

Rate sheet prepared by Web User on 7/20/2019 2:17:39 PM. Illinois Payroll Premium rates are Semi-Monthly for industry Class A.

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Accident Advantage - 24-HOUR ACCIDENT OPTION 3 - Series A36000

	Premium	Total
18-75 INDIVIDUAL	\$10.99	\$10.99
18-75 NAMED INSURED/SPOUSE	\$15.60	\$15.60
18-75 ONE-PARENT FAMILY	\$18.46	\$18.46
18-75 TWO-PARENT FAMILY	\$23.92	\$23.92

AFLAC-SHORT TERM DISABILITY - Series A-57600

Elimination Period Accident/Sickness - 0/7 DAYS

Annual Income		\$30,000	\$32,000	\$34,000	\$36,000	\$38,000	\$40,000	\$42,000	\$44,000	\$46,000	\$48,000
Benefit Period	Age	\$1,500	\$1,600	\$1,700	\$1,800	\$1,900	\$2,000	\$2,100	\$2,200	\$2,300	\$2,400
3 MONTHS	18-49	\$21.45	\$22.88	\$24.31	\$25.74	\$27.17	\$28.60	\$30.03	\$31.46	\$32.89	\$34.32
	50-64	\$22.43	\$23.92	\$25.42	\$26.91	\$28.41	\$29.90	\$31.40	\$32.89	\$34.39	\$35.88
	65-74	\$27.30	\$29.12	\$30.94	\$32.76	\$34.58	\$36.40	\$38.22	\$40.04	\$41.86	\$43.68
6 MONTHS	18-49	\$27.30	\$29.12	\$30.94	\$32.76	\$34.58	\$36.40	\$38.22	\$40.04	\$41.86	\$43.68
	50-64	\$29.25	\$31.20	\$33,15	\$35.10	\$37.05	\$39.00	\$40.95	\$42.90	\$44.85	\$46.80
	65-74	\$37.05	\$39.52	\$41.99	\$44.46	\$46.93	\$49.40	\$51.87	\$54.34	\$56.81	\$59.28

AFLAC-SHORT TERM DISABILITY - Series A-57600

Elimination Period Accident/Sickness - 7/14 DAYS

Annual Income		\$30,000	\$32,000	\$34,000	\$36,000	\$38,000	\$40,000	\$42,000	\$44,000	\$46,000	\$48,000
Benefit Period	Age	\$1,500	\$1,600	\$1,700	\$1,800	\$1,900	\$2,000	\$2,100	\$2,200	\$2,300	\$2,400
3 MONTHS	18-49	\$13,65	\$14.56	\$15.47	\$16.38	\$17,29	\$18.20	\$19.11	\$20,02	\$20.93	\$21.84
	50-64	\$14.63	\$15.60	\$16.58	\$17.55	\$18.53	\$19.50	\$20.48	\$21,45	\$22.43	\$23.40
	65-74	\$17.55	\$18.72	\$19.89	\$21.06	\$22.23	\$23.40	\$24.57	\$25.74	\$26.91	\$28.08
6 MONTHS	18-49	\$15.60	\$16.64	\$17.68	\$18.72	\$19.76	\$20.80	\$21.84	\$22.88	\$23.92	\$24.96
	50-64	\$18,53	\$19.76	\$21.00	\$22.23	\$23.47	\$24.70	\$25.94	\$27.17	\$28.41	\$29.64
	65-74	\$23.40	\$24.96	\$26.52	\$28.08	\$29.64	\$31.20	\$32.76	\$34.32	\$35.88	\$37.44



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CANCER PROTECTION ASSURANCE PLAN LEVEL 1 - Series B70100

		Premium	IDR* (5 units)	Total
18-75	INDIVIDUAL	\$8.30	\$2.98	\$11.27
18-75	INSURED/SPOUSE	\$13.18	\$7.03	\$20.20
18-75	ONE-PARENT FAMILY	\$8.30	\$2.98	\$11.27
18-75	TWO-PARENT FAMILY	\$13.18	\$7.03	\$20.20

IDR* = Optional Initial Diagnosis Rider (Series B70050) premium 1-5 units

CANCER PROTECTION ASSURANCE PLAN LEVEL 2 - Series B70200

		Premium	IDR* (5 units)	Total
18-75	INDIVIDUAL	\$16.75	\$2.98	\$19.73
18-75	INSURED/SPOUSE	\$28.82	\$7.03	\$35.85
18-75	ONE-PARENT FAMILY	\$16.75	\$2,98	\$19.73
18-75	TWO-PARENT FAMILY	\$28.82	\$7.03	\$35.85

