

## Employee Weekly Rates



### Allstate Medical

	Plan 1	Plan 2	Plan 3 HSA
<b>Employee</b>	<b>\$45.41</b>	<b>\$49.77</b>	<b>\$39.06</b>
<b>Employee + Spouse</b>	<b>\$104.44</b>	<b>\$114.48</b>	<b>\$89.82</b>
<b>Employee + Child(ren)</b>	<b>\$82.28</b>	<b>\$94.57</b>	<b>\$74.20</b>
<b>Family</b>	<b>\$208.89</b>	<b>\$228.96</b>	<b>\$179.65</b>

### Colonial Medical Bridge Insurance (No Deductibles)

#### Individual Medical Bridge for TN

Applicable to policy form Individual Medical Bridge

- \$1500 Hospital Confinement Benefit and Outpatient Surgical Procedure Benefit with a calendar year maximum of \$4500, Diagnostic Procedure Benefit, \$100 Health Screening Benefit. Enhanced Intensive Care Unit Confinement benefit

ISSUE AGE	EMPLOYEE	EMPLOYEE AND SPOUSE	EMPLOYEE AND DEPENDENT CHILDREN	EMPLOYEE, SPOUSE AND DEPENDENT CHILDREN
17-49	\$13.07	\$24.62	\$16.35	\$27.88
50-59	\$17.16	\$32.28	\$20.44	\$35.56
60-64	\$21.03	\$39.72	\$24.31	\$43.00
65-75	\$25.48	\$48.15	\$28.76	\$51.43

#### Individual Medical Bridge for TN

Applicable to policy form Individual Medical Bridge

- \$1500 Hospital Confinement Benefit and Outpatient Surgical Procedure Benefit with a calendar year maximum of \$4500, Diagnostic Procedure Benefit, Medical Treatment Package, \$100 Health Screening Benefit.

ISSUE AGE	EMPLOYEE	EMPLOYEE AND SPOUSE	EMPLOYEE AND DEPENDENT CHILDREN	EMPLOYEE, SPOUSE AND DEPENDENT CHILDREN
17-49	\$12.85	\$24.19	\$17.45	\$28.77
50-59	\$16.92	\$31.81	\$21.51	\$36.41
60-64	\$20.95	\$39.58	\$25.55	\$44.17
65-75	\$25.83	\$48.81	\$30.42	\$53.40

### Unum Vision

<b>Employee</b>	<b>\$1.55</b>
<b>Employee + Spouse</b>	<b>\$3.10</b>
<b>Employee + Child(ren)</b>	<b>\$3.47</b>
<b>Family</b>	<b>\$5.43</b>

### Colonial Short Term Disability 3 Month Benefit 0/14

Issue Age	\$2,000	\$3,000	\$4,000
17-49	\$12.78	\$19.18	\$25.57
50-64	\$15.55	\$23.33	\$31.11
65-74	\$19.80	\$29.70	\$39.60

### Unum Long Term Disability 5 Year Max or Social Security Age 90 Day Elimination

Issue Age	\$2,000.00	\$3,000.00	\$4,000.00
30-34	\$1.20	\$1.80	\$2.40
35-39	\$1.75	\$2.63	\$3.50
40-44	\$2.95	\$4.43	\$5.91
45-49	\$4.15	\$6.23	\$8.30
50-54	\$6.23	\$9.34	\$12.46
55-59	\$9.69	\$14.54	\$19.38
60-64	\$15.09	\$22.64	\$30.18

### Colonial Accident Insurance

	Preferred	Premier
Employee	\$5.28	\$6.15
Employee + Spouse	\$8.95	\$10.40
Employee + Child(ren)	\$9.91	\$11.82
Family	\$13.58	\$16.08

