

Premium rates for 24 pay periods

Refer the following rate tables for premium rates for your accident, critical illness, hospital indemnity and life insurance benefits

Accident Insurance

Coverage type	Premium per employee
Employee only	\$4.51
Employee + Spouse	\$7.55
Employee + Child(ren)	\$11.26
Employee + Family	\$15.95

Critical Illness Insurance

\$5,000 of coverage

Age	Employee	Employee + Spouse	Employee + Child(ren)	Employee + Family
Under 26	\$2.27	\$4.27	\$2.27	\$4.27
26-30	2.46	4.78	2.46	4.78
31-35	2.82	5.37	2.82	5.37
36-40	3.29	6.32	3.29	6.32
41-45	3.70	7.14	3.70	7.14
46-50	4.17	8.06	4.17	8.06
51-55	5.77	11.28	5.77	11.28
56-60	5.71	11.15	5.71	11.15
61-65	10.33	20.38	10.33	20.38
66+	17.15	34.03	17.15	34.03

\$10,000 of coverage

Age	Employee	Employee + Spouse	Employee + Child(ren)	Employee + Family
Under 26	\$3.31	\$6.10	\$3.31	\$6.10
26-30	3.94	7.35	3.94	7.35
31-35	4.41	8.28	4.41	8.28
36-40	5.36	10.18	5.36	10.18
41-45	6.18	11.82	6.18	11.82
46-50	7.10	13.67	7.10	13.67
51-55	10.31	20.09	10.31	20.09
56-60	10.20	19.85	10.20	19.85
61-65	19.42	38.31	19.42	38.31
66+	33.07	65.61	33.07	65.61

Critical Illness Insurance continued

\$15,000 of coverage

Age	Employee	Employee + Spouse	Employee + Child(ren)	Employee + Family
Under 26	\$4.36	\$7.91	\$4.36	\$7.91
26-30	5.30	9.79	5.30	9.79
31-35	6.00	11.20	6.00	11.20
36-40	7.42	14.05	7.42	14.05
41-45	8.65	16.50	8.65	16.50
46-50	10.05	19.29	10.05	19.29
51-55	14.86	28.92	14.86	28.92
56-60	14.68	28.56	14.68	28.56
61-65	28.52	56.23	28.52	56.23
66+	48.99	97.19	48.99	97.19

\$20,000 of coverage

Age	Employee	Employee + Spouse	Employee + Child(ren)	Employee + Family
Under 26	\$5.40	\$9.74	\$5.40	\$9.74
26-30	6.65	12.24	6.65	12.24
31-35	7.59	14.11	7.59	14.11
36-40	9.49	17.92	9.49	17.92
41-45	11.13	21.18	11.13	21.18
46-50	12.99	24.90	12.99	24.90
51-55	19.40	37.74	19.40	37.74
56-60	19.16	37.25	19.16	37.25
61-65	37.61	74.16	37.61	74.16
66+	64.92	128.77	64.92	128.77

\$25,000 of coverage

Age	Employee	Employee + Spouse	Employee + Child(ren)	Employee + Family
Under 26	\$6.45	\$11.56	\$6.45	\$11.56
26-30	8.01	14.69	8.01	14.69
31-35	9.18	17.03	9.18	17.03
36-40	11.56	21.78	11.56	21.78
41-45	13.60	25.87	13.60	25.87
46-50	15.92	30.51	15.92	30.51
51-55	23.95	46.56	23.95	46.56
56-60	23.65	45.96	23.65	45.96
61-65	46.71	92.09	46.71	92.09
66+	80.84	160.35	80.84	160.35

