

Deductions per year: 52

Individual Disability - ISTD3000 for OK AA Risk Class

Applicable to policy form Individual Disability

- Off Job Accident & Off Job Sickness

3 Month Benefit Period

ELIMINATION PERIOD	ISSUE AGE	\$800*	\$1,000*	\$1,200*	\$1,400*	\$1,600*
0 days Accident/7 days Sickness	17-49	\$5.45	\$6.81	\$8.17	\$9.53	\$10.89
	50-64	\$6.46	\$8.08	\$9.69	\$11.31	\$12.92
	65-74	\$7.55	\$9.44	\$11.33	\$13.21	\$15.10

*monthly benefit amount

6 Month Benefit Period

ELIMINATION PERIOD	ISSUE AGE	\$800*	\$1,000*	\$1,200*	\$1,400*	\$1,600*
0 days Accident/14 days Sickness	17-49	\$5.02	\$6.28	\$7.53	\$8.79	\$10.04
	50-64	\$6.46	\$8.08	\$9.69	\$11.31	\$12.92
	65-74	\$8.31	\$10.38	\$12.46	\$14.54	\$16.62

*monthly benefit amount

Individual Accident (IAC4000) for OK

Applicable to Policy Forms IAC4000

- On/Off-Job Accident Coverage, Active Lifestyles, Wellbeing Assistance Standard - \$50

BENEFIT LEVEL	ISSUE AGE	NAMED INSURED	EMPLOYEE & SPOUSE	ONE-PARENT FAMILY	TWO-PARENT FAMILY
Preferred	0-80	\$5.45	\$8.18	\$9.32	\$11.93

Individual Medical Bridge for OK

Applicable to policy form Individual Medical Bridge

- \$1500 Hospital Confinement Benefit. Daily Hospital Confinement benefit

ISSUE AGE	EMPLOYEE	EMPLOYEE AND SPOUSE	EMPLOYEE AND DEPENDENT CHILDREN	EMPLOYEE, SPOUSE AND DEPENDENT CHILDREN
17-49	\$5.50	\$10.46	\$7.85	\$12.82
50-59	\$7.55	\$14.34	\$9.90	\$16.69
60-64	\$10.91	\$20.73	\$13.26	\$23.09
65-75	\$14.79	\$28.09	\$17.15	\$30.45

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Critical Illness 1.0 for OK

Applicable to policy form CI-1.0

- HSA Compliant, with Subsequent Diagnosis Coverage, Health Screening Benefit, Cancer Benefit

Non-Tobacco Rates

	ISSUE AGE	NAMED INSURED	EMPLOYEE & SPOUSE	ONE-PARENT FAMILY	TWO-PARENT FAMILY
\$10,000	17-24	\$1.45	\$2.19	\$1.82	\$2.58
	25-29	\$1.93	\$2.95	\$2.30	\$3.32
	30-34	\$2.46	\$3.76	\$2.83	\$4.15
	35-39	\$3.27	\$5.03	\$3.66	\$5.40
	40-44	\$3.94	\$6.04	\$4.31	\$6.41
	45-49	\$5.18	\$7.94	\$5.55	\$8.33
	50-54	\$7.26	\$11.14	\$7.65	\$11.54
	55-59	\$8.99	\$13.82	\$9.38	\$14.21
	60-64	\$11.99	\$18.44	\$12.38	\$18.81
	65-70	\$13.31	\$20.44	\$13.70	\$20.81
\$20,000	17-24	\$2.39	\$3.62	\$3.13	\$4.41
	25-29	\$3.36	\$5.14	\$4.10	\$5.88
	30-34	\$4.42	\$6.76	\$5.16	\$7.54
	35-39	\$6.04	\$9.30	\$6.82	\$10.04
	40-44	\$7.38	\$11.33	\$8.12	\$12.07
	45-49	\$9.87	\$15.11	\$10.61	\$15.90
	50-54	\$14.02	\$21.53	\$14.81	\$22.31
	55-59	\$17.48	\$26.88	\$18.27	\$27.67
	60-64	\$23.48	\$36.11	\$24.27	\$36.85
	65-70	\$26.12	\$40.13	\$26.90	\$40.87

