

Supplemental Life
PREMIUM RATE GRID



City of El Paso

Eligibility

You are eligible to enroll if you work the minimum number of hours per week by your employer, and you have satisfied any waiting period.

Supplemental Life

Employee Benefit: **\$10,000 to \$200,000 in \$10,000 increments.**
Spouse Benefit: **\$10,000 to \$100,000 in \$10,000 increments.**
(not to exceed 50% of the employee benefit)

Note: Spouse may not have coverage unless the employee has coverage.

Guarantee Issue*

Employee	\$200,000
Spouse	\$20,000

*Assumes 60% participation

Child Coverage

Birth to 14 days:	\$2,000
15 days to 6 months:	\$2,000
6 months to age 26:	\$2,000 to \$10,000 in increments of \$2,000

Benefits reduce by 35% of the original amount at age 65; and further reduce by: 50% of the original amount at age 70; and 70% of the original amount at age 75.

Supplemental Life

Premium Cost (Based on 24 payroll deductions per year)

Benefit Amount	ATTAINED AGE											
	<20	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74
\$10,000	\$0.23	\$0.23	\$0.27	\$0.36	\$0.41	\$0.50	\$0.77	\$1.13	\$2.12	\$3.24	\$5.72	\$9.27
\$20,000	\$0.45	\$0.45	\$0.54	\$0.72	\$0.81	\$0.99	\$1.53	\$2.25	\$4.23	\$6.48	\$11.43	\$18.54
\$30,000	\$0.68	\$0.68	\$0.81	\$1.08	\$1.22	\$1.49	\$2.30	\$3.38	\$6.35	\$9.72	\$17.15	\$27.81
\$40,000	\$0.90	\$0.90	\$1.08	\$1.44	\$1.62	\$1.98	\$3.06	\$4.50	\$8.46	\$12.96	\$22.86	\$37.08
\$50,000	\$1.13	\$1.13	\$1.35	\$1.80	\$2.03	\$2.48	\$3.83	\$5.63	\$10.58	\$16.20	\$28.58	\$46.35
\$60,000	\$1.35	\$1.35	\$1.62	\$2.16	\$2.43	\$2.97	\$4.59	\$6.75	\$12.69	\$19.44	\$34.29	\$55.62
\$70,000	\$1.58	\$1.58	\$1.89	\$2.52	\$2.84	\$3.47	\$5.36	\$7.88	\$14.81	\$22.68	\$40.01	\$64.89
\$80,000	\$1.80	\$1.80	\$2.16	\$2.88	\$3.24	\$3.96	\$6.12	\$9.00	\$16.92	\$25.92	\$45.72	\$74.16
\$90,000	\$2.03	\$2.03	\$2.43	\$3.24	\$3.65	\$4.46	\$6.89	\$10.13	\$19.04	\$29.16	\$51.44	\$83.43
\$100,000	\$2.25	\$2.25	\$2.70	\$3.60	\$4.05	\$4.95	\$7.65	\$11.25	\$21.15	\$32.40	\$57.15	\$92.70
\$110,000	\$2.48	\$2.48	\$2.97	\$3.96	\$4.46	\$5.45	\$8.42	\$12.38	\$23.27	\$35.64	\$62.87	\$101.97
\$120,000	\$2.70	\$2.70	\$3.24	\$4.32	\$4.86	\$5.94	\$9.18	\$13.50	\$25.38	\$38.88	\$68.58	\$111.24
\$130,000	\$2.93	\$2.93	\$3.51	\$4.68	\$5.27	\$6.44	\$9.95	\$14.63	\$27.50	\$42.12	\$74.30	\$120.51
\$140,000	\$3.15	\$3.15	\$3.78	\$5.04	\$5.67	\$6.93	\$10.71	\$15.75	\$29.61	\$45.36	\$80.01	\$129.78
\$150,000	\$3.38	\$3.38	\$4.05	\$5.40	\$6.08	\$7.43	\$11.48	\$16.88	\$31.73	\$48.60	\$85.73	\$139.05
\$160,000	\$3.60	\$3.60	\$4.32	\$5.76	\$6.48	\$7.92	\$12.24	\$18.00	\$33.84	\$51.84	\$91.44	\$148.32
\$170,000	\$3.83	\$3.83	\$4.59	\$6.12	\$6.89	\$8.42	\$13.01	\$19.13	\$35.96	\$55.08	\$97.16	\$157.59
\$180,000	\$4.05	\$4.05	\$4.86	\$6.48	\$7.29	\$8.91	\$13.77	\$20.25	\$38.07	\$58.32	\$102.87	\$166.86
\$190,000	\$4.28	\$4.28	\$5.13	\$6.84	\$7.70	\$9.41	\$14.54	\$21.38	\$40.19	\$61.56	\$108.59	\$176.13
\$200,000	\$4.50	\$4.50	\$5.40	\$7.20	\$8.10	\$9.90	\$15.30	\$22.50	\$42.30	\$64.80	\$114.30	\$185.40

