

# ***First Diagnosis Cancer***

## **Premium Rate Charts**

### ***UNITED TEACHER ASSOCIATES INSURANCE COMPANY***

*An Old Line Legal Reserve Stock Company Originally Organized in 1958*

**5508 Parkcrest Drive • P. O. Box 26580**

**Austin, Texas 78755-0580**

**(512) 451-2224**

## **TABLE OF CONTENTS**

**Policy Form Series CF-960201-UTA First Diagnosis Cancer (FDC)**

**Policy Form Series CF-940101-UTA Cancer First Diagnosis (CFD)  
with CF-940101-UTA-BIA**

<b>Generic Base Policy FDC &amp; CFD with BIA</b>	<b>Page 3</b>
<b>California Base Policy FDC</b>	<b>Page 4</b>
<b>Florida Base Policy CFD</b>	<b>Page 5</b>
<b>Georgia Base Policy Group FDC</b>	<b>Page 6</b>
<b>Iowa Base Policy FDC</b>	<b>Page 7</b>
<b>Montana Base Policy FDC</b>	<b>Page 8</b>
<b>Nevada Base Policy FDC</b>	<b>Page 9</b>
<b>Pennsylvania CFD with First Diagnosis Cancer Benefit Rider</b>	<b>Page 10</b>
<b>South Carolina Base Policy CFD with BIA</b>	<b>Page 11</b>
<b>Wisconsin Base Policy FDC</b>	<b>Page 12</b>
<b>Generic Dread Disease Rider for FDC &amp; CFD BIA</b>	<b>Page 13</b>
<b>Georgia Dread Disease Rider for Group FDC</b>	<b>Page 14</b>
<b>South Carolina Dread Disease Rider for CFD with BIA</b>	<b>Page 15</b>
<b>Generic Dread Disease Rider for CFD</b>	<b>Page 16</b>
<b>Generic ICU Rider for FDC</b>	<b>Page 17</b>
<b>Georgia ICU Rider for Group FDC</b>	<b>Page 18</b>
<b>FL, VA &amp; PA ICU Rider for CFD &amp; CFD with BIA</b>	<b>Page 19</b>

# FIRST DIAGNOSIS CANCER BENEFIT POLICY

Policy Form Series CF-960201-UTA

## CANCER FIRST DIAGNOSIS BENEFIT INSURANCE WITH BENEFIT INCREASE AMENDMENT

Policy Form Series CF-940101-UTA with CF-940101-UTA-BIA

*All States Except California, Florida, Georgia, Iowa, Montana, Nevada,  
Pennsylvania, and South Carolina*

### MONTHLY BANK DRAFT PREMIUMS INDIVIDUAL

Issue Age	\$10,000	\$20,000	\$25,000	\$30,000	\$40,000	\$50,000
20-24	N/A	N/A	N/A	N/A	N/A	17.50
25-29	N/A	N/A	N/A	N/A	18.00	22.50
30-34	N/A	N/A	N/A	16.50	22.00	27.25
35-39	N/A	N/A	16.25	19.50	26.00	32.50
40-44	N/A	17.00	21.25	25.50	34.00	42.50
45-49	N/A	23.00	28.75	34.50	46.00	57.50
50-54	15.50	31.00	38.75	46.50	62.00	77.50
55-59	19.00	38.00	47.50	57.00	76.00	95.00
60-64	24.50	49.00	61.25	73.50	98.00	122.50
65-69	30.50	61.00	76.25	91.50	122.00	152.50
70-74	31.50	63.00	78.75	94.50	126.00	157.50
75-79	33.50	67.00	83.75	100.50	134.00	167.50
80-84	36.50	73.00	91.25	109.50	146.00	182.50
85-89	38.50	77.00	96.25	115.50	154.00	192.50
90-94	38.50	77.00	96.25	115.50	154.00	192.50
95-99	57.00	114.00	142.50	171.00	228.00	285.00

### SINGLE PARENT

Issue Age	\$10,000	\$20,000	\$25,000	\$30,000	\$40,000	\$50,000
20-24	N/A	N/A	N/A	16.50	22.00	27.50
25-29	N/A	N/A	15.00	18.00	24.00	30.00
30-34	N/A	N/A	17.50	21.00	28.00	35.00
35-39	N/A	16.00	20.00	24.00	32.00	40.00
40-44	N/A	20.00	25.00	30.00	40.00	50.00
45-49	N/A	26.00	32.50	39.00	52.00	65.00
50-54	17.00	34.00	42.50	51.00	68.00	85.00
55-59	20.50	41.00	51.25	61.50	82.00	102.50
60-64	25.50	51.00	63.75	76.50	102.00	127.50
65-69	31.50	63.00	78.75	94.50	126.00	157.50
70-74	32.50	65.00	81.25	97.50	130.00	162.50
75-79	34.50	69.00	86.25	103.50	138.00	172.50
80-84	37.50	75.00	93.75	112.50	150.00	187.50
85-89	39.50	79.00	98.75	118.50	158.00	197.50
90-94	39.50	79.00	98.75	118.50	158.00	197.50
95-99	58.50	117.00	146.25	175.50	234.00	292.50

### FAMILY

Issue Age	\$10,000	\$20,000	\$25,000	\$30,000	\$40,000	\$50,000
20-24	N/A	N/A	16.25	19.50	26.00	32.50
25-29	N/A	16.00	20.00	23.75	32.00	40.00
30-34	N/A	19.00	23.75	28.50	38.00	47.50
35-39	N/A	24.00	30.00	36.00	48.00	60.00
40-44	15.50	31.00	38.75	46.50	62.00	77.50
45-49	20.50	41.00	51.25	61.50	82.00	102.50
50-54	26.50	53.00	66.25	79.50	106.00	132.50
55-59	33.00	66.00	82.50	99.00	132.00	165.00
60-64	38.50	77.00	96.25	115.50	154.00	192.50
65-69	46.00	92.00	115.00	138.00	184.00	230.00
70-74	52.00	104.00	130.00	156.00	208.00	260.00
75-79	57.50	115.00	143.75	172.50	230.00	287.50
80-84	59.50	119.00	148.75	178.50	238.00	297.50
85-89	62.00	124.00	155.00	183.75	248.00	310.00
90-94	62.00	124.00	155.00	186.00	248.00	310.00
95-99	80.00	160.00	200.00	226.50	302.00	400.00

Modal Factors:

Annual = Bank draft x 12

Semi Annual = Bank draft x 6.24

Quarterly = Bank draft x 3.18

REQUIRED MINIMUM ANNUAL PREMIUM IS \$180.00.

**SUPPLEMENTAL FIRST DIAGNOSIS  
CANCER BENEFIT POLICY**

Policy Form Number CF-960201-UTA-CA

*California*

**MONTHLY BANK DRAFT PREMIUMS**

**INDIVIDUAL**

Issue Age	\$10,000	\$20,000	\$25,000	\$30,000	\$40,000	\$50,000
20-24	N/A	N/A	N/A	N/A	16.00	20.00
25-29	N/A	N/A	N/A	15.00	20.00	25.00
30-34	N/A	N/A	16.25	19.50	26.00	32.50
35-39	N/A	15.00	18.75	22.50	30.00	37.50
40-44	N/A	20.00	25.00	30.00	40.00	50.00
45-49	N/A	26.00	32.50	39.00	52.00	65.00
50-54	18.00	36.00	45.00	54.00	72.00	90.00
55-59	22.00	44.00	55.00	66.00	88.00	110.00
60-64	28.00	56.00	70.00	84.00	112.00	140.00

**SINGLE PARENT**

Issue Age	\$10,000	\$20,000	\$25,000	\$30,000	\$40,000	\$50,000
20-24	N/A	N/A	16.25	19.50	26.00	32.50
25-29	N/A	N/A	17.50	21.00	28.00	35.00
30-34	N/A	16.00	20.00	24.00	32.00	40.00
35-39	N/A	18.00	22.50	27.00	36.00	45.00
40-44	N/A	23.00	28.75	34.50	46.00	57.50
45-49	15.00	30.00	37.50	45.00	60.00	75.00
50-54	19.50	39.00	48.75	58.50	78.00	97.50
55-59	23.50	47.00	58.75	70.50	94.00	117.50
60-64	29.50	59.00	73.75	88.50	118.00	147.50

