Limited Benefit Group Critical Illness With Cancer Benefit / Rate Insert

Group Critical Illness Insurance Limited Benefit Group Critical Illness With Cancer Benefit

Extends coverage to dependent children at no additional cost.

EMPLOYEE MONTHLY RATES

	\$5,000		\$10,000		\$15,000		\$20,000		\$25,000		\$30,000	
AGE	Non-Tobacco	Тоbассо	Non-Tobacco	Тоbассо	Non-Tobacco	Торассо	Non-Tobacco	Тоbассо	Non-Tobacco	Тоbассо	Non-Tobacco	Тоbассо
18-29	\$5.28	\$7.02	\$6.88	\$10.30	\$8.46	\$13.60	\$10.04	\$16.88	\$11.64	\$20.20	\$13.24	\$23.50
30-39	\$7.28	\$10.44	\$10.84	\$17.18	\$14.44	\$23.90	\$18.02	\$30.64	\$21.60	\$37.38	\$25.18	\$44.10
40-49	\$11.68	\$18.02	\$19.64	\$32.38	\$27.60	\$46.74	\$35.56	\$61.06	\$43.56	\$75.42	\$51.52	\$89.78
50-59	\$18.82	\$30.58	\$33.94	\$57.46	\$49.10	\$84.32	\$64.22	\$111.20	\$79.34	\$138.10	\$94.46	\$164.96
60 & Over	\$29.74	\$49.60	\$55.74	\$95.50	\$81.78	\$141.42	\$107.80	\$187.32	\$133.84	\$233.22	\$159.88	\$279.12

SPOUSE MONTHLY RATES

	\$2,500		\$5,000		\$7,500		\$10,000		\$12,500		\$15,000	
AGE	Non-Tobacco	Tobacco	Non-Tobacco	Тоbассо	Non-Tobacco	Тоbассо	Non-Tobacco	Тоbассо	Non-Tobacco	Торассо	Non-Tobacco	Тоbассо
18-29	\$4.22	\$5.36	\$4.72	\$7.02	\$5.24	\$8.70	\$5.74	\$10.38	\$6.28	\$12.04	\$6.78	\$13.72
30-39	\$5.28	\$7.38	\$6.88	\$11.02	\$8.46	\$14.72	\$10.08	\$18.38	\$11.64	\$22.06	\$13.24	\$25.72
40-49	\$7.70	\$11.84	\$11.72	\$19.96	\$15.72	\$28.10	\$19.72	\$36.24	\$23.76	\$44.38	\$27.76	\$52.50
50-59	\$11.62	\$19.08	\$19.52	\$34.46	\$27.44	\$49.86	\$35.34	\$65.24	\$43.26	\$80.60	\$51.16	\$96.00
60-69	\$17.58	\$30.16	\$31.48	\$56.60	\$45.34	\$83.08	\$59.24	\$109.52	\$73.14	\$135.98	\$87.00	\$162.40

This insert must be used in conjunction with SB-32267(FF) and any state specific deviations thereof.



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