

PREMIUM WORKSHEET



Rates and/or benefits can change. Rates are based on the employee's age and increase as you enter each new age category.

DisabilityFLEX® (VOLUNTARY SHORT TERM DISABILITY INSURANCE)														
Monthly Premium Amount (Cost per Pay Period – 12/Year)														
OPTION 1: Benefits Begin: 8 day Duration: 26 weeks					OPTION 2: Benefits Begin: 15 day Duration: 26 weeks					OPTION 3: Benefits Begin: 30 day Duration: 26 weeks				
Weekly Benefit	Under 35	35-49	50-59	60+	Weekly Benefit	Under 35	35-49	50-59	60+	Weekly Benefit	Under 35	35-49	50-59	60+
\$200	\$28.52	\$18.02	\$21.80	\$27.96	\$200	\$24.90	\$15.00	\$17.74	\$22.76	\$200	\$20.52	\$10.00	\$10.54	\$13.54
\$300	\$42.78	\$27.03	\$32.70	\$41.94	\$300	\$37.35	\$22.50	\$26.61	\$34.14	\$300	\$30.78	\$15.00	\$15.81	\$20.31
\$400	\$57.04	\$36.04	\$43.60	\$55.92	\$400	\$49.80	\$30.00	\$35.48	\$45.52	\$400	\$41.04	\$20.00	\$21.08	\$27.08
\$500	\$71.30	\$45.05	\$54.50	\$69.90	\$500	\$62.25	\$37.50	\$44.35	\$56.90	\$500	\$51.30	\$25.00	\$26.35	\$33.85
\$600	\$85.56	\$54.06	\$65.40	\$83.88	\$600	\$74.70	\$45.00	\$53.22	\$68.28	\$600	\$61.56	\$30.00	\$31.62	\$40.62
\$700	\$99.82	\$63.07	\$76.30	\$97.86	\$700	\$87.15	\$52.50	\$62.09	\$79.66	\$700	\$71.82	\$35.00	\$36.89	\$47.39
\$800	\$114.08	\$72.08	\$87.20	\$111.84	\$800	\$99.60	\$60.00	\$70.96	\$91.04	\$800	\$82.08	\$40.00	\$42.16	\$54.16
\$900	\$128.34	\$81.09	\$98.10	\$125.82	\$900	\$112.05	\$67.50	\$79.83	\$102.42	\$900	\$92.34	\$45.00	\$47.43	\$60.93
\$1,000	\$142.60	\$90.10	\$109.00	\$139.80	\$1,000	\$124.50	\$75.00	\$88.70	\$113.80	\$1,000	\$102.60	\$50.00	\$52.70	\$67.70

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