County Health Pool is pleased to offer…

…the opportunity to purchase additional, Guaranteed Issue life insurance coverage. Protect yourself and your family today!

Product Highlights

Payroll Deducted ✧ No Pre-Existing Condition Limitations
Employee Coverage Includes Waiver of Premium and Living Benefits
Underwritten by Anthem Life Insurance Company ✧ Rated "A" by A.M. Best

Product Features

Employee coverage Available in $10,000 multiples	**Minimum benefit:** **Maximum benefit:**	$ 10,000 $300,000 (guarantee issue is $100,000 – see below)
Spousal Coverage Available in $10,000 multiples	**Minimum benefit:** **Maximum benefit:**	$ 10,000 (guarantee issue is $20,000 – see below) $100,000 (Not to exceed 50% of employee amount)
Dependent Life coverage Chosen by your employer	**Spouse/child benefit:**	$5,000/$2,000 or $2,000/$1,000 (guarantee issue). One affordable rate covers your spouse and eligible children.
Age reductions		Age reductions apply beginning at age 65. **Spousal Benefits terminate at age 65.**
Enroll NOW **for Guaranteed Issue** **(available to newly eligible employees/spouses only)**		No medical questions on Supplemental Life amounts up to $100,000 if age 70 or younger, $20,000 if over age 70, and $20,000 for your spouse. No medical questions for Dependent Life coverage.

Employee/Spouse Rates

Monthly Rate/$1,000 of Insurance	
Age	*Rate*
Under 30	$0.09
30 - 34	$0.09
35 - 39	$0.12
40 - 44	$0.17
45 - 49	$0.27
50 - 54	$0.47
55 - 59	$0.77
60 - 64	$1.03
65 – 69**	$1.55
70 - 74	$2.82
75 – 79	$4.26
80+*	$7.74

Initial rates are based on your age on your effective date of coverage. Rates will change on your birthday, based on these age brackets. ****Spousal benefits terminate when spouse reaches age 65.**

Family Rates

Monthly Cost of Insurance	
Coverage	*Total Cost*
$5,000/$2,000	$0.92
$2,000/$1,000	$0.78

Children are eligible from age 15 days to 19 years; to age 26 if eligible tax exemption.

Employee Benefit Schedule

Age-Based Benefit Levels		
Age	*Benefit Amount*	*Factor*
Under 65	100% of amount selected	1.00
65	65% of the full amount	0.65
70	50% of the full amount	0.50
75+	35% of the full amount	0.35

Benefits reduce on the plan anniversary based on age. Premiums are based on age and reduced benefit amount. Coverage ends when you retire or terminate coverage with County Health Pool.

This benefit description is intended to be a brief outline of benefits available to eligible employees. It does not include all the terms of coverage. The complete terms of coverage are contained in the contract documents (the certificate, policy and/or trust agreement). In the event of a conflict between the contract documents and this description, the contract documents will prevail.

Anthem Life

Calculate Your Additional Life Insurance Cost

Use this worksheet to determine your monthly cost for employee-paid life insurance.
Refer to Rate Tables to find the monthly rates.

Steps to Determine Monthly Cost of Employee Paid Life Insurance	Worksheet
Employee Life Insurance	
1. Select your desired amount of Supplemental Life coverage - $10,000 multiples up to max amount	$_____(1)
2. If you are an employee and are 65 or older, look up your benefit factor in the Benefit Reduction Schedule. If you are under 65 your factor is 1.00.	The benefit factor is_____(2)
3. Multiply by the factor to calculate the benefit amount for your age.	$_____(1) x _____(2) = $_____(3)
4. Find your age in the Employee/Spousal Rate table, and note the corresponding monthly rate.	The monthly rate per $1,000 is $_____(4)
5. Divide your amount of coverage by $1,000.	$_____(3) / $1,000 = $_____(5)
6. Multiply the result by the monthly rate per $1,000 for your age.	_____(5) x $_____(4)
7. The answer is your monthly cost of insurance.	**Monthly Cost of Employee Supplemental Life coverage** $ [6]
Dependent Life Insurance	
8. Select your desired family coverage plan.	☐ $5,000 spouse/$2,000 each eligible child. ☐ $2,000 spouse/$1,000 each eligible child.
9. Locate that coverage plan on the Family Rates table and note the monthly cost.	**Monthly Cost of Dependent Life coverage** $ [7]
Total Monthly Cost	
10. Add the monthly cost of additional employee and dependent coverage.	$_____[6] + $_____[7]
11. The answer is your monthly cost of additional life insurance.	**Monthly Cost of Employee-Paid Life Insurance** $

To enroll for coverage, complete and sign the enrollment application. Remember, if your group qualifies for Guaranteed Issue, only coverage amounts above the Guaranteed Issue limits will be medically underwritten.

Take advantage of this convenient, affordable life insurance protection –
Enroll TODAY!

Anthem Life

Supp & dependent life enrollment worksheet, $10,000 units