IDR* = Optional Initial Diagnosis Rider (Series B70050) premium 1-5 units

AFLAC PLUS RIDER

		Aflac Plus Rider
18-29	INDIVIDUAL	\$1.56
30-39		\$2,21
40-49		\$3.77
50-70		\$6.44
18-29	INSURED/SPOUSE	\$2.93
30-39		\$4.36
40-49		\$7.15
50-70		\$12.29
18-29	ONE-PARENT FAMILY	\$3.12
30-39		\$3.38
40-49		\$4.55
50-70		\$6.63
18-29	TWO-PARENT FAMILY	\$3.77
30-39		\$4.88
40-49		\$7.35
50-70		\$12.35



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CRITICAL CARE PROTECTION POLICY - Series A74200

	Individual			One Parent Family				
Age	Premium	FOBBR	Total	Age	Premium	FOBBR	Total	
18-35	\$8.65	\$1.17	\$9.82	18-35	\$14.63	\$1.24	\$15.86	
36-45	\$12.29	\$2.21	\$14.50	36-45	\$17.36	\$2.34	\$19.70	
46-55	\$16.71	\$2.60	\$19.31	46-55	\$22.36	\$2.67	\$25.03	
56-70	\$21.58	\$2.86	\$24.44	56-70	\$29.38	\$2.99	\$32.37	
	Insured	Spouse			Two Pare	nt Family		
Age	Premium	FOBBR	Total	Age	Premium	FOBBR	Total	
18-35	\$16.58	\$2.41	\$18.98	18-35	\$18.85	\$2.47	\$21.32	
36-45	\$21.58	\$4.36	\$25.94	36-45	\$23.92	\$4.49	\$28,41	
46-55	\$29.06	\$5.20	\$34.26	46-55	\$31.98	\$5.27	\$37.25	
56-70	\$40.43	\$5.72	\$46.15	56-70	\$43.8B	\$5.85	\$49.73	

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



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

	Premium	EBR	Total
18-49 INDIVIDUAL	\$13.26	\$5.72	\$18.98
50-59	\$13.52	\$6.50	\$20.02
60-75	\$13.91	\$6.57	\$20.48
18-49 INSURED/SPOUSE	\$18.79	\$12.03	\$30.82
50-59	\$19.89	\$13,46	\$33.35
60-75	\$21.26	\$13.59	\$34.85
18-49 ONE-PARENT FAMILY	\$16.84	\$11.38	\$28.22
50-59	\$17.10	\$11.64	\$28.74
60-75	\$17.36	\$11.90	\$29.26
18-49 TWO-PARENT FAMILY	\$19.96	\$14.56	\$34.52
50-59	\$20.15	\$14.82	\$34.97
60-75	\$21.52	\$15.47	\$36.99

EBR*: Extended Benefit Rider Premium (Available for ages 18-75)

AFLAC HOSPITAL CHOICE - Option 1 Benefit Amount 2000 - Series B40100

	Premium	EBR	Total
18-49 INDIVIDUAL	\$25.03	\$5.72	\$30.75
50-59	\$25.29	\$6.50	\$31.79
60-75	\$26.78	\$6.57	\$33.35
18-49 INSURED/SPOUSE	\$37.31	\$12.03	\$49.34
50-59	\$39.39	\$13.46	\$52.85
60-75	\$43.23	\$13.59	\$56.82
18-49 ONE-PARENT FAMILY	\$30.81	\$11.38	\$42.19
50-59	\$31.01	\$11.64	\$42.65
60-75	\$31,27	\$11.90	\$43.17
18-49 TWO-PARENT FAMILY	\$37.51	\$14.56	\$52.07
50-59	\$39.65	\$14.82	\$54.47
60-75	\$43.49	\$15.47	\$58.96

EBR*: Extended Benefit Rider Premium (Available for ages 18-75)

Aflac Life Solutions WHOLE LIFE POLICY - Series A68100

Female Applicant Face Amount: \$25,000.00

Age	Non-Tobacco User	Policy Fee	Non- Tobacco Total
21	\$6.70	\$1.50	\$8.20
22	\$6.83	\$1.50	\$8.33
23	\$6.95	\$1,50	\$8.45
24	\$7.08	\$1.50	\$8.58
25	\$7.20	\$1.50	\$8.70

^{*}Note – The Extended Benefit Rider and Hospital Stay and Surgical Care Rider are not available with Option H.

