



Autopilots Central Inc

Rate sheet prepared by Web User on 3/6/2025 11:15:32 AM.
 Oklahoma Payroll Premium rates are Semi-Monthly 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 Insurance - 24-HOUR ACCIDENT OPTION 3 - Series A38000

	Premium	Total
18-75 INDIVIDUAL	\$15.42	\$15.42
18-75 NAMED INSURED/SPOUSE	\$21.83	\$21.83
18-75 ONE-PARENT FAMILY	\$26.17	\$26.17
18-75 TWO-PARENT FAMILY	\$33.05	\$33.05

AFLAC PLUS RIDER

		Aflac Plus Rider
18-29	INDIVIDUAL	\$1.56
30-39		\$2.21
40-49		\$3.77
50-70		\$6.44
18-29	INSURED/SPOUSE	\$2.93
30-39		\$4.36
40-49		\$7.15
50-70		\$12.29
18-29	ONE-PARENT FAMILY	\$3.12
30-39		\$3.38
40-49		\$4.55
50-70		\$6.63
18-29	TWO-PARENT FAMILY	\$3.77
30-39		\$4.88
40-49		\$7.35
50-70		\$12.35

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

	Premium	EBR	HSSCR	Total
18-49 INDIVIDUAL	\$13.78	\$5.92	\$9.36	\$29.06
50-59	\$14.04	\$6.76	\$12.03	\$32.83
60-75	\$14.50	\$6.83	\$15.67	\$37.00
18-49 INSURED/SPOUSE	\$19.57	\$12.48	\$17.16	\$49.21
50-59	\$20.67	\$14.04	\$23.86	\$58.57
60-75	\$22.10	\$14.17	\$29.97	\$66.24
18-49 ONE-PARENT FAMILY	\$17.49	\$11.83	\$13.00	\$42.32
50-59	\$17.81	\$12.09	\$14.76	\$44.66
60-75	\$18.07	\$12.42	\$19.37	\$49.86
18-49 TWO-PARENT FAMILY	\$20.74	\$15.15	\$17.49	\$53.38
50-59	\$20.93	\$15.41	\$25.09	\$61.43
60-75	\$22.36	\$16.12	\$31.98	\$70.46

EBR*: Extended Benefit Rider Premium (Available for ages 18-75)

HSSCR*: Hospital Stay and Surgical Care Rider Premium (Available for ages 18-75)

*Note – The Extended Benefit Rider and Hospital Stay and Surgical Care Rider are not available with Option H.



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CANCER PROTECTION ASSURANCE PLAN LEVEL 1 - Series B70100

		Premium	Total
18-75	INDIVIDUAL	\$8.30	\$8.30
18-75	INSURED/SPOUSE	\$13.18	\$13.18
18-75	ONE-PARENT FAMILY	\$8.30	\$8.30
18-75	TWO-PARENT FAMILY	\$13.18	\$13.18

CANCER PROTECTION ASSURANCE PLAN LEVEL 2 - Series B70200

		Premium	Total
18-75	INDIVIDUAL	\$16.75	\$16.75
18-75	INSURED/SPOUSE	\$28.82	\$28.82
18-75	ONE-PARENT FAMILY	\$16.75	\$16.75
18-75	TWO-PARENT FAMILY	\$28.82	\$28.82

CANCER PROTECTION ASSURANCE PLAN LEVEL 3 - Series B70300

		Premium	Total
18-75	INDIVIDUAL	\$23.69	\$23.69
18-75	INSURED/SPOUSE	\$40.43	\$40.43
18-75	ONE-PARENT FAMILY	\$23.69	\$23.69
18-75	TWO-PARENT FAMILY	\$40.43	\$40.43



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CRITICAL CARE PROTECTION POLICY - Series A74100

Individual			One Parent Family		
Age	Premium	Total	Age	Premium	Total
18-35	\$4.68	\$4.68	18-35	\$5.20	\$5.20
36-45	\$7.28	\$7.28	36-45	\$7.54	\$7.54
46-55	\$10.14	\$10.14	46-55	\$10.47	\$10.47
56-70	\$13.65	\$13.65	56-70	\$13.98	\$13.98
Insured/Spouse			Two Parent Family		
Age	Premium	Total	Age	Premium	Total
18-35	\$6.70	\$6.70	18-35	\$7.74	\$7.74
36-45	\$11.18	\$11.18	36-45	\$12.35	\$12.35
46-55	\$16.77	\$16.77	46-55	\$18.20	\$18.20
56-70	\$24.57	\$24.57	56-70	\$26.26	\$26.26

CRITICAL CARE PROTECTION POLICY - Series A74300

Individual			One Parent Family		
Age	Premium	Total	Age	Premium	Total
18-35	\$8.91	\$8.91	18-35	\$15.15	\$15.15
36-45	\$12.61	\$12.61	36-45	\$17.88	\$17.88
46-55	\$18.59	\$18.59	46-55	\$23.01	\$23.01
56-70	\$25.74	\$25.74	56-70	\$32.44	\$32.44
Insured/Spouse			Two Parent Family		
Age	Premium	Total	Age	Premium	Total
18-35	\$17.10	\$17.10	18-35	\$19.37	\$19.37
36-45	\$22.62	\$22.62	36-45	\$24.64	\$24.64
46-55	\$34.84	\$34.84	46-55	\$36.92	\$36.92
56-70	\$49.66	\$49.66	56-70	\$53.17	\$53.17