



Oregon Short Term Medical Daily Rates

Minimum of 30 Days up to a Maximum of 90 Days

Policy Maximum \$1,000,000

Effective: 4/1/2022 - 6/30/2022

80% / 20% Coinsurance

\$500 Deductible per Member

Issue Age	Male	Female
0-19	4.30	4.43
20-24	3.57	5.61
25-29	4.06	7.16
30-34	4.96	8.48
35-39	6.10	9.55
40-44	7.79	11.00
45-49	10.10	12.85
50-54	13.53	15.35
55-59	17.89	17.83
60-64	23.11	21.27

\$5,000 Deductible per Member

Issue Age	Male	Female
0-19	2.32	2.40
20-24	1.83	2.92
25-29	2.05	3.91
30-34	2.62	4.73
35-39	3.37	5.52
40-44	4.50	6.56
45-49	6.16	7.83
50-54	8.68	9.66
55-59	11.92	11.58
60-64	15.90	14.19

\$1,000 Deductible per Member

Issue Age	Male	Female
0-19	3.91	4.01
20-24	3.21	5.08
25-29	3.63	6.51
30-34	4.48	7.74
35-39	5.56	8.78
40-44	7.16	10.19
45-49	9.37	11.92
50-54	12.65	14.30
55-59	16.85	16.71
60-64	21.89	20.06

\$7,500 Deductible per Member

Issue Age	Male	Female
0-19	2.05	2.15
20-24	1.59	2.60
25-29	1.86	3.45
30-34	2.32	4.23
35-39	3.00	4.94
40-44	4.06	5.89
45-49	5.60	7.11
50-54	7.93	8.84
55-59	11.04	10.57
60-64	14.81	13.10

\$2,500 Deductible per Member

Issue Age	Male	Female
0-19	3.06	3.17
20-24	2.49	3.98
25-29	2.82	5.15
30-34	3.53	6.24
35-39	4.43	7.16
40-44	5.81	8.36
45-49	7.79	9.93
50-54	10.71	12.04
55-59	14.49	14.23
60-64	19.06	17.26

There is a \$20 policy fee in addition to the above amount.



Oregon Short Term Medical Daily Rates

Minimum of 30 Days up to a Maximum of 90 Days

Policy Maximum \$1,000,000

Effective: 4/1/2022 – 6/30/2022

50% / 50% Coinsurance

\$500 Deductible per Member			\$5,000 Deductible per Member		
Issue Age	Male	Female	Issue Age	Male	Female
0-19	3.53	3.63	0-19	2.09	2.16
20-24	2.86	4.50	20-24	1.63	2.60
25-29	3.24	5.75	25-29	1.88	3.48
30-34	4.01	6.90	30-34	2.37	4.23
35-39	4.96	7.83	35-39	3.03	4.94
40-44	6.45	9.10	40-44	4.08	5.89
45-49	8.48	10.71	45-49	5.60	7.08
50-54	11.58	12.89	50-54	7.93	8.73
55-59	15.48	15.15	55-59	10.99	10.47
60-64	20.25	18.29	60-64	14.74	12.93

\$1,000 Deductible per Member			\$7,500 Deductible per Member		
Issue Age	Male	Female	Issue Age	Male	Female
0-19	3.21	3.31	0-19	1.93	1.98
20-24	2.60	4.11	20-24	1.42	2.35
25-29	2.93	5.33	25-29	1.70	3.13
30-34	3.66	6.37	30-34	2.11	3.83
35-39	4.59	7.27	35-39	2.72	4.50
40-44	5.99	8.49	40-44	3.71	5.35
45-49	7.93	10.05	45-49	5.15	6.46
50-54	10.86	12.13	50-54	7.37	8.03
55-59	14.66	14.28	55-59	10.23	9.69
60-64	19.28	17.36	60-64	13.82	12.04

\$2,500 Deductible per Member		
Issue Age	Male	Female
0-19	2.64	2.72
20-24	2.09	3.37
25-29	2.40	4.38
30-34	3.00	5.33
35-39	3.81	6.16
40-44	5.05	7.23
45-49	6.80	8.64
50-54	9.51	10.53
55-59	12.93	12.51
60-64	17.19	15.33

There is a \$20 policy fee in addition to the above amount.