Published (Adjusted) Life Insurance Premiums
Effective January 1, 2009
For SPOC-Covered Employees Only

Basic Life Premiums (State Funded)

Code	Age Group	Amount of Insurance Available	Monthly Adjusted Premium
A2	< 65	$ 20,000	$ 1.13
B2	65-69	$ 13,200	$ 0.75
C2	70-74	$ 8,300	$ 0.47
X2	75 & Over	$ 5,700	$ 0.32

Optional Life Insurance Rates (Employee Funded)

$5,000
Schedule I

Code	Age	Amount of Insurance Available	Cost Monthly
DA	< 30	$ 5,000	$ 0.21
EA	30-34	$ 5,000	$ 0.25
FA	35-39	$ 5,000	$ 0.32
GA	40-44	$ 5,000	$ 0.42
HA	45-49	$ 5,000	$ 0.61
IA	50-54	$ 5,000	$ 1.00
JA	55-59	$ 5,000	$ 1.71
KA	60-64	$ 5,000	$ 2.64
LA	65-69	$ 3,300	$ 2.74
MA	70-74	$ 2,075	$ 2.52
NA	75-79	$ 1,425	$ 2.34
OA	80-84	$ 1,000	$ 1.65
PA	85-89	$ 1,000	$ 1.65
QA	90 & Over	$ 1,000	$ 1.65

$10,000
Schedule II

Code	Age	Amount of Insurance Available	Cost Monthly
DB	< 30	$ 10,000	$ 0.42
EB	30-34	$ 10,000	$ 0.50
FB	35-39	$ 10,000	$ 0.64
GB	40-44	$ 10,000	$ 0.83
HB	45-49	$ 10,000	$ 1.22
IB	50-54	$ 10,000	$ 2.00
JB	55-59	$ 10,000	$ 3.42
KB	60-64	$ 10,000	$ 5.27
LB	65-69	$ 6,600	$ 5.47
MB	70-74	$ 4,150	$ 5.03
NB	75-79	$ 2,850	$ 4.69
OB	80-84	$ 2,000	$ 3.29
PB	85-89	$ 2,000	$ 3.29
QB	90 & Over	$ 2,000	$ 3.29

$15,000
Schedule III

Code	Age	Amount of Insurance Available	Cost Monthly
DC	< 30	$ 15,000	$ 0.63
EC	30-34	$ 15,000	$ 0.75
FC	35-39	$ 15,000	$ 0.96
GC	40-44	$ 15,000	$ 1.25
HC	45-49	$ 15,000	$ 1.82
IC	50-54	$ 15,000	$ 3.01
JC	55-59	$ 15,000	$ 5.13
KC	60-64	$ 15,000	$ 7.91
LC	65-69	$ 9,900	$ 8.20
MC	70-74	$ 6,225	$ 7.54
NC	75-79	$ 4,275	$ 7.03
OC	80-84	$ 3,000	$ 4.94
PC	85-89	$ 3,000	$ 4.94
QC	90 & Over	$ 3,000	$ 4.94

$20,000
Schedule IV

Code	Age	Amount of Insurance Available	Cost Monthly
DD	< 30	$ 20,000	$ 0.84
ED	30-34	$ 20,000	$ 0.99
FD	35-39	$ 20,000	$ 1.28
GD	40-44	$ 20,000	$ 1.66
HD	45-49	$ 20,000	$ 2.43
ID	50-54	$ 20,000	$ 4.01
JD	55-59	$ 20,000	$ 6.83
KD	60-64	$ 20,000	$ 10.54
LD	65-69	$ 13,200	$ 10.93
MD	70-74	$ 8,300	$ 10.06
ND	75-79	$ 5,700	$ 9.37
OD	80-84	$ 4,000	$ 6.58
PD	85-89	$ 4,000	$ 6.58
QD	90 & Over	$ 4,000	$ 6.58

Effective January 1, 2009

Optional (Employee Funded) Supplemental Life Insurance Rates
Effective January 1, 2009
For SPOC-Covered Employees Only

$25,000
Schedule V

Code	Age	Amount of Insurance Available	Cost Monthly
DE	< 30	$ 25,000	$ 1.05
EE	30-34	$ 25,000	$ 1.25
FE	35-39	$ 25,000	$ 1.60
GE	40-44	$ 25,000	$ 2.08
HE	45-49	$ 25,000	$ 3.04
IE	50-54	$ 25,000	$ 5.01
JE	55-59	$ 25,000	$ 8.54
KE	60-64	$ 25,000	$ 13.18
LE	65-69	$ 16,500	$ 13.66
ME	70-74	$ 10,375	$ 12.57
NE	75-79	$ 7,125	$ 11.72
OE	80-84	$ 5,000	$ 8.22
PE	85-89	$ 5,000	$ 8.22
QE	90 & Over	$ 5,000	$ 8.22

$30,000
Schedule VI

Code	Age	Amount of Insurance Available	Cost Monthly
DF	< 30	$ 30,000	$ 1.25
EF	30-34	$ 30,000	$ 1.49
FF	35-39	$ 30,000	$ 1.92
GF	40-44	$ 30,000	$ 2.49
HF	45-49	$ 30,000	$ 3.65
IF	50-54	$ 30,000	$ 6.01
JF	55-59	$ 30,000	$ 10.25
KF	60-64	$ 30,000	$ 15.81
LF	65-69	$ 19,800	$ 16.40
MF	70-74	$ 12,450	$ 15.09
NF	75-79	$ 8,550	$ 14.06
OF	80-84	$ 6,000	$ 9.87
PF	85-89	$ 6,000	$ 9.87
QF	90 & Over	$ 6,000	$ 9.87