

Current 2017 Monthly Rates (Non-tobacco/Tobacco)

Members may apply for coverage between \$50,000 and \$1,000,000 in increments of \$50,000.

Spouses are eligible for coverage between \$25,000 and \$1,000,000 in increments of \$25,000 (not to exceed member's coverage amount).

Age	\$1,000,000	\$750,000	\$500,000	\$400,000	\$300,000	\$250,000	\$100,000	\$50,000	\$25,000
Less than 30	\$ 1.67	\$ 1.25	\$ 0.83	\$ 0.67	\$ 0.50	\$ 0.42	\$ 0.17	\$ 0.08	\$ 0.04
30	1.67	1.25	0.83	0.67	0.50	0.42	0.17	0.08	0.04
31	1.67	1.25	0.83	0.67	0.50	0.42	0.17	0.08	0.04
32	1.67	1.25	0.83	0.67	0.50	0.42	0.17	0.08	0.04
33	1.67	1.25	0.83	0.67	0.50	0.42	0.17	0.08	0.04
34	1.67	1.25	0.83	0.67	0.50	0.42	0.17	0.08	0.04
35	1.67	1.25	0.83	0.67	0.50	0.42	0.17	0.13	0.06
36	1.67	1.25	0.83	0.67	0.50	0.42	0.17	0.13	0.06
37	1.67	1.25	0.83	0.67	0.50	0.42	0.17	0.13	0.06
38	2.50	1.88	1.25	1.00	0.75	0.63	0.25	0.13	0.06
39	3.33	2.50	1.67	1.33	1.00	0.83	0.33	0.13	0.06
40	4.17	3.13	2.08	1.67	1.25	1.04	0.42	0.42	0.21
41	5.00	3.75	2.50	2.00	1.50	1.25	0.50	0.42	0.21
42	6.67	5.00	3.33	2.67	2.00	1.67	0.67	0.42	0.21
43	7.50	5.63	3.75	3.00	2.25	1.88	0.75	0.42	0.21
44	9.17	6.88	4.58	3.67	2.75	2.29	0.92	0.42	0.21
45	10.00	7.50	5.00	4.00	3.00	2.50	1.00	0.88	0.44
46	11.67	8.75	5.83	4.67	3.50	2.92	1.17	0.88	0.44
47	13.33	10.00	6.67	5.33	4.00	3.33	1.33	0.88	0.44
48	15.83	11.88	7.92	6.33	4.75	3.96	1.58	0.88	0.44
49	20.00	15.00	10.00	8.00	6.00	5.00	2.00	0.88	0.44
50	24.17	18.13	12.08	9.67	7.25	6.04	2.42	1.96	0.98
51	28.33	21.25	14.17	11.33	8.50	7.08	2.83	1.96	0.98
52	33.33	25.00	16.67	13.33	10.00	8.33	3.33	1.96	0.98
53	36.67	27.50	18.33	14.67	11.00	9.17	3.67	1.96	0.98
54	40.83	30.63	20.42	16.33	12.25	10.21	4.08	1.96	0.98
55	45.83	34.38	22.92	18.33	13.75	11.46	4.58	3.42	1.71
56	50.83	38.13	25.42	20.33	15.25	12.71	5.08	3.42	1.71
57	57.50	43.13	28.75	23.00	17.25	14.38	5.75	3.42	1.71
58	62.50	46.88	31.25	25.00	18.75	15.63	6.25	3.42	1.71
59	68.33	51.25	34.17	27.33	20.50	17.08	6.83	3.42	1.71
60	73.33	55.00	36.67	29.33	22.00	18.33	7.33	5.58	2.79
61	78.33	58.75	39.17	31.33	23.50	19.58	7.83	5.58	2.79
62	83.33	62.50	41.67	33.33	25.00	20.83	8.33	5.58	2.79
63	99.17	74.38	49.58	39.67	29.75	24.79	9.92	5.58	2.79
64	120.00	90.00	60.00	48.00	36.00	30.00	12.00	5.58	2.79
65*	158.33	118.75	79.17	63.33	47.50	39.58	15.83	14.88	7.44
66*	207.50	155.63	103.75	83.00	62.25	51.88	20.75	14.88	7.44
67*	271.67	203.75	135.83	108.67	81.50	67.92	27.17	14.88	7.44
68*	319.17	239.38	159.58	127.67	95.75	79.79	31.92	14.88	7.44
69*	375.00	281.25	187.50	150.00	112.50	93.75	37.50	14.88	7.44

For rates for coverage amounts not shown, contact the Plan Administrator at 1-800-622-0344.

*For renewal only.