

## Reliance Standard Voluntary Plans Critical Illness Insurance Premium Table

### Plan Holder: Nash Rocky Mount Schools

**Scheduled Benefit:**

Each eligible employee may elect for himself and/or his eligible spouse an amount of insurance shown in the table below.

**Employee/Spouse Premiums:**

**To find you and your spouse's premium -**

- Determine your age band:
  - Your age = your age at your last birthday.
  - Spouse age = your age at your last birthday.
  - For employees age 70 or older, benefit amounts are reduced according to the age-based reduction chart shown in the Plan Highlights. When selecting an amount of insurance, you must select at pre-age 70 benefit amount.
- Select a benefit from:
  - Select an employee and spouse benefit from the table below.
- Employee and spouse rates change as insured moves from one age bracket to the next, based on the age determination rules.

### Employee and Spouse Monthly Premiums

#### Tobacco User Rate

Benefit Amount	Age 0-29	Age 30-39	Age 40-49	Age 50-59	Age 60-69	Age 70+
\$5,000	\$3.50	\$6.25	\$10.35	\$19.50	\$32.80	\$60.00
\$6,000	\$4.20	\$7.50	\$12.42	\$23.40	\$39.36	\$72.00
\$7,000	\$4.90	\$8.75	\$14.49	\$27.30	\$45.92	\$84.00
\$8,000	\$5.60	\$10.00	\$16.56	\$31.20	\$52.48	\$96.00
\$9,000	\$6.30	\$11.25	\$18.63	\$35.10	\$59.04	\$108.00
\$10,000	\$7.00	\$12.50	\$20.70	\$39.00	\$65.60	\$120.00
\$11,000	\$7.70	\$13.75	\$22.77	\$42.90	\$72.16	\$132.00
\$12,000	\$8.40	\$15.00	\$24.84	\$46.80	\$78.72	\$144.00
\$13,000	\$9.10	\$16.25	\$26.91	\$50.70	\$85.28	\$156.00
\$14,000	\$9.80	\$17.50	\$28.98	\$54.60	\$91.84	\$168.00
\$15,000	\$10.50	\$18.75	\$31.05	\$58.50	\$98.40	\$180.00
\$16,000	\$11.20	\$20.00	\$33.12	\$62.40	\$104.96	\$192.00
\$17,000	\$11.90	\$21.25	\$35.19	\$66.30	\$111.52	\$204.00
\$18,000	\$12.60	\$22.50	\$37.26	\$70.20	\$118.08	\$216.00
\$19,000	\$13.30	\$23.75	\$39.33	\$74.10	\$124.64	\$228.00
\$20,000	\$14.00	\$25.00	\$41.40	\$78.00	\$131.20	\$240.00
\$21,000	\$14.70	\$26.25	\$43.47	\$81.90	\$137.76	\$252.00
\$22,000	\$15.40	\$27.50	\$45.54	\$85.80	\$144.32	\$264.00
\$23,000	\$16.10	\$28.75	\$47.61	\$89.70	\$150.88	\$276.00
\$24,000	\$16.80	\$30.00	\$49.68	\$93.60	\$157.44	\$288.00
\$25,000	\$17.50	\$31.25	\$51.75	\$97.50	\$164.00	\$300.00
\$26,000	\$18.20	\$32.50	\$53.82	\$101.40	\$170.56	\$312.00
\$27,000	\$18.90	\$33.75	\$55.89	\$105.30	\$177.12	\$324.00
\$28,000	\$19.60	\$35.00	\$57.96	\$109.20	\$183.68	\$336.00
\$29,000	\$20.30	\$36.25	\$60.03	\$113.10	\$190.24	\$348.00

