Premium rates for continued coverage – Spouse/Child Critical Illness Insurance

Coweta County Board of Education Group Benefit Plan Number: 310531

Premiums are reflected on a quarterly basis, with the option to select other frequencies. See the chart(s) below and use your Issue Age to determine your cost. Your Issue Age is based on your age as of the Coverage Effective Date found on page 1 of the portability form. If you have any questions, contact Voya Employee Benefits Customer Service.

| Spouse Coverage* Quarterly Rates | | | | | |
|---|---------|----------|--|----------|----------|
| Non-Tobacco User Includes Wellness Benefit Rider | | | Tobacco User Includes Wellness Benefit Rider | | |
| Issue Age | \$5,000 | \$10,000 | Issue Age | \$5,000 | \$10,000 |
| Under 25 | \$10.95 | \$21.90 | Under 25 | \$13.50 | \$27.00 |
| 25-29 | \$11.25 | \$22.50 | 25-29 | \$13.95 | \$27.90 |
| 30-34 | \$12.30 | \$24.60 | 30-34 | \$15.75 | \$31.50 |
| 35-39 | \$14.70 | \$29.40 | 35-39 | \$19.35 | \$38.70 |
| 40-44 | \$19.95 | \$39.90 | 40-44 | \$26.25 | \$52.50 |
| 45-49 | \$27.30 | \$54.60 | 45-49 | \$36.45 | \$72.90 |
| 50-54 | \$36.60 | \$73.20 | 50-54 | \$49.50 | \$99.00 |
| 55-59 | \$48.30 | \$96.60 | 55-59 | \$66.00 | \$132.00 |
| 60-64 | \$58.05 | \$116.10 | 60-64 | \$81.60 | \$163.20 |
| 65-69 | \$76.20 | \$152.40 | 65-69 | \$98.85 | \$197.70 |
| 70+ | \$93.90 | \$187.80 | 70+ | \$122.25 | \$244.50 |

*Spouse rates are based on the age of the spouse.

| Children Coverage Quarterly Rates | | |
|--------------------------------------|---------|--|
| Includes Wellness Benefit Rider | | |
| Coverage Amount | Rate | |
| \$2,500 | \$15.30 | |

Rates are subject to change. Refer to your certificate and riders for a description of benefits and exclusions.

Critical Illness/Specified Disease Insurance is underwritten by ReliaStar Life Insurance Company (Minneapolis, MN), a member of the Voya[®] family of companies. Policy form RL-Cl4-POL-16, Certificate form RL-Cl4-CERT-16. Form numbers may vary by state.

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Premium rates for continued coverage – Spouse/Child Accident Insurance

Coweta County Board of Education Group Benefit Plan Number: 310531

Premiums are reflected on a quarterly basis, with the option to select other frequencies. See the chart(s) below to determine your cost. If you have any questions, contact Voya Employee Benefits Customer Service.

| Quarterly Rates | | | |
|-----------------|----------|--|--|
| Spouse | Children | | |
| \$11.55 | \$30.75 | | |

Rates are subject to change. Refer to your certificate and riders for a description of benefits and exclusions.

Accident Insurance is underwritten by ReliaStar Life Insurance Company (Minneapolis, MN), a member of the Voya[®] family of companies. Policy form RL-ACC3-POL-16, Certificate form RL-ACC3-CERT-16. Form numbers may vary by state.

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Premium rates for continued coverage – Spouse/Child Hospital Confinement Indemnity Insurance

Coweta County Board of Education Group Benefit Plan Number: 310531

Premiums are reflected on a quarterly basis, with the option to select other frequencies. See the chart(s) below to determine your cost. If you have any questions, contact Voya Employee Benefits Customer Service.

\$100 daily benefit - Low Plan

| Coverage Type | Daily Benefit | Quarterly Rates |
|---------------|---------------|-----------------|
| Spouse | \$100 | \$21.36 |
| Children | \$100 | \$19.26 |

\$200 daily benefit - Mid Plan

| Coverage Type | Daily Benefit | Quarterly Rates |
|---------------|---------------|-----------------|
| Spouse | \$200 | \$40.02 |
| Children | \$200 | \$33.00 |

\$300 daily benefit - High Plan

| Coverage Type | Daily Benefit | Quarterly Rates |
|---------------|---------------|-----------------|
| Spouse | \$300 | \$58.71 |
| Children | \$300 | \$46.86 |

Rates are subject to change. Refer to your certificate and riders for a description of benefits and exclusions.

Hospital Confinement Indemnity Insurance is underwritten by ReliaStar Life Insurance Company (Minneapolis, MN), a member of the Voya[®] family of companies. Policy form RL-HI2-POL-18, Certificate form RL-HI2-CERT-18. Form numbers may vary by state.

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