

**With most Colonial Life plans:**

- Coverage is available for your spouse and eligible dependent children.
- Benefits are paid directly to you, unless you specify otherwise.
- You can continue coverage when you retire or change jobs, with no increase in premiums.
- You may receive benefits regardless of any insurance you may have with other companies.

Everyone's benefit needs are different. That's why it's important to choose the benefits that are right for your personal situation. Complete this page and bring it to your personal, 1-to-1 benefits counseling session. At the session, you'll learn how these products fit into your overall benefits package and how they can help protect what you've worked so hard to build.

- Disability insurance** — Helps replace a portion of your income to help make ends meet if you become disabled from a covered accident or covered sickness.
- Accident insurance** — Helps offset unexpected medical expenses, such as emergency room fees, deductibles and co-payments that can result from a fracture, dislocation or other covered accidental injury.
- Life insurance** — Enables you to tailor coverage for your individual needs and helps provide financial security for your family members.
- Cancer insurance** — Helps offset the out-of-pocket medical and indirect, non-medical expenses related to cancer that most medical plans don't cover. This coverage also provides a benefit for specified cancer-screening tests.
- Critical illness insurance** — Supplements your major medical coverage by providing a lump-sum benefit you can use to pay the direct and indirect costs related to a covered critical illness.
- Hospital confinement indemnity insurance** — Provides a lump-sum benefit for a covered hospital confinement or outpatient surgery to help with co-payments and deductibles that are not covered by most major medical plans.
- Dental insurance** — Provides coverage for a variety of dental procedures, from routine cleanings to major services. Additional savings are available by visiting a network dentist.



**Fill in the following information and bring with you to your Colonial Life benefits counseling session.**

Name \_\_\_\_\_

Date \_\_\_\_\_

Department/Location \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_



Deductions per year: 26

These rates were prepared on 1/18/2019 and are valid for 90 days.

## Individual Accident (IAC4000) for AZ

Applicable to Policy Form IAC4000

### ● On/Off-Job Accident Coverage

BENEFIT LEVEL	ISSUE AGE	NAMED INSURED	EMPLOYEE & SPOUSE	ONE-PARENT FAMILY	TWO-PARENT FAMILY
Preferred	0-80	\$8.75	\$12.90	\$15.78	\$19.73

## Individual Disability - ISTD3000 for AZ AA Risk Class

Applicable to policy form Individual Disability

### ● On/Off Job Accident and On/Off Job Sickness

#### 3 Month Benefit Period

ELIMINATION PERIOD	ISSUE AGE	\$500*	\$1,000*	\$1,500*	\$2,000*
7 days Accident/7 days Sickness	17-49	\$7.27	\$14.54	\$21.81	\$29.08
	50-64	\$8.75	\$17.49	\$26.24	\$34.98
	65-74	\$10.34	\$20.68	\$31.02	\$41.35
14 days Accident/14 days Sickness	17-49	\$5.19	\$10.38	\$15.58	\$20.77
	50-64	\$6.02	\$12.05	\$18.07	\$24.09
	65-74	\$7.29	\$14.58	\$21.88	\$29.17

\*monthly benefit amount

#### 6 Month Benefit Period

ELIMINATION PERIOD	ISSUE AGE	\$500*	\$1,000*	\$1,500*	\$2,000*
7 days Accident/7 days Sickness	17-49	\$9.23	\$18.46	\$27.69	\$36.92
	50-64	\$12.12	\$24.23	\$36.35	\$48.46
	65-74	\$16.52	\$33.05	\$49.57	\$66.09
14 days Accident/14 days Sickness	17-49	\$6.58	\$13.15	\$19.73	\$26.31
	50-64	\$8.65	\$17.31	\$25.96	\$34.62
	65-74	\$11.40	\$22.80	\$34.20	\$45.60

\*monthly benefit amount

## Cancer Assist for AZ

### \$5,000 Initial Diagnosis Benefit

Applicable to policy form CanAssist

COVERAGE LEVEL	ISSUE AGE	NAMED INSURED	EMPLOYEE AND SPOUSE	ONE-PARENT FAMILY	TWO-PARENT FAMILY
Level 2	17-75	\$10.38	\$16.62	\$10.75	\$16.98
Level 3	17-75	\$12.69	\$21.49	\$13.13	\$21.92

### \$10,000 Initial Diagnosis Benefit

COVERAGE LEVEL	ISSUE AGE	NAMED INSURED	EMPLOYEE AND SPOUSE	ONE-PARENT FAMILY	TWO-PARENT FAMILY
Level 2	17-75	\$13.84	\$22.39	\$14.44	\$22.98
Level 3	17-75	\$16.15	\$27.26	\$16.82	\$27.92

## Critical Illness 1.0 for AZ

Applicable to policy form CI-1.0

### Non-Tobacco Rates

	ISSUE AGE	NAMED INSURED	EMPLOYEE & SPOUSE	ONE-PARENT FAMILY	TWO-PARENT FAMILY
\$10,000	17-24	\$1.02	\$1.57	\$1.02	\$1.57
	25-29	\$1.34	\$2.03	\$1.34	\$2.03
	30-34	\$1.66	\$2.58	\$1.66	\$2.58
	35-39	\$2.35	\$3.65	\$2.35	\$3.65
	40-44	\$3.23	\$4.98	\$3.23	\$4.98
	45-49	\$4.43	\$6.83	\$4.43	\$6.83
	50-54	\$5.86	\$9.00	\$5.86	\$9.00

## Term Life 1000 for AZ

Applicable to policy form Term1000

### ● 20 Year Term Base Plan

#### Non-Tobacco Rates

ISSUE AGE	\$10,000	\$20,000
30	\$2.46	\$3.06
35	\$2.55	\$3.26
40	\$2.94	\$4.04