



Emory University

GA Payroll Premium rates are Biweekly for industry Class A.
Rate sheet prepared by JAMES 1/14/26 12:14 PM

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For more information about policy/plan benefits and limitations, please refer to the accompanying
product brochure for each insurance policy/plan listed below.

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

Age	Coverage	Premium	EBRider	HSSCRider	Total
18-49	INDIVIDUAL	\$12.48	\$5.40	N/A	\$17.88
50-59		\$12.72	\$6.12	N/A	\$18.84
60-75		\$13.08	\$6.18	N/A	\$19.26
18-49	INSURED/SPOUSE	\$17.70	\$11.28	N/A	\$28.98
50-59		\$18.72	\$12.72	N/A	\$31.44
60-75		\$20.04	\$12.78	N/A	\$32.82
18-49	ONE-PARENT FAMILY	\$15.84	\$10.74	N/A	\$26.58
50-59		\$16.08	\$10.98	N/A	\$27.06
60-75		\$16.32	\$11.22	N/A	\$27.54
18-49	TWO-PARENT FAMILY	\$18.78	\$13.74	N/A	\$32.52
50-59		\$18.96	\$13.98	N/A	\$32.94
60-75		\$20.28	\$14.58	N/A	\$34.86

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

AFLAC HOSPITAL CHOICE - Option 1 Benefit Amount 1500 - Series B40100

Age	Coverage	Premium	EBRider	HSSCRider	Total
18-49	INDIVIDUAL	\$17.70	\$5.40	N/A	\$23.10
50-59		\$17.88	\$6.12	N/A	\$24.00
60-75		\$18.72	\$6.18	N/A	\$24.90
18-49	INSURED/SPOUSE	\$25.74	\$11.28	N/A	\$37.02
50-59		\$27.24	\$12.72	N/A	\$39.96
60-75		\$29.64	\$12.78	N/A	\$42.42
18-49	ONE-PARENT FAMILY	\$21.96	\$10.74	N/A	\$32.70
50-59		\$22.20	\$10.98	N/A	\$33.18
60-75		\$22.44	\$11.22	N/A	\$33.66
18-49	TWO-PARENT FAMILY	\$26.04	\$13.74	N/A	\$39.78
50-59		\$27.48	\$13.98	N/A	\$41.46
60-75		\$29.88	\$14.58	N/A	\$44.46

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

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

Age	Coverage	Premium	EBRider	HSSCRider	Total
18-49	INDIVIDUAL	\$23.58	\$5.40	N/A	\$28.98
50-59		\$23.82	\$6.12	N/A	\$29.94
60-75		\$25.20	\$6.18	N/A	\$31.38
18-49	INSURED/SPOUSE	\$35.10	\$11.28	N/A	\$46.38
50-59		\$37.08	\$12.72	N/A	\$49.80
60-75		\$40.68	\$12.78	N/A	\$53.46
18-49	ONE-PARENT FAMILY	\$28.98	\$10.74	N/A	\$39.72
50-59		\$29.22	\$10.98	N/A	\$40.20
60-75		\$29.46	\$11.22	N/A	\$40.68
18-49	TWO-PARENT FAMILY	\$35.34	\$13.74	N/A	\$49.08
50-59		\$37.32	\$13.98	N/A	\$51.30
60-75		\$40.92	\$14.58	N/A	\$55.50

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



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Age	Coverage	Aflac Plus Rider
18-29	INDIVIDUAL	\$1.44
30-39		\$2.04
40-49		\$3.48
50-70		\$5.94
18-29	INSURED/SPOUSE	\$2.70
30-39		\$4.02
40-49		\$6.60
50-70		\$11.34
18-29	ONE-PARENT FAMILY	\$2.88
30-39		\$3.12
40-49		\$4.20
50-70		\$6.12
18-29	TWO-PARENT FAMILY	\$3.48
30-39		\$4.50
40-49		\$6.78
50-70		\$11.40