Boces Aflac Rate Information

Rate sheet prepared by Web User on 10/19/2021 4:55:29 PM.
New York Payroll Premium rates are 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 Advantage - 24-HOUR ACCIDENT OPTION 4 - Series NY36000

		Premium	Total
18-75	INDIVIDUAL	$26.26	$26.26
18-75	NAMED INSURED/SPOUSE	$34.19	$34.19
18-75	ONE-PARENT FAMILY	$39.52	$39.52
18-75	TWO-PARENT FAMILY	$49.79	$49.79

AFLAC HOSPITAL CHOICE - Option 1 Benefit Amount 1000 - Series NYB40100

		Premium	EBR	HSSCR	Total
18-49	INDIVIDUAL	$25.09	$8.58	$10.66	$44.33
50-59		$25.48	$9.75	$14.30	$49.53
60-75		$26.13	$9.88	$19.11	$55.12
18-49	INSURED/SPOUSE	$33.41	$18.07	$19.89	$71.37
50-59		$35.10	$20.28	$28.73	$84.11
60-75		$37.05	$20.41	$36.79	$94.25
18-49	ONE-PARENT FAMILY	$31.72	$17.81	$15.99	$65.52
50-59		$32.11	$18.20	$18.46	$68.77
60-75		$32.50	$18.59	$24.96	$76.05
18-49	TWO-PARENT FAMILY	$36.53	$22.75	$21.32	$80.60
50-59		$36.79	$23.14	$20.80	$80.73
60-75		$39.00	$24.18	$41.34	$104.52

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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AFLAC CANCER CARE PLAN CLASSIC - Series NY78300

		Premium	IDR* (5 units)	Total
18-35	INDIVIDUAL	$32.89	$5.85	$38.74
36-45		$32.89	$5.85	$38.74
46-55		$32.89	$5.85	$38.74
56-75		$32.89	$5.85	$38.74
18-35	INSURED/SPOUSE	$56.29	$13.00	$69.29
36-45		$56.29	$13.00	$69.29
46-55		$56.29	$13.00	$69.29
56-75		$56.29	$13.00	$69.29
18-35	ONE-PARENT FAMILY	$32.89	$5.85	$38.74
36-45		$32.89	$5.85	$38.74
46-55		$32.89	$5.85	$38.74
56-75		$32.89	$5.85	$38.74
18-35	TWO-PARENT FAMILY	$56.29	$13.00	$69.29
36-45		$56.29	$13.00	$69.29
46-55		$56.29	$13.00	$69.29
56-75		$56.29	$13.00	$69.29

IDR = Optional Initial Diagnosis Rider (Series NY78050) premium 1-5 units*

DENTAL LEVEL 1 - Series NY82200

		Premium	Total
18-70	INDIVIDUAL	$31.33	$31.33
18-70	ONE-PARENT FAMILY	$60.19	$60.19
18-70	INSURED/SPOUSE	$60.97	$60.97
18-70	TWO-PARENT FAMILY	$91.00	$91.00