

The Bahamian American Plan
(LLOYD'S)
2011 Rate Table 1 Year

ANNUAL DEDUCTIBLES														
Deductible and co-insurance will be reduced by \$ 1,000 in Super Special Hospitals in USA.														
AGES	US\$ 250		US\$ 500		US\$ 1,000		US\$2,000		US\$3,000		US\$5,000		US\$10,000	
	Annual	Monthly*	Annual	Monthly*	Annual	Monthly*	Annual	Monthly*	Annual	Monthly*	Annual	Monthly*	Annual	Monthly*
*0-10	Free	Free	Free	Free	Free	Free	Free	Free	Free	Free	Free	Free	Free	Free
*11-17	\$ 1,136	\$ 107	\$ 943	\$ 89	\$ 720	\$ 69	\$ 560	\$ 54	\$ 520	\$ 50	\$ 494	\$ 48	\$ 461	\$ 45
18-24	\$ 2,607	\$ 242	\$ 2,165	\$ 202	\$ 1,652	\$ 154	\$ 1,281	\$ 120	\$ 1,191	\$ 112	\$ 1,131	\$ 107	\$ 1,057	\$ 100
25-29	\$ 2,852	\$ 265	\$ 2,364	\$ 220	\$ 1,796	\$ 168	\$ 1,387	\$ 130	\$ 1,286	\$ 121	\$ 1,220	\$ 115	\$ 1,139	\$ 107
30-34	\$ 3,149	\$ 292	\$ 2,604	\$ 242	\$ 1,970	\$ 184	\$ 1,516	\$ 142	\$ 1,402	\$ 131	\$ 1,329	\$ 125	\$ 1,238	\$ 116
35-39	\$ 3,507	\$ 325	\$ 2,894	\$ 269	\$ 2,183	\$ 203	\$ 1,671	\$ 156	\$ 1,543	\$ 144	\$ 1,461	\$ 137	\$ 1,358	\$ 127
40-44	\$ 3,959	\$ 367	\$ 3,261	\$ 303	\$ 2,449	\$ 228	\$ 1,864	\$ 174	\$ 1,720	\$ 161	\$ 1,625	\$ 152	\$ 1,509	\$ 141
45-49	\$ 4,548	\$ 421	\$ 3,738	\$ 346	\$ 2,796	\$ 260	\$ 2,120	\$ 198	\$ 1,951	\$ 182	\$ 1,842	\$ 172	\$ 1,707	\$ 160
50-54	\$ 5,360	\$ 496	\$ 4,395	\$ 407	\$ 3,274	\$ 305	\$ 2,470	\$ 230	\$ 2,269	\$ 211	\$ 2,139	\$ 199	\$ 1,978	\$ 184
55-59	\$ 6,452	\$ 596	\$ 5,281	\$ 488	\$ 3,919	\$ 363	\$ 2,940	\$ 273	\$ 2,698	\$ 251	\$ 2,539	\$ 236	\$ 2,343	\$ 218
60-64	\$ 8,306	\$ 767	\$ 6,783	\$ 626	\$ 5,011	\$ 464	\$ 3,738	\$ 346	\$ 3,423	\$ 317	\$ 3,218	\$ 299	\$ 2,961	\$ 275
65					\$ 5,603	\$ 518	\$ 4,172	\$ 386	\$ 3,816	\$ 354	\$ 3,584	\$ 332	\$ 3,297	\$ 306
66					\$ 6,268	\$ 579	\$ 4,659	\$ 431	\$ 4,258	\$ 394	\$ 3,997	\$ 370	\$ 3,674	\$ 341
67					\$ 7,017	\$ 648	\$ 5,206	\$ 481	\$ 4,756	\$ 440	\$ 4,463	\$ 413	\$ 4,100	\$ 380
68					\$ 7,860	\$ 726	\$ 5,822	\$ 538	\$ 5,315	\$ 491	\$ 4,986	\$ 461	\$ 4,577	\$ 424
69					\$ 8,808	\$ 813	\$ 6,514	\$ 602	\$ 5,943	\$ 549	\$ 5,575	\$ 515	\$ 5,115	\$ 473
70					\$ 10,130	\$ 934	\$ 7,481	\$ 691	\$ 6,823	\$ 630	\$ 6,396	\$ 591	\$ 5,865	\$ 542
71					\$ 11,658	\$ 1,075	\$ 8,597	\$ 793	\$ 7,836	\$ 723	\$ 7,345	\$ 678	\$ 6,730	\$ 622
72					\$ 13,421	\$ 1,237	\$ 9,886	\$ 912	\$ 9,008	\$ 831	\$ 8,441	\$ 779	\$ 7,730	\$ 714
73					\$ 15,458	\$ 1,425	\$ 11,375	\$ 1,049	\$ 10,361	\$ 956	\$ 9,707	\$ 896	\$ 8,885	\$ 820
74					\$ 17,811	\$ 1,641	\$ 13,096	\$ 1,207	\$ 11,925	\$ 1,100	\$ 11,167	\$ 1,030	\$ 10,220	\$ 943

IMPORTANT

If two adults are covered under a single policy, a discount of \$150.00 may be deducted or subtracted from the Annual Premium

The Semi-Annual Premium is calculated by multiplying the Annual Premium by .55

Children 0 - 10 years old are FREE in the parents' policy

Single dependent age for Full-Time Student (Rates 11-17) is up to 23 years and 364 days

Reimbursement of \$500 per airfare ticket for patients who Pre-certify and enter a Super Special Hospital in USA

BAHAMAS Premium Tax of 3% and Monthly Processing Fee* of \$2 is included in the Rates quoted above

NON COMMISSIONABLE POLICY FEE OF \$150.00 PER POLICY

OPTIONAL COVERAGES

Maternity Coverage (when only mother is insured) US \$500 Per Certificate

Excess Coverage After 70 Years of Age* US \$500 Per Assured*

Prescription Drug Increased Coverage US \$250 Per Certificate

PREMIUMS FOR OPTIONAL COVERAGES ARE NON-COMMISSIONABLE, EXCEPT THE EXCESS COVERAGE*