

Supplemental Disability Insurance Calculation

Supplemental Disability Monthly Rates for 2011

Age	Waiting Period			
	7 Days	30 Days	90 Days	180 Days
Under 35	\$0.0088	\$0.0032	\$0.0028	\$0.0010
35-39	0.0093	0.0036	0.0031	0.0015
40-44	0.0104	0.0044	0.0038	0.0023
45-49	0.0115	0.0052	0.0044	0.0029
50-54	0.0142	0.0066	0.0056	0.0044
55-59	0.0170	0.0095	0.0080	0.0071
60-64	0.0235	0.0155	0.0132	0.0126
65-69	0.0208	0.0121	0.0103	0.0092
70 and over	0.0158	0.0067	0.0057	0.0037

- Find the rate for your age and waiting period. \$ _____
monthly rate
- Multiply the rate by your gross monthly covered salary* up to \$14,286 per month. If your salary is higher, use \$14,286. X \$ _____
gross monthly covered salary
rate
- This is your estimated monthly premium. = \$ _____
monthly premium

* Use the full-time monthly covered salary rate for your position, even if you work part time. Premiums are based on the full-time salary rate for your position; if you normally work less than full time, benefits will be based on your part-time earnings. Do not include special pay, such as overtime.

Supplemental Life Insurance Calculation

Cost of Coverage

Your cost for Supplemental Life depends on your age and the amount of coverage you purchase. Use the table and worksheet at right to figure your monthly premium.

You pay nothing for the first month or partial month of coverage. Likewise, if you increase coverage you don't pay the extra premium for the first partial month of increased coverage.

Supplemental Life Insurance Monthly Rates for 2011 (Per \$1,000)

Your Age	Monthly Cost
Under 30	\$.023
30-34	.026
35-39	.033
40-44	.053
45-49	.095
50-54	.138
55-59	.250
60-64	.390
65-69	.598
70 and over	1.074

To estimate your monthly premium, use your current age and salary.

- Round your annual salary up to the next higher thousand (if it is not an exact multiple of \$1,000). Use your full-time salary rate even if you work part time.

\$ _____
full-time annual salary
- If you want \$20,000 of coverage, write \$20,000 on Line 3. Otherwise, multiply your full-time annual salary (Line 1, above) by the coverage level you want (1, 2, 3, or 4 times your annual salary).

X _____
coverage level
- This is your coverage amount.

= _____
coverage amount
- Divide the coverage amount by 1,000.

÷ 1,000 = _____
- Multiply the number on Line 4 by the monthly cost for your age.

X \$ _____
monthly rate
- This is your estimated monthly premium.

= \$ _____
monthly premium

Basic Dependent Life Insurance

The table shows your monthly cost, which depends on your age as of January 1, 2011. You pay nothing for the first month of coverage.

Basic Dependent Life Monthly Rates for 2011

Your Age	Monthly Cost
Under 35	\$ 0.62
35-39	1.10
40-44	1.22
45-49	1.49
50 and over	1.70

AD&D Monthly Rates

Cost of Coverage

Your cost depends on the plan option and the coverage amount you choose, which can range from \$10,000 to \$500,000. You pay nothing for the first month. Likewise, if you increase coverage, you don't pay the extra premium for the first partial month of increased coverage.

AD&D Monthly Rates for 2011

Coverage	Plan Options		
	Self (You)	Family (You, spouse or partner, and eligible children)	Modified Family (You and eligible children)
\$ 10,000	\$ 0.13	\$ 0.23	\$ 0.16
20,000	0.26	0.46	0.32
30,000	0.39	0.69	0.48
40,000	0.52	0.92	0.64
50,000	0.65	1.15	0.80
60,000	0.78	1.38	0.96
70,000	0.91	1.61	1.12
80,000	1.04	1.84	1.28
90,000	1.17	2.07	1.44
100,000	1.30	2.30	1.60
125,000	1.63	2.88	2.00
150,000	1.95	3.45	2.40
175,000	2.28	4.03	2.80
200,000	2.60	4.60	3.20
300,000	3.90	6.90	4.80
400,000	5.20	9.20	6.40
500,000	6.50	11.50	8.00