



RATE SHEET

Rates shown are based on semimonthly deductions. Your payroll deductions will be taken after taxes are taken.



Critical Illness Plan*

You may enroll in one option only.

Payments per pay period - 18 pay periods in total

Non - Tobacco Rates

Employee Face Amount: \$10,000

Age Band	Yourself only	Yourself and spouse	Yourself plus child(ren)	Yourself and family
16-29	\$3.40	\$5.51	\$3.40	\$5.51
30-39	\$5.92	\$9.39	\$5.92	\$9.39
40-49	\$9.50	\$16.11	\$9.50	\$16.11
50-59	\$16.36	\$27.71	\$16.36	\$27.71
60-74	\$27.62	\$44.83	\$27.62	\$44.83

Employee Face Amount: \$20,000

Age Band	Yourself only	Yourself and spouse	Yourself plus child(ren)	Yourself and family
16-29	\$6.47	\$12.16	\$6.47	\$12.16
30-39	\$10.19	\$18.97	\$10.19	\$18.97
40-49	\$17.25	\$28.57	\$17.25	\$28.57
50-59	\$31.01	\$51.83	\$31.01	\$51.83
60-74	\$53.65	\$86.30	\$53.65	\$86.30

Tobacco Rates

Employee Face Amount: \$10,000

Age Band	Yourself only	Yourself and spouse	Yourself plus child(ren)	Yourself and family
16-29	\$4.95	\$7.83	\$4.95	\$7.83
30-39	\$8.85	\$14.27	\$8.85	\$14.27
40-49	\$14.82	\$24.67	\$14.82	\$24.67
50-59	\$26.42	\$44.27	\$26.41	\$44.27
60-74	\$45.49	\$73.30	\$45.48	\$73.30

Employee Face Amount: \$20,000

Age Band	Yourself only	Yourself and spouse	Yourself plus child(ren)	Yourself and family
16-29	\$9.88	\$18.14	\$9.88	\$18.14
30-39	\$16.05	\$29.39	\$16.05	\$29.39
40-49	\$27.87	\$45.66	\$27.87	\$45.66
50-59	\$51.09	\$84.91	\$51.09	\$84.91
60-74	\$89.34	\$143.19	\$89.34	\$143.19

*Rates are based on your (the subscriber's) current age.