

VOLUNTARY OPTIONAL COVERAGE

VOLUNTARY TERM LIFE INSURANCE

- Paid 100% by employee
- Available in units of \$10,000
- Minimum - \$10,000/ Maximum - \$300,000
- Available to Employee
- Available to Employee's Spouse
- To apply for Optional Life Insurance, you must complete a Statement of Health Form and submit directly to the insurance carrier for approval

Age Ranges	Male Smoker	Male Non-Smoker	Female Smoker	Female Non-Smoker
Under 30	0.77	0.50	0.53	0.36
30-34	0.85	0.53	0.62	0.41
35-39	1.07	0.62	0.80	0.45
40-44	1.78	0.98	1.21	0.67
45-49	3.12	1.69	2.01	1.07
50-54	5.12	2.85	3.12	1.78
55-59	8.46	4.82	4.77	2.85
60-64	12.25	7.4	6.60	4.28

VOLUNTARY ACCIDENTAL DEATH & DISMEMBERMENT INSURANCE

- Available in units of \$10,000
- Minimum - \$10,000/ Maximum - \$300,000
- Available in Family Plan as well as Employee only
- Family Coverage – Spouse – 50% of employee's coverage
Children – 10% of employee's coverage
- Rates: Employee Only - \$0.20 per \$10,000 unit
Family Plan -\$0.32 per \$10,000 unit