



Rate sheet prepared by Web User on 10/26/2015 10:25:35 AM.  
Louisiana Payroll Premium rates are Monthly for industry Class B.

The rates shown on this insert page are for illustration purposes only; they do not imply coverage.  
For more information about policy/plan benefits and limitations, please refer to the accompanying  
product brochure for each insurance policy/plan listed below.

**AFLAC CANCER CARE PLAN CLASSIC - Series A78300**

		Premium	IDR* (5 units)	SDR*	Total
18-75	INDIVIDUAL	\$31.72	\$5.85	\$0.91	\$38.48
18-75	INSURED/SPOUSE	\$53.95	\$13.00	\$1.69	\$68.64
18-75	ONE-PARENT FAMILY	\$31.72	\$5.85	\$0.91	\$38.48
18-75	TWO-PARENT FAMILY	\$53.95	\$13.00	\$1.69	\$68.64

IDR\* = Optional Initial Diagnosis Rider (Series A-78050) premium 1-5 units

SDR\* = Optional Specified Disease Rider (Series A-78052) premium

**CRITICAL CARE PROTECTION POLICY - Series A74200**

Individual				One Parent Family			
Age	Premium	FOBBR	Total	Age	Premium	FOBBR	Total
18-35	\$16.90	\$2.34	\$19.24	18-35	\$28.73	\$2.47	\$31.20
36-45	\$24.05	\$4.29	\$28.34	36-45	\$34.06	\$4.55	\$38.61
46-55	\$32.76	\$5.07	\$37.83	46-55	\$43.81	\$5.20	\$49.01
56-70	\$42.25	\$5.59	\$47.84	56-70	\$57.59	\$5.85	\$63.44
Insured/Spouse				Two Parent Family			
Age	Premium	FOBBR	Total	Age	Premium	FOBBR	Total
18-35	\$32.50	\$4.68	\$37.18	18-35	\$36.92	\$4.81	\$41.73
36-45	\$42.25	\$8.58	\$50.83	36-45	\$46.93	\$8.84	\$55.77
46-55	\$56.94	\$10.14	\$67.08	46-55	\$62.66	\$10.27	\$72.93
56-70	\$79.30	\$11.18	\$90.48	56-70	\$86.06	\$11.44	\$97.50

FOBBR: First Occurrence Building Benefit Rider (Rider Series A74050)



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**Accident Advantage - 24-HOUR ACCIDENT OPTION 3 - Series A36000**

	Premium	Total
18-75 INDIVIDUAL	\$26.91	\$26.91
18-75 NAMED INSURED/SPOUSE	\$35.88	\$35.88
18-75 ONE-PARENT FAMILY	\$41.73	\$41.73
18-75 TWO-PARENT FAMILY	\$52.52	\$52.52

**AFLAC PLUS RIDER**

**Aflac Plus Rider**

Age	Category	Premium
18-29	INDIVIDUAL	\$3.12
30-39		\$4.42
40-49		\$7.54
50-70		\$12.87
18-29	HUSBAND WIFE	\$5.85
30-39		\$8.71
40-49		\$14.30
50-70		\$24.57
18-29	ONE-PARENT FAMILY	\$6.24
30-39		\$6.76
40-49		\$9.10
50-70		\$13.26
18-29	TWO-PARENT FAMILY	\$7.54
30-39		\$9.75
40-49		\$14.69
50-70		\$24.70

**AFLAC HOSPITAL ADVANTAGE ESSENTIALS - Option2 Series A49600**

Age	Individual	One Parent Family	Insured/Spouse	Two Parent Family
18-75	\$27.30	\$40.82	\$44.07	\$50.18

**AFLAC HOSPITAL ADVANTAGE ESSENTIALS - Option4 Series A49800**

Age	Individual	One Parent Family	Insured/Spouse	Two Parent Family
18-75	\$44.85	\$59.28	\$75.53	\$77.74