**FAMILY**

Issue Age	\$10,000	\$20,000	\$25,000	\$30,000	\$40,000	\$50,000
20-24	N/A	15.00	18.75	22.50	30.00	37.50
25-29	N/A	18.00	22.50	27.00	36.00	45.00
30-34	N/A	22.00	27.50	33.00	44.00	55.00
35-39	N/A	28.00	35.00	42.00	56.00	70.00
40-44	18.00	36.00	45.00	54.00	72.00	90.00
45-49	23.50	47.00	58.75	70.50	94.00	117.50
50-54	30.50	61.00	76.25	91.50	122.00	152.50
55-59	38.00	76.00	95.00	114.00	152.00	190.00
60-64	44.00	88.00	110.00	132.00	176.00	220.00

Modal Factors:

Annual = Bank draft x 12

Semi Annual = Bank draft x 6.24

Quarterly = Bank draft x 3.18

**REQUIRED MINIMUM ANNUAL PREMIUM IS \$180.00.**

# CANCER FIRST DIAGNOSIS BENEFIT INSURANCE

Policy Form Number CF-940101-UTA-FL

## Florida

### MONTHLY BANK DRAFT PREMIUMS

#### INDIVIDUAL

Issue Age	\$10,000	\$20,000	\$25,000	\$30,000	\$40,000	\$50,000
20-24	N/A	N/A	N/A	N/A	N/A	16.25
25-29	N/A	N/A	N/A	N/A	15.00	18.75
30-34	N/A	N/A	N/A	N/A	18.00	22.50
35-39	N/A	N/A	N/A	16.50	22.00	27.50
40-44	N/A	N/A	17.50	21.00	28.00	35.00
45-49	N/A	17.75	22.50	27.00	36.00	45.00
50-54	N/A	22.75	28.75	34.50	46.00	57.50
55-59	N/A	26.75	33.75	40.50	54.00	67.50
60-74*	N/A	27.25	34.50	41.25	55.00	68.75
75-79	15.00	30.00	37.50	45.00	60.00	75.00
80-84	16.25	32.50	40.75	48.75	65.00	81.25
85-89	17.25	34.25	43.25	51.75	69.00	86.25
90-94	17.25	34.25	43.25	51.75	69.00	86.25
95-99	25.50	50.75	63.75	76.50	102.00	127.50

#### SINGLE PARENT

Issue Age	\$10,000	\$20,000	\$25,000	\$30,000	\$40,000	\$50,000
20-24	N/A	N/A	N/A	N/A	16.00	20.00
25-29	N/A	N/A	N/A	N/A	18.00	22.50
30-34	N/A	N/A	N/A	15.75	21.00	26.25
35-39	N/A	N/A	15.00	18.00	24.00	30.00
40-44	N/A	15.25	19.50	23.25	31.00	38.75
45-49	N/A	19.25	24.50	29.25	39.00	48.75
50-54	N/A	24.00	30.00	36.00	48.00	60.00
55-59	N/A	28.00	35.00	42.00	56.00	70.00
60-74*	N/A	28.00	35.00	42.00	56.00	70.00
75-79	15.50	30.75	38.75	46.50	62.00	77.50
80-84	16.75	33.50	42.00	50.25	67.00	83.75
85-89	17.75	35.25	44.50	53.25	71.00	88.75
90-94	17.75	35.25	44.50	53.25	71.00	88.75
95-99	26.00	52.00	66.00	78.00	104.00	130.00

#### FAMILY

Issue Age	\$10,000	\$20,000	\$25,000	\$30,000	\$40,000	\$50,000
20-24	N/A	N/A	N/A	15.00	20.00	25.00
25-29	N/A	N/A	15.00	18.00	24.00	30.00
30-34	N/A	N/A	18.15	21.80	29.05	36.30
35-39	N/A	18.25	23.25	27.75	37.00	46.25
40-44	N/A	24.00	30.00	36.00	48.00	60.00
45-49	16.00	31.75	40.00	48.00	64.00	80.00
50-54	20.25	40.50	50.75	60.75	81.00	101.25
55-59	24.25	48.50	60.75	72.75	97.00	121.25
60-74*	24.50	49.00	61.25	73.50	98.00	122.50
75-79	26.75	53.50	62.00	80.25	107.00	133.75
80-84	29.25	58.25	73.25	87.75	117.00	146.25
85-89	30.75	61.50	77.00	92.25	123.00	153.75
90-94	30.75	61.50	77.00	92.25	123.00	153.75
95-99	42.75	85.50	107.00	128.25	171.00	213.75

\*Benefits reduce 50% for insureds ages 65 and over and for dependent children.

Modal Factors:

Annual = Bank draft x 12

Semi Annual = Bank draft x 6.24

Quarterly = Bank draft x 3.18

**REQUIRED MINIMUM ANNUAL PREMIUM IS \$180.00.**

# GROUP FIRST DIAGNOSIS CANCER BENEFIT

Certificate Form Number CG-960601-UTA

## Georgia

### MONTHLY BANK DRAFT PREMIUMS

#### INDIVIDUAL

Issue Age	\$10,000	\$20,000	\$25,000	\$30,000	\$40,000	\$50,000
20-24	N/A	N/A	N/A	N/A	N/A	N/A
25-29	N/A	N/A	N/A	N/A	18.00	22.50
30-34	N/A	N/A	N/A	16.50	22.00	27.25
35-39	N/A	N/A	16.25	19.50	26.00	32.50
40-44	N/A	17.00	21.25	25.50	34.00	42.50
45-49	N/A	23.00	28.75	34.50	46.00	57.50
50-54	15.50	31.00	38.75	46.50	62.00	77.50
55-59	19.00	38.00	47.50	57.00	76.00	95.00
60-64	24.50	49.00	61.25	73.50	98.00	122.50
65-69	30.50	61.00	76.25	91.50	122.00	152.50
70-74	31.50	63.00	78.75	94.50	126.00	157.50
75-79	33.50	67.00	83.75	100.50	134.00	167.50
80-84	36.50	73.00	91.25	109.50	146.00	182.50
85-89	38.50	77.00	96.25	115.50	154.00	192.50
90-94	38.50	77.00	96.25	115.50	154.00	192.50
95-99	57.00	114.00	142.50	171.00	228.00	285.00

#### SINGLE PARENT

Issue Age	\$10,000	\$20,000	\$25,000	\$30,000	\$40,000	\$50,000
20-24	N/A	N/A	N/A	16.50	22.00	27.50
25-29	N/A	N/A	15.00	18.00	24.00	30.00
30-34	N/A	N/A	17.50	21.00	28.00	35.00
35-39	N/A	16.00	20.00	24.00	32.00	40.00
40-44	N/A	20.00	25.00	30.00	40.00	50.00
45-49	N/A	26.00	32.50	39.00	52.00	65.00
50-54	17.00	34.00	42.50	51.00	68.00	85.00
55-59	20.50	41.00	51.25	61.50	82.00	102.50
60-64	25.50	51.00	63.75	76.50	102.00	127.50
65-69	31.50	63.00	78.75	94.50	126.00	157.50
70-74	32.50	65.00	81.25	97.50	130.00	162.50
75-79	34.50	69.00	86.25	103.50	138.00	172.50
80-84	37.50	75.00	93.75	112.50	150.00	187.50
85-89	39.50	79.00	98.75	118.50	158.00	197.50
90-94	39.50	79.00	98.75	118.50	158.00	197.50
95-99	58.50	117.00	146.25	175.50	234.00	292.50

#### FAMILY

Issue Age	\$10,000	\$20,000	\$25,000	\$30,000	\$40,000	\$50,000
20-24	N/A	N/A	16.25	19.50	26.00	32.50
25-29	N/A	16.00	20.00	24.00	32.00	40.00
30-34	N/A	19.00	23.75	28.50	38.00	47.50
35-39	N/A	24.00	30.00	36.00	48.00	60.00
40-44	15.50	31.00	38.75	46.50	62.00	77.50
45-49	20.50	41.00	51.25	61.50	82.00	102.50
50-54	26.50	53.00	66.25	79.50	106.00	132.50
55-59	33.00	66.00	82.50	99.00	132.00	165.00
60-64	38.50	77.00	96.25	115.50	154.00	192.50
65-69	46.00	92.00	115.00	138.00	184.00	230.00
70-74	52.00	104.00	130.00	156.00	208.00	260.00
75-79	57.50	115.00	143.75	172.50	230.00	287.50
80-84	59.50	119.00	148.75	178.50	238.00	297.50
85-89	62.00	124.00	155.00	183.75	248.00	310.00
90-94	62.00	124.00	155.00	186.00	248.00	310.00
95-99	80.00	160.00	200.00	226.50	320.00	400.00

Modal Factors:

Annual = Bank draft x 12

Semi Annual = Bank draft x 6.24

Quarterly = Bank draft x 3.18

REQUIRED MINIMUM ANNUAL PREMIUM IS \$180.00.

