

Rate sheet prepared by Web User on 1/17/2018 11:36:07 AM. Ohio Payroll Premium rates are Monthly for industry Class C.

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ACCIDENT INDEMNITY ADVANTAGE 24-HOUR LEVEL TWO - Series A-35200

	Premium	Total
18-49 INDIVIDUAL	\$28.86	\$28.86
50-70	\$28.86	\$28.86
18-49 HUSBAND WIFE	\$37.83	\$37.83
50-70	\$37.83	\$37.83
18-49 ONE-PARENT FAMILY	\$42.38	\$42.38
50-70	\$42.38	\$42.38
18-49 TWO-PARENT FAMILY	\$52.78	\$52.78
50-70	\$52.78	\$52.78

AFLAC HOSPITAL CHOICE - Option 1 Benefit Amount 1000 - Series B40100

	Premium	EBR	HSSCR	Total
18-75 INDIVIDUAL	\$26.13	\$11.57	\$19.50	\$57.20
18-75 INSURED/SPOUSE	\$37.83	\$24.70	\$39.91	\$102.44
18-75 ONE-PARENT FAMILY	\$33.15	\$22.36	\$24.96	\$80.47
18-75 TWO-PARENT FAMILY	\$39.13	\$28.60	\$34.71	\$102.44

AFLAC-SHORT TERM DISABILITY - Series A-57600

Elimination Period Accident/Sickness - 0/7 DAYS

Annual Income		\$36,000	\$38,000	\$40,000	\$42,000	\$44,000	\$46,000	\$48,000	\$50,000	\$52,000	\$54,000
Benefit Period	Age	\$1,800	\$1,900	\$2,000	\$2,100	\$2,200	\$2,300	\$2,400	\$2,500	\$2,600	\$2,700
3 MONTHS	18-49	\$58.50	\$61.75	\$65.00	\$68.25	\$71.50	\$74.75	\$78.00	\$81.25	\$84.50	\$87.75
	50-64	\$72.54	\$76.57	\$80.60	\$84.63	\$88.66	\$92.69	\$96.72	\$100.75	\$104.78	\$108.81
	65-74	\$86.58	\$91.39	\$96.20	\$101.01	\$105.82	\$110.63	\$115.44	\$120.25	\$125.06	\$129.87
6 MONTHS	18-49	\$77.22	\$81.51	\$85.80	\$90.09	\$94.38	\$98.67	\$102.96	\$107.25	\$111.54	\$115.83
	50-64	\$98.28	\$103.74	\$109.20	\$114.66	\$120.12	\$125.58	\$131.04	\$136.50	\$141.96	\$147.42
	65-74	\$124.02	\$130.91	\$137.80	\$144.69	\$151.58	\$158.47	\$165.36	\$172.25	\$179.14	\$186.03

EBR*: Extended Benefit Rider Premium (Available for ages 18-75)
HSSCR*: Hospital Stay and Surgical Care Rider Premium (Available for ages 18-75)
*Note – The Extended Benefit Rider and Hospital Stay and Surgical Care Rider are not available with Option H.



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AFLAC CANCER CARE PLAN CLASSIC - Series A78300

			Premium	IDR* (5 units)	Total
Ī	18-75	INDIVIDUAL	\$31.72	\$5.85	\$37.57
	18-75	INSURED/SPOUSE	\$53.95	\$13.00	\$66.95
	18-75	ONE-PARENT FAMILY	\$31.72	\$5.85	\$37.57
	18-75	TWO-PARENT FAMILY	\$53.95	\$13.00	\$66.95

IDR* = Optional Initial Diagnosis Rider (Series A-78050) premium 1-5 units

CRITICAL CARE PROTECTION POLICY - Series A74100

Individual					One Parent Family				
Age	Premium	FOBBR	Total		Age	Premium	FOBBR	Total	
18-35	\$9.36	\$2.34	\$11.70		18-35	\$10.40	\$2.47	\$12.87	
36-45	\$14.56	\$4.29	\$18.85		36-45	\$15.08	\$4.55	\$19.63	
46-55	\$20.28	\$5.07	\$25.35		46-55	\$20.93	\$5.20	\$26.13	
56-70	\$27.30	\$5.59	\$32.89		56-70	\$27.95	\$5.85	\$33.80	
	Insured/Spouse					Two Parent Family			
Age	Premium	FOBBR	Total		Age	Premium	FOBBR	Total	
18-35	\$13.39	\$4.68	\$18.07		18-35	\$15.47	\$4.81	\$20.28	
36-45	\$22.36	\$8.58	\$30.94		36-45	\$24.70	\$8.84	\$33.54	
46-55	\$33.54	\$10.14	\$43.68		46-55	\$36.40	\$10.27	\$46.67	
56-70	\$49.14	\$11.18	\$60.32		56-70	\$52.52	\$11.44	\$63.96	

FOBBR: First Occurrence Building Benefit Rider (Rider Series A74050)