



Shrewsberry and Associates

Rate sheet prepared by Web User on 11/28/2022 2:14:51 PM.
 Indiana Payroll Premium rates are Biweekly for industry Class B.

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

Accident Advantage - 24-Hour ACCIDENT INCLUDING WELLNESS BENEFIT OPTION 2 - Series A36000

	Premium	Total
18-75 INDIVIDUAL	\$9.84	\$9.84
18-75 NAMED INSURED/SPOUSE	\$13.14	\$13.14
18-75 ONE-PARENT FAMILY	\$15.48	\$15.48
18-75 TWO-PARENT FAMILY	\$19.50	\$19.50

CANCER PROTECTION ASSURANCE PLAN LEVEL 2 - Series B70200

	Premium	Total
18-75 INDIVIDUAL	\$15.46	\$15.46
18-75 INSURED/SPOUSE	\$26.60	\$26.60
18-75 ONE-PARENT FAMILY	\$15.46	\$15.46
18-75 TWO-PARENT FAMILY	\$26.60	\$26.60

CRITICAL CARE PROTECTION POLICY - Series A74100

Individual			One Parent Family		
Age	Premium	Total	Age	Premium	Total
18-35	\$4.32	\$4.32	18-35	\$4.80	\$4.80
36-45	\$6.72	\$6.72	36-45	\$6.96	\$6.96
46-55	\$9.36	\$9.36	46-55	\$9.66	\$9.66
56-70	\$12.60	\$12.60	56-70	\$12.90	\$12.90
Insured/Spouse			Two Parent Family		
Age	Premium	Total	Age	Premium	Total
18-35	\$6.18	\$6.18	18-35	\$7.14	\$7.14
36-45	\$10.32	\$10.32	36-45	\$11.40	\$11.40
46-55	\$15.48	\$15.48	46-55	\$16.80	\$16.80
56-70	\$22.68	\$22.68	56-70	\$24.24	\$24.24



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AFLAC HOSPITAL CHOICE - Option 1 Benefit Amount 1000 - Series B40100

	Premium	Total
18-49 INDIVIDUAL	\$12.72	\$12.72
50-59	\$12.96	\$12.96
60-75	\$13.32	\$13.32
18-49 INSURED/SPOUSE	\$18.00	\$18.00
50-59	\$19.02	\$19.02
60-75	\$20.34	\$20.34
18-49 ONE-PARENT FAMILY	\$16.14	\$16.14
50-59	\$16.38	\$16.38
60-75	\$16.62	\$16.62
18-49 TWO-PARENT FAMILY	\$19.08	\$19.08
50-59	\$19.32	\$19.32
60-75	\$20.58	\$20.58