

## **AUPE Aux Monthly Benefit Premium Rate Sheet**

## April 1, 2024

	Benefit	Age Limit	Coverage	Employe	ee Share	Employer Share		Total Monthly Premium	
TS	Supplementary Health	none	Single	\$19.61		\$58.82		\$78.43	
			Family	\$49	9.00	\$147	7.00	\$19	6.00
	Dental	none	Single	\$14.19		\$42.56		\$56.75	
MANDATORY BENEFITS			Family	\$35	5.67	\$107	7.00	\$14	2.67
	Basic Life (1x annual salary)	age 80	per \$1,000 of benefit	\$0.0440		\$0.1320		\$0.1760	
	Basic AD&D (1x annual salary)	age 80	per \$1,000 of benefit	\$0.0032		\$0.0098		\$0.0130	
	Short-Term Disability	age 65	% of basic monthly salary	0.326%		0.979%		1.3050%	
	Long-Term Disability	age 65	% of basic monthly salary	1.1082%		3.3248%		4.4330%	
	Emergency Travel Under Age 70	age 70	Single	\$1.39 \$3.53		\$0.00		\$1.39	
			Family			\$0.00		\$3.53	
	Additional Basic Life (1x annual salary)	age 80	per \$1,000 of benefit	\$0.0440		\$0.1320		\$0.1760	
	Additional Basic AD&D (1x annual salary)	age 80	per \$1,000 of benefit	\$0.0032		\$0.0098		\$0.0130	
	Optional Dependent Life (\$10,000 spouse; \$5,000/child)	age 70	per benefit	\$3.93		N/A		\$3.93	
Benefits	Optional AD&D	none	Employee only - per \$10,000 of benefit	\$0.315		N/A		\$0.315	
	(\$350,000 maximum)		Family - per \$10,000 of benefit	\$0.450		N/A		\$0.450	
Iry Be	Optional Employee/Spousal Life (\$500,000 maximum)	age 70	per \$10,000 of benefit	Gender X Non-Smoker	Female Non-Smoker	Male Non-Smoker	Gender X Smoker	Female Smoker	Male Smoker
Inte				Optional Employee/Spousal Life premiums are 100% employee paid				employee paid	
Voluntary			Up to 34 years	\$0.41	\$0.39	\$0.49	\$0.62	\$0.59	\$0.78
>			35-39 years	\$0.49	\$0.49	\$0.50	\$0.82	\$0.78	\$1.07
			40-44 years	\$0.70	\$0.69	\$0.78	\$1.23	\$1.17	\$1.56
			45-49 years	\$1.21	\$1.17	\$1.46	\$2.16	\$2.04	\$2.81
			50-54 years	\$2.01	\$1.94	\$2.43	\$3.43	\$3.20	\$4.75
			55-59 years	\$3.31	\$3.11	\$4.45	\$5.36	\$4.85	\$8.24
			60-64 years	\$4.31	\$3.98	\$6.20	\$6.55	\$5.82	\$10.66
			65-69 years	\$6.33	\$5.89	\$8.80	\$8.75	\$7.81	\$14.04