



SHORT-TERM HOME HEALTH CARE RATES

AL, AR, AZ, DE, GA, IA, IL, IN, LA, MD, MO, MS, MT, NC, NE, NV, OH,
OK, OR, PA, TN, TX, VA, WV, WY

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(Issue Ages 40-85)

Age	HHC Base Plan			Ambulance Rider*	Severe Accident & Accidental Death Rider*		Additional Home Health Aide Rider	Hospital Confinement Rider		
Attained	Basic	Standard	Complete	Per \$100	\$5,000	\$10,000	60 days	3 Days (per \$100)	6 Days (per \$100)	10 Days (per \$100)
40-55	\$12.14	\$24.29	\$25.46	\$0.69	\$1.50	\$3.01	\$0.83	\$3.60	\$4.80	\$5.46
56	\$14.02	\$28.03	\$29.49	\$0.76	\$1.83	\$3.67	\$0.87	\$3.89	\$5.19	\$5.89
57	\$14.02	\$28.03	\$29.49	\$0.76	\$1.83	\$3.67	\$0.87	\$3.89	\$5.19	\$5.89
58	\$14.02	\$28.03	\$29.49	\$0.76	\$1.83	\$3.67	\$0.87	\$3.89	\$5.19	\$5.89
59	\$14.02	\$28.03	\$29.49	\$0.76	\$1.83	\$3.67	\$0.87	\$3.89	\$5.19	\$5.89
60	\$14.02	\$28.03	\$29.49	\$0.76	\$1.83	\$3.67	\$0.87	\$3.89	\$5.19	\$5.89
61	\$16.86	\$33.72	\$36.09	\$0.91	\$2.30	\$4.59	\$1.28	\$4.47	\$5.95	\$6.77
62	\$16.86	\$33.72	\$36.09	\$0.91	\$2.30	\$4.59	\$1.28	\$4.47	\$5.95	\$6.77
63	\$16.86	\$33.72	\$36.09	\$0.91	\$2.30	\$4.59	\$1.28	\$4.47	\$5.95	\$6.77
64	\$16.86	\$33.72	\$36.09	\$0.91	\$2.30	\$4.59	\$1.28	\$4.47	\$5.95	\$6.77
65	\$21.77	\$43.54	\$47.57	\$1.00	\$3.00	\$6.01	\$1.82	\$6.22	\$8.30	\$9.43
66	\$21.77	\$43.54	\$47.57	\$1.00	\$3.00	\$6.01	\$1.82	\$6.22	\$8.30	\$9.43
67	\$21.77	\$43.54	\$47.57	\$1.00	\$3.00	\$6.01	\$1.82	\$6.22	\$8.30	\$9.43
68	\$21.77	\$43.54	\$47.57	\$1.00	\$3.00	\$6.01	\$1.82	\$6.22	\$8.30	\$9.43
69	\$21.77	\$43.54	\$47.57	\$1.00	\$3.00	\$6.01	\$1.82	\$6.22	\$8.30	\$9.43
70	\$21.77	\$43.54	\$47.57	\$1.00	\$3.00	\$6.01	\$1.82	\$6.22	\$8.30	\$9.43
71	\$29.06	\$58.13	\$66.56	\$1.39	\$4.10	\$8.19	\$3.08	\$8.79	\$11.72	\$13.31
72	\$29.06	\$58.13	\$66.56	\$1.39	\$4.10	\$8.19	\$3.08	\$8.79	\$11.72	\$13.31
73	\$29.06	\$58.13	\$66.56	\$1.39	\$4.10	\$8.19	\$3.08	\$8.79	\$11.72	\$13.31
74	\$29.06	\$58.13	\$66.56	\$1.39	\$4.10	\$8.19	\$3.08	\$8.79	\$11.72	\$13.31
75	\$29.06	\$58.13	\$66.56	\$1.39	\$4.10	\$8.19	\$3.08	\$8.79	\$11.72	\$13.31
76	\$39.17	\$78.35	\$97.07	\$1.57	\$5.75	\$11.51	\$5.22	\$10.80	\$14.41	\$16.37
77	\$39.17	\$78.35	\$97.07	\$1.57	\$5.75	\$11.51	\$5.22	\$10.80	\$14.41	\$16.37
78	\$39.17	\$78.35	\$97.07	\$1.57	\$5.75	\$11.51	\$5.22	\$10.80	\$14.41	\$16.37
79	\$39.17	\$78.35	\$97.07	\$1.57	\$5.75	\$11.51	\$5.22	\$10.80	\$14.41	\$16.37
80	\$39.17	\$78.35	\$97.07	\$1.57	\$5.75	\$11.51	\$5.22	\$10.80	\$14.41	\$16.37
81	\$52.71	\$105.42	\$138.98	\$2.20	\$8.22	\$16.44	\$7.41	\$12.96	\$17.29	\$19.64
82	\$52.71	\$105.42	\$138.98	\$2.20	\$8.22	\$16.44	\$7.41	\$12.96	\$17.29	\$19.64
83	\$52.71	\$105.42	\$138.98	\$2.20	\$8.22	\$16.44	\$7.41	\$12.96	\$17.29	\$19.64
84	\$52.71	\$105.42	\$138.98	\$2.20	\$8.22	\$16.44	\$7.41	\$12.96	\$17.29	\$19.64
85	\$52.71	\$105.42	\$138.98	\$2.20	\$8.22	\$16.44	\$7.41	\$12.96	\$17.29	\$19.64
86	\$69.53	\$139.06	\$193.02	\$2.20	\$8.22	\$16.44	\$12.15	\$15.56	\$20.74	\$23.57
87	\$69.53	\$139.06	\$193.02	\$2.20	\$8.22	\$16.44	\$12.15	\$15.56	\$20.74	\$23.57
88	\$69.53	\$139.06	\$193.02	\$2.20	\$8.22	\$16.44	\$12.15	\$15.56	\$20.74	\$23.57
89	\$69.53	\$139.06	\$193.02	\$2.20	\$8.22	\$16.44	\$12.15	\$15.56	\$20.74	\$23.57
90	\$69.53	\$139.06	\$193.02	\$2.20	\$8.22	\$16.44	\$12.15	\$15.56	\$20.74	\$23.57
91+	\$69.53	\$139.06	\$193.02	\$2.20	\$8.22	\$16.44	\$12.15	\$15.56	\$20.74	\$23.57

Household Discount of 7% is available to those that qualify.

Add a One-Time \$25 Policy Fee

* Ambulance Rider and Severe Accident & Accidental Death Benefit Riders are Issue Age. Not all riders are available in every state.

Modal Factors for Direct Bill

Semiannual	0.52000
Quarterly	0.26500