



RIO VISTA ISD / TEEBC TRUST F021842 - 359

Eligibility

All Active Full Time Employees who regularly work 10 hours per week are eligible for insurance on the first of the month following their date of hire.

Supplemental Life and AD&D

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

Spouse Benefit: **\$5,000 to \$250,000 in \$5,000 increments.**
(not to exceed 50% of the employee benefit)

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

Child Coverage (Life Only)

Live Birth to Age 26: **\$10,000**

Guarantee Issue*

Employee **\$150,000 Under age 65, \$30,000 age 65-69**
Spouse **\$50,000 Under age 60, \$10,000 age 60-69**

*NEW HIRES ONLY

Employee: Life & AD&D benefits reduce by 50% of the original amount at age 70.
All benefits terminate at retirement.

Spouse: Benefits terminate at Employee's age 70.

**Employee/Spouse
Supplemental Life and AD&D**

Monthly rates per \$1,000

| Age | Rates |
|----------|---------|
| Under 20 | \$0.080 |
| 20-24 | \$0.080 |
| 25-29 | \$0.090 |
| 30-34 | \$0.110 |
| 35-39 | \$0.130 |
| 40-44 | \$0.180 |
| 45-49 | \$0.280 |
| 50-54 | \$0.440 |
| 55-59 | \$0.700 |
| 60-64 | \$0.870 |
| 65+ | \$1.490 |

Dependent Life (Children)

Monthly Premium per Family

| Life | Premium |
|----------|---------|
| \$10,000 | \$1.00 |

Supplemental Life and AD&D

Premium Cost (Based on 12 payroll deductions per year)

| Employee 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 | \$0.80 | \$0.80 | \$0.90 | \$1.10 | \$1.30 | \$1.80 | \$2.80 | \$4.40 | \$7.00 | \$8.70 | \$14.90 |
| \$20,000 | \$1.60 | \$1.60 | \$1.80 | \$2.20 | \$2.60 | \$3.60 | \$5.60 | \$8.80 | \$14.00 | \$17.40 | \$29.80 |
| \$30,000 | \$2.40 | \$2.40 | \$2.70 | \$3.30 | \$3.90 | \$5.40 | \$8.40 | \$13.20 | \$21.00 | \$26.10 | \$44.70 |
| \$40,000 | \$3.20 | \$3.20 | \$3.60 | \$4.40 | \$5.20 | \$7.20 | \$11.20 | \$17.60 | \$28.00 | \$34.80 | \$59.60 |
| \$50,000 | \$4.00 | \$4.00 | \$4.50 | \$5.50 | \$6.50 | \$9.00 | \$14.00 | \$22.00 | \$35.00 | \$43.50 | \$74.50 |
| \$60,000 | \$4.80 | \$4.80 | \$5.40 | \$6.60 | \$7.80 | \$10.80 | \$16.80 | \$26.40 | \$42.00 | \$52.20 | \$89.40 |
| \$70,000 | \$5.60 | \$5.60 | \$6.30 | \$7.70 | \$9.10 | \$12.60 | \$19.60 | \$30.80 | \$49.00 | \$60.90 | \$104.30 |
| \$80,000 | \$6.40 | \$6.40 | \$7.20 | \$8.80 | \$10.40 | \$14.40 | \$22.40 | \$35.20 | \$56.00 | \$69.60 | \$119.20 |
| \$90,000 | \$7.20 | \$7.20 | \$8.10 | \$9.90 | \$11.70 | \$16.20 | \$25.20 | \$39.60 | \$63.00 | \$78.30 | \$134.10 |
| \$100,000 | \$8.00 | \$8.00 | \$9.00 | \$11.00 | \$13.00 | \$18.00 | \$28.00 | \$44.00 | \$70.00 | \$87.00 | \$149.00 |
| \$110,000 | \$8.80 | \$8.80 | \$9.90 | \$12.10 | \$14.30 | \$19.80 | \$30.80 | \$48.40 | \$77.00 | \$95.70 | \$163.90 |
| \$120,000 | \$9.60 | \$9.60 | \$10.80 | \$13.20 | \$15.60 | \$21.60 | \$33.60 | \$52.80 | \$84.00 | \$104.40 | \$178.80 |
| \$130,000 | \$10.40 | \$10.40 | \$11.70 | \$14.30 | \$16.90 | \$23.40 | \$36.40 | \$57.20 | \$91.00 | \$113.10 | \$193.70 |
| \$140,000 | \$11.20 | \$11.20 | \$12.60 | \$15.40 | \$18.20 | \$25.20 | \$39.20 | \$61.60 | \$98.00 | \$121.80 | \$208.60 |
| \$150,000 | \$12.00 | \$12.00 | \$13.50 | \$16.50 | \$19.50 | \$27.00 | \$42.00 | \$66.00 | \$105.00 | \$130.50 | \$223.50 |

