

Allina Heath
Accident and Critical Illness Off Ballot Rates
Effective 1/1/2018

Critical Illness

Monthly Cost per \$1,000 of Benefit Non-Smoker

Issue Age	Employee Only	Employee + Spouse	Employee + Children	Employee + Spouse / Children
<25	\$0.22	\$0.34	\$0.29	\$0.41
25-29	\$0.22	\$0.37	\$0.29	\$0.43
30-34	\$0.33	\$0.56	\$0.40	\$0.62
35-39	\$0.49	\$0.83	\$0.56	\$0.90
40-44	\$0.78	\$1.30	\$0.83	\$1.37
45-49	\$1.09	\$1.84	\$1.15	\$1.91
50-54	\$1.48	\$2.49	\$1.54	\$2.55
55-59	\$1.89	\$3.17	\$1.95	\$3.23
60-64	\$2.35	\$3.87	\$2.42	\$3.94
65-69	\$2.70	\$4.44	\$2.76	\$4.51
70+	\$3.32	\$5.46	\$3.39	\$5.53

Monthly Cost per \$1,000 of Benefit Smoker

Issue Age	Employee Only	Employee + Spouse	Employee + Children	Employee + Spouse / Children
<25	\$0.38	\$0.57	\$0.44	\$0.63
25-29	\$0.38	\$0.61	\$0.43	\$0.67
30-34	\$0.57	\$0.92	\$0.63	\$0.99
35-39	\$0.82	\$1.39	\$0.89	\$1.45
40-44	\$1.31	\$2.19	\$1.38	\$2.25
45-49	\$1.85	\$3.11	\$1.91	\$3.17
50-54	\$2.50	\$4.21	\$2.56	\$4.27
55-59	\$3.20	\$5.37	\$3.25	\$5.44
60-64	\$3.98	\$6.59	\$4.04	\$6.66
65-69	\$4.61	\$7.63	\$4.67	\$7.68
70+	\$5.74	\$9.49	\$5.81	\$9.55

Monthly Cost per \$10,000 of Benefit Non-Smoker

Issue Age	Employee Only	Employee + Spouse	Employee + Children	Employee + Spouse / Children
<25	\$2.20	\$3.40	\$2.90	\$4.10
25-29	\$2.20	\$3.70	\$2.90	\$4.30
30-34	\$3.30	\$5.60	\$4.00	\$6.20
35-39	\$4.90	\$8.30	\$5.60	\$9.00
40-44	\$7.80	\$13.00	\$8.30	\$13.70
45-49	\$10.90	\$18.40	\$11.50	\$19.10
50-54	\$14.80	\$24.90	\$15.40	\$25.50
55-59	\$18.90	\$31.70	\$19.50	\$32.30
60-64	\$23.50	\$38.70	\$24.20	\$39.40
65-69	\$27.00	\$44.40	\$27.60	\$45.10
70+	\$33.20	\$54.60	\$33.90	\$55.30

Monthly Cost per \$10,000 of Benefit Smoker

Issue Age	Employee Only	Employee + Spouse	Employee + Children	Employee + Spouse / Children
<25	\$3.80	\$5.70	\$4.40	\$6.30
25-29	\$3.80	\$6.10	\$4.30	\$6.70
30-34	\$5.70	\$9.20	\$6.30	\$9.90
35-39	\$8.20	\$13.90	\$8.90	\$14.50
40-44	\$13.10	\$21.90	\$13.80	\$22.50
45-49	\$18.50	\$31.10	\$19.10	\$31.70
50-54	\$25.00	\$42.10	\$25.60	\$42.70
55-59	\$32.00	\$53.70	\$32.50	\$54.40
60-64	\$39.80	\$65.90	\$40.40	\$66.60
65-69	\$46.10	\$76.30	\$46.70	\$76.80
70+	\$57.40	\$94.90	\$58.10	\$95.50

Monthly Cost per \$20,000 of Benefit Non-Smoker

Issue Age	Employee Only	Employee + Spouse	Employee + Children	Employee + Spouse / Children
<25	\$4.40	\$6.80	\$5.80	\$8.20
25-29	\$4.40	\$7.40	\$5.80	\$8.60
30-34	\$6.60	\$11.20	\$8.00	\$12.40
35-39	\$9.80	\$16.60	\$11.20	\$18.00
40-44	\$15.60	\$26.00	\$16.60	\$27.40
45-49	\$21.80	\$36.80	\$23.00	\$38.20
50-54	\$29.60	\$49.80	\$30.80	\$51.00
55-59	\$37.80	\$63.40	\$39.00	\$64.60
60-64	\$47.00	\$77.40	\$48.40	\$78.80
65-69	\$54.00	\$88.80	\$55.20	\$90.20
70+	\$66.40	\$109.20	\$67.80	\$110.60

Monthly Cost per \$20,000 of Benefit Smoker

Issue Age	Employee Only	Employee + Spouse	Employee + Children	Employee + Spouse / Children
<25	\$7.60	\$11.40	\$8.80	\$12.60
25-29	\$7.60	\$12.20	\$8.60	\$13.40
30-34	\$11.40	\$18.40	\$12.60	\$19.80
35-39	\$16.40	\$27.80	\$17.80	\$29.00
40-44	\$26.20	\$43.80	\$27.60	\$45.00
45-49	\$37.00	\$62.20	\$38.20	\$63.40
50-54	\$50.00	\$84.20	\$51.20	\$85.40
55-59	\$64.00	\$107.40	\$65.00	\$108.80
60-64	\$79.60	\$131.80	\$80.80	\$133.20
65-69	\$92.20	\$152.60	\$93.40	\$153.60
70+	\$114.80	\$189.80	\$116.20	\$191.00