# FIRST DIAGNOSIS CANCER BENEFIT POLICY

Policy Form Number CF-960201-UTA-IA

## Iowa

### MONTHLY BANK DRAFT PREMIUMS

#### INDIVIDUAL

Issue Age	\$10,000	\$20,000	\$25,000	\$30,000	\$40,000	\$50,000
20-24	N/A	N/A	N/A	N/A	N/A	17.75
25-29	N/A	N/A	N/A	N/A	18.25	22.75
30-34	N/A	N/A	N/A	17.00	22.50	28.00
35-39	N/A	N/A	17.00	20.25	26.75	33.25
40-44	N/A	18.25	22.50	26.75	35.25	43.75
45-49	N/A	24.75	30.50	36.25	47.75	59.25
50-54	18.00	33.50	41.25	49.00	64.50	80.00
55-59	22.25	41.25	50.75	60.25	79.25	98.25
60-64	28.75	53.25	65.50	77.75	102.25	126.75
65-69	34.75	65.25	80.50	95.75	126.25	156.75
70-74	35.75	67.25	83.00	98.75	130.25	161.75
75-79	38.50	72.00	88.75	105.50	139.00	172.50
80-84	41.75	78.25	96.50	114.75	151.25	187.75
85-89	43.75	82.25	101.50	120.75	159.25	197.75
90-94	43.75	82.25	101.50	120.75	159.25	197.75
95-99	62.25	119.25	147.75	176.25	233.25	290.25

#### SINGLE PARENT

Issue Age	\$10,000	\$20,000	\$25,000	\$30,000	\$40,000	\$50,000
20-24	N/A	N/A	N/A	17.25	22.75	28.25
25-29	N/A	N/A	15.75	18.75	24.75	30.75
30-34	N/A	15.00	18.50	22.00	29.00	36.00
35-39	N/A	17.25	21.25	25.25	33.25	41.25
40-44	N/A	21.75	26.75	31.75	41.75	51.75
45-49	15.25	28.25	34.75	41.25	54.25	67.25
50-54	20.00	37.00	45.50	54.00	71.00	88.00
55-59	24.25	44.75	55.00	65.25	85.75	106.25
60-64	30.25	55.75	68.50	81.25	106.75	132.25
65-69	36.25	67.75	83.50	99.25	130.75	162.25
70-74	37.25	69.75	86.00	102.25	134.75	167.25
75-79	40.00	74.50	91.75	109.00	143.50	178.00
80-84	43.25	80.75	99.50	118.25	155.75	193.25
85-89	45.25	84.75	104.50	124.25	163.75	203.25
90-94	45.25	84.75	104.50	124.25	163.75	203.25
95-99	64.25	122.75	152.00	181.25	239.75	298.25

#### FAMILY

Issue Age	\$10,000	\$20,000	\$25,000	\$30,000	\$40,000	\$50,000
20-24	N/A	N/A	17.25	20.50	27.00	33.50
25-29	N/A	17.00	21.00	25.00	33.00	41.00
30-34	N/A	20.50	25.25	30.00	39.50	49.00
35-39	N/A	26.00	32.00	38.00	50.00	62.00
40-44	18.50	34.00	41.75	49.50	65.00	80.50
45-49	24.50	45.00	55.25	65.50	86.00	106.50
50-54	31.50	58.00	71.25	84.50	111.00	137.50
55-59	39.50	72.50	89.00	105.50	138.50	171.50
60-64	47.00	85.50	104.75	124.00	162.50	201.00
65-69	54.50	100.50	123.50	146.50	192.50	238.50
70-74	60.50	112.50	138.50	164.50	216.50	268.50
75-79	67.50	125.00	153.75	182.50	240.00	297.50
80-84	70.00	129.50	159.25	189.00	248.50	308.00
85-89	72.50	134.50	165.50	196.50	258.50	320.50
90-94	72.50	134.50	165.50	196.50	258.50	320.50
95-99	90.50	170.50	210.50	250.50	330.50	410.50

Modal Factors:

Annual = Bank draft x 12

Semi Annual = Bank draft x 6.24

Quarterly = Bank draft x 3.18

REQUIRED MINIMUM ANNUAL PREMIUM IS \$180.00.

# FIRST DIAGNOSIS CANCER BENEFIT POLICY

Policy Form Number CF-960201-UTA-MT

## Montana

### MONTHLY BANK DRAFT PREMIUMS

#### INDIVIDUAL

Issue Age	\$10,000	\$20,000	\$25,000	\$30,000	\$40,000	\$50,000
20-24	N/A	N/A	N/A	N/A	15.50	19.00
25-29	N/A	N/A	N/A	15.00	19.50	24.00
30-34	N/A	N/A	15.25	18.00	23.50	29.00
35-39	N/A	N/A	17.75	21.00	27.50	34.00
40-44	N/A	18.50	22.75	27.00	35.50	44.00
45-49	N/A	24.50	30.25	36.00	47.50	59.00
50-54	17.00	32.50	40.25	48.00	63.50	79.00
55-59	20.50	39.50	49.00	58.50	77.50	96.50
60-64	26.00	50.50	62.75	75.00	99.50	124.00
65-69	32.00	62.50	77.75	93.00	123.50	154.00
70-74	33.00	64.50	80.25	96.00	127.50	159.00
75-79	35.00	68.50	85.25	102.00	135.50	169.00
80-84	38.00	74.50	92.75	111.00	147.50	184.00
85-89	40.00	78.50	97.75	117.00	155.50	194.00
90-94	40.00	78.50	97.75	117.00	155.50	194.00
95-99	58.50	115.50	144.00	172.50	229.50	286.00

#### SINGLE PARENT

Issue Age	\$10,000	\$20,000	\$25,000	\$30,000	\$40,000	\$50,000
20-24	N/A	N/A	15.25	18.00	23.50	29.00
25-29	N/A	N/A	16.50	19.50	25.50	31.50
30-34	N/A	15.50	19.00	22.50	29.50	36.50
35-39	N/A	17.50	21.50	25.50	33.50	41.50
40-44	N/A	21.50	26.50	31.50	41.50	51.50
45-49	N/A	27.50	34.00	40.50	53.50	66.50
50-54	18.50	35.50	44.00	52.50	69.50	86.50
55-59	22.00	42.50	52.75	63.00	83.50	104.00
60-64	27.00	52.50	65.25	78.00	103.50	129.00
65-69	33.00	64.50	80.25	96.00	127.50	159.00
70-74	34.00	66.50	82.75	99.00	131.50	164.00
75-79	36.00	70.50	87.75	105.00	139.50	174.00
80-84	39.00	76.50	95.25	114.00	151.50	189.00
85-89	41.00	80.50	100.25	120.00	159.50	199.00
90-94	41.00	80.50	100.25	120.00	159.50	199.00
95-99	60.00	118.50	147.75	177.00	235.50	294.00

#### FAMILY

Issue Age	\$10,000	\$20,000	\$25,000	\$30,000	\$40,000	\$50,000
20-24	N/A	N/A	17.75	21.00	27.50	34.00
25-29	N/A	17.50	21.50	25.50	33.50	41.50
30-34	N/A	20.50	25.25	30.00	39.50	49.00
35-39	N/A	25.50	31.50	37.50	49.50	61.50
40-44	17.00	32.50	40.25	48.00	63.50	79.00
45-49	22.00	42.50	52.75	63.00	83.50	104.00
50-54	28.00	54.50	67.75	81.00	107.50	134.00
55-59	34.50	67.50	84.00	100.50	133.50	166.50
60-64	40.00	78.50	97.75	117.00	155.50	194.00
65-69	47.50	93.50	116.50	139.50	185.50	231.50
70-74	53.50	105.50	131.50	157.50	209.50	261.50
75-79	59.00	116.50	145.25	174.00	231.50	289.00
80-84	61.00	120.50	150.25	180.00	239.50	299.00
85-89	63.50	125.50	156.50	187.50	249.50	311.50
90-94	63.50	125.50	156.50	187.50	249.50	311.50
95-99	81.50	161.50	201.50	241.50	321.50	401.50

Modal Factors:

Annual = Bank draft x 12

Semi Annual = Bank draft x 6.24

Quarterly = Bank draft x 3.18

REQUIRED MINIMUM ANNUAL PREMIUM IS \$180.00.

