# SUPPLEMENTAL GROUP LIFE AND AD&D

**PREMIUM RATE GRID** 



# EGYPTIAN AREA SCHOOLS EMPLOYEE BENEFIT TRUST

## **Eligibility**

You are eligible to enroll if you work the minimum number of hours per week by your employer, and you have satisfied any waiting period.

## Supplemental Life/AD&D Insurance

Options of \$10,000 - \$25,000 - \$50,000 - \$75,000 - \$100,000 or Employee Benefit:

\$10,000 increments to a maximum of \$500,000, not to exceed 5 times

annual salary

Spouse Benefit: \$5,000 to \$250,000, in increments of \$2,500,

not to exceed 50% of the employee benefit

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

**Guarantee Issue** 

\$ 100,000 (Under age 60) Employee \$ 37,500 (Under age 60) Spouse

Child Coverage (Life coverage only)

Live birth to 14 days: \$0

15 days to age 19 (25 if full-time student) \$5,000 or \$10,000

Life/AD&D benefits reduce by 50% of the original amount at age 70.

EMPLOYE	EMPLOYEE & SPOUSE									
Suppleme	ntal Life/AD&D									
Monthly rates per \$1,000										
Age	Rates									
Under 20	\$0.085									
20-24	\$0.085									
25-29	\$0.095									
30-34	\$0.105									
35-39	\$0.135									
40-44	\$0.195									
45-49	\$0.305									
50-54	\$0.495									
55-59	\$0.795									
60-64	\$0.985									
65-69	\$1.685									
70-74	\$1.685									
75+	\$1.685									
Dependent	Life (Children)									
Monthly Pre	mium per Family									

\$5,000 \$0.47 \$10,000 \$0.94

### **EMPLOYEE - Supplemental Life/AD&D Insurance**

Monthly Premium Cost (Based on 12 payroll deductions per year)

Benefit		ATTAINED AGE										
Amount	<20	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74
\$10,000	\$0.8	5 \$0.85	\$0.95	\$1.05	\$1.35	\$1.95	\$3.05	\$4.95	\$7.95	\$9.85	\$16.85	\$16.85
\$25,000	\$2.1	3 \$2.13	\$2.38	\$2.63	\$3.38	\$4.88	\$7.63	\$12.38	\$19.88	\$24.63	\$42.13	\$42.13
\$50,000	\$4.2	5 \$4.25	\$4.75	\$5.25	\$6.75	\$9.75	\$15.25	\$24.75	\$39.75	\$49.25	\$84.25	\$84.25
\$75,000	\$6.3	8 \$6.38	\$7.13	\$7.88	\$10.13	\$14.63	\$22.88	\$37.13	\$59.63	\$73.88	\$126.38	\$126.38
\$100,000	\$8.5	0 \$8.50	\$9.50	\$10.50	\$13.50	\$19.50	\$30.50	\$49.50	\$79.50	\$98.50	\$168.50	\$168.50

SPOUSE - Supplemental Life/AD&D Insurance

Benefit Amount		ATTAINED AGE										
	<20	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74
\$5,000	\$0.43	\$0.43	\$0.48	\$0.53	\$0.68	\$0.98	\$1.53	\$2.48	\$3.98	\$4.93	\$8.43	\$8.43
\$10,000	\$0.85	\$0.85	\$0.95	\$1.05	\$1.35	\$1.95	\$3.05	\$4.95	\$7.95	\$9.85	\$16.85	\$16.85
\$25,000	\$2.13	\$2.13	\$2.38	\$2.63	\$3.38	\$4.88	\$7.63	\$12.38	\$19.88	\$24.63	\$42.13	\$42.13
\$30,000	\$2.55	\$2.55	\$2.85	\$3.15	\$4.05	\$5.85	\$9.15	\$14.85	\$23.85	\$29.55	\$50.55	\$50.55
\$35,000	\$2.98	\$2.98	\$3.33	\$3.68	\$4.73	\$6.83	\$10.68	\$17.33	\$27.83	\$34.48	\$58.98	\$58.98
\$37,500	\$3.19	\$3.19	\$3.56	\$3.94	\$5.06	\$7.31	\$11.44	\$18.56	\$29.81	\$36.94	\$63.19	\$63.19

For internal use only: Policy number FDL1-504-707

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