

Town of Acushnet: Aflac Rate Sheet

Contact Our Agent for Details, Options, Policy Changes, Quotes, and to Apply/Enroll

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Url Below for Account Landing Page with Product Brochures and Videos:

<https://www.aflacenrollment.com/TownofAcushnet/Y28460309514>

The rates shown on this insert page are for illustration purposes only; they do not imply coverage. For more information about policy benefits and limitations, please refer to the accompanying product brochure for each policy listed below and discuss with your Agent.

MA Payroll: Bi-Weekly Premium Rates for Industry Class B

ACCIDENT ADVANTAGE 24-HOUR *Pre-Tax Deduction: Est 25% Savings in Payroll Taxes*

| AGE | | <u>OPTION 4 - Series A36000</u> |
|-------|-------------------|---------------------------------|
| 18-64 | INDIVIDUAL | \$13.74 |
| 18-64 | INSURED + SPOUSE | \$18.30 |
| 18-64 | ONE PARENT FAMILY | \$21.24 |
| 18-64 | TWO PARENT FAMILY | \$26.82 |

CANCER PROTECTION ASSURANCE *Pre-Tax Deduction: Est 25% Savings in Payroll Taxes*

| AGE | Coverage | <u>Level 1 - Series B70100</u> | OR | <u>Level 2 - Series B70200</u> |
|-------|-------------------|--------------------------------|----|--------------------------------|
| 18-64 | INDIVIDUAL | \$7.66 | | \$15.46 |
| 18-64 | INSURED + SPOUSE | \$12.16 | | \$26.60 |
| 18-64 | ONE-PARENT FAMILY | \$7.66 | | \$15.46 |
| 18-64 | TWO-PARENT FAMILY | \$12.15 | | \$26.60 |

Includes Annual Cancer Screening Wellness Benefit Per Person: \$40 Level 1 and \$75 Level 2

AFLAC PLUS RIDER *Pre-Tax Deduction: Est 25% Savings in Payroll Taxes*

| AGE | <u>INDIVIDUAL</u> | <u>INSURED + SPOUSE</u> | <u>ONE-PARENT FAMILY</u> | <u>TWO-PARENT FAMILY</u> |
|--------------|-------------------|-------------------------|--------------------------|--------------------------|
| 18-29 | \$ 1.44 | \$ 2.70 | \$ 2.88 | \$ 3.48 |
| 30-39 | \$ 2.04 | \$ 4.02 | \$ 3.12 | \$ 4.50 |
| 40-49 | \$ 3.48 | \$ 6.60 | \$ 4.20 | \$ 6.78 |
| 50-64 | \$ 5.94 | \$ 11.34 | \$ 6.12 | \$ 11.40 |

Lock in Rates at current age of enrollment.

HOSPITAL CHOICE *Option 1: Hospitalization Benefit Amount \$1,000 - Series B40100 (other amount options)*

Pre-Tax Deduction: Est 25% Savings in Payroll Taxes

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

Options available to increase Hospitalization Benefit to \$1,500 or \$2,000

Short Term Disability and Life Insurance (Whole and Term) are Quoted Individually to You by our Agent