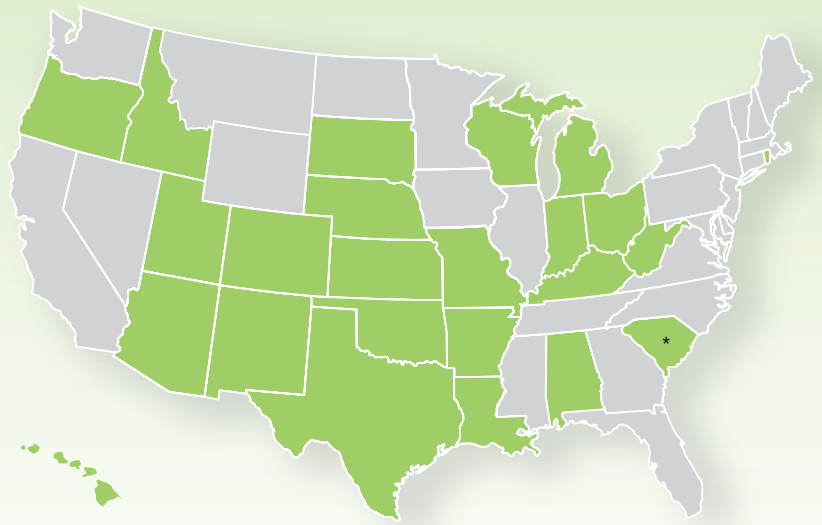


Critical Illness Cash Plan

Rate Sheet
March 2010
Policy - 70620



Rates apply to states shaded in green
*Note: South Carolina benefit amounts start at \$25,000

HUMANA
Guidance when you need it most

Humana Financial Protection Products

Critical Illness Cash Plan • Monthly

Issue Age	Vascular, Cancer and Other Illnesses				Vascular and Other Illnesses				Cancer Only			
	Non-Tobacco		Tobacco		Non-Tobacco		Tobacco		Non-Tobacco		Tobacco	
	Base Only	Base +ROP	Base Only	Base +ROP	Base Only	Base +ROP	Base Only	Base +ROP	Base Only	Base +ROP	Base Only	Base +ROP
Individual Monthly Level Premiums per \$5,000												
18-29	2.75	13.65	4.55	22.80	1.80	9.00	3.25	16.20	1.90	9.55	3.20	15.90
30-39	4.75	17.60	8.60	31.80	3.15	11.65	5.65	21.00	2.45	9.10	4.45	16.45
40-49	9.70	19.40	17.30	34.55	6.10	12.20	10.90	21.75	4.40	8.85	7.85	15.70
50-59	16.75	23.45	29.70	41.55	10.05	14.05	17.80	24.95	7.50	10.50	13.35	18.65
60-64	21.00	27.30	37.15	48.25	13.05	16.95	22.30	28.95	9.80	12.75	19.00	24.70
65-69	23.60	28.70	42.85	52.10	14.15	17.25	25.70	31.25	11.25	13.70	22.00	26.80
Single Parent Monthly Level Premiums per \$5,000												
18-29	3.01	14.17	4.81	23.32	1.98	9.36	3.43	16.56	2.09	9.93	3.39	16.28
30-39	5.01	18.12	8.86	32.32	3.33	12.01	5.83	21.36	2.64	9.48	4.64	16.83
40-49	9.96	19.92	17.56	35.07	6.28	12.56	11.08	22.11	4.59	9.23	8.04	16.08
50-59	17.01	23.97	29.96	42.07	10.23	14.41	17.98	25.31	7.69	10.88	13.54	19.03
60-64	21.26	27.82	37.41	48.77	13.23	17.31	22.48	29.31	9.99	13.13	19.19	25.08
65-69	23.86	29.22	43.11	52.62	14.33	17.61	25.88	31.61	11.44	14.08	22.19	27.18
Couple Monthly Level Premiums per \$5,000												
18-29	5.50	27.30	9.10	45.60	3.60	18.00	6.50	32.40	3.80	19.10	6.40	31.80
30-39	9.50	35.20	17.20	63.60	6.30	23.30	11.30	42.00	4.90	18.20	8.90	32.90
40-49	19.40	38.80	34.60	69.10	12.20	24.40	21.80	43.50	8.80	17.70	15.70	31.40
50-59	33.50	46.90	59.40	83.10	20.10	28.10	35.60	49.90	15.00	21.00	26.70	37.30
60-64	42.00	54.60	74.30	96.50	26.10	33.90	44.60	57.90	19.60	25.50	38.00	49.40
65-69	47.20	57.40	85.70	104.20	28.30	34.50	51.40	62.50	22.50	27.40	44.00	53.60
Family Monthly Level Premiums per \$5,000												
18-29	5.76	27.82	9.36	46.12	3.78	18.36	6.68	32.76	3.99	19.48	6.59	32.18
30-39	9.76	35.72	17.46	64.12	6.48	23.66	11.48	42.36	5.09	18.58	9.09	33.28
40-49	19.66	39.32	34.86	69.62	12.38	24.76	21.98	43.86	8.99	18.08	15.89	31.78
50-59	33.76	47.42	59.66	83.62	20.28	28.46	35.78	50.26	15.19	21.38	26.89	37.68
60-64	42.26	55.12	74.56	97.02	26.28	34.26	44.78	58.26	19.79	25.88	38.19	49.78
65-69	47.46	57.92	85.96	104.72	28.48	34.86	51.58	62.86	22.69	27.78	44.19	53.98

