

ADVANTAGE PLUS® RATE SHEET



ADVANTAGE PLUS®
RATE SHEET - KANSAS

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

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

GUARANTEE TRUST LIFE INSURANCE COMPANY
1275 Milwaukee Avenue, Glenview, IL 60025
www.gtlic.com

Software is also available to download at www.gtlic.com

15D671

3-Day Benefits*		6-Day Benefits*		10-Day Hospital Confinement Benefits (per \$10/Day)				21-Day Benefits (per \$10/Day)		
AGE	(per \$10/Day)	AGE	(per \$10/Day)	AGE	\$100-170	\$180-240	\$250-600	\$100-170	\$180-240	\$250-600
40	6.33	40	8.85	40	11.44	10.64	10.18	12.73	11.84	11.33
41	6.45	41	9.02	41	11.65	10.83	10.36	12.99	12.08	11.56
42	6.56	42	9.17	42	11.84	11.01	10.54	13.23	12.30	11.77
43	6.66	43	9.31	43	12.02	11.18	10.70	13.44	12.50	11.96
44	6.76	44	9.45	44	12.19	11.34	10.85	13.63	12.68	12.13
45	6.84	45	9.57	45	12.35	11.49	10.99	13.80	12.83	12.28
46	6.93	46	9.68	46	12.49	11.62	11.12	13.95	12.97	12.42
47	7.02	47	9.80	47	12.63	11.74	11.24	14.09	13.10	12.54
48	7.08	48	9.88	48	12.74	11.85	11.34	14.21	13.21	12.65
49	7.14	49	9.98	49	12.85	11.95	11.44	14.32	13.32	12.74
50	7.20	50	10.06	50	12.94	12.04	11.52	14.43	13.42	12.84
51	7.25	51	10.13	51	13.02	12.11	11.59	14.53	13.52	12.94
52	7.30	52	10.19	52	13.09	12.18	11.65	14.65	13.62	13.04
53	7.33	53	10.24	53	13.15	12.23	11.71	14.78	13.74	13.15
54	7.37	54	10.29	54	13.21	12.28	11.75	14.92	13.88	13.28
55	7.40	55	10.33	55	13.25	12.32	11.79	15.10	14.04	13.44
56	7.44	56	10.37	56	13.29	12.36	11.83	15.31	14.24	13.63
57	7.46	57	10.41	57	13.32	12.39	11.86	15.58	14.49	13.86
58	7.50	58	10.45	58	13.35	12.42	11.88	15.90	14.79	14.15
59	7.53	59	10.48	59	13.38	12.45	11.91	16.29	15.15	14.50
60	7.56	60	10.53	60	13.42	12.48	11.94	16.76	15.59	14.92
61	7.59	61	10.56	61	13.46	12.51	11.97	17.33	16.11	15.42
62	7.63	62	10.62	62	13.50	12.56	12.02	18.00	16.74	16.02
63	7.68	63	10.67	63	13.56	12.61	12.06	18.79	17.48	16.73
64	7.75	64	10.76	64	14.35	12.96	12.16	20.83	19.20	18.33
65	7.77	65	10.78	65	14.35	12.96	12.16	20.83	19.20	18.33
66	8.11	66	11.26	66	14.92	13.50	12.70	21.75	20.10	19.21
67	8.45	67	11.72	67	15.44	14.03	13.21	22.69	21.00	20.09
68	8.79	68	12.21	68	16.01	14.59	13.75	23.60	21.88	20.96
69	9.18	69	12.74	69	16.63	15.22	14.36	24.61	22.87	21.90
70	9.54	70	13.24	70	17.21	15.78	14.90	25.55	23.78	22.78
71	9.91	71	13.74	71	17.81	16.37	15.48	26.62	24.81	23.79
72	10.28	72	14.27	72	18.38	16.97	16.07	27.59	25.76	24.73
73	10.66	73	14.79	73	19.00	17.57	16.64	28.53	26.70	25.62
74	11.01	74	15.26	74	19.54	18.08	17.16	29.43	27.57	26.48
75	11.32	75	15.70	75	20.04	18.59	17.65	30.27	28.39	27.28
76	11.61	76	16.10	76	20.48	19.04	18.10	31.05	29.12	28.00
77	11.89	77	16.47	77	20.95	19.48	18.50	31.77	29.81	28.67
78	12.14	78	16.81	78	21.29	19.84	18.86	32.40	30.43	29.27
79	12.36	79	17.12	79	21.64	20.17	19.19	32.95	30.98	29.81
80	12.58	80	17.41	80	21.92	20.46	19.49	33.46	31.46	30.27
81	12.73	81	17.63	81	22.16	20.70	19.70	33.83	31.82	30.64
82	12.88	82	17.82	82	22.38	20.89	19.91	34.17	32.14	30.94
83	13.02	83	18.01	83	22.58	21.10	20.09	34.50	32.45	31.24
84	13.18	84	18.21	84	22.78	21.29	20.29	34.80	32.76	31.55
85	13.32	85	18.40	85	22.97	21.49	20.47	35.16	33.11	31.88