\$30,000 of coverage

Age	Employee	Employee + Spouse	Employee + Child(ren)	Employee + Family
Under 26	\$7.49	\$13.38	\$7.49	\$13.38
26-30	9.37	17.13	9.37	17.13
31-35	10.78	19.95	10.78	19.95
36-40	13.62	25.65	13.62	25.65
41-45	16.08	30.55	16.08	30.55
46-50	18.86	36.12	18.86	36.12
51-55	28.49	55.38	28.49	55.38
56-60	28.13	54.66	28.13	54.66
61-65	55.81	110.01	55.81	110.01
66+	96.76	191.92	96.76	191.92

Critical Illness Insurance continued

\$35,000 of coverage

Age	Employee	Employee + Spouse	Employee + Child(ren)	Employee + Family
Under 26	\$8.53	\$15.20	\$8.53	\$15.20
26-30	10.73	19.59	10.73	19.59
31-35	12.36	22.86	12.36	22.86
36-40	15.69	29.51	15.69	29.51
41-45	18.55	35.24	18.55	35.24
46-50	21.80	41.74	21.80	41.74
51-55	33.03	64.20	33.03	64.20
56-60	32.61	63.35	32.61	63.35
61-65	64.91	127.95	64.91	127.95
66+	112.69	223.51	112.69	223.51

\$40,000 of coverage

Age	Employee	Employee + Spouse	Employee + Child(ren)	Employee + Family
Under 26	\$9.58	\$17.03	\$9.58	\$17.03
26-30	12.08	22.03	12.08	22.03
31-35	13.96	25.78	13.96	25.78
36-40	17.76	33.38	17.76	33.38
41-45	21.03	39.92	21.03	39.92
46-50	24.74	47.35	24.74	47.35
51-55	37.58	73.02	37.58	73.02
56-60	37.10	72.06	37.10	72.06
61-65	74.00	145.87	74.00	145.87
66+	128.61	255.09	128.61	255.09

\$45,000 of coverage

Age	Employee	Employee + Spouse	Employee + Child(ren)	Employee + Family
Under 26	\$10.62	\$18.84	\$10.62	\$18.84
26-30	13.44	24.48	13.44	24.48
31-35	15.55	28.69	15.55	28.69
36-40	19.82	37.24	19.82	37.24
41-45	23.50	44.60	23.50	44.60
46-50	27.68	52.96	27.68	52.96
51-55	42.12	81.84	42.12	81.84
56-60	41.58	80.76	41.58	80.76
61-65	83.10	163.80	83.10	163.80
66+	144.53	286.66	144.53	286.66

\$50,000 of coverage

Age	Employee	Employee + Spouse	Employee + Child(ren)	Employee + Family
Under 26	\$11.67	\$20.67	\$11.67	\$20.67
26-30	14.79	26.88	14.79	26.88
31-35	17.14	31.62	17.14	31.62
36-40	21.89	41.11	21.89	41.11
41-45	25.98	49.29	25.98	49.29
46-50	30.62	58.57	30.62	58.57
51-55	46.66	90.66	46.66	90.66
56-60	46.06	89.46	46.06	89.46
61-65	92.19	181.73	92.19	181.73
66+	160.45	318.24	160.45	318.24

Hospital Indemnity Insurance

Coverage type	Premium per employee
Employee only	\$8.46
Employee + Spouse	\$15.53
Employee + Child(ren)	\$12.51
Employee + Family	\$20.52

Supplemental life Insurance

Employee (rate per \$1,000/month based on 24 pay periods)

Age	Rate
Under 25	\$0.027
25-29	0.032
30-34	0.042
35-39	0.048
40-44	0.053
45-49	0.080
50-54	0.123
55-59	0.229
60-64	0.351
65-69	0.676
70 and over	1.096

Spouse (rate per \$1,000/month based on 24 pay periods)

Age	Rate
Under 25	\$0.027
25-29	0.032
30-34	0.042
35-39	0.048
40-44	0.053
45-49	0.080
50-54	0.123
55-59	0.229
60-64	0.351
65-69	0.676
70 and over	1.096

Child (rate per \$1,000/month based on 24 pay periods)

\$0.062

All rates noted on this flyer may be subject to change.



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