



**Idaho Short Term Medical Daily Rates**

Minimum of 30 Days up to a Maximum of 90 Days

Policy Maximum \$1,000,000

Effective: 7/1/2021 – 9/30/2021

**80% / 20% Coinsurance**

\$500 Deductible per Member

Issue Age	Unisex
0-19	4.20
20-24	4.19
25-29	5.21
30-34	6.31
35-39	7.39
40-44	9.53
45-49	10.62
50-54	14.00
55-59	16.59
60-64	21.67

\$5,000 Deductible per Member

Issue Age	Unisex
0-19	2.21
20-24	2.07
25-29	2.72
30-34	3.40
35-39	4.10
40-44	5.51
45-49	6.39
50-54	8.82
55-59	10.78
60-64	14.53

\$1,000 Deductible per Member

Issue Age	Unisex
0-19	3.57
20-24	3.53
25-29	4.43
30-34	5.45
35-39	6.39
40-44	8.28
45-49	9.31
50-54	12.46
55-59	14.77
60-64	19.40

\$7,500 Deductible per Member

Issue Age	Unisex
0-19	1.92
20-24	1.75
25-29	2.27
30-34	2.88
35-39	3.49
40-44	4.73
45-49	5.53
50-54	7.69
55-59	9.48
60-64	12.86

\$2,500 Deductible per Member

Issue Age	Unisex
0-19	2.87
20-24	2.79
25-29	3.56
30-34	4.42
35-39	5.26
40-44	6.92
45-49	7.93
50-54	10.73
55-59	12.89
60-64	17.14



**Idaho Short Term Medical Daily Rates**

Minimum of 30 Days up to a Maximum of 90 Days

Policy Maximum \$1,000,000

Effective: 7/1/2021 – 9/30/2021

**50% / 50% Coinsurance**

\$500 Deductible per Member

Issue Age	Unisex
0-19	3.10
20-24	3.10
25-29	3.77
30-34	4.66
35-39	5.48
40-44	7.12
45-49	8.07
50-54	10.65
55-59	12.90
60-64	17.03

\$5,000 Deductible per Member

Issue Age	Unisex
0-19	1.85
20-24	1.69
25-29	2.17
30-34	2.76
35-39	3.35
40-44	4.51
45-49	5.24
50-54	7.29
55-59	8.95
60-64	12.11

\$1,000 Deductible per Member

Issue Age	Unisex
0-19	2.82
20-24	2.69
25-29	3.40
30-34	4.23
35-39	5.00
40-44	6.56
45-49	7.45
50-54	10.02
55-59	12.04
60-64	15.98

\$7,500 Deductible per Member

Issue Age	Unisex
0-19	1.64
20-24	1.45
25-29	1.86
30-34	2.39
35-39	2.89
40-44	3.90
45-49	4.58
50-54	6.39
55-59	7.90
60-64	10.77

\$2,500 Deductible per Member

Issue Age	Unisex
0-19	2.35
20-24	2.22
25-29	2.81
30-34	3.53
35-39	4.20
40-44	5.59
45-49	6.44
50-54	8.77
55-59	10.66
60-64	14.28