Employee Supplemental Life	
Monthly rates per \$1,000	
Age	Rates
Under 20	\$0.045
20-24	\$0.045
25-29	\$0.054
30-34	\$0.072
35-39	\$0.081
40-44	\$0.099
45-49	\$0.153
50-54	\$0.225
55-59	\$0.423
60-64	\$0.648
65-69	\$1.143
70-74	\$1.854
75+	*

* Please contact your HR Dept.

Dependent Life (Children)	
Monthly Premium per Family	
Life	
\$2,000	\$0.200
\$10,000	\$1.000

Products and services marketed under the Dearborn National® brand and the star logo are underwritten and/or provided by Dearborn National® Life Insurance Company® (Downers Grove, IL) (formerly known as Fort Dearborn Life Insurance Company®) in all states (excluding New York), the District of Columbia, the United States Virgin Islands, the British Virgin Islands, Guam and Puerto Rico. Policy Provisions may vary by state. Refer to a certificate or enrollment brochure for details about coverage features and limitations.

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	<20	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74
\$10,000	\$0.83	\$0.83	\$0.83	\$0.83	\$0.83	\$0.83	\$0.83	\$0.83	\$0.83	\$0.83	\$0.83	\$0.83
\$20,000	\$1.65	\$1.65	\$1.65	\$1.65	\$1.65	\$1.65	\$1.65	\$1.65	\$1.65	\$1.65	\$1.65	\$1.65
\$30,000	\$2.48	\$2.48	\$2.48	\$2.48	\$2.48	\$2.48	\$2.48	\$2.48	\$2.48	\$2.48	\$2.48	\$2.48
\$40,000	\$3.30	\$3.30	\$3.30	\$3.30	\$3.30	\$3.30	\$3.30	\$3.30	\$3.30	\$3.30	\$3.30	\$3.30
\$50,000	\$4.13	\$4.13	\$4.13	\$4.13	\$4.13	\$4.13	\$4.13	\$4.13	\$4.13	\$4.13	\$4.13	\$4.13
\$60,000	\$4.95	\$4.95	\$4.95	\$4.95	\$4.95	\$4.95	\$4.95	\$4.95	\$4.95	\$4.95	\$4.95	\$4.95
\$70,000	\$5.78	\$5.78	\$5.78	\$5.78	\$5.78	\$5.78	\$5.78	\$5.78	\$5.78	\$5.78	\$5.78	\$5.78
\$80,000	\$6.60	\$6.60	\$6.60	\$6.60	\$6.60	\$6.60	\$6.60	\$6.60	\$6.60	\$6.60	\$6.60	\$6.60
\$90,000	\$7.43	\$7.43	\$7.43	\$7.43	\$7.43	\$7.43	\$7.43	\$7.43	\$7.43	\$7.43	\$7.43	\$7.43
\$100,000	\$8.25	\$8.25	\$8.25	\$8.25	\$8.25	\$8.25	\$8.25	\$8.25	\$8.25	\$8.25	\$8.25	\$8.25

Spouse Supplemental Life	
Monthly rates per \$1,000	
Age	Rates
Under 20	\$0.165
20-24	\$0.165
25-29	\$0.165
30-34	\$0.165
35-39	\$0.165
40-44	\$0.165
45-49	\$0.165
50-54	\$0.165
55-59	\$0.165
60-64	\$0.165
65-69	\$0.165
70-74	\$0.165
75+	*

* Please contact your HR Dept.

Dependent Life (Children)	
Monthly Premium per Family	
Life	
\$2,000	\$0.200
\$10,000	\$1.000

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