Patriot Travel Medical Insurance® Individual Rates

Patriot International® Individual Rates 2016 (U.S. Citizens) Rates below reflect a \$250 deductible

Individual Monthly Rate

Individual Daily Rate

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			M	aximum Lir	nit				
	Age	\$50,000	\$100,000	\$500,000	\$1 Million	\$2 Million			
	18-29	\$23	\$28	\$33	\$38	\$49			
	30-39	\$28	\$33	\$44	\$51	\$65			
	40-49	\$50	\$54	\$61	\$68	\$89			
	50-59	\$81	\$92	\$103	\$108	\$138			
	60-64	\$98	\$116	\$138	\$162	\$181			
	65-69	\$116	\$124	\$158	\$170	\$219			
	70-79	\$170	N/A	N/A	N/A	N/A			
	80+*	\$340	N/A	N/A	N/A	N/A			
	Dep. Child	\$21	\$25	\$30	\$33	\$37			
	Child Alone	\$23	\$28	\$33	\$38	\$47			

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	Maximum Limit									
Age	\$50,000	\$100,000	\$500,000	\$1 Million	\$2 Million					
18-29	\$.80	\$0.95	\$1.10	\$1.30	\$1.65					
30-39	\$0.95	\$1.10	\$1.50	\$1.70	\$2.20					
40-49	\$1.70	\$1.80	\$2.05	\$2.30	\$3.00					
50-59	\$2.70	\$3.10	\$3.45	\$3.60	\$4.60					
60-64	\$3.25	\$3.90	\$4.60	\$5.40	\$6.05					
65-69	\$3.90	\$4.15	\$4.80	\$5.70	\$7.30					
70-79	\$5.70	N/A	N/A	N/A	N/A					
80+*	\$11.35	N/A	N/A	N/A	N/A					
Dep. Child	\$0.70	\$0.85	\$1.00	\$1.10	\$1.25					
Child Alone	\$0.80	\$0.95	\$1.10	\$1.30	\$1.60					

^{*10,000} Maximum

Patriot America® Individual Rates 2016 (Non-U.S. Citizens) Rates below reflect a \$250 deductible

Individual Monthly Rate

Individual Daily Rate

	Maximum Limit						
Age	\$50,000	\$100,000	\$500,000	\$1 Million			
18-29	\$37	\$46	\$59	\$71			
30-39	\$49	\$62	\$78	\$91			
40-49	\$73	\$90	\$119	\$133			
50-59	\$107	\$138	\$169	\$194			
60-64	\$135	\$174	\$207	\$248			
65-69	\$154	\$208	\$226	\$270			
70-79	\$208	N/A	N/A	N/A			
80+*	\$362	N/A	N/A	N/A			
Dep. Child	\$34	\$41	\$53	\$59			
Child Alone	\$37	\$46	\$59	\$66			

	Maximum Limit						
Age	\$50,000	\$100,000	\$500,000	\$1 Million			
18-29	\$1.25	\$1.55	\$2.20	\$2.40			
30-39	\$1.65	\$2.10	\$2.60	\$3.05			
40-49	\$2.45	\$3.00	\$4.00	\$4.45			
50-59	\$3.60	\$4.60	\$5.56	\$6.50			
60-64	\$4.50	\$5.85	\$6.95	\$8.35			
65-69	\$5.15	\$7.00	\$7.60	\$9.05			
70-79	\$6.95	N/A	N/A	N/A			
80+*	\$12.10	N/A	N/A	N/A			
Dep. Child	\$1.15	\$1.40	\$1.80	\$2.00			
Child Alone	\$1.25	\$1.55	\$2.00	\$2.25			

Enhanced AD&D rider monthly i	rates*
Up to \$100,000 additional coverage	\$8
Up to \$200,000 additional coverage	\$16
Up to \$300,000 additional coverage	\$24
Up to \$400,000 additional coverage	\$32

^{*}Available to the primary Insured only. Available with a minimum purchase of three months of medical and AD&D rider coverage. Premium is charged in wholemonth increments.

