

Additional Coverage Rates

GROUP CRITICAL ILLNESS

(Rate is based on your age as of your enrollment effective date. If you drop coverage and later enroll in a different age band, the new age band rates will apply)

| Bi-Weekly | | | |
|--------------|--------------------|---------|---------|
| Age | Tier Level | \$15k | \$30k |
| 18 – 29 | EMP, EMP/Child | \$2.53 | \$4.30 |
| | EMP/Spouse, Family | \$3.79 | \$6.47 |
| 30 – 35 | EMP, EMP/Child | \$3.10 | \$5.38 |
| | EMP/Spouse, Family | \$4.60 | \$8.01 |
| 36 – 39 | EMP, EMP/Child | \$4.85 | \$8.88 |
| | EMP/Spouse, Family | \$7.26 | \$13.26 |
| 40 – 50 | EMP, EMP/Child | \$7.06 | \$13.27 |
| | EMP/Spouse, Family | \$10.34 | \$19.41 |
| 51 – 60 | EMP, EMP/Child | \$12.43 | \$24.03 |
| | EMP/Spouse, Family | \$18.18 | \$35.12 |
| 61 – 70 | EMP, EMP/Child | \$21.85 | \$42.90 |
| | EMP/Spouse, Family | \$31.78 | \$62.38 |
| 71 and above | EMP, EMP/Child | \$24.64 | \$48.00 |
| | EMP/Spouse, Family | \$36.00 | \$70.27 |

| Monthly | | | |
|--------------|--------------------|---------|----------|
| Age | Tier Level | \$15k | \$30k |
| 18 – 29 | EMP, EMP/Child | \$5.48 | \$9.32 |
| | EMP/Spouse, Family | \$8.21 | \$14.02 |
| 30 – 35 | EMP, EMP/Child | \$6.72 | \$11.65 |
| | EMP/Spouse, Family | \$9.96 | \$17.36 |
| 36 – 39 | EMP, EMP/Child | \$10.51 | \$19.24 |
| | EMP/Spouse, Family | \$15.73 | \$28.74 |
| 40 – 50 | EMP, EMP/Child | \$15.29 | \$28.75 |
| | EMP/Spouse, Family | \$22.40 | \$42.05 |
| 51 – 60 | EMP, EMP/Child | \$26.93 | \$52.06 |
| | EMP/Spouse, Family | \$39.39 | \$76.09 |
| 61 – 70 | EMP, EMP/Child | \$47.34 | \$92.94 |
| | EMP/Spouse, Family | \$68.86 | \$135.15 |
| 71 and above | EMP, EMP/Child | \$53.38 | \$104.00 |
| | EMP/Spouse, Family | \$77.99 | \$152.25 |

GROUP ACCIDENT

| Tier Level | Bi-Weekly Rate | Monthly Rate |
|------------|----------------|--------------|
| EMP | \$4.09 | \$8.86 |
| EMP/Child | \$7.56 | \$16.37 |
| EMP/Spouse | \$7.11 | \$15.41 |
| Family | \$10.19 | \$22.07 |

ID THEFT

| Tier Level | Bi-Weekly Rate | Monthly Rate |
|------------|----------------|--------------|
| EMP | \$4.59 | \$9.95 |
| Family | \$8.28 | \$17.95 |

HOSPITAL INDEMNITY (stand-alone coverage)

| Tier Level | Bi-Weekly Rate | Monthly Rate |
|------------|----------------|--------------|
| EMP | \$4.38 | \$9.48 |
| EMP + 1 | \$9.11 | \$19.74 |
| Family | \$11.44 | \$24.78 |

PET INSURANCE

| Bi-Weekly Rate | Monthly Rate |
|----------------|--------------|
| \$4.15 | \$9.00 |

Additional Coverage Rates

– Continued –

PERSONAL ACCIDENT INSURANCE

(You may not elect a coverage amount that is greater than 10x your base salary)

| Coverage Amount | Tier Level | Bi-Weekly Rate | Monthly Rate |
|-----------------|------------|----------------|--------------|
| \$25,000 | EMP | \$0.12 | \$0.24 |
| | Family | \$0.18 | \$0.39 |
| \$50,000 | EMP | \$0.22 | \$0.47 |
| | Family | \$0.36 | \$0.78 |
| \$100,000 | EMP | \$0.43 | \$0.93 |
| | Family | \$0.72 | \$1.55 |
| \$200,000 | EMP | \$0.86 | \$1.86 |
| | Family | \$1.44 | \$3.10 |
| \$300,000 | EMP | \$1.29 | \$2.79 |
| | Family | \$2.15 | \$4.65 |
| \$400,000 | EMP | \$1.72 | \$3.72 |
| | Family | \$2.87 | \$6.20 |
| \$500,000 | EMP | \$2.15 | \$4.65 |
| | Family | \$3.58 | \$7.75 |
| \$1,000,000 | EMP | \$4.30 | \$9.30 |
| | Family | \$7.16 | \$15.50 |

LTD BUY-UP

(Maximum covered salary for the Buy-up option is \$300,000 – base salary only)

Cost: \$0.157 per \$100 covered salary/month

EXAMPLE

Annual Base Salary
\$50,000

Monthly Base Salary
 $\$4,166.67 \div 100 = \41.67

Monthly Cost
 $\$41.67 \times \$0.157 = \$6.54$