<b>\$30,000</b>	\$21.00	\$37.50	\$62.10	\$117.00	\$196.80	\$360.00
<b>\$31,000</b>	\$21.70	\$38.75	\$64.17	\$120.90	\$203.36	\$372.00
<b>\$32,000</b>	\$22.40	\$40.00	\$66.24	\$124.80	\$209.92	\$384.00
<b>\$33,000</b>	\$23.10	\$41.25	\$68.31	\$128.70	\$216.48	\$396.00
<b>\$34,000</b>	\$23.80	\$42.50	\$70.38	\$132.60	\$223.04	\$408.00
<b>\$35,000</b>	\$24.50	\$43.75	\$72.45	\$136.50	\$229.60	\$420.00
<b>\$36,000</b>	\$25.20	\$45.00	\$74.52	\$140.40	\$236.16	\$432.00
<b>\$37,000</b>	\$25.90	\$46.25	\$76.59	\$144.30	\$242.72	\$444.00
<b>\$38,000</b>	\$26.60	\$47.50	\$78.66	\$148.20	\$249.28	\$456.00
<b>\$39,000</b>	\$27.30	\$48.75	\$80.73	\$152.10	\$255.84	\$468.00
<b>\$40,000</b>	\$28.00	\$50.00	\$82.80	\$156.00	\$262.40	\$480.00
<b>\$41,000</b>	\$28.70	\$51.25	\$84.87	\$159.90	\$268.96	\$492.00
<b>\$42,000</b>	\$29.40	\$52.50	\$86.94	\$163.80	\$275.52	\$504.00
<b>\$43,000</b>	\$30.10	\$53.75	\$89.01	\$167.70	\$282.08	\$516.00
<b>\$44,000</b>	\$30.80	\$55.00	\$91.08	\$171.60	\$288.64	\$528.00
<b>\$45,000</b>	\$31.50	\$56.25	\$93.15	\$175.50	\$295.20	\$540.00
<b>\$46,000</b>	\$32.20	\$57.50	\$95.22	\$179.40	\$301.76	\$552.00
<b>\$47,000</b>	\$32.90	\$58.75	\$97.29	\$183.30	\$308.32	\$564.00
<b>\$48,000</b>	\$33.60	\$60.00	\$99.36	\$187.20	\$314.88	\$576.00
<b>\$49,000</b>	\$34.30	\$61.25	\$101.43	\$191.10	\$321.44	\$588.00
<b>\$50,000</b>	\$35.00	\$62.50	\$103.50	\$195.00	\$328.00	\$600.00

### Non-Tobacco User Rate

<b>Benefit Amount</b>	<b>Age 0-29</b>	<b>Age 30-39</b>	<b>Age 40-49</b>	<b>Age 50-59</b>	<b>Age 60-69</b>	<b>Age 70+</b>
<b>\$5,000</b>	\$2.75	\$4.25	\$7.00	\$12.75	\$22.25	\$44.20
<b>\$6,000</b>	\$3.30	\$5.10	\$8.40	\$15.30	\$26.70	\$53.04
<b>\$7,000</b>	\$3.85	\$5.95	\$9.80	\$17.85	\$31.15	\$61.88
<b>\$8,000</b>	\$4.40	\$6.80	\$11.20	\$20.40	\$35.60	\$70.72
<b>\$9,000</b>	\$4.95	\$7.65	\$12.60	\$22.95	\$40.05	\$79.56
<b>\$10,000</b>	\$5.50	\$8.50	\$14.00	\$25.50	\$44.50	\$88.40
<b>\$11,000</b>	\$6.05	\$9.35	\$15.40	\$28.05	\$48.95	\$97.24
<b>\$12,000</b>	\$6.60	\$10.20	\$16.80	\$30.60	\$53.40	\$106.08
<b>\$13,000</b>	\$7.15	\$11.05	\$18.20	\$33.15	\$57.85	\$114.92
<b>\$14,000</b>	\$7.70	\$11.90	\$19.60	\$35.70	\$62.30	\$123.76
<b>\$15,000</b>	\$8.25	\$12.75	\$21.00	\$38.25	\$66.75	\$132.60
<b>\$16,000</b>	\$8.80	\$13.60	\$22.40	\$40.80	\$71.20	\$141.44
<b>\$17,000</b>	\$9.35	\$14.45	\$23.80	\$43.35	\$75.65	\$150.28
<b>\$18,000</b>	\$9.90	\$15.30	\$25.20	\$45.90	\$80.10	\$159.12
<b>\$19,000</b>	\$10.45	\$16.15	\$26.60	\$48.45	\$84.55	\$167.96
<b>\$20,000</b>	\$11.00	\$17.00	\$28.00	\$51.00	\$89.00	\$176.80
<b>\$21,000</b>	\$11.55	\$17.85	\$29.40	\$53.55	\$93.45	\$185.64
<b>\$22,000</b>	\$12.10	\$18.70	\$30.80	\$56.10	\$97.90	\$194.48
<b>\$23,000</b>	\$12.65	\$19.55	\$32.20	\$58.65	\$102.35	\$203.32
<b>\$24,000</b>	\$13.20	\$20.40	\$33.60	\$61.20	\$106.80	\$212.16
<b>\$25,000</b>	\$13.75	\$21.25	\$35.00	\$63.75	\$111.25	\$221.00
<b>\$26,000</b>	\$14.30	\$22.10	\$36.40	\$66.30	\$115.70	\$229.84
<b>\$27,000</b>	\$14.85	\$22.95	\$37.80	\$68.85	\$120.15	\$238.68
<b>\$28,000</b>	\$15.40	\$23.80	\$39.20	\$71.40	\$124.60	\$247.52
<b>\$29,000</b>	\$15.95	\$24.65	\$40.60	\$73.95	\$129.05	\$256.36
<b>\$30,000</b>	\$16.50	\$25.50	\$42.00	\$76.50	\$133.50	\$265.20