| Spouse (Employee Attained Age) | | | | | | | | | | | |
|--------------------------------|--------|--------|--------|--------|--------|--------|---------|---------|---------|---------|---------|
| Benefit Amount | <20 | 20-24 | 25-29 | 30-34 | 35-39 | 40-44 | 45-49 | 50-54 | 55-59 | 60-64 | 65+ |
| \$5,000 | \$0.40 | \$0.40 | \$0.45 | \$0.55 | \$0.65 | \$0.90 | \$1.40 | \$2.20 | \$3.50 | \$4.35 | \$7.45 |
| \$10,000 | \$0.80 | \$0.80 | \$0.90 | \$1.10 | \$1.30 | \$1.80 | \$2.80 | \$4.40 | \$7.00 | \$8.70 | \$14.90 |
| \$15,000 | \$1.20 | \$1.20 | \$1.35 | \$1.65 | \$1.95 | \$2.70 | \$4.20 | \$6.60 | \$10.50 | \$13.05 | \$22.35 |
| \$20,000 | \$1.60 | \$1.60 | \$1.80 | \$2.20 | \$2.60 | \$3.60 | \$5.60 | \$8.80 | \$14.00 | \$17.40 | \$29.80 |
| \$25,000 | \$2.00 | \$2.00 | \$2.25 | \$2.75 | \$3.25 | \$4.50 | \$7.00 | \$11.00 | \$17.50 | \$21.75 | \$37.25 |
| \$30,000 | \$2.40 | \$2.40 | \$2.70 | \$3.30 | \$3.90 | \$5.40 | \$8.40 | \$13.20 | \$21.00 | \$26.10 | \$44.70 |
| \$35,000 | \$2.80 | \$2.80 | \$3.15 | \$3.85 | \$4.55 | \$6.30 | \$9.80 | \$15.40 | \$24.50 | \$30.45 | \$52.15 |
| \$40,000 | \$3.20 | \$3.20 | \$3.60 | \$4.40 | \$5.20 | \$7.20 | \$11.20 | \$17.60 | \$28.00 | \$34.80 | \$59.60 |
| \$45,000 | \$3.60 | \$3.60 | \$4.05 | \$4.95 | \$5.85 | \$8.10 | \$12.60 | \$19.80 | \$31.50 | \$39.15 | \$67.05 |
| \$50,000 | \$4.00 | \$4.00 | \$4.50 | \$5.50 | \$6.50 | \$9.00 | \$14.00 | \$22.00 | \$35.00 | \$43.50 | \$74.50 |

Insurance products issued by Dearborn Life Insurance Company, 701 E. 22nd St. Suite 300, Lombard, IL 60148. Blue Cross and Blue Shield of Texas is the trade name of Dearborn Life Insurance Company, an independent licensee of the Blue Cross and Blue Shield Association. BLUE CROSS®, BLUE SHIELD® and the Cross and Shield Symbols are registered service marks of the Blue Cross and Blue Shield Association, an association of independent Blue Cross and Blue Shield Plans. Policy Provisions may vary by state. Refer to a certificate or enrollment brochure for details about coverage features and limitations.