Evacuation plus rider monthly rate*	
Premium per covered insured per month	\$45

^{*}Must be purchased for a minimum of three months regardless of the minimum number of days being traveled. Premium is charged in whole-month increments.

Additional deductible options										
Deductible	\$0	\$100	\$200	\$500	\$1,000	\$2,500				
Rate Factor	1.25	1.10	1.00	.90	.80	.70				

^{*10,000} Maximum

Patriot Travel Medical Insurance Group Rates (Groups of 5 or more)

Patriot International Group Rates 2016 (U.S. Citizens) Rates below reflect a \$250 deductible

Individual Monthly Rate

Individual Daily Rate

	Maximum Limit							M	aximum Liı	nit	
Age	\$50,000	\$100,000	\$500,000	\$1,000,000	\$2,000,000	Age	\$50,000	\$100,000	\$500,000	\$1,000,000	\$2,000,000
18-29	\$21	\$25	\$30	\$34	\$44	18-29	\$0.72	\$0.86	\$0.99	\$1.17	\$1.49
30-39	\$25	\$30	\$40	\$46	\$59	30-39	\$0.86	\$0.99	\$1.35	\$1.53	\$1.98
40-49	\$45	\$49	\$55	\$61	\$80	40-49	\$1.53	\$1.62	\$1.85	\$2.07	\$2.70
50-59	\$73	\$83	\$93	\$97	\$124	50-59	\$2.43	\$2.79	\$3.11	\$3.24	\$4.14
60-64	\$88	\$104	\$124	\$146	\$162	60-64	\$2.93	\$3.51	\$4.14	\$4.86	\$5.45
65-69	\$104	\$114	\$142	\$153	\$197	65-69	\$3.51	\$3.74	\$4.32	\$5.13	\$6.57
70-79	\$153	N/A	N/A	N/A	N/A	70-79	\$5.13	N/A	N/A	N/A	N/A
80+*	\$306	N/A	N/A	N/A	N/A	80+*	\$10.22	N/A	N/A	N/A	N/A
Dep. Child	\$19	\$23	\$27	\$30	\$33	Dep. Child	\$0.63	\$0.77	\$0.90	\$0.99	\$1.13
Child Alone	\$21	\$25	\$30	\$34	\$42	Child Alone	\$0.72	\$0.86	\$0.99	\$1.17	\$1.44
*10 000 Maximum				*10 000 Maximu	ım						

Patriot America Group Rates 2016 (Non-U.S. Citizens) Rates below reflect a \$250 deductible

Individual Monthly Rate

Individual Daily Rate

		Maximu	m Limit				Maximu	ım Limit	
Age	\$50,000	\$100,000	\$500,000	\$1,000,000	Age	\$50,000	\$100,000	\$500,000	\$1,000,000
18-29	\$33	\$41	\$53	\$64	18-29	\$1.15	\$1.40	\$1.80	\$2.15
30-39	\$44	\$56	\$70	\$82	30-39	\$1.50	\$1.90	\$2.35	\$2.75
40-49	\$67	\$81	\$107	\$120	40-49	\$2.25	\$2.70	\$3.60	\$4.00
50-59	\$97	\$124	\$152	\$175	50-59	\$3.25	\$4.15	\$5.10	\$5.85
60-64	\$122	\$157	\$186	\$223	60-64	\$4.10	\$5.25	\$6.25	\$7.50
65-69	\$139	\$187	\$203	\$243	65-69	\$4.65	\$6.30	\$6.80	\$8.10
70-79	\$187	N/A	N/A	N/A	70-79	\$6.25	N/A	N/A	N/A
80+*	\$326	N/A	N/A	N/A	80+*	\$10.90	N/A	N/A	N/A
Dep. Child	\$30	\$37	\$48	\$53	Dep. Child	\$1.05	\$1.25	\$1.60	\$1.80
Child Alone	\$33	\$41	\$53	\$59	Child Alone	\$1.15	\$1.40	\$1.80	\$2.00

^{*10,000} Maximum

^{*10,000} Maximum

Additional deductible options										
Deductible	\$0	\$100	\$200	\$500	\$1,000	\$2,500				
Rate Factor	1.25	1.10	1.00	.90	.80	.70				