.80	116.60	159.00
73	59.30	81.80	127.20	171.70
	65.50	89.60	139.30	186.50
	78.70	106.80	165.10	219.90
	86.40 94.70	116.20 126.40	180.00 194.60	237.50 255.30
	03.80	137.50	211.80	275.90
79 1	13.70	149.60	228.50	295.90
80 1	24.60	162.70	248.60	319.60



Base Plan			Options_	
Facility Monthly Benef	fit \$1,000	-	Home Care Level	Home, Community-Based
Home Monthly Benefit	\$500			and Immediate Family
Facility Benefit Duration		ed		Member Care
Home Benefit	50%		Inflation Protection	Simple Capped
Lifetime Maximum	Unlimite	ed		
Elimination Period	90 Days			
Home Care Level		nd Community-		
	Based C			
		te sheet shows the cost	t per \$1,000 of covera	ge
Calculate your Premiu			, , , , , , , , , , , , , , , , , , ,	
	X		÷ \$1,000 =	= (A)
Rate for Plan Chosen		lity Monthly Benefit A		Your Premium
For Employees Only:	1 000	2		1 0 301 1 1 0 1 1 1 1 1 1 1 1 1 1 1 1 1
Tor Employees Only.	37	2		
D . C D1 . 1	X	3	=	(D)
Rate for Plan 1	(1	Based on Funded Amo	unt)	Employer Paid Amount
(3 Year Duration)			A MINUS B =	=
			A MINUS D	EMPLOYEE'S COST
		Monthly R	Patos	EMILOTEE 5 COST
	Plan 1	Plan 2	Plan 3	Plan 4
	1 1411 1	1 1411 2	1 Ian 5	Base Plan With
		Base Plan With		Home, Comm-Based
		Home, Comm-Bas		*
		and Immediate Fan		Member Care
Insurance		Member Care	Inflation	
	Base Plan			Simple Inflation
Age 18-30	6.80	Option 10.70	Option 12.30	Option 19.40
31	6.80	10.80	12.50	19.70
32 33	7.10	11.10	13.20	20.70
33	7.20 7.30	11.30 11.50	13.40 13.80	21.00 21.80
35	7.50	11.80	14.40	22.60
36	7.70	12.10	15.10	23.40
37 38	8.10 8.30	12.70 13.10	15.80 16.40	24.60 25.50
39	8.60	13.50	17.20	26.60
40	9.00	14.10	17.90	27.80
41 42	9.50 9.80	14.80 15.30	18.70 19.60	29.00 30.40
43	10.30	16.00	20.70	31.90
44	10.80	16.80	21.70	33.50
45 46	11.30 11.90	17.60 18.60	22.90 24.10	35.30 37.20
47	12.40	19.50	25.50	37.20
48	13.10	20.80	26.60	41.60
49	13.10		27 70	42 00
EΛ	13.60	21.80	27.70	43.90
50 51	13.60 14.30	21.80 23.10	29.00	46.10
51 52	13.60 14.30 15.00 15.80	21.80 23.10 24.40 25.90	29.00 30.70 32.40	46.10 49.00 52.00
51 52 53	13.60 14.30 15.00 15.80 16.70	21.80 23.10 24.40 25.90 27.60	29.00 30.70 32.40 34.00	46.10 49.00 52.00 54.90
51 52 53 54	13.60 14.30 15.00 15.80 16.70 17.60	21.80 23.10 24.40 25.90 27.60 29.20	29.00 30.70 32.40 34.00 35.90	46.10 49.00 52.00 54.90 58.20
51 52 53 54 55	13.60 14.30 15.00 15.80 16.70 17.60 18.40 19.70	21.80 23.10 24.40 25.90 27.60 29.20 30.80 32.90	29.00 30.70 32.40 34.00 35.90 37.40 39.60	46.10 49.00 52.00 54.90 58.20 60.40 64.20
51 52 53 54 55 56 57	13.60 14.30 15.00 15.80 16.70 17.60 18.40 19.70 20.90	21.80 23.10 24.40 25.90 27.60 29.20 30.80 32.90 35.20	29.00 30.70 32.40 34.00 35.90 37.40 39.60 42.20	46.10 49.00 52.00 54.90 58.20 60.40 64.20 68.70
51 52 53 54 55 56	13.60 14.30 15.00 15.80 16.70 17.60 18.40 19.70	21.80 23.10 24.40 25.90 27.60 29.20 30.80 32.90	29.00 30.70 32.40 34.00 35.90 37.40 39.60	46.10 49.00 52.00 54.90 58.20 60.40 64.20



Base Plan			<u>Options</u>	
Facility Monthly Benefit	\$1,000		Home Care Level	Home, Community-Based
Home Monthly Benefit	\$500			and Immediate Family
Facility Benefit Duration	Unlimited	l		Member Care
Home Benefit	50%		Inflation Protection	Simple Capped
Lifetime Maximum	Unlimited	ł		
Elimination Period	90 Days			
Home Care Level	•	d Community-		
	Based Ca	•		
		sheet shows the co	st per \$1,000 of covera	ige
Calculate your Premium	ı:			
	X		÷ \$1,000 =	= (A)
Rate for Plan Chosen	Facil	ity Monthly Benefit		Your Premium
For Employees Only:				
T. J. L. L. J.	X	3	=	(B)
Rate for Plan 1		ased on Funded Am		Employer Paid Amount
(3 Year Duration)	(D)	used on I unded I in	iount)	Employer raid ramount
			A MINUS B	=
				EMPLOYEE'S COST
		Monthly		
	Plan 1	Plan 2	Plan 3	Plan 4
				Base Plan With
		Base Plan Wit		Home, Comm-Based
		Home, Comm-Ba		•
		and Immediate Fa	· -	Member Care
Insurance		Member Car		Simple Inflation
	Base Plan	Option	Option	Option
	25.50 27.80	43.20 47.00	50.50 54.80	82.70 89.40
	30.20	51.10	59.40	96.80
63 3	32.90	55.60	64.10	104.40
64	35.70	60.30	69.40	112.70
	10.40 14.70	67.30 73.50	77.90 85.30	125.10 135.40
	19.40	80.20	93.70	147.30
	4.60	87.60	102.20	158.70
69 6	50.30	95.50	112.10	171.90
	6.50	104.20	122.30	185.80
71 72	73.60 31.30	114.10	133.90 146.60	202.10 219.00
	31.30 39.50	124.60 135.90	159.40	235.90
	98.50	148.10	174.10	255.20
75 11	L8.20	176.20	206.10	300.20
	29.70	191.70	224.60	324.20
77 14 78 15	12.10	208.30	242.70	348.30 375.50
	55.40 70.00	226.30 245.60	263.40 284.20	375.50 4 02.90
	36.00	266.60	308.30	433.70