# FIRST DIAGNOSIS CANCER BENEFIT POLICY

Policy Form Number CF-960201-UTA-NV

## Nevada

### MONTHLY BANK DRAFT PREMIUMS

#### INDIVIDUAL

Issue Age	\$10,000	\$20,000	\$25,000	\$30,000	\$40,000	\$50,000
20-24	N/A	N/A	N/A	N/A	\$17.00	\$20.50
25-29	N/A	N/A	N/A	\$16.50	\$21.00	\$25.50
30-34	N/A	N/A	\$16.75	\$19.50	\$25.00	\$30.50
35-39	N/A	\$16.00	\$19.25	\$22.50	\$29.00	\$35.50
40-44	N/A	\$20.00	\$24.25	\$28.50	\$37.00	\$45.50
45-49	N/A	\$26.00	\$31.75	\$37.50	\$49.00	\$60.50
50-54	\$18.50	\$34.00	\$41.75	\$49.50	\$65.00	\$80.50
55-59	\$22.00	\$41.00	\$50.50	\$60.00	\$79.00	\$98.00
60-64	\$27.50	\$52.00	\$64.25	\$76.50	\$101.00	\$125.50
65-69	\$33.50	\$64.00	\$79.25	\$94.50	\$125.00	\$155.50
70-74	\$34.50	\$66.00	\$81.75	\$97.50	\$129.00	\$160.50
75-79	\$36.50	\$70.00	\$86.75	\$103.50	\$137.00	\$170.50
80-84	\$39.50	\$76.00	\$94.25	\$112.50	\$149.00	\$185.50
85-89	\$41.50	\$80.00	\$99.25	\$118.50	\$157.00	\$195.50
90-94	\$41.50	\$80.00	\$99.25	\$118.50	\$157.00	\$195.50
95-99	\$60.00	\$117.00	\$145.50	\$174.00	\$231.00	\$288.00

#### SINGLE PARENT

Issue Age	\$10,000	\$20,000	\$25,000	\$30,000	\$40,000	\$50,000
20-24	N/A	N/A	\$16.75	\$19.50	\$25.00	\$30.50
25-29	N/A	\$15.00	\$18.00	\$21.00	\$27.00	\$33.00
30-34	N/A	\$17.00	\$20.50	\$24.00	\$31.00	\$38.00
35-39	N/A	\$19.00	\$23.00	\$27.00	\$35.00	\$43.00
40-44	N/A	\$23.00	\$28.00	\$33.00	\$43.00	\$53.00
45-49	\$16.00	\$29.00	\$35.50	\$42.00	\$55.00	\$68.00
50-54	\$20.00	\$37.00	\$45.50	\$54.00	\$71.00	\$88.00
55-59	\$23.50	\$44.00	\$54.25	\$64.50	\$85.00	\$105.50
60-64	\$28.50	\$54.00	\$66.75	\$79.50	\$105.00	\$130.50
65-69	\$34.50	\$66.00	\$81.75	\$97.50	\$129.00	\$160.50
70-74	\$35.50	\$68.00	\$84.25	\$100.50	\$133.00	\$165.50
75-79	\$37.50	\$72.00	\$89.25	\$106.50	\$141.00	\$175.50
80-84	\$40.50	\$78.00	\$96.75	\$115.50	\$153.00	\$190.50
85-89	\$42.50	\$82.00	\$101.75	\$121.50	\$161.00	\$200.50
90-94	\$42.50	\$82.00	\$101.75	\$121.50	\$161.00	\$200.50
95-99	\$61.50	\$120.00	\$149.25	\$178.50	\$237.00	\$295.50

#### FAMILY

Issue Age	\$10,000	\$20,000	\$25,000	\$30,000	\$40,000	\$50,000
20-24	N/A	\$16.00	\$19.25	\$22.50	\$29.00	\$35.50
25-29	N/A	\$19.00	\$23.00	\$27.00	\$35.00	\$43.00
30-34	N/A	\$22.00	\$26.75	\$31.50	\$41.00	\$50.50
35-39	\$15.00	\$27.00	\$33.00	\$39.00	\$51.00	\$63.00
40-44	\$18.50	\$34.00	\$41.75	\$49.50	\$65.00	\$80.50
45-49	\$23.50	\$44.00	\$54.25	\$64.50	\$85.00	\$105.50
50-54	\$29.50	\$56.00	\$69.25	\$82.50	\$109.00	\$135.50
55-59	\$36.00	\$69.00	\$85.50	\$102.00	\$135.00	\$168.00
60-64	\$41.50	\$80.00	\$99.25	\$118.50	\$157.00	\$195.50
65-69	\$49.00	\$95.00	\$118.00	\$141.00	\$187.00	\$233.00
70-74	\$55.00	\$107.00	\$133.00	\$159.00	\$211.00	\$263.00
75-79	\$60.50	\$118.00	\$146.75	\$175.50	\$233.00	\$290.50
80-84	\$62.50	\$122.00	\$151.75	\$181.50	\$241.00	\$300.50
85-89	\$65.00	\$127.00	\$158.00	\$189.00	\$251.00	\$313.00
90-94	\$65.00	\$127.00	\$158.00	\$189.00	\$251.00	\$313.00
95-99	\$83.00	\$163.00	\$203.00	\$243.00	\$323.00	\$403.00

Modal Factors:

Annual = Bank draft x 12

Semi Annual = Bank draft x 6.24

Quarterly = Bank draft x 3.18

**REQUIRED MINIMUM ANNUAL PREMIUM IS \$180.00.**

# CANCER BENEFIT INSURANCE

Sold with the  
First Diagnosis Cancer Benefit Rider  
Rider Form Number CF-940101-UTA-R05-PA

## Pennsylvania

### MONTHLY BANK DRAFT PREMIUMS

#### INDIVIDUAL

Issue Age	\$10,000	\$20,000	\$25,000	\$30,000	\$40,000	\$50,000
18-24	N/A	N/A	N/A	N/A	15.00	18.50
25-29	N/A	N/A	N/A	N/A	18.50	22.75
30-34	N/A	N/A	N/A	17.00	22.00	27.00
35-39	N/A	15.00	18.00	21.00	27.00	33.00
40-44	N/A	20.00	23.90	27.75	35.50	43.25
45-49	16.50	26.50	31.50	36.50	46.50	56.50
50-54	21.25	34.00	40.40	46.75	59.50	72.25
55-59	25.50	40.50	48.00	55.50	70.50	85.50
60-74*	27.50	42.75	50.40	58.00	73.25	88.50
75-79	29.25	46.00	54.40	62.75	79.50	96.25
80-84	31.00	49.25	58.40	67.50	85.75	104.00
85-89	32.35	51.50	61.15	70.75	90.00	109.25
90-94	32.35	51.50	61.15	70.75	90.00	109.25
95-99	41.50	70.00	84.25	98.50	127.00	155.50

#### SINGLE PARENT

Issue Age	\$10,000	\$20,000	\$25,000	\$30,000	\$40,000	\$50,000
18-24	N/A	N/A	N/A	15.50	20.00	24.50
25-29	N/A	N/A	15.00	17.50	22.50	27.50
30-34	N/A	N/A	17.40	20.25	26.00	31.75
35-39	N/A	17.50	20.90	24.25	31.00	37.75
40-44	N/A	22.50	26.75	31.00	39.50	48.00
45-49	18.25	29.00	34.40	39.75	50.50	61.25
50-54	23.00	36.50	43.25	50.00	63.50	77.00
55-59	27.25	43.00	50.90	58.75	74.50	90.25
60-74*	28.00	43.75	51.65	59.50	75.25	91.00
75-79	29.75	47.00	55.65	64.25	81.50	98.75
80-84	31.50	50.25	59.65	69.00	87.75	106.50
85-89	32.75	52.50	62.40	72.25	92.00	111.75
90-94	32.75	52.50	62.40	72.25	92.00	111.75
95-99	42.25	71.50	86.15	100.75	130.00	159.25

#### FAMILY

Issue Age	\$10,000	\$20,000	\$25,000	\$30,000	\$40,000	\$50,000
18-24	N/A	N/A	16.75	19.50	25.00	30.50
25-29	N/A	17.50	20.90	24.25	31.00	37.75
30-34	N/A	21.00	25.00	29.00	37.00	45.00
35-39	17.25	27.50	32.65	37.75	48.00	58.25
40-44	23.50	37.00	43.75	50.50	64.00	77.50
45-49	31.75	49.50	58.40	67.25	85.00	102.75
50-54	40.75	63.50	74.90	86.25	109.00	131.75
55-59	49.25	76.50	90.15	103.75	131.00	158.25
60-74*	52.00	79.50	93.25	107.00	134.50	162.00
75-79	55.00	85.00	100.00	115.00	145.00	175.00
80-84	58.25	91.00	107.40	123.75	156.50	189.25
85-89	60.50	95.00	112.25	129.50	164.00	198.50
90-94	60.50	95.00	112.25	129.50	164.00	198.50
95-99	74.00	122.00	146.00	170.00	218.00	266.00

\*Benefits reduce 50% for insureds ages 65 and over and for dependent children.

