

Critical Illness Insurance Monthly Premium Rates*

INDIVIDUAL – NON-NICOTINE

Benefit Amount: \$10,000

Age	MALE Self Only	FEMALE Self Only	MALE OR FEMALE with Spouse**
18	\$9.85	\$10.15	\$12.25
19	\$9.85	\$10.15	\$12.25
20	\$9.85	\$10.15	\$12.25
21	\$9.85	\$10.15	\$12.25
22	\$9.85	\$10.15	\$12.25
23	\$10.05	\$10.35	\$12.65
24	\$10.25	\$10.55	\$13.05
25	\$10.45	\$10.75	\$13.45
26	\$10.75	\$11.05	\$14.05
27	\$10.95	\$11.25	\$14.45
28	\$11.25	\$11.55	\$15.05
29	\$11.65	\$11.85	\$15.75
30	\$12.05	\$12.15	\$16.45
31	\$12.45	\$12.45	\$17.15
32	\$12.85	\$12.85	\$17.95
33	\$13.35	\$13.25	\$18.85
34	\$13.85	\$13.75	\$19.85
35	\$14.45	\$14.25	\$20.95
36	\$15.05	\$14.75	\$22.05
37	\$15.65	\$15.35	\$23.25
38	\$16.35	\$15.85	\$24.45
39	\$17.15	\$16.45	\$25.85
40	\$18.05	\$17.05	\$27.35
41	\$18.95	\$17.75	\$28.95
42	\$19.95	\$18.45	\$30.65
43	\$20.95	\$19.15	\$32.35
44	\$21.95	\$19.75	\$33.95

Age	MALE Self Only	FEMALE Self Only	MALE OR FEMALE with Spouse**
45	\$23.05	\$20.45	\$35.75
46	\$24.25	\$21.25	\$37.75
47	\$25.55	\$22.05	\$39.85
48	\$26.85	\$22.85	\$41.95
49	\$28.25	\$23.65	\$44.15
50	\$29.75	\$24.45	\$46.45
51	\$31.35	\$25.35	\$48.95
52	\$32.95	\$26.25	\$51.45
53	\$34.55	\$27.15	\$53.95
54	\$36.35	\$28.15	\$56.75
55	\$38.15	\$29.15	\$59.55
56	\$40.05	\$30.25	\$62.55
57	\$42.05	\$31.35	\$65.65
58	\$44.15	\$32.65	\$69.05
59	\$46.45	\$33.95	\$72.65
60	\$48.75	\$35.35	\$76.35
61	\$51.25	\$36.85	\$80.35
62	\$53.85	\$38.45	\$84.55
63	\$56.45	\$40.05	\$88.75
64	\$59.15	\$41.75	\$93.15
65***	\$62.15	\$43.55	\$97.95
66***	\$65.45	\$45.55	\$103.25
67***	\$69.15	\$47.85	\$109.25
68***	\$73.75	\$50.75	\$116.75
69***	\$79.45	\$54.25	\$125.95
70***	\$87.05	\$59.25	\$138.55

Note: Each dependent child is automatically covered with a \$2,500 Benefit Amount – *at no additional cost*

* To review monthly premiums for different benefit amounts and scenarios, visit www.YourLifeSecure.com and login to your secure portal to run quotes.

** Premium rates shown above assume an opposite gender spouse who is the same age and nicotine status as the policyholder. Different rates apply for nicotine users – see other page.

*** Rates for ages 65-70 are not applicable in California

NOT FOR USE IN THE STATES OF:
CO, GA, MD, MN, MT, SD or WA

Policy Series LS-CI-0001
LS-CI-I-0306-10K ST 11/18

Critical Illness Insurance Monthly Premium Rates*

INDIVIDUAL – NICOTINE

Benefit Amount: \$10,000

Age	MALE Self Only	FEMALE Self Only	MALE OR FEMALE with Spouse**
18	\$11.25	\$10.95	\$14.45
19	\$11.25	\$10.95	\$14.45
20	\$11.25	\$10.95	\$14.45
21	\$11.25	\$10.95	\$14.45
22	\$11.25	\$10.95	\$14.45
23	\$11.65	\$11.25	\$15.15
24	\$12.05	\$11.55	\$15.85
25	\$12.55	\$11.95	\$16.75
26	\$13.05	\$12.25	\$17.55
27	\$13.55	\$12.65	\$18.45
28	\$14.15	\$13.15	\$19.55
29	\$14.85	\$13.55	\$20.65
30	\$15.65	\$14.15	\$22.05
31	\$16.45	\$14.75	\$23.45
32	\$17.35	\$15.35	\$24.95
33	\$18.35	\$16.05	\$26.65
34	\$19.35	\$16.75	\$28.35
35	\$20.45	\$17.45	\$30.15
36	\$21.75	\$18.35	\$32.35
37	\$23.05	\$19.25	\$34.55
38	\$24.65	\$20.25	\$37.15
39	\$26.45	\$21.25	\$39.95
40	\$28.35	\$22.45	\$43.05
41	\$30.55	\$23.65	\$46.45
42	\$32.80	\$25.05	\$50.10
43	\$34.85	\$26.45	\$53.55
44	\$37.05	\$27.85	\$57.15

Age	MALE Self Only	FEMALE Self Only	MALE OR FEMALE with Spouse**
45	\$39.25	\$29.35	\$60.85
46	\$41.75	\$31.05	\$65.05
47	\$44.35	\$32.75	\$69.35
48	\$47.25	\$34.45	\$73.95
49	\$50.35	\$36.25	\$78.85
50	\$53.55	\$38.15	\$83.95
51	\$57.05	\$40.15	\$89.45
52	\$60.75	\$42.25	\$95.25
53	\$64.45	\$44.35	\$101.05
54	\$68.35	\$46.55	\$107.15
55	\$72.45	\$48.85	\$113.55
56	\$76.75	\$51.35	\$120.35
57	\$81.45	\$53.95	\$127.65
58	\$86.25	\$56.75	\$135.25
59	\$91.35	\$59.65	\$143.25
60	\$96.55	\$62.75	\$151.55
61	\$102.15	\$66.05	\$160.45
62	\$108.05	\$69.45	\$169.75
63	\$113.75	\$72.65	\$178.65
64	\$119.65	\$76.05	\$187.95
65***	\$126.15	\$79.75	\$198.15
66***	\$133.05	\$83.65	\$208.95
67***	\$140.65	\$87.95	\$220.85
68***	\$150.85	\$93.35	\$236.45
69***	\$163.45	\$99.95	\$255.65
70***	\$180.95	\$109.25	\$282.45

Note: Each dependent child is automatically covered with a \$2,500 Benefit Amount – *at no additional cost*

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** Premium rates shown above assume an opposite gender spouse who is the same age and nicotine status as the policyholder. Different rates apply for non-nicotine – see other page.

*** Rates for ages 65-70 are not applicable in California

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