



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

Washington 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	4.50	4.65
20-24	3.74	5.78
25-29	4.23	7.39
30-34	5.19	8.79
35-39	6.39	9.98
40-44	8.13	11.48
45-49	10.51	13.37
50-54	14.02	15.82
55-59	18.53	18.32
60-64	23.93	21.80

\$5,000 Deductible per Member		
Issue Age	Male	Female
0-19	2.53	2.59
20-24	1.95	3.11
25-29	2.26	4.17
30-34	2.84	5.11
35-39	3.66	5.97
40-44	4.89	7.04
45-49	6.62	8.43
50-54	9.27	10.23
55-59	12.68	12.14
60-64	16.83	14.84

\$1,000 Deductible per Member		
Issue Age	Male	Female
0-19	4.08	4.23
20-24	3.35	5.23
25-29	3.80	6.74
30-34	4.70	8.09
35-39	5.84	9.24
40-44	7.48	10.64
45-49	9.79	12.48
50-54	13.17	14.82
55-59	17.52	17.24
60-64	22.73	20.60

\$7,500 Deductible per Member		
Issue Age	Male	Female
0-19	2.31	2.38
20-24	1.76	2.76
25-29	1.99	3.74
30-34	2.54	4.59
35-39	3.28	5.39
40-44	4.40	6.40
45-49	6.05	7.69
50-54	8.55	9.39
55-59	11.81	11.22
60-64	15.76	13.78

\$2,500 Deductible per Member		
Issue Age	Male	Female
0-19	3.28	3.38
20-24	2.62	4.15
25-29	3.01	5.44
30-34	3.76	6.62
35-39	4.73	7.63
40-44	6.20	8.87
45-49	8.23	10.51
50-54	11.32	12.62
55-59	15.24	14.82
60-64	19.96	17.87



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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	3.70	3.84
20-24	3.01	4.62
25-29	3.39	5.98
30-34	4.19	7.20
35-39	5.23	8.24
40-44	6.74	9.58
45-49	8.91	11.24
50-54	12.09	13.41
55-59	16.17	15.67
60-64	21.08	18.88

\$5,000 Deductible per Member		
Issue Age	Male	Female
0-19	2.31	2.38
20-24	1.77	2.76
25-29	2.03	3.70
30-34	2.54	4.58
35-39	3.28	5.38
40-44	4.40	6.36
45-49	6.05	7.63
50-54	8.54	9.28
55-59	11.74	11.09
60-64	15.67	13.66

\$1,000 Deductible per Member		
Issue Age	Male	Female
0-19	3.39	3.51
20-24	2.74	4.24
25-29	3.11	5.54
30-34	3.88	6.70
35-39	4.84	7.73
40-44	6.31	8.98
45-49	8.39	10.58
50-54	11.44	12.68
55-59	15.37	14.84
60-64	20.14	17.94

\$7,500 Deductible per Member		
Issue Age	Male	Female
0-19	2.09	2.19
20-24	1.61	2.49
25-29	1.84	3.35
30-34	2.35	4.15
35-39	3.01	4.90
40-44	4.05	5.82
45-49	5.58	7.02
50-54	7.96	8.60
55-59	10.98	10.33
60-64	14.78	12.76

\$2,500 Deductible per Member		
Issue Age	Male	Female
0-19	2.86	2.94
20-24	2.26	3.51
25-29	2.57	4.65
30-34	3.20	5.69
35-39	4.08	6.58
40-44	5.39	7.73
45-49	7.28	9.18
50-54	10.09	11.09
55-59	13.68	13.12
60-64	18.11	15.98