Modal Factors:

Annual = Bank draft x 12

Semi Annual = Bank draft x 6.24

Quarterly = Bank draft x 3.18

REQUIRED MINIMUM ANNUAL PREMIUM IS \$180.00.

**CANCER FIRST DIAGNOSIS BENEFIT INS  
WITH BENEFIT INCREASE AMENDMENT**

Policy Form Number CF-940101-UTA-SC  
with CF-940101-UTA-BIA

**SOUTH CAROLINA**

**MONTHLY BANK DRAFT PREMIUMS**

**INDIVIDUAL**

Issue Age	\$25,000	\$30,000	\$40,000	\$50,000
20-24	N/A	N/A	N/A	17.50
25-29	N/A	N/A	18.00	22.50
30-34	N/A	16.50	22.00	27.25
35-39	16.25	19.50	26.00	32.50
40-44	21.25	25.50	34.00	42.50
45-49	28.75	34.50	46.00	57.50
50-54	38.75	46.50	62.00	77.50
55-59	47.50	57.00	76.00	95.00
60-64	61.25	73.50	98.00	122.50
65-69	76.25	91.50	122.00	152.50
70-74	78.75	94.50	126.00	157.50
75-79	83.75	100.50	134.00	167.50
80-84	91.25	109.50	146.00	182.50
85-89	96.25	115.50	154.00	192.50
90-94	96.25	115.50	154.00	192.50
95-99	142.50	171.00	228.00	285.00

**SINGLE PARENT**

Issue Age	\$25,000	\$30,000	\$40,000	\$50,000
20-24	N/A	16.50	22.00	27.50
25-29	15.00	18.00	24.00	30.00
30-34	17.50	21.00	28.00	35.00
35-39	20.00	24.00	32.00	40.00
40-44	25.00	30.00	40.00	50.00
45-49	32.50	39.00	52.00	65.00
50-54	42.50	51.00	68.00	85.00
55-59	51.25	61.50	82.00	102.50
60-64	63.75	76.50	102.00	127.50
65-69	78.75	94.50	126.00	157.50
70-74	81.25	97.50	130.00	162.50
75-79	86.25	103.50	138.00	172.50
80-84	93.75	112.50	150.00	187.50
85-89	98.75	118.50	158.00	197.50
90-94	98.75	118.50	158.00	197.50
95-99	146.25	175.50	234.00	292.50

**FAMILY**

Issue Age	\$25,000	\$30,000	\$40,000	\$50,000
20-24	16.25	19.50	26.00	32.50
25-29	20.00	24.00	32.00	40.00
30-34	23.75	28.50	38.00	47.50
35-39	30.00	36.00	48.00	60.00
40-44	38.75	46.50	62.00	77.50
45-49	51.25	61.50	82.00	102.50
50-54	66.25	79.50	106.00	132.50
55-59	82.50	99.00	132.00	165.00
60-64	96.25	115.50	154.00	192.50
65-69	115.00	138.00	184.00	230.00
70-74	130.00	156.00	208.00	260.00
75-79	143.75	172.50	230.00	287.50
80-84	148.75	178.50	238.00	297.50
85-89	155.00	183.75	248.00	310.00
90-94	155.00	186.00	248.00	310.00
95-99	200.00	226.50	320.00	400.00

Modal Factors:

Annual = Bank draft x 12

Semi Annual = Bank draft x 6.24

Quarterly = Bank draft x 3.18

**REQUIRED MINIMUM ANNUAL PREMIUM IS \$180.00.**

# FIRST DIAGNOSIS CANCER BENEFIT POLICY

Policy Form Number CF-960201-UTA-WI

## Wisconsin

### MONTHLY BANK DRAFT PREMIUMS INDIVIDUAL

Issue Age	\$10,000	\$20,000	\$25,000	\$30,000	\$40,000	\$50,000
20-24	N/A	N/A	N/A	N/A	16.00	20.00
25-29	N/A	N/A	N/A	15.00	20.00	25.00
30-34	N/A	N/A	16.25	19.50	26.00	32.50
35-39	N/A	15.00	18.75	22.50	30.00	37.50
40-44	N/A	20.00	25.00	3.00	40.00	50.00
45-49	N/A	26.00	32.50	39.00	52.00	65.00
50-54	18.00	36.00	45.00	54.00	72.00	90.00
55-59	22.00	44.00	55.00	66.00	88.00	110.00
60-64	28.00	56.00	70.00	84.00	112.00	140.00
65-69	35.00	70.00	87.50	105.00	140.00	175.00
70-74	36.00	72.00	90.00	108.00	144.00	180.00
75-79	38.50	77.00	96.25	115.50	154.00	192.50
80-84	42.00	84.00	105.00	126.00	168.00	210.00
85-89	44.00	88.00	110.00	132.00	176.00	220.00
90-94	44.00	88.00	110.00	132.00	176.00	220.00
95-99	65.50	131.00	163.75	196.50	262.00	327.50

### SINGLE PARENT

Issue Age	\$10,000	\$20,000	\$25,000	\$30,000	\$40,000	\$50,000
20-24	N/A	N/A	N/A	16.50	22.00	27.50
25-29	N/A	N/A	15.00	18.00	24.00	30.00
30-34	N/A	N/A	17.50	21.00	28.00	35.00
35-39	N/A	16.00	20.00	24.00	32.00	40.00
40-44	N/A	20.00	25.00	30.00	40.00	50.00
45-49	15.00	26.00	32.50	39.00	52.00	65.00
50-54	19.50	34.00	42.50	51.00	68.00	85.00
55-59	23.50	41.00	51.25	61.50	82.00	102.50
60-64	29.50	51.00	63.75	76.50	102.00	127.50
65-69	36.00	63.00	78.75	94.50	126.00	157.50
70-74	37.50	65.00	81.25	97.50	130.00	162.50
75-79	40.00	69.00	86.25	103.50	138.00	172.50

(For Single Parent rates ages 80-99, contact the home office)

### FAMILY

Issue Age	\$10,000	\$20,000	\$25,000	\$30,000	\$40,000	\$50,000
20-24	N/A	15.00	18.75	22.50	30.00	37.50
25-29	N/A	18.00	22.50	27.00	36.00	45.00
30-34	N/A	22.00	27.50	33.00	44.00	55.00
35-39	N/A	28.00	35.00	42.00	56.00	70.00
40-44	18.00	36.00	45.00	54.00	72.00	90.00
45-49	23.50	47.00	58.75	70.50	94.00	117.50
50-54	30.50	61.00	76.25	91.50	122.00	152.50
55-59	38.00	76.00	95.00	114.00	152.00	190.00
60-64	44.00	88.00	110.00	132.00	176.00	220.00
65-69	53.00	106.00	132.50	159.00	212.00	265.00
70-74	60.00	120.00	150.00	180.00	240.00	300.00
75-79	66.00	132.00	165.00	198.00	264.00	330.00
80-84	68.50	137.00	171.25	205.50	274.00	342.50
85-89	71.00	142.00	177.50	213.00	284.00	355.00
90-94	71.00	142.00	177.50	213.00	284.00	355.00
95-99	92.00	184.00	230.00	276.00	368.00	460.00

Modal Factors:

Annual = Bank draft x 12

Semi Annual = Bank draft x 6.24

Quarterly = Bank draft x 3.18

REQUIRED MINIMUM ANNUAL PREMIUM IS \$180.00.

