



SAN ANGELO ISD /TEEBC TRUST F021842 - 335

Eligibility

All Active Full Time employees regularly working 15 hours per week and All Active Part Time Employees regularly working 10 hours per week are eligible for insurance on their date of hire.

Supplemental Life

Employee Benefit: **\$10,000 to \$500,000 in \$10,000 increments.**

Spouse Benefit: **\$10,000 to \$50,000 in \$10,000 increments.**
(not to exceed 50% of the employee benefit)

Note: Spouse may not have coverage unless the employee has coverage.

Child Coverage

Birth to Age 26: \$2,000 to \$10,000 in increments of \$2,000

Guarantee Issue*

Employee **Lesser of \$250,000 or 3X Base Annual Earnings**
Spouse **\$ 50,000**

*NEW HIRES ONLY

Employee: Life benefits reduce by 35% of the original amount at age 65, then by 55% at age 70, by 70% at age 75, and by 80% at age 80. Benefits terminate at retirement.

Spouse: All benefits terminate at Employee's termination or retirement.

Employee Supplemental Life	
Monthly rates per \$1,000	
<u>Age</u>	<u>Rates</u>
Under 20	\$0.043
20-24	\$0.043
25-29	\$0.043
30-34	\$0.060
35-39	\$0.068
40-44	\$0.102
45-49	\$0.145
50-54	\$0.247
55-59	\$0.434
60-64	\$0.536
65-69	\$0.859
70+	\$1.479

Dependent Life (Children)		
Monthly Premium per Family		
	<u>Life</u>	<u>Premium</u>
\$2,000		\$0.18
\$4,000		\$0.36
\$6,000		\$0.54
\$8,000		\$0.72
\$10,000		\$0.90

Supplemental Life

Premium Cost (Based on 12 payroll deductions per year)

Benefit Amount	ATTAINED AGE											
	<20	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70+
\$10,000	\$0.43	\$0.43	\$0.43	\$0.60	\$0.68	\$1.02	\$1.45	\$2.47	\$4.34	\$5.36	\$8.59	\$14.79
\$20,000	\$0.86	\$0.86	\$0.86	\$1.20	\$1.36	\$2.04	\$2.90	\$4.94	\$8.68	\$10.72	\$17.18	\$29.58
\$30,000	\$1.29	\$1.29	\$1.29	\$1.80	\$2.04	\$3.06	\$4.35	\$7.41	\$13.02	\$16.08	\$25.77	\$44.37
\$40,000	\$1.72	\$1.72	\$1.72	\$2.40	\$2.72	\$4.08	\$5.80	\$9.88	\$17.36	\$21.44	\$34.36	\$59.16
\$50,000	\$2.15	\$2.15	\$2.15	\$3.00	\$3.40	\$5.10	\$7.25	\$12.35	\$21.70	\$26.80	\$42.95	\$73.95
\$60,000	\$2.58	\$2.58	\$2.58	\$3.60	\$4.08	\$6.12	\$8.70	\$14.82	\$26.04	\$32.16	\$51.54	\$88.74
\$70,000	\$3.01	\$3.01	\$3.01	\$4.20	\$4.76	\$7.14	\$10.15	\$17.29	\$30.38	\$37.52	\$60.13	\$103.53
\$80,000	\$3.44	\$3.44	\$3.44	\$4.80	\$5.44	\$8.16	\$11.60	\$19.76	\$34.72	\$42.88	\$68.72	\$118.32
\$90,000	\$3.87	\$3.87	\$3.87	\$5.40	\$6.12	\$9.18	\$13.05	\$22.23	\$39.06	\$48.24	\$77.31	\$133.11
\$100,000	\$4.30	\$4.30	\$4.30	\$6.00	\$6.80	\$10.20	\$14.50	\$24.70	\$43.40	\$53.60	\$85.90	\$147.90
\$110,000	\$4.73	\$4.73	\$4.73	\$6.60	\$7.48	\$11.22	\$15.95	\$27.17	\$47.74	\$58.96	\$94.49	\$162.69
\$120,000	\$5.16	\$5.16	\$5.16	\$7.20	\$8.16	\$12.24	\$17.40	\$29.64	\$52.08	\$64.32	\$103.08	\$177.48
\$130,000	\$5.59	\$5.59	\$5.59	\$7.80	\$8.84	\$13.26	\$18.85	\$32.11	\$56.42	\$69.68	\$111.67	\$192.27
\$140,000	\$6.02	\$6.02	\$6.02	\$8.40	\$9.52	\$14.28	\$20.30	\$34.58	\$60.76	\$75.04	\$120.26	\$207.06
\$150,000	\$6.45	\$6.45	\$6.45	\$9.00	\$10.20	\$15.30	\$21.75	\$37.05	\$65.10	\$80.40	\$128.85	\$221.85
\$160,000	\$6.88	\$6.88	\$6.88	\$9.60	\$10.88	\$16.32	\$23.20	\$39.52	\$69.44	\$85.76	\$137.44	\$236.64
\$170,000	\$7.31	\$7.31	\$7.31	\$10.20	\$11.56	\$17.34	\$24.65	\$41.99	\$73.78	\$91.12	\$146.03	\$251.43
\$180,000	\$7.74	\$7.74	\$7.74	\$10.80	\$12.24	\$18.36	\$26.10	\$44.46	\$78.12	\$96.48	\$154.62	\$266.22
\$190,000	\$8.17	\$8.17	\$8.17	\$11.40	\$12.92	\$19.38	\$27.55	\$46.93	\$82.46	\$101.84	\$163.21	\$281.01
\$200,000	\$8.60	\$8.60	\$8.60	\$12.00	\$13.60	\$20.40	\$29.00	\$49.40	\$86.80	\$107.20	\$171.80	\$295.80
\$210,000	\$9.03	\$9.03	\$9.03	\$12.60	\$14.28	\$21.42	\$30.45	\$51.87	\$91.14	\$112.56	\$180.39	\$310.59
\$220,000	\$9.46	\$9.46	\$9.46	\$13.20	\$14.96	\$22.44	\$31.90	\$54.34	\$95.48	\$117.92	\$188.98	\$325.38
\$230,000	\$9.89	\$9.89	\$9.89	\$13.80	\$15.64	\$23.46	\$33.35	\$56.81	\$99.82	\$123.28	\$197.57	\$340.17
\$240,000	\$10.32	\$10.32	\$10.32	\$14.40	\$16.32	\$24.48	\$34.80	\$59.28	\$104.16	\$128.64	\$206.16	\$354.96
\$250,000	\$10.75	\$10.75	\$10.75	\$15.00	\$17.00	\$25.50	\$36.25	\$61.75	\$108.50	\$134.00	\$214.75	\$369.75

