

Five-Town Health Alliance, Inc

Critical Illness - employee

Estimated employee semi-monthly premium amounts

End of rate guarantee period: 12/31/2024

Benefit amount	24 & under	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70 & over
\$5,000	\$1.36	\$2.03	\$2.20	\$2.46	\$3.22	\$4.38	\$6.02	\$7.97	\$11.02	\$15.18	\$22.15
\$10,000	\$2.72	\$4.06	\$4.41	\$4.93	\$6.44	\$8.77	\$12.04	\$15.94	\$22.04	\$30.37	\$44.30
\$15,000	\$4.08	\$6.08	\$6.61	\$7.39	\$9.66	\$13.15	\$18.06	\$23.90	\$33.05	\$45.55	\$66.45
\$20,000	\$5.44	\$8.11	\$8.81	\$9.85	\$12.88	\$17.53	\$24.08	\$31.87	\$44.07	\$60.73	\$88.60
\$25,000	\$6.80	\$10.14	\$11.01	\$12.31	\$16.10	\$21.91	\$30.10	\$39.84	\$55.09	\$75.91	\$110.75
\$30,000	\$8.16	\$12.17	\$13.22	\$14.78	\$19.32	\$26.30	\$36.12	\$47.81	\$66.11	\$91.10	\$132.90
\$35,000	\$9.52	\$14.19	\$15.42	\$17.24	\$22.54	\$30.68	\$42.14	\$55.77	\$77.12	\$106.28	\$155.05
\$40,000	\$10.88	\$16.22	\$17.62	\$19.70	\$25.76	\$35.06	\$48.16	\$63.74	\$88.14	\$121.46	\$177.20
\$45,000	\$12.24	\$18.25	\$19.82	\$22.16	\$28.98	\$39.44	\$54.18	\$71.71	\$99.16	\$136.64	\$199.35
\$50,000	\$13.60	\$20.28	\$22.03	\$24.63	\$32.20	\$43.83	\$60.20	\$79.68	\$110.18	\$151.83	\$221.50

Critical Illness - spouse

Estimated spouse semi-monthly premium amounts

End of rate guarantee period: 12/31/2024

Benefit amount	24 & under	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70 & over
\$2,500	\$0.68	\$1.01	\$1.10	\$1.23	\$1.61	\$2.19	\$3.01	\$3.98	\$5.51	\$7.59	\$11.08
\$5,000	\$1.36	\$2.03	\$2.20	\$2.46	\$3.22	\$4.38	\$6.02	\$7.97	\$11.02	\$15.18	\$22.15
\$7,500	\$2.04	\$3.04	\$3.30	\$3.69	\$4.83	\$6.57	\$9.03	\$11.95	\$16.53	\$22.77	\$33.23
\$10,000	\$2.72	\$4.06	\$4.41	\$4.93	\$6.44	\$8.77	\$12.04	\$15.94	\$22.04	\$30.37	\$44.30
\$12,500	\$3.40	\$5.07	\$5.51	\$6.16	\$8.05	\$10.96	\$15.05	\$19.92	\$27.54	\$37.96	\$55.38
\$15,000	\$4.08	\$6.08	\$6.61	\$7.39	\$9.66	\$13.15	\$18.06	\$23.90	\$33.05	\$45.55	\$66.45
\$17,500	\$4.76	\$7.10	\$7.71	\$8.62	\$11.27	\$15.34	\$21.07	\$27.89	\$38.56	\$53.14	\$77.53
\$20,000	\$5.44	\$8.11	\$8.81	\$9.85	\$12.88	\$17.53	\$24.08	\$31.87	\$44.07	\$60.73	\$88.60
\$22,500	\$6.12	\$9.12	\$9.91	\$11.08	\$14.49	\$19.72	\$27.09	\$35.85	\$49.58	\$68.32	\$99.68
\$25,000	\$6.80	\$10.14	\$11.01	\$12.31	\$16.10	\$21.91	\$30.10	\$39.84	\$55.09	\$75.91	\$110.75

Note: Proof of good health/evidence of insurability is required to apply for benefit amounts greater than those highlighted above.

Note: Children are automatically covered for 25% of the employee's benefit for no additional cost.

If your age changes to a different rate band during the guarantee period, your premium will change to reflect the new rate band effective on the next policy anniversary date.

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