Tobacco Rates

	ISSUE AGE	NAMED INSURED	EMPLOYEE & SPOUSE	ONE-PARENT FAMILY	TWO-PARENT FAMILY
\$10,000	17-24	\$1.84	\$2.81	\$2.23	\$3.21
	25-29	\$2.65	\$4.04	\$3.02	\$4.43
	30-34	\$3.66	\$5.63	\$4.05	\$6.02
	35-39	\$4.98	\$7.61	\$5.35	\$8.01
	40-44	\$6.22	\$9.55	\$6.62	\$9.94
	45-49	\$8.02	\$12.34	\$8.42	\$12.71
	50-54	\$11.05	\$16.96	\$11.44	\$17.35
	55-59	\$14.12	\$21.69	\$14.51	\$22.06
	60-64	\$18.18	\$27.90	\$18.55	\$28.29
	65-70	\$20.30	\$31.18	\$20.67	\$31.57

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Critical Illness 1.0 for OK

Applicable to policy form CI-1.0

- HSA Compliant, with Subsequent Diagnosis Coverage, Health Screening Benefit, Cancer Benefit

Tobacco Rates

	ISSUE AGE	NAMED INSURED	EMPLOYEE & SPOUSE	ONE-PARENT FAMILY	TWO-PARENT FAMILY
\$20,000	17-24	\$3.18	\$4.87	\$3.96	\$5.65
	25-29	\$4.79	\$7.31	\$5.53	\$8.10
	30-34	\$6.82	\$10.50	\$7.61	\$11.28
	35-39	\$9.45	\$14.47	\$10.19	\$15.25
	40-44	\$11.95	\$18.34	\$12.73	\$19.13
	45-49	\$15.55	\$23.93	\$16.33	\$24.67
	50-54	\$21.59	\$33.16	\$22.38	\$33.94
	55-59	\$27.73	\$42.62	\$28.52	\$43.36
	60-64	\$35.85	\$55.04	\$36.59	\$55.82
	65-70	\$40.10	\$61.59	\$40.84	\$62.38

Important Notice

Insurance coverage has exclusions and limitations that may affect benefits payable. For a complete description of benefits, limitations and exclusions, please refer to an outline of coverage, sample policy/certificate, proposal description or see your Colonial Life benefits counselor. Coverage type, benefits and rates vary by state. Coverage may not be available in all states. Rates provided are illustrative and your actual premium may be different depending on your particular situation and plan choices.

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Deductions per year: 52

Term Life (ITL5000) for OK

Applicable to policy form ITL5000

● 10-Year Term Base Plan

Non-Tobacco Rates

ISSUE AGE	\$25,000	\$50,000	\$75,000	\$100,000	\$200,000
25	\$2.44	\$2.35	\$3.07	\$3.79	\$6.00
35	\$2.98	\$2.59	\$3.43	\$4.27	\$6.30
45	\$3.90	\$4.29	\$5.98	\$7.67	\$9.88
55	\$7.94	\$8.39	\$12.13	\$15.86	\$18.23
65	\$10.46	\$20.00	\$29.54	\$39.07	\$41.34
75	\$31.24	\$61.55	\$91.87	\$122.18	\$121.11

Tobacco Rates

ISSUE AGE	\$25,000	\$50,000	\$75,000	\$100,000	\$200,000
25	\$4.61	\$4.09	\$5.68	\$7.27	\$10.00
35	\$5.26	\$4.55	\$6.36	\$8.17	\$10.80
45	\$7.25	\$9.44	\$13.70	\$17.96	\$19.80
55	\$17.19	\$22.63	\$33.49	\$44.34	\$46.11
65	\$21.61	\$42.30	\$62.99	\$83.69	\$87.84
75	\$46.66	\$92.40	\$138.14	\$183.87	\$185.53

Term Life (ITL5000) for OK

Applicable to policy form ITL5000

● 20-Year Term Base Plan

Non-Tobacco Rates

ISSUE AGE	\$25,000	\$50,000	\$75,000	\$100,000	\$200,000
25	\$2.48	\$2.43	\$3.18	\$3.94	\$6.15
35	\$3.05	\$2.67	\$3.54	\$4.42	\$6.61
45	\$4.20	\$5.03	\$7.08	\$9.13	\$11.92
55	\$9.03	\$10.69	\$15.57	\$20.46	\$26.15
65	\$14.20	\$27.48	\$40.76	\$54.03	\$74.76

Tobacco Rates

ISSUE AGE	\$25,000	\$50,000	\$75,000	\$100,000	\$200,000
25	\$4.66	\$4.20	\$5.84	\$7.48	\$10.73
35	\$5.37	\$4.76	\$6.68	\$8.59	\$12.03
45	\$7.78	\$10.49	\$15.27	\$20.05	\$26.57
55	\$18.19	\$24.47	\$36.24	\$48.02	\$62.76
65	\$23.92	\$46.93	\$69.93	\$92.93	\$123.49

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