Association of Oregon Counties Insurance Trust (AOCIT) Life, AD&D, Long Term Disability, Short Term Disability and Dependent Life Monthly Premium Rates Pooled Groups Only (under 25 employees)* EFFECTIVE January 1, 2018

Basic Life Insurance Plans*	Rate	Admin Fee (per Employee)
Flat Life		(po:p.o)oo)
(\$1,000 multiples up to \$9,000)	Please see rate table below	\$0.25
(\$5,000 multiples - \$10,000 minin	num to \$50,000 maximum)	\$0.25
Life 1 x or 1.5 x Salary	Please see rate table below	\$0.40
(Multiples of Salary - \$10,000 mir	nimum to \$75,000 maximum)	
Statutory Life	\$0.067 per \$1,000/coverage	\$0.10
(Statutory Public Safety Coverage	e - \$10,000)	

Basic Life Insurance Rates

Rates based on age at	Age:	Cost per \$1,000 Coverage
initial enrollment, and change	0-29	0.014
thereafter on January 1 if	30-34	0.021
employee changes age	35-39	0.027
categories.	40-44	0.041
	45-49	0.068
	50-54	0.109
	55-59	0.205
	60-64	0.233
	65-69	0.356
	70-74	0.581
	75 and older	1.915

Available with Flat Life,	\$0.02 per \$1,000/coverage	\$0.05
Life 1x and 1.5x Salary plans		
ng Term Disability		
		* * **
50% up to \$3,000, 90 Day Elim.	\$0.336 per \$100/covered salary	\$0.60

* For groups with over 25 employees, rates vary based on demographics of group; rates will be provided directly to you.

Association of Oregon Counties Insurance Trust (AOCIT) Life, AD&D, Long Term Disability, Short Term Disability and Dependent Life Monthly Premium Rates Pooled Groups Only (under 25 employees)* EFFECTIVE January 1, 2018

Voluntary Dependent Life

\$10,000 \$2.96 per employee

No Admin Fee

No Admin Fee

Employee Paid Supplemental and Spouse Life:

(\$10,000 multiples from \$10,000 to \$300,000)

Rates based on age at	Age:	Employee	Spouse
initial enrollment, and change	0-29	0.034	0.039
thereafter on January 1 if	30-34	0.043	0.049
employee changes age	35-39	0.059	0.068
categories.	40-44	0.084	0.097
	45-49	0.118	0.136
	50-54	0.185	0.213
	55-59	0.345	0.398
	60-64	0.529	0.610
	65-69	0.998	1.150
	70-74	1.570	1.810
	75 and older	4.838	5.580

Voluntary Short Term Disability

Monthly Rates

Cost per \$1,000 Coverage

	60% of weekly salary up to \$200/week	60% of weekly salary up to \$300/week	60% of weekly salary up to \$400/week	60% of weekly salary up to \$500/week
Age:				
Under 35	\$6.50	\$9.75	\$13.00	\$16.25
35-49	\$5.18	\$7.77	\$10.36	\$12.95
50-59	\$6.88	\$10.32	\$13.76	\$17.20
60+	\$9.02	\$13.53	\$18.04	\$22.55

* For groups with over 25 employees, rates vary based on demographics of group; rates will be provided directly to you.