



**RATE SHEET
CRAWFORD & COMPANY**

<u>BASE PLAN</u>		<u>OPTIONS</u>	
Facility Monthly Benefit	\$1,000	Home Care Level	TOTAL SIMPLE CAPPED
Home Monthly Benefit	\$500	Inflation Protection	
Facility Benefit Duration	3 YEARS		
Home Benefit	50%		
Lifetime Maximum	\$36,000		
Elimination Period	60 DAY		
Home Care Level	PROFESSIONAL		

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

Calculate your Premium:

$$\frac{\text{Monthly Rate for plan chose}}{\text{Facility Monthly Benefit Amount}} \times \text{Facility Monthly Benefit Amount} \div \$1,000 = \text{Monthly Premium}$$

Monthly Rates

AGE	PLAN 1	PLAN 2	PLAN 3	PLAN 4
	BASE PLAN	BASE PLAN WITH TOTAL HOME CARE OPTION	BASE PLAN WITH SIMPLE INFLAT OPTION	BASE PLAN WITH TOTAL HOME CARE SIMPLE INFLAT OPTIONS
18-30	2.30	3.60	3.20	4.90
31	2.30	3.60	3.30	5.00
32	2.30	3.60	3.40	5.20
33	2.40	3.70	3.50	5.30
34	2.50	3.80	3.70	5.60
35	2.60	3.90	3.80	5.70
36	2.60	4.00	4.00	6.00
37	2.70	4.20	4.10	6.20
38	2.90	4.40	4.40	6.50
39	3.00	4.50	4.60	6.90
40	3.10	4.70	4.70	7.10
41	3.30	4.90	5.00	7.50
42	3.40	5.10	5.30	7.90
43	3.60	5.30	5.50	8.20
44	3.70	5.60	5.80	8.70
45	4.00	5.90	6.20	9.10
46	4.10	6.20	6.50	9.60
47	4.30	6.50	6.80	10.10
48	4.50	6.90	7.20	10.80
49	4.70	7.30	7.60	11.40
50	5.00	7.70	8.00	12.00
51	5.30	8.20	8.50	12.80
52	5.60	8.70	8.90	13.50
53	6.00	9.20	9.50	14.30
54	6.30	9.70	10.00	15.10
55	6.70	10.40	10.60	15.90
56	7.10	11.00	11.20	16.80
57	7.70	11.90	12.00	17.90
58	8.20	12.60	12.90	19.20
59	8.80	13.60	13.80	20.50



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AGE	PLAN 1	PLAN 2	PLAN 3	PLAN 4
	BASE PLAN	BASE PLAN WITH TOTAL HOME CARE OPTION	BASE PLAN WITH SIMPLE INFLAT OPTION	BASE PLAN WITH TOTAL HOME CARE SIMPLE INFLAT OPTIONS
60	9.60	14.60	14.80	21.80
61	10.40	15.70	16.10	23.50
62	11.50	17.20	17.60	25.50
63	12.50	18.60	19.10	27.40
64	13.80	20.30	20.80	29.60
65	15.70	22.70	23.70	33.00
66	17.40	24.60	25.90	35.60
67	19.40	27.00	28.60	38.70
68	21.50	29.40	31.20	41.70
69	23.80	32.10	34.50	45.30
70	26.40	35.10	37.60	48.90
71	29.30	38.40	41.40	53.20
72	32.50	42.10	45.60	57.90
73	36.10	46.20	49.80	62.60
74	39.90	50.50	54.70	68.10
75	48.10	60.20	65.00	80.30
76	52.80	65.50	71.00	86.70
77	57.90	71.20	76.80	93.10
78	63.60	77.40	83.60	100.50
79	69.70	84.20	90.30	107.80
80	76.60	91.60	98.50	116.60
81	84.40	100.00	107.80	126.30
82	93.70	110.10	117.60	137.00
83	103.50	121.00	129.00	149.50
84	114.00	132.60	140.00	161.50



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Home Monthly Benefit	\$500	Inflation Protection	
Facility Benefit Duration	6 YEARS		
Home Benefit	50%		
Lifetime Maximum	\$72,000		
Elimination Period	60 DAY		
Home Care Level	PROFESSIONAL		

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Monthly Rates

	PLAN 1	PLAN 2	PLAN 3	PLAN 4
		BASE PLAN WITH TOTAL HOME CARE	BASE PLAN WITH SIMPLE INFLAT	BASE PLAN WITH TOTAL HOME CARE SIMPLE INFLAT
AGE	BASE PLAN	OPTION	OPTION	OPTIONS
18-30	3.00	4.70	4.30	6.60
31	3.10	4.80	4.40	6.80
32	3.20	4.90	4.50	7.10
33	3.30	5.00	4.70	7.30
34	3.30	5.10	4.80	7.50
35	3.50	5.30	5.10	7.80
36	3.60	5.50	5.30	8.20
37	3.70	5.70	5.50	8.50
38	3.90	5.90	5.80	8.80
39	4.00	6.10	6.10	9.20
40	4.20	6.40	6.40	9.70
41	4.30	6.60	6.70	10.10
42	4.50	7.00	7.00	10.60
43	4.70	7.30	7.40	11.20
44	5.00	7.60	7.80	11.70
45	5.30	8.00	8.30	12.40
46	5.50	8.50	8.70	13.10
47	5.80	8.90	9.10	13.80
48	6.10	9.40	9.60	14.60
49	6.30	9.90	10.00	15.40
50	6.70	10.50	10.60	16.30
51	7.00	11.10	11.10	17.20
52	7.50	11.80	11.80	18.20
53	7.90	12.60	12.60	19.50
54	8.40	13.30	13.20	20.50
55	8.90	14.20	13.90	21.60
56	9.50	15.10	14.80	22.90
57	10.10	16.20	15.80	24.50
58	10.80	17.30	16.90	26.10
59	11.60	18.60	18.00	27.80



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	BASE PLAN	BASE PLAN WITH TOTAL HOME CARE OPTION	BASE PLAN WITH SIMPLE INFLAT OPTION	BASE PLAN WITH TOTAL HOME CARE SIMPLE INFLAT OPTIONS
60	12.50	19.90	19.30	29.60
61	13.70	21.70	21.00	32.10
62	15.00	23.60	22.90	34.80
63	16.40	25.60	24.70	37.40
64	18.00	27.90	27.10	40.60
65	20.40	31.20	30.50	45.10
66	22.60	34.10	33.40	48.80
67	25.10	37.30	36.90	53.20
68	27.70	40.60	40.20	57.30
69	30.60	44.30	44.20	62.20
70	33.80	48.50	48.20	67.20
71	37.60	53.20	52.90	73.20
72	41.60	58.20	58.20	79.60
73	46.00	63.80	63.50	86.00
74	50.90	69.80	69.60	93.50
75	61.20	83.30	82.60	110.30
76	67.20	90.70	90.10	119.20
77	73.70	98.70	97.30	128.10
78	80.80	107.30	106.00	138.40
79	88.50	116.80	114.40	148.60
80	97.10	127.00	124.50	160.40
81	106.70	138.50	135.90	173.70
82	118.10	152.50	148.10	188.60
83	130.30	167.40	162.10	205.50
84	143.20	183.30	175.50	222.00