Guaranteed Issue Rates*

Monthly Premium for \$1,000 of Coverage (Non-Smoker)

Issue Age	Employee Only	Employee +Spouse	Employee +Children	Employee +Spouse/ Children
<25	\$0.30	\$0.58	\$0.63	\$0.91
25–29	\$0.30	\$0.60	\$0.63	\$0.93
30–34	\$0.38	\$0.75	\$0.71	\$1.08
35–39	\$0.50	\$1.00	\$0.83	\$1.33
40–44	\$0.70	\$1.44	\$1.03	\$1.77
45–49	\$0.93	\$1.97	\$1.26	\$2.30
50–54	\$1.19	\$2.60	\$1.52	\$2.93
55–59	\$1.44	\$3.22	\$1.77	\$3.55
60–64	\$1.66	\$3.73	\$1.99	\$4.06
65–69	\$1.69	\$3.85	\$2.02	\$4.18
70+	\$1.67	\$3.92	\$2.00	\$4.25

Monthly Premium for \$1,000 of Coverage (Smoker)

Issue Age	Employee Only	Employee +Spouse	Employee +Children	Employee +Spouse/ Children
<25	\$0.47	\$0.87	\$0.80	\$1.20
25–29	\$0.47	\$0.91	\$0.80	\$1.24
30–34	\$0.63	\$1.22	\$0.96	\$1.55
35–39	\$0.84	\$1.70	\$1.17	\$2.03
40–44	\$1.24	\$2.55	\$1.57	\$2.88
45–49	\$1.68	\$3.57	\$2.01	\$3.90
50–54	\$2.18	\$4.79	\$2.51	\$5.12
55–59	\$2.68	\$6.03	\$3.01	\$6.36
60–64	\$3.12	\$7.07	\$3.45	\$7.40
65–69	\$3.22	\$7.37	\$3.55	\$7.70
70+	\$3.18	\$7.54	\$3.51	\$7.87

^{*}Multiply the per \$1,000 rates shown above by the coverage amount factor applicable for the employee (e.g., 15 for \$15,000 of coverage) and round to two decimals to calculate rates for the quoted benefit amounts. Note that the per \$1,000 rates are only applicable to the benefit amounts shown in this C&B. Final implemented rates may vary slightly due to rounding.