### Colonial Critical Illness Insurance

#### Non-Tobacco Rates

	ISSUE AGE	NAMED INSURED	EMPLOYEE & SPOUSE	ONE-PARENT FAMILY	TWO-PARENT FAMILY
\$10,000	17-24	\$1.45	\$2.19	\$1.82	\$2.58
	25-29	\$1.93	\$2.95	\$2.30	\$3.32
	30-34	\$2.46	\$3.76	\$2.83	\$4.15
	35-39	\$3.27	\$5.03	\$3.66	\$5.40
	40-44	\$3.94	\$6.04	\$4.31	\$6.41
	45-49	\$5.18	\$7.94	\$5.55	\$8.33
	50-54	\$7.26	\$11.14	\$7.65	\$11.54
	55-59	\$8.99	\$13.82	\$9.38	\$14.21
	60-64	\$11.99	\$18.44	\$12.38	\$18.81
	65-70	\$13.31	\$20.44	\$13.70	\$20.81

#### Tobacco Rates

	ISSUE AGE	NAMED INSURED	EMPLOYEE & SPOUSE	ONE-PARENT FAMILY	TWO-PARENT FAMILY
\$10,000	17-24	\$1.84	\$2.81	\$2.23	\$3.21
	25-29	\$2.65	\$4.04	\$3.02	\$4.43
	30-34	\$3.66	\$5.63	\$4.05	\$6.02
	35-39	\$4.98	\$7.61	\$5.35	\$8.01
	40-44	\$6.22	\$9.55	\$6.62	\$9.94
	45-49	\$8.02	\$12.34	\$8.42	\$12.71
	50-54	\$11.05	\$16.96	\$11.44	\$17.35
	55-59	\$14.12	\$21.69	\$14.51	\$22.06
	60-64	\$18.18	\$27.90	\$18.55	\$28.29
	65-70	\$20.30	\$31.18	\$20.67	\$31.57

## Colonial Level Term Life

- 20-Year Term Base Plan, Waiver of Premium Benefit, Accidental Death Benefit

*Non-Tobacco Rates*

ISSUE AGE	\$50,000	\$100,000	\$150,000	\$200,000	\$250,000
30	\$3.54	\$6.18	\$8.80	\$9.69	\$11.19
40	\$4.74	\$8.56	\$12.37	\$12.08	\$14.17
50	\$9.08	\$17.27	\$25.44	\$23.27	\$28.16
60	\$17.53	\$34.15	\$50.76	\$46.92	\$57.73

*Tobacco Rates*

ISSUE AGE	\$50,000	\$100,000	\$150,000	\$200,000	\$250,000
30	\$5.31	\$9.72	\$14.11	\$14.27	\$16.91
40	\$7.98	\$15.04	\$22.09	\$19.96	\$24.03
50	\$18.39	\$35.89	\$53.36	\$47.81	\$58.83
60	\$35.26	\$69.61	\$103.95	\$93.38	\$115.80

## Colonial WholeLife

- Adult Base Plan Paid-Up at Age 100, Accidental Death Benefit, Waiver of Premium Benefit

*Non-Tobacco Rates*

ISSUE AGE	\$20,000	\$30,000	\$40,000	\$50,000
25	\$4.71	\$7.05	\$9.41	\$11.76
35	\$6.28	\$9.42	\$12.55	\$15.69
45	\$9.85	\$14.77	\$19.69	\$24.61
55	\$16.64	\$24.96	\$33.27	\$41.59
65	\$27.02	\$40.53	\$54.05	\$67.55

- Adult Base Plan Paid-Up at Age 100, Accidental Death Benefit, Waiver of Premium Benefit

*Tobacco Rates*

ISSUE AGE	\$20,000	\$30,000	\$40,000	\$50,000
25	\$7.87	\$11.80	\$15.75	\$19.68
35	\$9.52	\$14.28	\$19.05	\$23.81
45	\$14.10	\$21.15	\$28.21	\$35.26
55	\$24.31	\$36.46	\$48.61	\$60.76
65	\$39.10	\$58.64	\$78.20	\$97.74

