

Employee Monthly Cost – Rate Schedule

Accident Plan

	Plan 1 (Low Option)	Plan 2 (High Option)
Employee Only	\$6.13	\$9.53
Employee & Spouse	\$10.55	\$16.38
Employee & Children	\$12.42	\$18.91
Family	\$16.59	\$25.28

Hospitalization Plan

	Plan 1 (Low Option)	Plan 2 (High Option)
Employee Only	\$12.38	\$22.47
Employee & Spouse	\$27.66	\$49.82
Employee & Children	\$20.67	\$37.00
Family	\$34.45	\$61.80

Critical Illness Plan

(Age-Banded Rates)*

Plan 1: \$10,000 Face Amount (non-tobacco)					Plan 2: \$20,000 Face Amount (non-tobacco)			
Age Band	Employee Only	EE & Spouse	EE Children	Family	Employee Only	EE & Spouse	EE Children	Family
<20	\$2.03	\$3.39	\$2.03	\$3.39	\$2.81	\$4.51	\$2.81	\$4.51
20-24	\$2.32	\$3.83	\$2.32	\$3.83	\$3.39	\$5.39	\$3.39	\$5.39
25-29	\$2.88	\$4.67	\$2.88	\$4.67	\$4.52	\$7.09	\$4.52	\$7.09
30-34	\$3.64	\$5.81	\$3.64	\$5.81	\$6.04	\$9.36	\$6.04	\$9.36
35-39	\$4.79	\$7.54	\$4.79	\$7.54	\$8.34	\$12.82	\$8.34	\$12.82
40-44	\$6.79	\$10.54	\$6.79	\$10.54	\$12.34	\$18.81	\$12.34	\$18.81
45-49	\$9.98	\$15.32	\$9.98	\$15.32	\$18.71	\$28.39	\$18.71	\$28.39
50-54	\$14.90	\$22.70	\$14.90	\$22.70	\$28.55	\$43.15	\$28.55	\$43.15
55-59	\$22.11	\$33.53	\$22.11	\$33.53	\$42.98	\$64.80	\$42.98	\$64.80
60-64	\$31.32	\$47.34	\$31.32	\$47.34	\$61.39	\$92.43	\$61.39	\$92.43
65-69	\$42.14	\$63.58	\$42.14	\$63.58	\$83.04	\$124.91	\$83.04	\$124.91
70+	\$52.38	\$78.95	\$52.38	\$78.95	\$103.52	\$155.64	\$103.5	\$155.64

*Rates for the Critical Illness Plan are subject to tobacco and non-tobacco rates.