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26	\$7.43	\$1.50	\$8.93
27	\$7.80	\$1.50	\$9.30
28	\$8.03	\$1.50	\$9.53
29	\$8.40	\$1.50	\$9.90
30	\$8.63	\$1.50	\$10.13
31	\$9.00	\$1.50	\$10.50
32	\$9,35	\$1.50	\$10.85
33	\$9.70	\$1.50	\$11.20
34	\$10.08	\$1.50	\$11.58
35	\$10.43	\$1.50	\$11.93
36	\$11.03	\$1.50	\$12.53
37	\$11.63	\$1.50	\$13,13
38	\$12.23	\$1.50	\$13.73
39	\$12.95	\$1.50	\$14.45
40	\$13.68	\$1.50	\$15.18
41	\$14.50	\$1.50	\$16.00
42	\$15.23	\$1.50	\$16.73
43	\$16.20	\$1.50	\$17.70
44	\$17.03	\$1.50	\$18.53
45	\$18.00	\$1.50	\$19,50
46	\$18.95	\$1.50	\$20.45
47	\$20.03	\$1.50	\$21.53
48	\$21.23	\$1.50	\$22.73
49	\$22.43	\$1.50	\$23.93
50	\$23,63	\$1.50	\$25.13
51	\$25.08	\$1.50	\$26.58
52	\$26.40	\$1.50	\$27.90
53	\$27.95	\$1.50	\$29.45
54	\$29.50	\$1.50	\$31.00
55	\$31.20	\$1.50	\$32.70
56	\$33.48	\$1.50	\$34.98
57	\$35.88	\$1.50	\$37.38
58	\$38.40	\$1.50	\$39.90
59	\$41.15	\$1.50	\$42.65
60	\$44,15	\$1.50	\$45.65
61	\$47.28	\$1.50	\$48.78
62	\$50.63	\$1.50	\$52.13
63	\$54.35	\$1.50	\$55.85
64	\$58.20	\$1.50	\$59.70
65	\$62.40	\$1.50	\$63,90
66	\$66.50	\$1.50	\$68.00
67	\$71.48	\$1,50	\$72.98
68	\$76.95	\$1.50	\$78.45
69	\$82.75	\$1.50	\$84.25
70	\$89.05	\$1.50	\$90.55

Aflac Life Solutions 20-YEAR TERM POLICY - Series A68300



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Female Applicant Face Amount: \$50,000.00

Age	Non-Tobacco User	Policy Fee	Non- Tobacco Total
21	\$2.90	\$2.00	\$4.90
22	\$2.90	\$2.00	\$4.90
23	\$2.90	\$2.00	\$4.90
24	\$2.90	\$2.00	\$4.90
25	\$2,90	\$2.00	\$4,90
26	\$2.90	\$2.00	\$4.90
27	\$3.00	\$2.00	\$5.00
28	\$3.00	\$2.00	\$5.00
29	\$3.10	\$2.00	\$5.10
30	\$3.15	\$2.00	\$5.15
31	\$3.20	\$2.00	\$5.20
32	\$3.30	\$2.00	\$5.30
33	\$3.40	\$2.00	\$5.40
34	\$3.50	\$2.00	\$5.50
35	\$3.65	\$2.00	\$5.65
36	\$3.95	\$2.00	\$5.95
37	\$4.30	\$2.00	\$6.30
38	\$4.70	\$2.00	\$6.70
39	\$5.15	\$2.00	\$7.15
40	\$5.70	\$2.00	\$7.70
41	\$6.15	\$2.00	\$8.15
42	\$6.70	\$2.00	\$8,70
43	\$7.30	\$2.00	\$9.30
44	\$8.00	\$2.00	\$10.00
45	\$8.75	\$2.00	\$10.75
46	\$9.60	\$2.00	\$11.60
47	\$10,50	\$2.00	\$12.50
48	\$11.60	\$2.00	\$13.60
49	\$12.80	\$2.00	\$14.80
50	\$14.10	\$2.00	\$16.10
51	\$15.40	\$2.00	\$17.40
52	\$16.80	\$2.00	\$18.80
53	\$18.40	\$2.00	\$20.40
54	\$20.20	\$2.00	\$22,20
55	\$22,15	\$2.00	\$24.15
56	\$24.50	\$2.00	\$26.50
57	\$27.15	\$2.00	\$29.15
58	\$30.15	\$2.00	\$32.15
59	\$33.55	\$2.00	\$35.55
60	\$37.40	\$2.00	\$39.40
61	N/A	N/A	N/A
62	N/A	N/A	N/A
63	N/A	N/A	N/A
64	N/A	N/A	N/A



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65	N/A	N/A	N/A
66	N/A	N/A	N/A
67	N/A	N/A	N/A
68	N/A	N/A	N/A

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