

NORTHWEST OTOLARYNGOLOGY - #F010676

Eligibility

You are eligible to enroll if you work the minimum number of hours per week by your employer, and you have satisfied any waiting period.

You must be covered under the basic life plan sponsored by your employer in SD and VT.

Voluntary Life Insurance

Employee Benefit: **\$10,000 - \$500,000 in \$10,000 increments.**

Spouse Benefit: **\$10,000 - \$500,000 in \$10,000 increments.**

The amount of spouse life insurance is limited to 50% of the employee benefit in FL and NE.

The spouse benefit may not exceed the employee benefit amount in AZ, CA, IL, MD, NJ, RI, VT, VA and WA.

The Spouse amount may not exceed the amount for which the employee is eligible in TX.

Voluntary Life Non-Tobacco User*	
Monthly rates per \$1,000	
Age	Rates
Under 30	\$0.060
30-34	\$0.080
35-39	\$0.090
40-44	\$0.150
45-49	\$0.210
50-54	\$0.360
55-59	\$0.620
60-64	\$0.970
65-69	\$1.530
70-74	\$2.430
75 and over	\$4.320
Voluntary AD&D	
Monthly rates per \$1,000	
Individual Plan	\$0.050
Family Plan	\$0.080
Dependent Life (Children)	
Monthly rates per Family	
\$5,000	\$1.00
\$10,000	\$2.00

Child Coverage

Ages 15 days to 6 months: **\$100**
 Ages 6 months to 18 years (23 years if full time student): **\$5,000 or \$10,000**

Voluntary AD&D Insurance

Benefits from \$10,000 to \$500,000 in \$10,000 increments.

The Individual Plan covers you in the event of accidental death or dismemberment.

The Family Plan covers you, your spouse and your eligible dependent children.

The spouse benefit is equal to 50% of your benefit and the child benefit is 10% of your benefit.

Voluntary Life Insurance

NON-TOBACCO Monthly Premium Cost (Based on 12 payroll deductions per year)

***If you have used tobacco products in the last two years the tobacco user rates will apply.**

Benefit Amount	VAD&D		ATTAINED AGE										
	IND	FAM	<30	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75+
\$10,000	\$0.50	\$0.80	\$ 0.60	\$ 0.80	\$ 0.90	\$ 1.50	\$ 2.10	\$ 3.60	\$ 6.20	\$ 9.70	\$ 15.30	\$ 24.30	\$ 43.20
\$20,000	\$1.00	\$1.60	\$1.20	\$1.60	\$1.80	\$3.00	\$4.20	\$7.20	\$12.40	\$19.40	\$30.60	\$48.60	\$86.40
\$30,000	\$1.50	\$2.40	\$1.80	\$2.40	\$2.70	\$4.50	\$6.30	\$10.80	\$18.60	\$29.10	\$45.90	\$72.90	\$129.60
\$40,000	\$2.00	\$3.20	\$2.40	\$3.20	\$3.60	\$6.00	\$8.40	\$14.40	\$24.80	\$38.80	\$61.20	\$97.20	\$172.80
\$50,000	\$2.50	\$4.00	\$3.00	\$4.00	\$4.50	\$7.50	\$10.50	\$18.00	\$31.00	\$48.50	\$76.50	\$121.50	\$216.00
\$60,000	\$3.00	\$4.80	\$3.60	\$4.80	\$5.40	\$9.00	\$12.60	\$21.60	\$37.20	\$58.20	\$91.80	\$145.80	\$259.20
\$70,000	\$3.50	\$5.60	\$4.20	\$5.60	\$6.30	\$10.50	\$14.70	\$25.20	\$43.40	\$67.90	\$107.10	\$170.10	\$302.40
\$80,000	\$4.00	\$6.40	\$4.80	\$6.40	\$7.20	\$12.00	\$16.80	\$28.80	\$49.60	\$77.60	\$122.40	\$194.40	\$345.60
\$90,000	\$4.50	\$7.20	\$5.40	\$7.20	\$8.10	\$13.50	\$18.90	\$32.40	\$55.80	\$87.30	\$137.70	\$218.70	\$388.80
\$100,000	\$5.00	\$8.00	\$6.00	\$8.00	\$9.00	\$15.00	\$21.00	\$36.00	\$62.00	\$97.00	\$153.00	\$243.00	\$432.00
\$110,000	\$5.50	\$8.80	\$6.60	\$8.80	\$9.90	\$16.50	\$23.10	\$39.60	\$68.20	\$106.70	\$168.30	\$267.30	\$475.20
\$120,000	\$6.00	\$9.60	\$7.20	\$9.60	\$10.80	\$18.00	\$25.20	\$43.20	\$74.40	\$116.40	\$183.60	\$291.60	\$518.40
\$130,000	\$6.50	\$10.40	\$7.80	\$10.40	\$11.70	\$19.50	\$27.30	\$46.80	\$80.60	\$126.10	\$198.90	\$315.90	\$561.60
\$140,000	\$7.00	\$11.20	\$8.40	\$11.20	\$12.60	\$21.00	\$29.40	\$50.40	\$86.80	\$135.80	\$214.20	\$340.20	\$604.80
\$150,000	\$7.50	\$12.00	\$9.00	\$12.00	\$13.50	\$22.50	\$31.50	\$54.00	\$93.00	\$145.50	\$229.50	\$364.50	\$648.00
\$200,000	\$10.00	\$16.00	\$12.00	\$16.00	\$18.00	\$30.00	\$42.00	\$72.00	\$124.00	\$194.00	\$306.00	\$486.00	\$864.00
\$250,000	\$12.50	\$20.00	\$15.00	\$20.00	\$22.50	\$37.50	\$52.50	\$90.00	\$155.00	\$242.50	\$382.50	\$607.50	\$1,080.00
\$300,000	\$15.00	\$24.00	\$18.00	\$24.00	\$27.00	\$45.00	\$63.00	\$108.00	\$186.00	\$291.00	\$459.00	\$729.00	\$1,296.00
\$350,000	\$17.50	\$28.00	\$21.00	\$28.00	\$31.50	\$52.50	\$73.50	\$126.00	\$217.00	\$339.50	\$535.50	\$850.50	\$1,512.00
\$400,000	\$20.00	\$32.00	\$24.00	\$32.00	\$36.00	\$60.00	\$84.00	\$144.00	\$248.00	\$388.00	\$612.00	\$972.00	\$1,728.00
\$450,000	\$22.50	\$36.00	\$27.00	\$36.00	\$40.50	\$67.50	\$94.50	\$162.00	\$279.00	\$436.50	\$688.50	\$1,093.50	\$1,944.00
\$500,000	\$25.00	\$40.00	\$30.00	\$40.00	\$45.00	\$75.00	\$105.00	\$180.00	\$310.00	\$485.00	\$765.00	\$1,215.00	\$2,160.00

Additional benefit amounts are available in \$10,000 increments to a maximum of \$500,000

Policy Provisions may vary by state. Refer to a certificate or enrollment brochure for details about coverage

features and limitations. For internal use only: Policy number FDL1-2230-C

Vlife/blend-w/add/12