

*ADVANTAGE PLUS® HOSPITAL INDEMNITY RATE SHEET*



**ADVANTAGE PLUS®**  
RATE SHEET - IDAHO

All Rates Are Annual  
One-Time Application Fee: \$20.00

Modal Factors	
Semi Annual	.520
Quarterly	.265
Monthly PAC	.084

**Software is also available to download at [www.gtlic.com](http://www.gtlic.com)**

GUARANTEE TRUST LIFE INSURANCE COMPANY  
1275 Milwaukee Avenue, Glenview, IL 60025  
[www.gtlic.com](http://www.gtlic.com)

**(Rev. 7/18) 15D613**

10-Day Hospital Confinement Benefits (per \$10/Day)				21-Day Benefits (per \$10/Day)			Lump Sum Hospital Confinement Rider		
AGE	\$100-170	\$180-240	\$250-600	\$100-170	\$180-240	\$250-600	\$250	\$500	\$750
64	14.35	12.96	12.16	20.83	19.20	18.33	132.53	251.69	369.94
65	14.35	12.96	12.16	20.83	19.20	18.33	132.53	251.69	369.94
66	14.92	13.50	12.70	21.75	20.10	19.21	136.97	260.34	382.65
67	15.44	14.03	13.21	22.69	21.00	20.09	141.69	269.10	395.60
68	16.01	14.59	13.75	23.60	21.88	20.96	146.28	278.01	408.71
69	16.63	15.22	14.36	24.61	22.87	21.90	150.99	286.91	421.80
70	17.21	15.78	14.90	25.55	23.78	22.78	155.71	295.82	434.90
71	17.81	16.37	15.48	26.62	24.81	23.79	160.41	304.72	447.99
72	18.38	16.97	16.07	27.59	25.76	24.73	165.00	313.50	460.82
73	19.00	17.57	16.64	28.53	26.70	25.62	169.46	322.01	473.40
74	19.54	18.08	17.16	29.43	27.57	26.48	173.78	330.26	485.44
75	20.04	18.59	17.65	30.27	28.39	27.28	177.97	338.12	497.09
76	20.48	19.04	18.10	31.05	29.12	28.00	181.90	345.72	508.09
77	20.95	19.48	18.50	31.77	29.81	28.67	185.69	352.78	518.57
78	21.29	19.84	18.86	32.40	30.43	29.27	189.09	359.34	528.26
79	21.64	20.17	19.19	32.95	30.98	29.81	192.37	365.49	537.30
80	21.92	20.46	19.49	33.46	31.46	30.27	195.25	370.99	545.41
81	22.16	20.70	19.70	33.83	31.82	30.64	197.87	376.09	552.88
82	22.38	20.89	19.91	34.17	32.14	30.94	200.22	380.55	559.30
83	22.58	21.10	20.09	34.50	32.45	31.24	202.32	384.34	564.93
84	22.78	21.29	20.29	34.80	32.76	31.55	203.90	387.49	569.51
85	22.97	21.49	20.47	35.16	33.11	31.88	205.21	389.84	573.05

Lump Sum Cancer Rider					Skilled Nursing Facility Rider (Days 1-50)			Outpatient Surgical Rider				Ambulance Rider Hospital Confinement not required
AGE	\$2,500	\$5,000	\$7,500	\$10,000	\$100/Day	\$150/Day	\$200/Day	\$250	\$500	\$750	\$1,000	\$200 per service
64	83.75	167.50	251.25	335.00	118.80	178.20	237.60	193.50	387.00	580.50	774.00	50.00
65	83.75	167.50	251.25	335.00	139.44	209.16	278.88	193.50	387.00	580.50	774.00	50.00
66	83.75	167.50	251.25	335.00	139.44	209.16	278.88	196.75	393.50	590.25	787.00	50.00
67	83.75	167.50	251.25	335.00	139.44	209.16	278.88	200.00	400.00	600.00	800.00	50.00
68	83.75	167.50	251.25	335.00	139.44	209.16	278.88	203.25	406.50	609.75	813.00	50.00
69	83.75	167.50	251.25	335.00	139.44	209.16	278.88	206.25	412.50	618.75	825.00	50.00
70	95.50	191.00	286.50	382.00	221.32	331.98	442.64	209.50	419.00	628.50	838.00	50.00
71	95.50	191.00	286.50	382.00	221.32	331.98	442.64	209.75	419.50	629.25	839.00	50.00
72	95.50	191.00	286.50	382.00	221.32	331.98	442.64	210.00	420.00	630.00	840.00	50.00
73	95.50	191.00	286.50	382.00	221.32	331.98	442.64	210.00	420.00	630.00	840.00	50.00
74	95.50	191.00	286.50	382.00	221.32	331.98	442.64	210.25	420.50	630.75	841.00	50.00
75	103.25	206.50	309.75	413.00	343.26	514.89	686.52	210.50	421.00	631.50	842.00	50.00
76	103.25	206.50	309.75	413.00	343.26	514.89	686.52	210.50	421.00	631.50	842.00	50.00
77	103.25	206.50	309.75	413.00	343.26	514.89	686.52	210.50	421.00	631.50	842.00	50.00
78	103.25	206.50	309.75	413.00	343.26	514.89	686.52	210.50	421.00	631.50	842.00	50.00
79	103.25	206.50	309.75	413.00	343.26	514.89	686.52	210.50	421.00	631.50	842.00	50.00
80	N/A	N/A	N/A	N/A	665.58	998.37	1,331.16	210.50	421.00	631.50	842.00	50.00
81	N/A	N/A	N/A	N/A	665.58	998.37	1,331.16	210.50	421.00	631.50	842.00	N/A
82	N/A	N/A	N/A	N/A	665.58	998.37	1,331.16	210.50	421.00	631.50	842.00	N/A
83	N/A	N/A	N/A	N/A	665.58	998.37	1,331.16	210.50	421.00	631.50	842.00	N/A
84	N/A	N/A	N/A	N/A	665.58	998.37	1,331.16	210.50	421.00	631.50	842.00	N/A
85	N/A	N/A	N/A	N/A	665.58	998.37	1,331.16	210.50	421.00	631.50	842.00	N/A