

SUPPLEMENTAL PREMIUM MONTHLY RATES

Choose a Plan as a New Employee, During Open Enrollment, and with a Qualifying Status Change

Accident		Brochure	Plan Code	Employee Only	Employee +Spouse	Employee +Child(ren)	Family
Helps you pay the following types of expenses when injured during a covered accident: - Expensive medical treatment for broken bones and dislocations or physical therapy. - Crutches, wheelchairs, or other medical aids you may need as a result of your accident. - Copays and deductibles.			Colonial Life	5002	\$18.00	24.00	\$30.00 \$36.00

Cancer	Brochure	Plan Code	Employee Only	Employee +Child(ren)	Family
- Cancer diagnosis and treatment, including certain screening tests. - Procedures and treatments you may require to care for your cancer. - Optional Aflac riders: BBR = Building Benefit Rider SDR = Specified-Disease Benefit		Aflac*	Level 1 (6500)	\$18.70	\$21.70 \$30.50
		+ SDR (6501)	\$19.70	\$23.20 \$32.50	
		+ BBR (6502)	\$20.50	\$24.40 \$34.40	
		+ BBR + SDR (6503)	\$21.50	\$25.90 \$36.40	
		Level 3 (6510)	\$33.50	\$40.20 \$55.90	
		+ SDR (6511)	\$34.50	\$41.70 \$57.90	
		+ BBR (6512)	\$36.50	\$44.70 \$62.40	
		+ SDR + BBR (6513)	\$37.50	\$46.20 \$64.40	
			Colonial Life	6601	\$12.50

Short-Term Disability	Brochure	Plan Code	3 Months	6 Months	12 Months
Helps supplement your income to help you pay the following expenses: - Copayments and health costs not covered under other plans. - Food, clothing, and other necessities. - Mortgage or rent payments, utility bills, and other household expenses. - Travel and lodging expenses for treatment.		Colonial Life	5020	\$11.25-121.50	\$10.50-169.50 \$14.25-225.00
		Premiums based on age band, coverage amount, and benefit period selected.			

Hospitalization	Brochure	Plan Code	Single	Family
Daily cash payments when you are hospitalized: - Cigna offers limited hospital facility coverage. - Additional Cigna options are Plan Codes 8110 + 8130, 8110 + 8140, 8100 + 8130, and 8100 + 8140. - New Era offers in-hospital confinement, convalescent care facility, hospice care, extended care facility, and ambulatory surgical center.		Cigna*	30/20 Plus (8110)	\$27.12-121.00 \$63.98-242.00
		Age 18-79	PPP (8100)	\$14.96-65.46 \$35.12-130.92
		SIS (8120)	\$14.14-78.48 \$33.38-156.98	
		365+ \$100 (8130)	\$ 3.66-20.42 \$ 8.70-40.88	
		365+ \$250 (8140)	\$11.80-65.42 \$27.84-130.86	
		365+ \$300 (8150)	\$19.86-110.16 \$46.88-220.34	
		New Era*		Single + One Dependent + Two or More
		8160	\$ 9.58 \$19.20 \$25.18	
		8180	\$12.92 \$25.86 \$32.72	
		8170	\$20.36 \$40.60 \$53.52	

Hospital Intensive Care	Plan Name	Plan Code	Individual	Family
Daily benefit for confinement in a hospital intensive care or a sub-acute intensive care unit.		Aflac*	7000	\$ 8.70 \$16.64

* Aflac and Cigna through Capital Insurance Agency. New Era through State Securities Corp.