



Rate sheet prepared by Web User on 4/21/2022 9:54:32 PM.
Massachusetts Payroll Premium rates are Biweekly for industry Class B.

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	Total
18-49 INDIVIDUAL	\$11.76	\$11.76
50-59	\$11.94	\$11.94
60-64	\$12.30	\$12.30
18-49 INSURED/SPOUSE	\$16.62	\$16.62
50-59	\$17.58	\$17.58
60-64	\$18.84	\$18.84
18-49 ONE-PARENT FAMILY	\$14.88	\$14.88
50-59	\$15.12	\$15.12
60-64	\$15.36	\$15.36
18-49 TWO-PARENT FAMILY	\$17.64	\$17.64
50-59	\$17.82	\$17.82
60-64	\$19.02	\$19.02

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

	Premium	Total
18-49 INDIVIDUAL	\$16.62	\$16.62
50-59	\$16.80	\$16.80
60-64	\$17.58	\$17.58
18-49 INSURED/SPOUSE	\$24.24	\$24.24
50-59	\$25.62	\$25.62
60-64	\$27.84	\$27.84
18-49 ONE-PARENT FAMILY	\$20.64	\$20.64
50-59	\$20.88	\$20.88
60-64	\$21.12	\$21.12
18-49 TWO-PARENT FAMILY	\$24.48	\$24.48
50-59	\$25.86	\$25.86
60-64	\$28.08	\$28.08