<b>\$31,000</b>	\$17.05	\$26.35	\$43.40	\$79.05	\$137.95	\$274.04
<b>\$32,000</b>	\$17.60	\$27.20	\$44.80	\$81.60	\$142.40	\$282.88
<b>\$33,000</b>	\$18.15	\$28.05	\$46.20	\$84.15	\$146.85	\$291.72
<b>\$34,000</b>	\$18.70	\$28.90	\$47.60	\$86.70	\$151.30	\$300.56
<b>\$35,000</b>	\$19.25	\$29.75	\$49.00	\$89.25	\$155.75	\$309.40
<b>\$36,000</b>	\$19.80	\$30.60	\$50.40	\$91.80	\$160.20	\$318.24
<b>\$37,000</b>	\$20.35	\$31.45	\$51.80	\$94.35	\$164.65	\$327.08
<b>\$38,000</b>	\$20.90	\$32.30	\$53.20	\$96.90	\$169.10	\$335.92
<b>\$39,000</b>	\$21.45	\$33.15	\$54.60	\$99.45	\$173.55	\$344.76
<b>\$40,000</b>	\$22.00	\$34.00	\$56.00	\$102.00	\$178.00	\$353.60
<b>\$41,000</b>	\$22.55	\$34.85	\$57.40	\$104.55	\$182.45	\$362.44
<b>\$42,000</b>	\$23.10	\$35.70	\$58.80	\$107.10	\$186.90	\$371.28
<b>\$43,000</b>	\$23.65	\$36.55	\$60.20	\$109.65	\$191.35	\$380.12
<b>\$44,000</b>	\$24.20	\$37.40	\$61.60	\$112.20	\$195.80	\$388.96
<b>\$45,000</b>	\$24.75	\$38.25	\$63.00	\$114.75	\$200.25	\$397.80
<b>\$46,000</b>	\$25.30	\$39.10	\$64.40	\$117.30	\$204.70	\$406.64
<b>\$47,000</b>	\$25.85	\$39.95	\$65.80	\$119.85	\$209.15	\$415.48
<b>\$48,000</b>	\$26.40	\$40.80	\$67.20	\$122.40	\$213.60	\$424.32
<b>\$49,000</b>	\$26.95	\$41.65	\$68.60	\$124.95	\$218.05	\$433.16
<b>\$50,000</b>	\$27.50	\$42.50	\$70.00	\$127.50	\$222.50	\$442.00

**Dependent Child(ren):**

Your dependent child(ren) is eligible for a benefit amount of 25% of your Critical Illness benefit election, limited to a maximum of \$12,500

**To calculate Dependent Child(ren) Benefit:**

Employee Benefit Amount x 25% = Dependent Child(ren) Benefit. No rounding needed.

**To calculate Semi-monthly Dependent Child(ren) Premium:**

Dependent Child(ren) Benefit/1000 x 0.89

Please Note: One rate and benefit amount for all eligible children in family, regardless of number.

**Please read this important information**

- You may not have coverage as both an employee and as a dependent.
- Employee must have coverage in order for spouse and dependent children to be covered.

*Please note, these rates are approximate and subject to change.*