

THE HARTFORD SUPPLEMENTAL BENEFITS RATES WORKSHEET



Employee Information

Employee Name:			Employee ID Number:		
Date of Hire:	Date Coverage Starts:	DOB:	Age on Coverage Start Date:		

SUPPLEMENTAL TERM LIFE INSURANCE

Employee Supplemental Term Life Insurance - \$10,000 Increments (\$10,000 = 1 Unit)

Minimum Election Amount: \$10,000

Maximum Election Amount: \$200,000 Guaranteed Issue; \$500,000 with approved Evidence of Insurability (EOI)

Age Range	<25	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75+
Emp Life Monthly Rates Per \$10,000	\$0.50	\$0.60	\$0.76	\$0.90	\$1.00	\$1.50	\$2.30	\$4.30	\$6.60	\$11.35	\$19.84	\$20.60
Emp AD&D Monthly Rates Per \$10,000	\$0.28	\$0.28	\$0.28	\$0.28	\$0.28	\$0.28	\$0.28	\$0.28	\$0.28	\$0.28	\$0.28	\$0.28

Emp Life Monthly Per \$10,000		x	# of Units		Monthly Rate		/ 2 =	Per Pay	
Emp AD&D Monthly Per \$10,000		x	# of Units		Monthly Rate		/ 2 =	Per Pay	

Spouse/Domestic Partner Supplemental Term Life Insurance - \$5,000 Increments (\$5,000 = 1 Unit)

Minimum Election Amount: \$5,000

Maximum Election Amount: \$30,000 Guaranteed Issue; \$250,000 with approved Evidence of Insurability (EOI)

* Election amount cannot be greater than 50% of the employee's amount. Rates are based on the EMPLOYEE'S AGE.

Age Range	<25	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75+
SP/DP Life Monthly Rates Per \$5,000	\$0.25	\$0.30	\$0.38	\$0.45	\$0.50	\$0.75	\$1.15	\$2.15	\$3.30	\$5.68	\$9.92	\$10.30
SP/DP AD&D Monthly Rates Per \$5,000	\$0.14	\$0.14	\$0.14	\$0.14	\$0.14	\$0.14	\$0.14	\$0.14	\$0.14	\$0.14	\$0.14	\$0.14

SP/DP Life Monthly Per \$5,000		x	# of Units		Monthly Rate		/ 2 =	Per Pay	
SP/DP AD&D Monthly Per \$5,000		x	# of Units		Monthly Rate		/ 2 =	Per Pay	

Child Supplemental Term Life Insurance - Flat \$10,000 (enrollment available to age 26)

*Employee must enroll in supplemental term life insurance in order to enroll child(ren). Cost is the same no matter how many children are enrolled.

Child Life Rate Per Pay	\$0.61	Child AD&D Rate Per Pay:	\$0.28	Both Per Pay:	\$0.89
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LONG TERM DISABILITY INSURANCE

Employee Only - Benefit Amount: 60% of salary, benefit begins to pay after 180 days of disability

Age Range at Coverage Start Date	<25	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65+
Monthly Rates per \$100 of Salary	\$0.096	\$0.108	\$0.180	\$0.292	\$0.429	\$0.663	\$0.830	\$0.936	\$0.682	\$0.564

	/ 12 =		/ 100 =		x			/ 2 =	
Annual Earnings (\$120,000 Max)		Monthly Earnings				Rate Per \$100 Salary	Monthly Rate		Per Paycheck

ACCIDENTAL INJURY INSURANCE

Accidental Injury Insurance - No Pre-Existing Condition Exclusions or Evidence of Insurability (EOI) Needed

Coverage Level	Employee Only	Employee + Child(ren)	Employee + Spouse/DP	Employee + Family
Rate Per Paycheck	\$3.28	\$5.53	\$5.16	\$8.68

HOSPITAL INDEMNITY INSURANCE				
Hospital Indemnity Insurance - No Pre-Existing Condition Exclusions or Evidence of Insurability (EOI) Needed				
Coverage Level	Employee Only	Employee + Child(ren)	Employee + Spouse/DP	Employee + Family
Rate Per Paycheck	\$5.52	\$11.70	\$10.10	\$17.04

CRITICAL ILLNESS (SPECIFIED DISEASE) INSURANCE - \$10,000, \$20,000, or \$30,000 Benefit													
Critical Illness (Specified Disease Insurance) - No Pre-Existing Condition Exclusions or Evidence of Insurability (EOI) Needed													
Employee Rates Per Paycheck (With or Without Children)													
Age	<25	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80+
\$10,000	\$0.85	\$1.20	\$1.60	\$2.10	\$3.15	\$5.00	\$6.65	\$8.40	\$11.35	\$15.30	\$18.50	\$21.35	\$22.35
\$20,000	\$1.70	\$2.40	\$3.20	\$4.20	\$6.30	\$10.00	\$13.30	\$16.80	\$22.70	\$30.60	\$37.00	\$42.70	\$44.70
\$30,000	\$2.55	\$3.60	\$4.80	\$6.30	\$9.45	\$15.00	\$19.95	\$25.20	\$34.05	\$45.90	\$55.50	\$64.05	\$67.05
Spouse/Domestic Partner Rates Per Paycheck (Based on Employee's Age)													
Age	<25	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80+
\$10,000	\$0.65	\$1.00	\$1.35	\$1.80	\$2.90	\$4.75	\$6.55	\$8.50	\$11.70	\$16.05	\$19.35	\$22.30	\$23.45
\$20,000	\$1.30	\$2.00	\$2.70	\$3.60	\$5.80	\$9.50	\$13.10	\$17.00	\$23.40	\$32.10	\$38.70	\$44.60	\$46.90
\$30,000	\$1.95	\$3.00	\$4.05	\$5.40	\$8.70	\$14.25	\$19.65	\$25.50	\$35.10	\$48.15	\$58.05	\$66.90	\$70.35