

# CITY OF MELROSE *ENHANCED* VOLUNTARY TERM LIFE AND AD&D

\* Must have Basic Life to enroll in Voluntary Life.

\* Monthly Premium rates listed below.

\* Rates remain the same!

## Guaranteed Issue Amounts

Age	Under 60	60-69	Over 70
Employee	\$ 150,000	\$ 50,000	\$ 10,000
Spouse	\$ 30,000	\$ 20,000	not eligible

Age	Monthly Premium per \$1,000	10,000	20,000	30,000	40,000	50,000	60,000	70,000	80,000	90,000	100,000	150,000
<35	\$0.14	\$1.40	\$2.80	\$4.20	\$5.60	\$7.00	\$8.40	\$9.80	\$11.20	\$12.60	\$14.00	\$21.00
35-39	\$0.17	\$1.70	\$3.40	\$5.10	\$6.80	\$8.50	\$10.20	\$11.90	\$13.60	\$15.30	\$17.00	\$25.50
40-44	\$0.23	\$2.30	\$4.60	\$6.90	\$9.20	\$11.50	\$13.80	\$16.10	\$18.40	\$20.70	\$23.00	\$34.50
45-49	\$0.36	\$3.60	\$7.20	\$10.80	\$14.40	\$18.00	\$21.60	\$25.20	\$28.80	\$32.40	\$36.00	\$54.00
50-54	\$0.52	\$5.20	\$10.40	\$15.60	\$20.80	\$26.00	\$31.20	\$36.40	\$41.60	\$46.80	\$52.00	\$78.00
55-59	\$0.84	\$8.40	\$16.80	\$25.20	\$33.60	\$42.00	\$50.40	\$58.80	\$67.20	\$75.60	\$84.00	\$126.00
60-64	\$1.24	\$12.40	\$24.80	\$37.20	\$49.60	\$62.00	\$74.40	\$86.80	\$99.20	\$111.60	\$124.00	\$186.00
65-69	\$2.04	\$20.40	\$40.80	\$61.20	\$81.60	\$102.00	\$122.40	\$142.80	\$163.20	\$183.60	\$204.00	\$306.00
70-74	\$3.94	\$39.40	\$78.80	\$118.20	\$157.60	\$197.00	\$236.40	\$275.80	\$315.20	\$354.60	\$394.00	\$591.00
75-80	\$6.49	\$64.90	\$129.80	\$194.70	\$259.60	\$324.50	\$389.40	\$454.30	\$519.20	\$584.10	\$649.00	\$973.50

\*\*\* EMPLOYEE MUST HAVE COVERAGE IN ORDER TO INSURE SPOUSE AND/OR CHILDREN \*\*\*

EMPLOYEE LIFE & AD&D = \$10,000 TO A MAXIMUM OF \$500,000 (NOT TO EXCEED 7 TIMES SALARY)

SPOUSE LIFE & AD&D = \$5,000 TO A MAXIMUM OF \$50,000 (NOT TO EXCEED 50% OF EMPLOYEE BENEFIT)

DEPENDENT (LIFE ONLY) \$500 AGE 14 DAYS TO 1 YEAR; \$5,000 AGE 1 YEAR TO AGE 19 OR 25 IF FULL TIME STUDENT (\$.95/MONTH); \$10,000 (\$1.90/MONTH)

AMOUNTS OVER THE GUARANTEE ISSUE LIMITS REQUIRE EVIDENCE OF INSURABILITY FORM AND AUTHORIZATION TO RELEASE MEDICAL INFORMATION FORM

TO BE COMPLETED AND SUBMITTED WITH THE ENROLLMENT FORM.

8/21/2019