

# Competitive Rates for Groups Under 50 Employees

Rates below are based on Elimination Period of 7 days for accident or sickness and Benefit Duration of 26 weeks.

Monthly Rates Payable Quarterly in Arrears (\$15 minimum) Groups Sitused in Zip Code range 10000-14999									
		50%				60%			
Eligible Lives	Benefit Amount	Stand-Alone		Cross Sold		Stand-Alone		Cross Sold	
		Males	Females	Males	Females	Males	Females	Males	Females
2-49	\$170	\$2.60	\$5.75	\$2.30	\$5.00	\$2.83	\$6.27	\$2.51	\$5.45
	\$200	\$2.90	\$6.42	\$2.59	\$5.64	\$3.24	\$7.19	\$2.90	\$6.32
	\$250	\$3.39	\$7.53	\$3.07	\$6.70	\$3.80	\$8.43	\$3.44	\$7.51
	\$300	\$3.89	\$8.64	\$3.55	\$7.77	\$4.59	\$10.19	\$4.19	\$9.17
	\$350	\$4.38	\$9.75	\$4.03	\$8.83	\$5.17	\$11.50	\$4.75	\$10.42
	\$400	\$4.88	\$10.86	\$4.51	\$9.90	\$5.75	\$12.81	\$5.32	\$11.68
	\$450	\$5.37	\$11.97	\$4.99	\$10.96	\$6.34	\$14.12	\$5.89	\$12.94
	\$500	\$5.87	\$13.08	\$5.47	\$12.03	\$6.92	\$15.43	\$6.45	\$14.19
10-49	\$550	\$6.36	\$14.19	\$5.95	\$13.09	\$7.51	\$16.74	\$7.02	\$15.45
	\$600	\$6.86	\$15.30	\$6.43	\$14.16	\$8.09	\$18.05	\$7.59	\$16.71
	\$650	\$7.35	\$16.41	\$6.91	\$15.22	\$8.68	\$19.36	\$8.15	\$17.96
	\$700	\$7.85	\$17.52	\$7.39	\$16.29	\$9.26	\$20.67	\$8.72	\$19.22

Monthly Rates Payable Annual* In Advance (\$60 minimum) Groups Sitused in Zip Code range 10000-11999									
		50%				60%			
Eligible Lives	Benefit Amount	Stand-Alone		Cross Sold		Stand-Alone		Cross Sold	
		Males	Females	Males	Females	Males	Females	Males	Females
2-49	\$170	\$1.93	\$4.49	\$1.68	\$3.92	\$2.10	\$4.89	\$1.83	\$4.27
	\$200	\$2.18	\$5.08	\$1.91	\$4.48	\$2.44	\$5.69	\$2.14	\$5.02
	\$250	\$2.59	\$6.06	\$2.30	\$5.41	\$2.90	\$6.79	\$2.57	\$6.06
	\$300	\$3.00	\$7.04	\$2.68	\$6.34	\$3.54	\$8.31	\$3.16	\$7.48
	\$350	\$3.41	\$8.02	\$3.07	\$7.27	\$4.02	\$9.46	\$3.62	\$8.58
	\$400	\$3.82	\$9.00	\$3.45	\$8.20	\$4.50	\$10.62	\$4.07	\$9.67
	\$450	\$4.23	\$9.98	\$3.84	\$9.13	\$4.99	\$11.77	\$4.53	\$10.77
	\$500	\$4.64	\$10.96	\$4.22	\$10.06	\$5.47	\$12.93	\$4.98	\$11.87
10-49	\$550	\$5.05	\$11.94	\$4.61	\$10.99	\$5.95	\$14.09	\$5.44	\$12.97
	\$600	\$5.46	\$12.92	\$4.99	\$11.92	\$6.44	\$15.24	\$5.89	\$14.06
	\$650	\$5.87	\$13.90	\$5.38	\$12.85	\$6.92	\$16.40	\$6.34	\$15.16
	\$700	\$6.28	\$14.88	\$5.76	\$13.78	\$7.41	\$17.56	\$6.80	\$16.26

		Monthly Rates Payable Annual* In Advance (\$60 minimum) Groups Sitused in Zip Code range 12000-14999							
		50%				60%			
Eligible Lives	Benefit Amount	Stand-Alone		Cross Sold		Stand-Alone		Cross Sold	
		Males	Females	Males	Females	Males	Females	Males	Females
2-49	\$170	\$2.35	\$5.11	\$2.05	\$4.46	\$2.56	\$5.57	\$2.24	\$4.86
	\$200	\$2.62	\$5.71	\$2.31	\$5.03	\$2.94	\$6.39	\$2.58	\$5.63
	\$250	\$3.07	\$6.71	\$2.73	\$5.98	\$3.44	\$7.51	\$3.06	\$6.69
	\$300	\$3.52	\$7.71	\$3.16	\$6.93	\$4.16	\$9.09	\$3.72	\$8.17
	\$350	\$3.97	\$8.71	\$3.58	\$7.88	\$4.69	\$10.27	\$4.23	\$9.29
	\$400	\$4.42	\$9.71	\$4.01	\$8.83	\$5.22	\$11.45	\$4.73	\$10.42
	\$450	\$4.87	\$10.71	\$4.43	\$9.76	\$5.75	\$12.63	\$5.23	\$11.54
	\$500	\$5.32	\$11.71	\$4.86	\$10.73	\$6.28	\$13.81	\$5.73	\$12.66
10-49	\$550	\$5.77	\$12.71	\$5.28	\$11.68	\$6.81	\$14.99	\$6.23	\$13.78
	\$600	\$6.22	\$13.71	\$5.71	\$12.63	\$7.34	\$16.17	\$6.73	\$14.90
	\$650	\$6.67	\$14.71	\$6.13	\$13.58	\$7.87	\$17.35	\$7.23	\$16.02
	\$700	\$7.12	\$15.71	\$6.56	\$14.53	\$8.40	\$18.53	\$7.74	\$17.14

