

Hospital Recovery Insurance Monthly Rates\*  
with Observation Coverage  
**CALIFORNIA**

**\$7,000 Annual Benefit Bank**  
**\$200 Daily Benefit**

Issue Age Bands	Self	Self + Spouse	Self + Child(ren)	Self + Family
<b>18-29</b>	\$5.20	\$8.30	\$9.98	\$14.81
<b>30-39</b>	\$6.62	\$10.98	\$12.38	\$16.28
<b>40-49</b>	\$8.37	\$14.70	\$13.18	\$18.83
<b>50-59</b>	\$10.13	\$17.91	\$13.83	\$21.49
<b>60-63</b>	\$12.00	\$22.74	\$14.91	\$24.66
<b>64</b>	\$13.53	\$26.37	\$16.08	\$28.80

**\$17,500 Annual Benefit Bank**  
**\$500 Daily Benefit**

Issue Age Bands	Self	Self + Spouse	Self + Child(ren)	Self + Family
<b>18-29</b>	\$7.95	\$14.79	\$18.04	\$25.44
<b>30-39</b>	\$10.00	\$18.22	\$21.03	\$29.88
<b>40-49</b>	\$13.79	\$26.03	\$23.44	\$36.24
<b>50-59</b>	\$17.97	\$34.64	\$26.16	\$44.18
<b>60-63</b>	\$23.86	\$47.61	\$30.05	\$53.78
<b>64</b>	\$29.83	\$60.84	\$35.78	\$66.46

**\$24,500 Annual Benefit Bank**  
**\$700 Daily Benefit**

Issue Age Bands	Self	Self + Spouse	Self + Child(ren)	Self + Family
<b>18-29</b>	\$10.32	\$19.93	\$24.35	\$34.73
<b>30-39</b>	\$13.16	\$24.67	\$28.50	\$40.85
<b>40-49</b>	\$18.42	\$35.52	\$31.84	\$49.70
<b>50-59</b>	\$23.82	\$47.40	\$35.64	\$60.60
<b>60-63</b>	\$32.57	\$65.77	\$41.15	\$74.33
<b>64</b>	\$41.28	\$84.35	\$49.42	\$92.31

**\$31,500 Annual Benefit Bank**  
**\$900 Daily Benefit**

Issue Age Bands	Self	Self + Spouse	Self + Child(ren)	Self + Family
<b>18-29</b>	\$12.70	\$25.08	\$30.68	\$44.01
<b>30-39</b>	\$16.32	\$31.11	\$35.97	\$51.83
<b>40-49</b>	\$24.58	\$48.00	\$42.91	\$67.38
<b>50-59</b>	\$31.24	\$63.73	\$47.40	\$80.16
<b>60-63</b>	\$42.00	\$85.44	\$53.17	\$96.56
<b>64</b>	\$53.14	\$109.44	\$64.02	\$119.95

\* Each covered family member has access to his/her own Annual Benefit Bank amount (Daily Benefit Amount x 35). In most instances, there will be a premium saving when spouses/partners apply together versus separately. The rates shown assume primary and spouse are in the same age bands. To review monthly premiums for different benefit amounts, visit [www.YourLifeSecure.com](http://www.YourLifeSecure.com) and login to your secure portal to run quotes.

Hospital Recovery Insurance Optional Riders Monthly Rates\*  
with Observation Coverage

**CALIFORNIA**

**Emergency Room and Ambulance Benefit Rider**

\$300 Per Emergency Room Visit, 1 Visit Per Year &  
\$150 Ground, \$ 500 Air Per Day Ambulance, 1 Day Per Year Maximum

Issue Age Bands	Self	Self + Spouse	Self + Child(ren)	Self + Family
<b>18-29</b>	\$1.68	\$3.33	\$4.06	\$6.15
<b>30-39</b>	\$1.68	\$3.33	\$4.06	\$6.15
<b>40-49</b>	\$1.68	\$3.33	\$4.06	\$6.15
<b>50-59</b>	\$1.98	\$3.93	\$4.31	\$6.71
<b>60-63</b>	\$2.50	\$5.00	\$4.72	\$7.55
<b>64</b>	\$3.18	\$6.34	\$5.55	\$8.71

**Major Diagnostic Examination Benefit Rider**

\$500 Per day, 1 Day Per Year Maximum

Issue Age Bands	Self	Self + Spouse	Self + Child(ren)	Self + Family
<b>18-29</b>	\$5.50	\$10.99	\$8.81	\$14.31
<b>30-39</b>	\$5.50	\$10.99	\$8.81	\$14.31
<b>40-49</b>	\$5.50	\$10.99	\$8.81	\$14.31
<b>50-59</b>	\$9.13	\$18.34	\$11.85	\$21.06
<b>60-63</b>	\$13.20	\$26.52	\$15.76	\$29.10
<b>64</b>	\$14.82	\$29.63	\$17.56	\$32.37

**Rehabilitation Facility Benefit Rider**

\$100 Per Day, 15 Days Per Year  
Maximum

Issue Age Bands	Self	Self + Spouse	Self + Child(ren)	Self + Family
<b>18-29</b>	\$0.06	\$0.12	\$0.07	\$0.14
<b>30-39</b>	\$0.06	\$0.12	\$0.07	\$0.14
<b>40-49</b>	\$0.06	\$0.12	\$0.07	\$0.14
<b>50-59</b>	\$0.14	\$0.29	\$0.15	\$0.30
<b>60-63</b>	\$0.24	\$0.48	\$0.25	\$0.50
<b>64</b>	\$0.34	\$0.67	\$0.35	\$0.69

\* The rates shown assume primary and spouse are in the same age bands. To review monthly premiums for different benefit amounts, visit [www.YourLifeSecure.com](http://www.YourLifeSecure.com) and login to your secure portal to run quotes.