Critical Illness Cash Plan • Semi-Annual

Issue Age	Vascular, Cancer and Other Illnesses				Vascular and Other Illnesses				Cancer Only			
	Non-Tobacco		Tobacco		Non-Tobacco		Tobacco		Non-Tobacco		Tobacco	
	Base Only	Base +ROP	Base Only	Base +ROP	Base Only	Base +ROP	Base Only	Base +ROP	Base Only	Base +ROP	Base Only	Base +ROP
Individual Semi-Annual Level Premiums per \$5,000												
18-29	16.50	81.90	27.30	136.80	10.80	54.00	19.50	97.20	11.40	57.30	19.20	95.40
30-39	28.50	105.60	51.60	190.80	18.90	69.90	33.90	126.00	14.70	54.60	26.70	98.70
40-49	58.20	116.40	103.80	207.30	36.60	73.20	65.40	130.50	26.40	53.10	47.10	94.20
50-59	100.50	140.70	178.20	249.30	60.30	84.30	106.80	149.70	45.00	63.00	80.10	111.90
60-64	126.00	163.80	222.90	289.50	78.30	101.70	133.80	173.70	58.80	76.50	114.00	148.20
65-69	141.60	172.20	257.10	312.60	84.90	103.50	154.20	187.50	67.50	82.20	132.00	160.80
Single Parent Semi-Annual Level Premiums per \$5,000												
18-29	18.06	85.02	28.86	139.92	11.88	56.16	20.58	99.36	12.54	59.58	20.34	97.68
30-39	30.06	108.72	53.16	193.92	19.98	72.06	34.98	128.16	15.84	56.88	27.84	100.98
40-49	59.76	119.52	105.36	210.42	37.68	75.36	66.48	132.66	27.54	55.38	48.24	96.48
50-59	102.06	143.82	179.76	252.42	61.38	86.46	107.88	151.86	46.14	65.28	81.24	114.18
60-64	127.56	166.92	224.46	292.62	79.38	103.86	134.88	175.86	59.94	78.78	115.14	150.48
65-69	143.16	175.32	258.66	315.72	85.98	105.66	155.28	189.66	68.64	84.48	133.14	163.08
Couple Semi-Annual Level Premiums per \$5,000												
18-29	33.00	163.80	54.60	273.60	21.60	108.00	39.00	194.40	22.80	114.60	38.40	190.80
30-39	57.00	211.20	103.20	381.60	37.80	139.80	67.80	252.00	29.40	109.20	53.40	197.40
40-49	116.40	232.80	207.60	414.60	73.20	146.40	130.80	261.00	52.80	106.20	94.20	188.40
50-59	201.00	281.40	356.40	498.60	120.60	168.60	213.60	299.40	90.00	126.00	160.20	223.80
60-64	252.00	327.60	445.80	579.00	156.60	203.40	267.60	347.40	117.60	153.00	228.00	296.40
65-69	283.20	344.40	514.20	625.20	169.80	207.00	308.40	375.00	135.00	164.40	264.00	321.60
Family Semi-Annual Level Premiums per \$5,000												
18-29	34.56	166.92	56.16	276.72	22.68	110.16	40.08	196.56	23.94	116.88	39.54	193.08
30-39	58.56	214.32	104.76	384.72	38.88	141.96	68.88	254.16	30.54	111.48	54.54	199.68
40-49	117.96	235.92	209.16	417.72	74.28	148.56	131.88	263.16	53.94	108.48	95.34	190.68
50-59	202.56	284.52	357.96	501.72	121.68	170.76	214.68	301.56	91.14	128.28	161.34	226.08
60-64	253.56	330.72	447.36	582.12	157.68	205.56	268.68	349.56	118.74	155.28	229.14	298.68
65-69	284.76	347.52	515.76	628.32	170.88	209.16	309.48	377.16	136.14	166.68	265.14	323.88

