

Monthly (12) Premium Rates

Non - Tobacco

Premium per \$1,000 of Coverage

Issue Age	Employee Only	Employee + Spouse	Employee + Child(ren)	Employee + Spouse and Child(ren)
<31	\$0.50	\$0.80	\$0.66	\$0.96
31 - 40	\$0.79	\$1.24	\$0.95	\$1.40
41 - 50	\$1.59	\$2.47	\$1.76	\$2.63
51 - 60	\$2.78	\$4.27	\$2.95	\$4.44
61+	\$4.60	\$7.03	\$4.77	\$7.19

Tobacco

Premium per \$1,000 of Coverage

Issue Age	Employee Only	Employee + Spouse	Employee + Child(ren)	Employee + Spouse and Child(ren)
<31	\$0.68	\$1.07	\$0.85	\$1.24
31 - 40	\$1.21	\$1.86	\$1.37	\$2.03
41 - 50	\$2.63	\$4.03	\$2.80	\$4.19
51 - 60	\$4.74	\$7.23	\$4.90	\$7.39
61+	\$7.87	\$11.97	\$8.03	\$12.13

Rates will increase when a Covered Person reaches a new age band. Rates are subject to change.