



Voluntary Insurance Designed to Help

Your Benefits Dollars Go Further!

WEEKLY Cost Examples

Rates shown are illustrative only and are subject to change without notice

Insurance Coverage	Employee Only	Employee + Spouse	Employee + Child(ren)	Employee + Family
Accident IAC4000 on/off job coverage	\$4.02	\$5.93	\$7.26	\$9.08
Cancer Assist Level 3 w/\$5k initial diagnosis, specified disease, \$50 wellness	\$6.26	\$10.45	\$6.42	\$10.60

SHORT TERM DISABILITY (3000) - Off Job w/Psychiatric Condition

These are for example purposes only. Many elimination periods to choose from to fit your budget

6 MONTH DURATION

Monthly Benefit	Elimination	\$1,000	\$2,000	\$2,500		
Ages 17-49	0/7 day wait	\$9.53	\$19.06	\$23.83		
	0/14 day wait	\$7.08	\$14.17	\$17.71		
Ages 50-74	0/7 day wait	\$12.32	\$24.65	\$30.81		
	0/14 day wait	\$9.07	\$18.14	\$22.67		

24 MONTH DURATION

Monthly Benefit	Elimination	\$1,000	\$2,000	\$2,500		
Ages 17-49	150 day wait	\$4.02	\$8.03	\$10.04		
	180 day wait	\$3.51	\$7.02	\$8.77		
Ages 50-74 150 day wait		\$8.22	\$16.43	\$20.54		
	180 day wait	\$8.17	\$16.34	\$20.42		

CRITICAL ILLNESS w/\$50	
Wellness & Subsequent Diagnosis	
(EE only, non-tobacco rates)	
Please note, additional coverage levels and	
family plans also available	

Issue Age	\$10,000	\$25,000
25	\$0.74	\$1.85
35	\$1.50	\$3.75
45	\$2.61	\$6.52
55	\$4.62	\$11.54
65	\$6.97	\$17.42

20 YEAR TERM LIFE 5000					
Issue Age Non-smoker	\$50,000	\$100,000	(10,15,30 year level too)		
25	\$3.35	\$5.79	Includes AD&D equal to face		
35	\$3.59	\$6.27	amount chosen.		
45	\$5.95	\$10.98	Other Ages and Face		
55	\$11.61	\$22.31	Amounts available		
65	\$28.40	\$55.88			

			1 3
Issue Age Non-smoker	\$15,000	\$25,000	
25	\$3.18	\$5.31	Several riders available. Other Ages and Face
35	\$4.33	\$7.22	Amounts available
45	\$6.88	\$11.47	, thounts available

\$18.72

\$33,32

WHOLE LIFE PLUS 5000 - Paid up at Age 100

Health and Wellness Discount Program



o WellCard discounts may supplement coverage already provided by insurance or your wellness program

55

\$11.23

\$19.99

- $\circ \qquad \text{Examples: vision, chiropractic, 24/7 doctor telephone consultations, high deductible health plans}$
- Discounts provided to many brand-recognized, national vendors

A Kinch Benefits Representative will explain how these benefits can help protect you and your family. Your insurance needs can be reviewed in just a few short minutes. You can select benefits that meet your individual needs and make your benefits count!

Don't miss your chance to learn more about this exciting opportunity!!

<u>All New Hires</u> are requested to review this supplemental coverage with a representative and either accept or waive coverage during your initial eligibility.

Failure to do so could impact your ability to take advantage of special underwriting.

Accident * Disability * Hospital Confinement * Dental * Cancer * Critical Illness * Life

Named Insured Section						
Named Insured (First, MI, Last)		Gende	r Birthdate	Social		
			M D	(mm/dd/yyyy)	Security No.	
			F D			
Home Address – S	Street	City		State	Zip Code	
Email Address			Home Phone No. Business			
			Phone	No.		
			Ex	tension:		
Date Employed	Occupation/Job Title	Annual		Hrs. Worked/	Eligible <u>For</u> Benefits	
		Income		Week		
Agreement Section	on					
	the coverage applied for will not pa					
after the issue date for a disease or physical condition that I now have or have had in the past. With my signature						
below, I hereby state the statements are true and have been completed to the best of my knowledge and belief.						
Signed at: CityDateDate						
mm/dd/yyyy						
(x) Print Name:						
Forwarding Instructions						
Disease amplification form to: Obsisting Kennstalia Coloniall if Colon com. Any questione 2 Call (042) 200 C450						
Please email completed form to: colonialLifeSales.com Any questions? Call (813) 299-6450						
Form needs to be received no later than the last WEDNESDAY of the month in order to become						
Effective for the first of the following month.						
_						

TOWN OF BERKLEY NEW HIRE 2022