

Critical Illness Non-Smoker (100% TM Paid)

Per Pay (26)

Age	\$10,000		\$20,000		\$30,000	
	Team Member	Family	Team Member	Family	Team Member	Family
Age 16	\$1.43	\$2.66	\$1.98	\$3.54	\$2.51	\$4.42
Age 20	\$1.61	\$2.97	\$2.31	\$4.11	\$3.04	\$5.28
Age 25	\$1.85	\$3.35	\$2.82	\$4.91	\$3.76	\$6.45
Age 30	\$2.40	\$4.28	\$3.82	\$6.56	\$5.23	\$8.86
Age 35	\$2.71	\$4.74	\$4.50	\$7.65	\$6.30	\$10.58
Age 40	\$3.30	\$5.66	\$5.76	\$9.66	\$8.24	\$13.68
Age 45	\$4.68	\$7.90	\$8.54	\$14.16	\$12.38	\$20.40
Age 50	\$6.40	\$10.67	\$12.07	\$19.86	\$17.72	\$29.02
Age 55	\$10.06	\$16.58	\$19.29	\$31.54	\$28.54	\$46.51
Age 60	\$11.57	\$19.01	\$22.50	\$36.69	\$33.41	\$54.38
Age 65	\$19.70	\$32.28	\$38.58	\$62.90	\$57.48	\$93.54
Age 70	\$24.66	\$40.42	\$48.48	\$79.20	\$72.32	\$117.98

Critical Illness Smoker (100% TM Paid)

Per Pay (26)

Age	\$10,000		\$20,000		\$30,000	
	Team Member	Family	Team Member	Family	Team Member	Family
Age 16	\$1.64	\$2.98	\$2.46	\$4.30	\$3.28	\$5.64
Age 20	\$1.90	\$3.42	\$3.00	\$5.18	\$4.08	\$6.94
Age 25	\$2.28	\$4.02	\$3.74	\$6.38	\$5.22	\$8.76
Age 30	\$3.06	\$5.33	\$5.23	\$8.82	\$7.39	\$12.34
Age 35	\$3.79	\$6.49	\$6.70	\$11.22	\$9.62	\$15.93
Age 40	\$5.24	\$8.82	\$9.62	\$15.92	\$13.98	\$23.02
Age 45	\$7.32	\$12.18	\$13.82	\$22.72	\$20.32	\$33.26
Age 50	\$9.50	\$15.67	\$18.31	\$29.94	\$27.12	\$44.22
Age 55	\$13.38	\$21.90	\$26.08	\$42.51	\$38.78	\$63.07
Age 60	\$18.67	\$30.50	\$36.71	\$59.71	\$54.72	\$88.91
Age 65	\$32.64	\$53.26	\$64.46	\$104.88	\$96.26	\$156.50
Age 70	\$32.64	\$53.26	\$64.46	\$104.88	\$96.26	\$156.50

Accident (100% TM Paid)

Per Pay (26)

Plan	Team Member	Team Member + Spouse/DP	Team Member + Child	Family
Low Plan	\$3.89	\$6.66	\$7.04	\$9.21
High Plan	\$7.16	\$11.93	\$12.14	\$16.62

Hospital Indemnity

Per Pay (26)

Plan	Team Member	Team Member + Spouse/DP	Team Member + Child	Family
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Inova-Paid Low Plan (for team members in HDP)

Total Premium	\$4.99	\$11.13	\$8.48	\$14.05
Team Member Contribution	\$0.00	\$0.00	\$0.00	\$0.00
Inova Cost	\$4.99	\$11.13	\$8.48	\$14.05

Voluntary Buy-Up High (for team members in HDP)

Total Premium	\$12.25	\$27.30	\$20.81	\$34.46
Team Member Contribution	\$7.26	\$16.17	\$12.32	\$20.41
Inova Cost	\$4.99	\$11.13	\$8.49	\$14.05

Voluntary Low

Total Premium	\$6.63	\$14.82	\$11.31	\$18.72
Team Member Contribution	\$6.63	\$14.82	\$11.31	\$18.72
Inova Cost	\$0.00	\$0.00	\$0.00	\$0.00

Voluntary High

Total Premium	\$12.25	\$27.30	\$20.81	\$34.46
Team Member Contribution	\$12.25	\$27.30	\$20.81	\$34.46
Inova Cost	\$0.00	\$0.00	\$0.00	\$0.00