**First Diagnosis Dread Disease Benefit Rider**  
Sold with the  
**First Diagnosis Cancer Benefit Policy**  
**&**  
**The Cancer First Diagnosis Benefit Insurance with**  
**the Benefit Increase Amendment**  
Rider Form Series RD-20101-DD & CF-940101-UTA-BIA01

*All States Except Florida, Georgia,  
Pennsylvania, & South Carolina*

**MONTHLY BANK DRAFT PREMIUMS**

**INDIVIDUAL**

Issue Age	\$10,000	\$20,000	\$25,000	\$30,000	\$40,000	\$50,000
20-24	\$1.25	\$2.50	\$3.15	\$3.75	\$5.00	\$6.25
25-29	\$1.25	\$2.50	\$3.15	\$3.75	\$5.00	\$6.25
30-34	\$1.25	\$2.50	\$3.15	\$3.75	\$5.00	\$6.25
35-39	\$1.25	\$2.50	\$3.15	\$3.75	\$5.00	\$6.25
40-44	\$1.75	\$3.50	\$4.40	\$5.25	\$7.00	\$8.75
45-49	\$2.25	\$4.50	\$5.65	\$6.75	\$9.00	\$11.25
50-54	\$3.00	\$6.00	\$7.50	\$9.00	\$12.00	\$15.00
55-59	\$3.75	\$7.50	\$9.40	\$11.25	\$15.00	\$18.75
60-64	\$4.75	\$9.50	\$11.90	\$14.25	\$19.00	\$23.75
65-69	\$6.00	\$12.00	\$15.00	\$18.00	\$24.00	\$30.00
70-74	\$6.25	\$12.50	\$15.65	\$18.75	\$25.00	\$31.25
75-79	\$6.50	\$13.00	\$16.25	\$19.50	\$26.00	\$32.50
80-84	\$7.00	\$14.00	\$17.50	\$21.00	\$28.00	\$35.00
85-89	\$7.50	\$15.00	\$18.75	\$22.50	\$30.00	\$37.50
90-94	\$7.50	\$15.00	\$18.75	\$22.50	\$30.00	\$37.50
95-99	\$10.00	\$20.00	\$25.00	\$30.00	\$40.00	\$50.00

**SINGLE PARENT**

Issue Age	\$10,000	\$20,000	\$25,000	\$30,000	\$40,000	\$50,000
20-24	\$1.75	\$3.50	\$4.40	\$5.25	\$7.00	\$8.75
25-29	\$1.75	\$3.50	\$4.40	\$5.25	\$7.00	\$8.75
30-34	\$1.75	\$3.50	\$4.40	\$5.25	\$7.00	\$8.75
35-39	\$1.75	\$3.50	\$4.40	\$5.25	\$7.00	\$8.75
40-44	\$2.25	\$4.50	\$5.65	\$6.75	\$9.00	\$11.25
45-49	\$2.75	\$5.50	\$6.70	\$8.25	\$11.00	\$13.75
50-54	\$3.25	\$6.50	\$8.15	\$9.75	\$13.00	\$16.25
55-59	\$4.00	\$8.00	\$10.00	\$12.00	\$16.00	\$20.00
60-64	\$5.25	\$10.50	\$13.15	\$15.75	\$21.00	\$26.25
65-69	\$6.50	\$13.00	\$16.25	\$19.50	\$26.00	\$32.50
70-74	\$6.75	\$13.50	\$16.90	\$20.25	\$27.00	\$33.75
75-79	\$7.00	\$14.00	\$17.50	\$21.00	\$28.00	\$35.00
80-84	\$7.50	\$15.00	\$18.75	\$22.50	\$30.00	\$37.50
85-89	\$8.00	\$16.00	\$20.00	\$24.00	\$32.00	\$40.00
90-94	\$8.00	\$16.00	\$20.00	\$24.00	\$32.00	\$40.00
95-99	\$10.50	\$21.00	\$26.25	\$31.50	\$42.00	\$52.50

**FAMILY**

Issue Age	\$10,000	\$20,000	\$25,000	\$30,000	\$40,000	\$50,000
20-24	\$2.50	\$5.00	\$6.25	\$7.50	\$10.00	\$12.50
25-29	\$2.50	\$5.00	\$6.25	\$7.50	\$10.00	\$12.50
30-34	\$2.50	\$5.00	\$6.25	\$7.50	\$10.00	\$12.50
35-39	\$2.50	\$5.00	\$6.25	\$7.50	\$10.00	\$12.50
40-44	\$3.25	\$6.50	\$8.15	\$9.75	\$13.00	\$16.25
45-49	\$4.25	\$8.50	\$10.65	\$12.75	\$17.00	\$21.25
50-54	\$5.75	\$11.50	\$14.40	\$17.25	\$23.00	\$28.75
55-59	\$7.00	\$14.00	\$17.50	\$21.00	\$28.00	\$35.00
60-64	\$9.25	\$18.50	\$23.15	\$27.75	\$37.00	\$46.25
65-69	\$11.75	\$23.50	\$29.40	\$35.25	\$47.00	\$58.75
70-74	\$12.25	\$24.50	\$30.65	\$36.75	\$49.00	\$61.25
75-79	\$12.75	\$25.50	\$31.90	\$38.25	\$51.00	\$63.75
80-84	\$13.75	\$27.50	\$34.40	\$41.25	\$55.00	\$68.75
85-89	\$14.75	\$29.50	\$36.90	\$44.25	\$59.00	\$73.75
90-94	\$15.25	\$30.50	\$38.15	\$45.75	\$61.00	\$76.25
95-99	\$19.00	\$38.00	\$47.50	\$57.00	\$76.00	\$95.00

Modal Factors:

Annual = Bank draft x 12  
Semi Annual = Bank draft x 6.24  
Quarterly = Bank draft x 3.18

**First Diagnosis Dread Disease Benefit Rider**  
 Sold with the  
**Group First Diagnosis Cancer Benefit Coverage**  
 Rider Form Number GRD-20101-DD

**GEORGIA**

**MONTHLY BANK DRAFT PREMIUMS**

**INDIVIDUAL**

<b>Issue Age</b>	<b>\$10,000</b>	<b>\$20,000</b>	<b>\$25,000</b>	<b>\$30,000</b>	<b>\$40,000</b>	<b>\$50,000</b>
20-24	\$1.25	\$2.50	\$3.15	\$3.75	\$5.00	\$6.25
25-29	\$1.25	\$2.50	\$3.15	\$3.75	\$5.00	\$6.25
30-34	\$1.25	\$2.50	\$3.15	\$3.75	\$5.00	\$6.25
35-39	\$1.25	\$2.50	\$3.15	\$3.75	\$5.00	\$6.25
40-44	\$1.75	\$3.50	\$4.40	\$5.25	\$7.00	\$8.75
45-49	\$2.25	\$4.50	\$5.65	\$6.75	\$9.00	\$11.25
50-54	\$3.00	\$6.00	\$7.50	\$9.00	\$12.00	\$15.00
55-59	\$3.75	\$7.50	\$9.40	\$11.25	\$15.00	\$18.75
60-64	\$4.75	\$9.50	\$11.90	\$14.25	\$19.00	\$23.75
65-69	\$6.00	\$12.00	\$15.00	\$18.00	\$24.00	\$30.00
70-74	\$6.25	\$12.50	\$15.65	\$18.75	\$25.00	\$31.25
75-79	\$6.50	\$13.00	\$16.25	\$19.50	\$26.00	\$32.50
80-84	\$7.00	\$14.00	\$17.50	\$21.00	\$28.00	\$35.00
85-89	\$7.50	\$15.00	\$18.75	\$22.50	\$30.00	\$37.50
90-94	\$7.50	\$15.00	\$18.75	\$22.50	\$30.00	\$37.50
95-99	\$10.00	\$20.00	\$25.00	\$30.00	\$40.00	\$50.00

