Rate sheet prepared by Web User on 3/11/2024 11:45:10 AM.
Illinois Payroll Premium rates are 10 Month for industry Class A.

The rates shown on this insert page are for illustration purposes only; they do not imply coverage.
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

		Premium	EBR	Total
18-49	INDIVIDUAL	$31.82	$13.73	$45.55
50-59		$32.45	$15.60	$48.05
60-75		$33.38	$15.76	$49.14
18-49	INSURED/SPOUSE	$45.08	$28.86	$73.94
50-59		$47.74	$32.29	$80.03
60-75		$51.01	$32.60	$83.61
18-49	ONE-PARENT FAMILY	$40.40	$27.30	$67.70
50-59		$41.03	$27.92	$68.95
60-75		$41.65	$28.55	$70.20
18-49	TWO-PARENT FAMILY	$47.89	$34.94	$82.83
50-59		$48.36	$35.57	$83.93
60-75		$51.64	$37.13	$88.77

EBR: Extended Benefit 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.*

CANCER PROTECTION ASSURANCE PLAN LEVEL 2 - Series B70200

		Premium	IDR* (5 units)	Total
18-75	**INDIVIDUAL**	$40.20	$7.14	$47.34
18-75	**INSURED/SPOUSE**	$69.17	$16.86	$86.03
18-75	**ONE-PARENT FAMILY**	$40.20	$7.14	$47.34
18-75	**TWO-PARENT FAMILY**	$69.17	$16.86	$86.03

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

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AFLAC-SHORT TERM DISABILITY - Series A-57600

Elimination Period Accident/Sickness - 0/14 DAYS

Annual Income		$46,000	$48,000	$50,000	$52,000	$54,000	$56,000	$58,000	$60,000	$61,000	$63,000
Benefit Period	**Age**	**$2,300**	**$2,400**	**$2,500**	**$2,600**	**$2,700**	**$2,800**	**$2,900**	**$3,000**	**$3,100**	**$3,200**
3 MONTHS	18-49	$57.41	$59.90	$62.40	$64.90	$67.39	$69.89	$72.38	$74.88	$77.38	$79.87
	50-64	$57.41	$59.90	$62.40	$64.90	$67.39	$69.89	$72.38	$74.88	$77.38	$79.87
	65-74	$68.17	$71.14	$74.10	$77.06	$80.03	$82.99	$85.96	$88.92	$91.88	$94.85
6 MONTHS	18-49	$64.58	$67.39	$70.20	$73.01	$75.82	$78.62	$81.43	$84.24	$87.05	$89.86
	50-64	$75.35	$78.62	$81.90	$85.18	$88.45	$91.73	$95.00	$98.28	$101.56	$104.83
	65-74	$93.29	$97.34	$101.40	$105.46	$109.51	$113.57	$117.62	$121.68	$125.74	$129.79
12 MONTHS	18-49	$96.88	$101.09	$105.30	$109.51	$113.72	$117.94	$122.15	$126.36	$130.57	$134.78
	50-64	$114.82	$119.81	$124.80	$129.79	$134.78	$139.78	$144.77	$149.76	$154.75	$159.74
	65-74	$161.46	$168.48	$175.50	$182.52	$189.54	$196.56	$203.58	$210.60	$217.62	$224.64

AFLAC-SHORT TERM DISABILITY - Series A-57600

Elimination Period Accident/Sickness - 14/14 DAYS

Annual Income		$46,000	$48,000	$50,000	$52,000	$54,000	$56,000	$58,000	$60,000	$61,000	$63,000
Benefit Period	**Age**	**$2,300**	**$2,400**	**$2,500**	**$2,600**	**$2,700**	**$2,800**	**$2,900**	**$3,000**	**$3,100**	**$3,200**
3 MONTHS	18-49	$46.64	$48.67	$50.70	$52.73	$54.76	$56.78	$58.81	$60.84	$62.87	$64.90
	50-64	$50.23	$52.42	$54.60	$56.78	$58.97	$61.15	$63.34	$65.52	$67.70	$69.89
	65-74	$61.00	$63.65	$66.30	$68.95	$71.60	$74.26	$76.91	$79.56	$82.21	$84.86
6 MONTHS	18-49	$53.82	$56.16	$58.50	$60.84	$63.18	$65.52	$67.86	$70.20	$72.54	$74.88
	50-64	$64.58	$67.39	$70.20	$73.01	$75.82	$78.62	$81.43	$84.24	$87.05	$89.86
	65-74	$82.52	$86.11	$89.70	$93.29	$96.88	$100.46	$104.05	$107.64	$111.23	$114.82
12 MONTHS	18-49	$78.94	$82.37	$85.80	$89.23	$92.66	$96.10	$99.53	$102.96	$106.39	$109.82
	50-64	$96.88	$101.09	$105.30	$109.51	$113.72	$117.94	$122.15	$126.36	$130.57	$134.78
	65-74	$136.34	$142.27	$148.20	$154.13	$160.06	$165.98	$171.91	$177.84	$183.77	$189.70

Accident Advantage - 24-HOUR ACCIDENT OPTION 4 - Series A36000

	Premium	Total
18-75 INDIVIDUAL	$30.11	$30.11
18-75 NAMED INSURED/SPOUSE	$43.06	$43.06
18-75 ONE-PARENT FAMILY	$51.64	$51.64
18-75 TWO-PARENT FAMILY	$67.39	$67.39