		Annual Rates Payable Annual In Advance (\$60 minimum) Groups Sitused in Zip Code range 10000-11999							
		50%				60%			
Eligible Lives	Benefit Amount	Stand-Alone		Cross Sold		Stand-Alone		Cross Sold	
		Males	Females	Males	Females	Males	Females	Males	Females
2-49	\$170	\$23.16	\$53.88	\$20.16	\$47.04	\$25.20	\$58.68	\$21.96	\$51.24
	\$200	\$26.16	\$60.96	\$22.92	\$53.76	\$29.28	\$68.28	\$25.68	\$60.24
	\$250	\$31.08	\$72.72	\$27.60	\$64.92	\$34.80	\$81.48	\$30.84	\$72.72
	\$300	\$36.00	\$84.48	\$32.16	\$76.08	\$42.48	\$99.72	\$37.92	\$89.76
	\$350	\$40.92	\$96.24	\$36.84	\$87.24	\$48.24	\$113.52	\$43.44	\$102.96
	\$400	\$45.84	\$108.00	\$41.40	\$98.40	\$54.00	\$127.44	\$48.84	\$116.04
	\$450	\$50.76	\$119.76	\$46.08	\$109.56	\$59.88	\$141.24	\$54.36	\$129.24
	\$500	\$55.68	\$131.52	\$50.64	\$120.72	\$65.64	\$155.16	\$59.76	\$142.44
10-49	\$550	\$60.60	\$143.28	\$55.32	\$131.88	\$71.40	\$169.08	\$65.28	\$155.64
	\$600	\$65.52	\$155.04	\$59.88	\$143.04	\$77.28	\$182.88	\$70.68	\$168.72
	\$650	\$70.44	\$166.80	\$64.56	\$154.20	\$83.04	\$196.80	\$76.08	\$181.92
	\$700	\$75.36	\$178.56	\$69.12	\$165.36	\$88.92	\$210.72	\$81.60	\$195.12

		Annual Rates Payable Annual In Advance (\$60 minimum) Groups Sitused in Zip Code range 12000-14999							
		50%				60%			
Eligible Lives	Benefit Amount	Stand-Alone		Cross Sold		Stand-Alone		Cross Sold	
		Males	Females	Males	Females	Males	Females	Males	Females
2-49	\$170	\$28.21	\$61.27	\$24.61	\$53.48	\$30.72	\$66.84	\$26.88	\$58.32
	\$200	\$31.44	\$68.52	\$27.72	\$60.36	\$35.28	\$76.68	\$30.96	\$67.56
	\$250	\$36.84	\$80.52	\$32.76	\$71.76	\$41.28	\$90.12	\$36.72	\$80.28
	\$300	\$42.24	\$92.52	\$37.92	\$83.16	\$49.92	\$109.08	\$44.64	\$98.04
	\$350	\$47.64	\$104.52	\$42.96	\$94.56	\$56.28	\$123.24	\$50.76	\$111.48
	\$400	\$53.04	\$116.52	\$48.12	\$105.96	\$62.64	\$137.40	\$56.76	\$125.04
	\$450	\$58.44	\$128.52	\$53.16	\$117.36	\$69.00	\$151.56	\$62.76	\$138.48
	\$500	\$63.84	\$140.52	\$58.32	\$128.76	\$75.36	\$165.72	\$68.76	\$151.92
10-49	\$550	\$69.24	\$152.52	\$63.36	\$140.16	\$81.72	\$179.88	\$74.76	\$165.36
	\$600	\$74.64	\$164.52	\$68.52	\$151.56	\$88.08	\$194.04	\$80.76	\$178.80
	\$650	\$80.04	\$176.52	\$73.56	\$162.96	\$94.44	\$208.20	\$86.76	\$192.24
	\$700	\$85.44	\$188.52	\$78.72	\$174.36	\$100.80	\$222.36	\$92.88	\$205.68

\* Annual rates may vary slightly due to rounding.

This Policy provides New York Statutory Disability Income Insurance only. It does not provide "basic hospital", basic medical, or "major medical" insurance as defined by the New York State Insurance Department. Policy limitations and exclusions apply. Optional riders and/or features may incur additional costs. Plan documents are the final arbiter of coverage. For more information please refer to policy, New York DBL Policy #GP-1-DBL. Benefits, coverage and eligibility are in accordance with Article 9 of the Workers' Compensation Law under the New York Statutory Disability Benefits Law.