**SINGLE PARENT**

<b>Issue Age</b>	<b>\$10,000</b>	<b>\$20,000</b>	<b>\$25,000</b>	<b>\$30,000</b>	<b>\$40,000</b>	<b>\$50,000</b>
20-24	\$1.75	\$3.50	\$4.40	\$5.25	\$7.00	\$8.75
25-29	\$1.75	\$3.50	\$4.40	\$5.25	\$7.00	\$8.75
30-34	\$1.75	\$3.50	\$4.40	\$5.25	\$7.00	\$8.75
35-39	\$1.75	\$3.50	\$4.40	\$5.25	\$7.00	\$8.75
40-44	\$2.25	\$4.50	\$5.65	\$6.75	\$9.00	\$11.25
45-49	\$2.75	\$5.50	\$6.70	\$8.25	\$11.00	\$13.75
50-54	\$3.25	\$6.50	\$8.15	\$9.75	\$13.00	\$16.25
55-59	\$4.00	\$8.00	\$10.00	\$12.00	\$16.00	\$20.00
60-64	\$5.25	\$10.50	\$13.15	\$15.75	\$21.00	\$26.25
65-69	\$6.50	\$13.00	\$16.25	\$19.50	\$26.00	\$32.50
70-74	\$6.75	\$13.50	\$16.90	\$20.25	\$27.00	\$33.75
75-79	\$7.00	\$14.00	\$17.50	\$21.00	\$28.00	\$35.00
80-84	\$7.50	\$15.00	\$18.75	\$22.50	\$30.00	\$37.50
85-89	\$8.00	\$16.00	\$20.00	\$24.00	\$32.00	\$40.00
90-94	\$8.00	\$16.00	\$20.00	\$24.00	\$32.00	\$40.00
95-99	\$10.50	\$21.00	\$26.25	\$31.50	\$42.00	\$52.50

**FAMILY**

<b>Issue Age</b>	<b>\$10,000</b>	<b>\$20,000</b>	<b>\$25,000</b>	<b>\$30,000</b>	<b>\$40,000</b>	<b>\$50,000</b>
20-24	\$2.50	\$5.00	\$6.25	\$7.50	\$10.00	\$12.50
25-29	\$2.50	\$5.00	\$6.25	\$7.50	\$10.00	\$12.50
30-34	\$2.50	\$5.00	\$6.25	\$7.50	\$10.00	\$12.50
35-39	\$2.50	\$5.00	\$6.25	\$7.50	\$10.00	\$12.50
40-44	\$3.25	\$6.50	\$8.15	\$9.75	\$13.00	\$16.25
45-49	\$4.25	\$8.50	\$10.65	\$12.75	\$17.00	\$21.25
50-54	\$5.75	\$11.50	\$14.40	\$17.25	\$23.00	\$28.75
55-59	\$7.00	\$14.00	\$17.50	\$21.00	\$28.00	\$35.00
60-64	\$9.25	\$18.50	\$23.15	\$27.75	\$37.00	\$46.25
65-69	\$11.75	\$23.50	\$29.40	\$35.25	\$47.00	\$58.75
70-74	\$12.25	\$24.50	\$30.65	\$36.75	\$49.00	\$61.25
75-79	\$12.75	\$25.50	\$31.90	\$38.25	\$51.00	\$63.75
80-84	\$13.75	\$27.50	\$34.40	\$41.25	\$55.00	\$68.75
85-89	\$14.75	\$29.50	\$36.90	\$44.25	\$59.00	\$73.75
90-94	\$15.25	\$30.50	\$38.15	\$45.75	\$61.00	\$76.25
95-99	\$19.00	\$38.00	\$47.50	\$57.00	\$76.00	\$95.00

**Modal Factors:**

**Annual = Bank draft x 12**

**Semi Annual = Bank draft x 6.24**

**Quarterly = Bank draft x 3.18**

**Dread Disease Benefit Rider**  
**Sold with the**  
**The Cancer First Diagnosis Benefit Insurance**  
**with the Benefit Increase Amendment**  
**Rider Form Number CF-940101-UTA-BIA01**

**South Carolina**

**MONTHLY BANK DRAFT PREMIUMS**

**INDIVIDUAL**

<b>Issue Age</b>	<b>\$25,000</b>	<b>\$30,000</b>	<b>\$40,000</b>	<b>\$50,000</b>
20-24	\$3.15	\$3.75	\$5.00	\$6.25
25-29	\$3.15	\$3.75	\$5.00	\$6.25
30-34	\$3.15	\$3.75	\$5.00	\$6.25
35-39	\$3.15	\$3.75	\$5.00	\$6.25
40-44	\$4.40	\$5.25	\$7.00	\$8.75
45-49	\$5.65	\$6.75	\$9.00	\$11.25
50-54	\$7.50	\$9.00	\$12.00	\$15.00
55-59	\$9.40	\$11.25	\$15.00	\$18.75
60-64	\$11.90	\$14.25	\$19.00	\$23.75
65-69	\$15.00	\$18.00	\$24.00	\$30.00
70-74	\$15.65	\$18.75	\$25.00	\$31.25
75-79	\$16.25	\$19.50	\$26.00	\$32.50
80-84	\$17.50	\$21.00	\$28.00	\$35.00
85-89	\$18.75	\$22.50	\$30.00	\$37.50
90-94	\$18.75	\$22.50	\$30.00	\$37.50
95-99	\$25.00	\$30.00	\$40.00	\$50.00

**SINGLE PARENT**

<b>Issue Age</b>	<b>\$25,000</b>	<b>\$30,000</b>	<b>\$40,000</b>	<b>\$50,000</b>
20-24	\$4.40	\$5.25	\$7.00	\$8.75
25-29	\$4.40	\$5.25	\$7.00	\$8.75
30-34	\$4.40	\$5.25	\$7.00	\$8.75
35-39	\$4.40	\$5.25	\$7.00	\$8.75
40-44	\$5.65	\$6.75	\$9.00	\$11.25
45-49	\$6.70	\$8.25	\$11.00	\$13.75
50-54	\$8.15	\$9.75	\$13.00	\$16.25
55-59	\$10.00	\$12.00	\$16.00	\$20.00
60-64	\$13.15	\$15.75	\$21.00	\$26.25
65-69	\$16.25	\$19.50	\$26.00	\$32.50
70-74	\$16.90	\$20.25	\$27.00	\$33.75
75-79	\$17.50	\$21.00	\$28.00	\$35.00
80-84	\$18.75	\$22.50	\$30.00	\$37.50
85-89	\$20.00	\$24.00	\$32.00	\$40.00
90-94	\$20.00	\$24.00	\$32.00	\$40.00
95-99	\$26.25	\$31.50	\$42.00	\$52.50

**FAMILY**

<b>Issue Age</b>	<b>\$25,000</b>	<b>\$30,000</b>	<b>\$40,000</b>	<b>\$50,000</b>
20-24	\$6.25	\$7.50	\$10.00	\$12.50
25-29	\$6.25	\$7.50	\$10.00	\$12.50
30-34	\$6.25	\$7.50	\$10.00	\$12.50
35-39	\$6.25	\$7.50	\$10.00	\$12.50
40-44	\$8.15	\$9.75	\$13.00	\$16.25
45-49	\$10.65	\$12.75	\$17.00	\$21.25
50-54	\$14.40	\$17.25	\$23.00	\$28.75
55-59	\$17.50	\$21.00	\$28.00	\$35.00
60-64	\$23.15	\$27.75	\$37.00	\$46.25
65-69	\$29.40	\$35.25	\$47.00	\$58.75
70-74	\$30.65	\$36.75	\$49.00	\$61.25
75-79	\$31.90	\$38.25	\$51.00	\$63.75
80-84	\$34.40	\$41.25	\$55.00	\$68.75
85-89	\$36.90	\$44.25	\$59.00	\$73.75
90-94	\$38.15	\$45.75	\$61.00	\$76.25
95-99	\$47.50	\$57.00	\$76.00	\$95.00

**Modal Factors:**

**Annual = Bank draft x 12**

**Semi Annual = Bank draft x 6.24**

**Quarterly = Bank draft x 3.18**

**Dread Disease Benefit Rider**  
 Sold with the  
**Cancer First Diagnosis Benefit Insurance**  
 Rider Form Series CF-940101-UTA-R01

**Florida & Pennsylvania**

**MONTHLY BANK DRAFT PREMIUMS**

**INDIVIDUAL**

Issue Age	\$10,000	\$20,000	\$25,000	\$30,000	\$40,000	\$50,000
18-24	1.00	2.00	2.50	3.00	4.00	5.00
25-29	1.00	2.00	2.50	3.00	4.00	5.00
30-34	1.00	2.00	2.50	3.00	4.00	5.00
35-39	1.00	2.00	2.50	3.00	4.00	5.00
40-44	1.50	3.00	3.75	4.50	6.00	7.50
45-49	2.00	4.00	5.00	6.00	8.00	10.00
50-54	2.50	5.00	6.25	7.50	10.00	12.50
55-59	3.00	6.00	7.50	9.00	12.00	15.00
60-74*	3.00	6.00	7.50	9.00	12.00	15.00
75-79	3.25	6.50	8.15	9.75	13.00	16.25
80-84	6.50	7.00	8.75	10.50	14.00	17.50
85-89	3.75	7.50	9.40	11.25	15.00	18.75
90-94	3.75	7.50	9.40	11.25	15.00	18.75
95-99	5.00	10.00	12.50	15.00	20.00	25.00

