



LifeMap Assurance Company®
 100 SW Market Street
 P.O. Box 1271, MS E-8L
 Portland, OR 97207-1271
 (800) 756-4105

Utah Short Term Medical Daily Rates

Minimum of 30 Days up to a Maximum of 90 Days

Policy Maximum \$1,000,000

Effective: 1/1/2021 - 3/31/2021

80% / 20% Coinsurance

\$500 Deductible per Member		
Issue Age	Male	Female
0-19	2.97	3.07
20-24	2.48	3.89
25-29	2.84	4.98
30-34	3.49	5.95
35-39	4.32	6.79
40-44	5.56	7.89
45-49	7.29	9.25
50-54	9.80	11.03
55-59	12.93	12.84
60-64	16.71	15.32

\$5,000 Deductible per Member		
Issue Age	Male	Female
0-19	1.60	1.65
20-24	1.22	1.99
25-29	1.40	2.66
30-34	1.79	3.30
35-39	2.36	3.88
40-44	3.20	4.64
45-49	4.40	5.61
50-54	6.26	6.89
55-59	8.60	8.26
60-64	11.44	10.16

\$1,000 Deductible per Member		
Issue Age	Male	Female
0-19	2.66	2.75
20-24	2.23	3.49
25-29	2.53	4.53
30-34	3.13	5.42
35-39	3.91	6.22
40-44	5.09	7.26
45-49	6.73	8.57
50-54	9.14	10.28
55-59	12.20	12.02
60-64	15.80	14.44

\$7,500 Deductible per Member		
Issue Age	Male	Female
0-19	1.43	1.47
20-24	1.11	1.75
25-29	1.24	2.36
30-34	1.64	2.94
35-39	2.11	3.48
40-44	2.87	4.18
45-49	4.00	5.07
50-54	5.72	6.29
55-59	7.93	7.57
60-64	10.66	9.38

\$2,500 Deductible per Member		
Issue Age	Male	Female
0-19	2.08	2.17
20-24	1.70	2.71
25-29	1.93	3.58
30-34	2.44	4.35
35-39	3.12	5.06
40-44	4.13	5.97
45-49	5.58	7.13
50-54	7.72	8.63
55-59	10.46	10.21
60-64	13.74	12.39



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Policy Maximum \$1,000,000

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50% / 50% Coinsurance

\$500 Deductible per Member		
Issue Age	Male	Female
0-19	2.42	2.48
20-24	1.97	3.08
25-29	2.26	3.99
30-34	2.82	4.82
35-39	3.53	5.54
40-44	4.58	6.45
45-49	6.09	7.67
50-54	8.31	9.20
55-59	11.13	10.85
60-64	14.54	13.09

\$5,000 Deductible per Member		
Issue Age	Male	Female
0-19	1.45	1.52
20-24	1.12	1.77
25-29	1.26	2.36
30-34	1.65	2.94
35-39	2.13	3.48
40-44	2.90	4.15
45-49	4.00	5.03
50-54	5.70	6.21
55-59	7.89	7.48
60-64	10.56	9.25

\$1,000 Deductible per Member		
Issue Age	Male	Female
0-19	2.22	2.28
20-24	1.78	2.82
25-29	2.03	3.66
30-34	2.57	4.41
35-39	3.24	5.13
40-44	4.25	6.02
45-49	5.68	7.19
50-54	7.84	8.65
55-59	10.54	10.21
60-64	13.82	12.39

\$7,500 Deductible per Member		
Issue Age	Male	Female
0-19	1.30	1.36
20-24	1.02	1.63
25-29	1.16	2.13
30-34	1.47	2.65
35-39	1.90	3.14
40-44	2.63	3.78
45-49	3.67	4.61
50-54	5.28	5.70
55-59	7.33	6.89
60-64	9.91	8.60

\$2,500 Deductible per Member		
Issue Age	Male	Female
0-19	1.79	1.86
20-24	1.45	2.28
25-29	1.67	3.01
30-34	2.11	3.71
35-39	2.66	4.32
40-44	3.58	5.13
45-49	4.87	6.14
50-54	6.80	7.50
55-59	9.30	8.92
60-64	12.31	10.92