

HOOD COUNTY - #FHM912670

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.

Voluntary Life Insurance

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

Spouse Benefit: **\$10,000 - \$500,000 in \$10,000 increments.**

Guarantee Issue*

	Under age 60	Age 60-69	Age 70 and over
Employee	\$ 100,000	\$ 20,000	Fully Underwritten
Spouse	\$ 20,000	\$ 20,000	Fully Underwritten

* NEW EMPLOYEES ONLY

Child Coverage

Ages 15 days to 6 months: **\$100**
 Ages 6 months to 19 years: **\$5,000 or \$10,000**
 (23 years if full time student)

Voluntary AD&D Insurance

Benefits from \$10,000 to \$500,000 in \$10,000 increments.

The Individual Plan covers you in the event of accidental death or dismemberment.

The Family Plan covers you, your spouse and your eligible dependent children.

The spouse benefit is equal to 50% of your benefit and the child benefit is 10% of your benefit.

Voluntary Life	
Monthly rates per \$1,000	
Age	Rates
Under 30	\$0.090
30-34	\$0.090
35-39	\$0.130
40-44	\$0.220
45-49	\$0.320
50-54	\$0.540
55-59	\$0.920
60-64	\$1.450
65-69	\$2.270
70-74	\$3.620
75 and over	\$6.420
Voluntary AD&D	
Monthly rates per \$1,000	
Individual Plan	\$0.050
Family Plan	\$0.080
Dependent Life (Children)	
Monthly rates per Family	
\$5,000	\$1.00
\$10,000	\$2.00

Voluntary Life Insurance

Semi Monthly Premium Cost (Based on 24 payroll deductions per year)

Benefit Amount	VAD&D		ATTAINED AGE											
	IND	FAM	<30	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75+	
\$10,000	\$0.25	\$0.40	\$ 0.45	\$ 0.45	\$ 0.65	\$ 1.10	\$ 1.60	\$ 2.70	\$ 4.60	\$ 7.25	\$ 11.35	\$ 18.10	\$ 32.10	
\$20,000	\$0.50	\$0.80	\$0.90	\$0.90	\$1.30	\$2.20	\$3.20	\$5.40	\$9.20	\$14.50	\$22.70	\$36.20	\$64.20	
\$30,000	\$0.75	\$1.20	\$1.35	\$1.35	\$1.95	\$3.30	\$4.80	\$8.10	\$13.80	\$21.75	\$34.05	\$54.30	\$96.30	
\$40,000	\$1.00	\$1.60	\$1.80	\$1.80	\$2.60	\$4.40	\$6.40	\$10.80	\$18.40	\$29.00	\$45.40	\$72.40	\$128.40	
\$50,000	\$1.25	\$2.00	\$2.25	\$2.25	\$3.25	\$5.50	\$8.00	\$13.50	\$23.00	\$36.25	\$56.75	\$90.50	\$160.50	
\$60,000	\$1.50	\$2.40	\$2.70	\$2.70	\$3.90	\$6.60	\$9.60	\$16.20	\$27.60	\$43.50	\$68.10	\$108.60	\$192.60	
\$70,000	\$1.75	\$2.80	\$3.15	\$3.15	\$4.55	\$7.70	\$11.20	\$18.90	\$32.20	\$50.75	\$79.45	\$126.70	\$224.70	
\$80,000	\$2.00	\$3.20	\$3.60	\$3.60	\$5.20	\$8.80	\$12.80	\$21.60	\$36.80	\$58.00	\$90.80	\$144.80	\$256.80	
\$90,000	\$2.25	\$3.60	\$4.05	\$4.05	\$5.85	\$9.90	\$14.40	\$24.30	\$41.40	\$65.25	\$102.15	\$162.90	\$288.90	
\$100,000	\$2.50	\$4.00	\$4.50	\$4.50	\$6.50	\$11.00	\$16.00	\$27.00	\$46.00	\$72.50	\$113.50	\$181.00	\$321.00	
\$110,000	\$2.75	\$4.40	\$4.95	\$4.95	\$7.15	\$12.10	\$17.60	\$29.70	\$50.60	\$79.75	\$124.85	\$199.10	\$353.10	
\$120,000	\$3.00	\$4.80	\$5.40	\$5.40	\$7.80	\$13.20	\$19.20	\$32.40	\$55.20	\$87.00	\$136.20	\$217.20	\$385.20	
\$130,000	\$3.25	\$5.20	\$5.85	\$5.85	\$8.45	\$14.30	\$20.80	\$35.10	\$59.80	\$94.25	\$147.55	\$235.30	\$417.30	
\$140,000	\$3.50	\$5.60	\$6.30	\$6.30	\$9.10	\$15.40	\$22.40	\$37.80	\$64.40	\$101.50	\$158.90	\$253.40	\$449.40	
\$150,000	\$3.75	\$6.00	\$6.75	\$6.75	\$9.75	\$16.50	\$24.00	\$40.50	\$69.00	\$108.75	\$170.25	\$271.50	\$481.50	
\$200,000	\$5.00	\$8.00	\$9.00	\$9.00	\$13.00	\$22.00	\$32.00	\$54.00	\$92.00	\$145.00	\$227.00	\$362.00	\$642.00	
\$250,000	\$6.25	\$10.00	\$11.25	\$11.25	\$16.25	\$27.50	\$40.00	\$67.50	\$115.00	\$181.25	\$283.75	\$452.50	\$802.50	
\$300,000	\$7.50	\$12.00	\$13.50	\$13.50	\$19.50	\$33.00	\$48.00	\$81.00	\$138.00	\$217.50	\$340.50	\$543.00	\$963.00	
\$350,000	\$8.75	\$14.00	\$15.75	\$15.75	\$22.75	\$38.50	\$56.00	\$94.50	\$161.00	\$253.75	\$397.25	\$633.50	\$1,123.50	
\$400,000	\$10.00	\$16.00	\$18.00	\$18.00	\$26.00	\$44.00	\$64.00	\$108.00	\$184.00	\$290.00	\$454.00	\$724.00	\$1,284.00	
\$450,000	\$11.25	\$18.00	\$20.25	\$20.25	\$29.25	\$49.50	\$72.00	\$121.50	\$207.00	\$326.25	\$510.75	\$814.50	\$1,444.50	
\$500,000	\$12.50	\$20.00	\$22.50	\$22.50	\$32.50	\$55.00	\$80.00	\$135.00	\$230.00	\$362.50	\$567.50	\$905.00	\$1,605.00	

Additional benefit amounts are available in \$10,000 increments to a maximum of \$500,000

Policy Provisions may vary by state. Refer to a certificate or enrollment brochure for details about coverage features and limitations. For internal use only: Policy number FDL1-504-707

Vlife/blend-w/add/24