**SINGLE PARENT**

Issue Age	\$10,000	\$20,000	\$25,000	\$30,000	\$40,000	\$50,000
18-24	1.25	2.50	3.15	3.75	5.00	6.25
25-29	1.25	2.50	3.15	3.75	5.00	6.25
30-34	1.25	2.50	3.15	3.75	5.00	6.25
35-39	1.25	2.50	3.15	3.75	5.00	6.25
40-44	1.75	3.50	4.40	5.25	7.00	8.75
45-49	2.25	4.50	5.65	6.75	9.00	11.25
50-54	2.50	5.00	6.25	7.50	10.00	12.50
55-59	3.00	6.00	7.50	9.00	12.00	15.00

**FAMILY**

Issue Age	\$10,000	\$20,000	\$25,000	\$30,000	\$40,000	\$50,000
18-24	1.75	3.50	4.40	5.25	7.00	8.75
25-29	1.75	3.50	4.40	5.25	7.00	8.75
30-34	1.75	3.50	4.40	5.25	7.00	8.75
35-39	1.75	3.50	4.40	5.25	7.00	8.75
40-44	2.50	5.00	6.25	7.50	10.00	12.50
45-49	3.50	7.00	8.75	10.50	14.00	17.50
50-54	4.50	9.00	11.25	13.50	18.00	22.50
55-59	5.25	10.50	13.15	15.75	21.00	26.25
60-74*	5.50	11.00	13.75	16.50	22.00	27.50
75-79	6.00	12.00	15.00	18.00	24.00	30.00
80-84	6.50	1.00	16.25	19.50	26.00	32.50
85-89	7.00	14.00	17.50	21.00	28.00	35.00
90-94	7.50	15.00	18.75	22.50	30.00	37.50
95-99	8.75	17.50	21.90	26.25	35.00	43.75

\*Benefits reduce 50% for insureds ages 65 and over and for dependent children.

**Modal Factors:**

**Annual = Bank draft x 12**

**Semi Annual = Bank draft x 6.24**

**Quarterly = Bank draft x 3.18**

# INTENSIVE CARE UNIT BENEFIT RIDER

Sold with the

## First Diagnosis Cancer Benefit Policy

Rider Form Series RD-10203-ICU

### MONTHLY BANK DRAFT PREMIUMS

**All States Except Florida, Georgia,  
Pennsylvania & Virginia**

ICU Rider not available in Idaho, Indiana, South Carolina,  
Tennessee, and Utah

#### INDIVIDUAL

<b>Issue Age</b>	<b>\$300.00</b>	<b>\$600.00</b>
20-24	0.50	1.00
25-29	0.75	1.50
30-34	1.00	2.00
35-39	1.50	3.00
40-44	2.25	4.50
45-49	3.25	6.50
50-54	4.50	9.00
55-59	6.00	12.00
60-74*	8.00	16.00
75-79	10.50	21.00
80-84	11.50	23.00
85-89	12.00	24.00
90-94	12.25	24.50
95-99	12.50	25.00

#### SINGLE PARENT

<b>Issue Age</b>	<b>\$300.00</b>	<b>\$600.00</b>
20-24	1.50	3.00
25-29	1.75	3.50
30-34	2.00	4.00
35-39	2.50	5.00
40-44	3.25	6.50
45-49	4.25	8.50
50-54	5.00	11.00
55-59	6.75	13.50

#### FAMILY

<b>Issue Age</b>	<b>\$300.00</b>	<b>\$600.00</b>
20-24	2.00	4.00
25-29	2.25	4.50
30-34	3.00	6.00
35-39	4.00	8.00
40-44	5.50	11.00
45-49	7.25	14.50
50-54	9.00	18.00
55-59	12.00	24.00
60-74*	15.75	31.50
75-79	21.00	42.00
80-84	22.75	45.50
85-89	24.00	48.00
90-94	24.25	48.50
95-99	24.50	49.00

*\*Benefits reduce 50% upon attainment of age 65*

*\*Benefits are 50% for Dependent Children*

**Modal Factors:**

**Annual = Bank draft x 12**

**Semi Annual = Bank draft x 6.24**

**Quarterly = Bank draft x 3.18**

**INTENSIVE CARE UNIT BENEFIT RIDER**  
 Sold with the  
**Group First Diagnosis Cancer Benefit Coverage**  
 Rider Form Series GRD-10203-ICU

**MONTHLY BANK DRAFT PREMIUMS**

**GEORGIA**

**INDIVIDUAL**

<b>Issue Age</b>	<b>\$300.00</b>	<b>\$600.00</b>
20-24	0.50	1.00
25-29	0.75	1.50
30-34	1.00	2.00
35-39	1.50	3.00
40-44	2.25	4.50
45-49	3.25	6.50
50-54	4.50	9.00
55-59	6.00	12.00
60-74*	8.00	16.00
75-79	10.50	21.00
80-84	11.50	23.00
85-89	12.00	24.00
90-94	12.25	24.50
95-99	12.50	25.00

**SINGLE PARENT**

<b>Issue Age</b>	<b>\$300.00</b>	<b>\$600.00</b>
20-24	1.50	3.00
25-29	1.75	3.50
30-34	2.00	4.00
35-39	2.50	5.00
40-44	3.25	6.50
45-49	4.25	8.50
50-54	5.00	11.00
55-59	6.75	13.50

**FAMILY**

<b>Issue Age</b>	<b>\$300.00</b>	<b>\$600.00</b>
20-24	2.00	4.00
25-29	2.25	4.50
30-34	3.00	6.00
35-39	4.00	8.00
40-44	5.50	11.00
45-49	7.25	14.50
50-54	9.00	18.00
55-59	12.00	24.00
60-74*	15.75	31.50
75-79	21.00	42.00
80-84	22.75	45.50
85-89	24.00	48.00
90-94	24.25	48.50
95-99	24.50	49.00

*\*Benefits reduce 50% upon attainment of age 65*

*\*Benefits are 50% for Dependent Children*

**Modal Factors:**

**Annual = Bank draft x 12**

**Semi Annual = Bank draft x 6.24**

**Quarterly = Bank draft x 3.18**

**INTENSIVE CARE UNIT BENEFIT RIDER**  
Sold with the  
**Cancer First Diagnosis Benefit Insurance**  
&  
**Cancer First Diagnosis Benefit Insurance With**  
**Benefit Increase Amendment**  
Rider Form Series CF-940101-UTA-R02

**Florida, Virginia & Pennsylvania**

**MONTHLY BANK DRAFT PREMIUMS**

**INDIVIDUAL**

<b>Issue Age</b>	<b>\$300.00</b>	<b>\$600.00</b>
20-24	0.50	1.00
25-29	0.75	1.50
30-34	1.00	2.00
35-39	1.50	3.00
40-44	2.25	4.50
45-49	3.25	6.50
50-54	4.50	9.00
55-59	6.00	12.00
60-74*	8.00	16.00
75-79	10.50	21.00
80-84	11.50	23.00
85-89	12.00	24.00
90-94	12.25	24.50
95-99	12.50	25.00

**SINGLE PARENT**

<b>Issue Age</b>	<b>\$300.00</b>	<b>\$600.00</b>
20-24	1.50	3.00
25-29	1.75	3.50
30-34	2.00	4.00
35-39	2.50	5.00
40-44	3.25	6.50
45-49	4.25	8.50
50-54	4.50	9.00
55-59	6.00	12.00

**FAMILY**

<b>Issue Age</b>	<b>\$300.00</b>	<b>\$600.00</b>
20-24	2.00	4.00
25-29	2.25	4.50
30-34	3.00	6.00
35-39	4.00	8.00
40-44	5.50	11.00
45-49	7.25	14.50
50-54	9.00	18.00
55-59	12.00	24.00
60-74*	15.75	31.50
75-79	21.00	42.00
80-84	22.75	45.50
85-89	24.00	48.00
90-94	24.25	48.50
95-99	24.50	49.00

*\*Benefits reduce 50% upon attainment of age 65*

*\*Benefits are 50% for Dependent Children*

**Modal Factors:**

**Annual = Bank draft x 12**

**Semi Annual = Bank draft x 6.24**

**Quarterly = Bank draft x 3.18**