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Supplemental Life
PREMIUM RATE GRID



**BlueCross BlueShield
of Texas**

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Eligibility

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Child Coverage

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Spouse **\$ 50,000**

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Spouse: All benefits terminate at Employee's termination or retirement.

Supplemental Life

Premium Cost (Based on 12 payroll deductions per year)

Benefit Amount	ATTAINED AGE										
	<20	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65+
\$10,000	\$0.68	\$0.68	\$0.68	\$0.68	\$0.94	\$1.62	\$2.81	\$4.59	\$7.23	\$11.22	\$16.49
\$20,000	\$1.36	\$1.36	\$1.36	\$1.36	\$1.88	\$3.24	\$5.62	\$9.18	\$14.46	\$22.44	\$32.98
\$30,000	\$2.04	\$2.04	\$2.04	\$2.04	\$2.82	\$4.86	\$8.43	\$13.77	\$21.69	\$33.66	\$49.47
\$40,000	\$2.72	\$2.72	\$2.72	\$2.72	\$3.76	\$6.48	\$11.24	\$18.36	\$28.92	\$44.88	\$65.96
\$50,000	\$3.40	\$3.40	\$3.40	\$3.40	\$4.70	\$8.10	\$14.05	\$22.95	\$36.15	\$56.10	\$82.45

Spouse Supplemental Life	
Monthly rates per \$1,000	
Age	Rates
Under 20	\$0.068
20-24	\$0.068
25-29	\$0.068
30-34	\$0.068
35-39	\$0.094
40-44	\$0.162
45-49	\$0.281
50-54	\$0.459
55-59	\$0.723
60-64	\$1.122
65+	\$1.649

Dependent Life (Children)		
Monthly Premium per Family		
Life	Premium	
\$2,000	\$0.18	
\$4,000	\$0.36	
\$6,000	\$0.54	
\$8,000	\$0.72	
\$10,000	\$0.90	

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