*Minimum/maximum daily benefit for 3-day plan is \$350 to \$600. For the 6-day plan the minimum/maximum is \$250 to \$600. The 3 and 6 day Plans include Short Stay benefits.

Short Stay Rider*		Ambulance Rider	Lump Sum Hospital Confinement Rider		
AGE	(per \$10/Day)	\$200 per service	\$250	\$500	\$750
40	0.17	30.00	56.98	108.26	159.54
41	0.18	30.00	57.73	109.69	161.65
42	0.18	30.00	58.46	111.08	163.70
43	0.18	30.00	59.19	112.46	165.73
44	0.19	30.00	59.93	113.86	167.79
45	0.19	30.00	60.70	115.33	169.96
46	0.20	30.00	61.54	116.92	172.31
47	0.21	30.00	62.47	118.70	174.93
48	0.21	30.00	63.54	120.72	177.91
49	0.22	30.00	64.77	123.07	181.36
50	0.23	30.00	66.22	125.81	185.40
51	0.24	30.00	67.92	129.04	190.16
52	0.25	30.00	69.92	132.85	195.77
53	0.25	30.00	72.28	137.33	202.38
54	0.26	30.00	75.05	142.60	210.15
55	0.27	30.00	78.30	148.77	219.24
56	0.28	30.00	82.08	155.96	229.83
57	0.29	30.00	86.47	164.28	242.10
58	0.31	30.00	91.52	173.89	256.26
59	0.32	30.00	97.32	184.92	272.51
60	0.34	40.00	103.95	197.51	291.06
61	0.35	40.00	111.48	211.81	312.15
62	0.36	40.00	120.00	228.00	336.00
63	0.38	40.00	129.60	246.23	362.87
64	0.39	40.00	132.53	251.69	369.94
65	0.41	40.00	132.53	251.69	369.94
66	0.43	40.00	136.97	260.34	382.65
67	0.45	40.00	141.69	269.10	395.60
68	0.47	40.00	146.28	278.01	408.71
69	0.49	40.00	150.99	286.91	421.80
70	0.52	40.00	155.71	295.82	434.90
71	0.54	40.00	160.41	304.72	447.99
72	0.56	40.00	165.00	313.50	460.82
73	0.59	40.00	169.46	322.01	473.40
74	0.62	40.00	173.78	330.26	485.44
75	0.64	40.00	177.97	338.12	497.09
76	0.66	40.00	181.90	345.72	508.09
77	0.69	40.00	185.69	352.78	518.57
78	0.72	40.00	189.09	359.34	528.26
79	0.75	40.00	192.37	365.49	537.30
80	0.78	40.00	195.25	370.99	545.41
81	0.81	N/A	197.87	376.09	552.88
82	0.84	N/A	200.22	380.55	559.30
83	0.87	N/A	202.32	384.34	564.93
84	0.90	N/A	203.90	387.49	569.51
85	0.93	N/A	205.21	389.84	573.05

*Available for 10 and 21 Day Benefit Period Only