

## Supplemental Medical Plans - Aetna

<b>Critical Illness Monthly Premium - Non-Tobacco User</b>				
Employee amount: \$10,000				
Spouse amount: \$5,000				
Child amount: \$5,000				
Age	EE	EE + SP	EE + Child	EE + Fam
16-29	\$3.42	\$5.40	\$3.42	\$5.40
30-39	\$6.63	\$10.21	\$6.63	\$10.21
40-49	\$12.65	\$19.24	\$12.65	\$19.24
50-59	\$24.93	\$37.67	\$24.93	\$37.67
60+	\$44.00	\$66.27	\$44.00	\$66.27

<b>Critical Illness Monthly Premium- Tobacco User</b>				
Employee amount: \$10,000				
Spouse amount: \$5,000				
Child amount: \$5,000				
Age	EE	EE + SP	EE + Child	EE + Fam
16-29	\$5.77	\$9.10	\$5.77	\$9.10
30-39	\$11.16	\$17.20	\$11.16	\$17.20
40-49	\$21.32	\$32.43	\$21.32	\$32.43
50-59	\$42.00	\$63.47	\$42.00	\$63.47
60+	\$74.14	\$111.67	\$74.14	\$111.67

<b>Critical Illness Monthly Premium - Non-Tobacco User</b>				
Employee amount: \$20,000				
Spouse amount: \$10,000				
Child amount: \$10,000				
Age	EE	EE + SP	EE + Child	EE + Fam
16-29	\$6.67	\$10.52	\$6.67	\$10.52
30-39	\$12.90	\$19.88	\$12.90	\$19.88
40-49	\$24.64	\$37.48	\$24.64	\$37.48
50-59	\$48.55	\$73.35	\$48.55	\$73.35
60+	\$85.68	\$129.06	\$85.68	\$129.06

<b>Critical Illness Monthly Premium - Tobacco User</b>				
Employee amount: \$20,000				
Spouse amount: \$10,000				
Child amount: \$10,000				
Age	EE	EE + SP	EE + Child	EE + Fam
16-29	\$11.23	\$17.72	\$11.23	\$17.72
30-39	\$21.74	\$33.49	\$21.74	\$33.49
40-49	\$41.51	\$63.15	\$41.51	\$63.15
50-59	\$81.80	\$123.59	\$81.80	\$123.59
60+	\$144.37	\$217.46	\$144.37	\$217.46

<b>Supplemental Accident - Monthly Premium</b>				
Tier	EE	EE + SP	EE + Child	EE + Fam
Premium	\$8.25	\$14.36	\$18.07	\$23.41

<b>Supplemental Hospital Indemnity - Monthly Premium</b>				
Tier	EE	EE + SP	EE + Child	EE + Fam
Premium	\$13.67	\$28.70	\$21.87	\$34.17