Critical Illness Cash Plan • Annual

Issue Age	Vascular, Cancer and Other Illnesses				Vascular and Other Illnesses				Cancer Only			
	Non-Tobacco		Tobacco		Non-Tobacco		Tobacco		Non-Tobacco		Tobacco	
	Base Only	Base +ROP	Base Only	Base +ROP	Base Only	Base +ROP	Base Only	Base +ROP	Base Only	Base +ROP	Base Only	Base +ROP
Individual Annual Level Premiums per \$5,000												
18-29	33.00	163.80	54.60	273.60	21.60	108.00	39.00	194.40	22.80	114.60	38.40	190.80
30-39	57.00	211.20	103.20	381.60	37.80	139.80	67.80	252.00	29.40	109.20	53.40	197.40
40-49	116.40	232.80	207.60	414.60	73.20	146.40	130.80	261.00	52.80	106.20	94.20	188.40
50-59	201.00	281.40	356.40	498.60	120.60	168.60	213.60	299.40	90.00	126.00	160.20	223.80
60-64	252.00	327.60	445.80	579.00	156.60	203.40	267.60	347.40	117.60	153.00	228.00	296.40
65-69	283.20	344.40	514.20	625.20	169.80	207.00	308.40	375.00	135.00	164.40	264.00	321.60
Single Parent Annual Level Premiums per \$5,000												
18-29	36.12	170.04	57.72	279.84	23.76	112.32	41.16	198.72	25.08	119.16	40.68	195.36
30-39	60.12	217.44	106.32	387.84	39.96	144.12	69.96	256.32	31.68	113.76	55.68	201.96
40-49	119.52	239.04	210.72	420.84	75.36	150.72	132.96	265.32	55.08	110.76	96.48	192.96
50-59	204.12	287.64	359.52	504.84	122.76	172.92	215.76	303.72	92.28	130.56	162.48	228.36
60-64	255.12	333.84	448.92	585.24	158.76	207.72	269.76	351.72	119.88	157.56	230.28	300.96
65-69	286.32	350.64	517.32	631.44	171.96	211.32	310.56	379.32	137.28	168.96	266.28	326.16
Couple Annual Level Premiums per \$5,000												
18-29	66.00	327.60	109.20	547.20	43.20	216.00	78.00	388.80	45.60	229.20	76.80	381.60
30-39	114.00	422.40	206.40	763.20	75.60	279.60	135.60	504.00	58.80	218.40	106.80	394.80
40-49	232.80	465.60	415.20	829.20	146.40	292.80	261.60	522.00	105.60	212.40	188.40	376.80
50-59	402.00	562.80	712.80	997.20	241.20	337.20	427.20	598.80	180.00	252.00	320.40	447.60
60-64	504.00	655.20	891.60	1158.00	313.20	406.80	535.20	694.80	235.20	306.00	456.00	592.80
65-69	566.40	688.80	1028.40	1250.40	339.60	414.00	616.80	750.00	270.00	328.80	528.00	643.20
Family Annual Level Premiums per \$5,000												
18-29	69.12	333.84	112.32	553.44	45.36	220.32	80.16	393.12	47.88	233.76	79.08	386.16
30-39	117.12	428.64	209.52	769.44	77.76	283.92	137.76	508.32	61.08	222.96	109.08	399.36
40-49	235.92	471.84	418.32	835.44	148.56	297.12	263.76	526.32	107.88	216.96	190.68	381.36
50-59	405.12	569.04	715.92	1003.44	243.36	341.52	429.36	603.12	182.28	256.56	322.68	452.16
60-64	507.12	661.44	894.72	1164.24	315.36	411.12	537.36	699.12	237.48	310.56	458.28	597.36
65-69	569.52	695.04	1,031.52	1256.64	341.76	418.32	618.96	754.32	272.28	333.36	530.28	647.76