

COVERED CONDITIONS

Benefit provisions may vary by situs state. This is a summary. See Plan Certificate at www.thempmgroupllc.com for details.

Health Screening Benefit	
Health Screening for Employee or Covered Spouse	\$100/Calendar Year
Health Screening for Dependent Children	\$50/Calendar Year
Base Benefits	
Heart Attack (Myocardial Infarction)	100% of Benefit
Stroke (Ischemic or Hemorrhagic)	100% of Benefit
Sudden Cardiac Arrest	100% of Benefit
Coronary Artery Bypass Surgery	100% of Benefit
Major Organ Transplant*	100% of Benefit
Bone Marrow Transplant (Stem Cell Transplant)	100% of Benefit
Kidney Failure (End-Stage Renal Failure)	100% of Benefit
*25% of this benefit is payable for Insureds placed on a transplant list for a major organ transplant	
Additional Benefits	
Benign Brain Tumor; Coma; Severe Burns; Paralysis; Loss of Sight, Speech, or Hearing; Advanced Alzheimer's or Parkinson's Disease; ALS; Multiple Sclerosis	100% of Benefit
Specified Diseases Rider	
Addison's Disease, Cerebrospinal Meningitis, Diphtheria, Huntington's Chorea, Legionnaire's Disease, Malaria, Muscular Dystrophy, Myasthenia Gravis, Necrotizing Fasciitis, Osteomyelitis, Poliomyelitis (Polio), Rabies, Sickle Cell Anemia, Systemic Lupus, Systemic Sclerosis (Scleroderma), Tetanus, Tuberculosis	25% of Benefit

PRE-TAX PAYROLL DEDUCTIONS

Non-Tobacco Monthly Premiums

Employee										
Age	\$5,000	\$10,000	\$15,000	\$20,000	\$25,000	\$30,000	\$35,000	\$40,000	\$45,000	\$50,000
18-29	\$3.58	\$4.13	\$4.68	\$5.23	\$5.79	\$6.34	\$6.89	\$7.44	\$7.99	\$8.54
30-39	\$4.02	\$5.01	\$5.99	\$6.98	\$7.97	\$8.96	\$9.95	\$10.94	\$11.92	\$12.91
40-49	\$4.64	\$6.25	\$7.86	\$9.47	\$11.08	\$12.69	\$14.30	\$15.91	\$17.52	\$19.13
50-59	\$6.04	\$9.05	\$12.06	\$15.07	\$18.09	\$21.10	\$24.11	\$27.12	\$30.13	\$33.14
60+	\$10.88	\$18.73	\$26.58	\$34.43	\$42.28	\$50.13	\$57.99	\$65.84	\$73.69	\$81.54
Spouse										
Age	\$5,000	\$10,000	\$15,000	\$20,000	\$25,000	\$30,000	\$35,000	\$40,000	\$45,000	\$50,000
18-29	\$3.11	\$3.66	\$4.21	\$4.76	\$5.32	\$5.87	\$6.42	\$6.97	\$7.52	\$8.07
30-39	\$3.55	\$4.54	\$5.52	\$6.51	\$7.50	\$8.49	\$9.48	\$10.47	\$11.45	\$12.44
40-49	\$4.17	\$5.78	\$7.39	\$9.00	\$10.61	\$12.22	\$13.83	\$15.44	\$17.05	\$18.66
50-59	\$5.57	\$8.58	\$11.59	\$14.60	\$17.62	\$20.63	\$23.64	\$26.65	\$29.66	\$32.67
60+	\$10.41	\$18.26	\$26.11	\$33.96	\$41.81	\$49.66	\$57.52	\$65.37	\$73.22	\$81.07

Tobacco Monthly Premiums

Employee										
Age	\$5,000	\$10,000	\$15,000	\$20,000	\$25,000	\$30,000	\$35,000	\$40,000	\$45,000	\$50,000
18-29	\$4.05	\$5.07	\$6.09	\$7.11	\$8.13	\$9.15	\$10.17	\$11.19	\$12.21	\$13.23
30-39	\$5.16	\$7.30	\$9.43	\$11.56	\$13.69	\$15.83	\$17.96	\$20.09	\$22.22	\$24.36
40-49	\$6.21	\$9.39	\$12.57	\$15.75	\$18.92	\$22.10	\$25.28	\$28.46	\$31.64	\$34.82
50-59	\$8.16	\$13.29	\$18.42	\$23.55	\$28.68	\$33.81	\$38.94	\$44.07	\$49.20	\$54.34
60+	\$15.14	\$27.26	\$39.37	\$51.49	\$63.60	\$75.72	\$87.83	\$99.94	\$112.06	\$124.17
Spouse										
Age	\$5,000	\$10,000	\$15,000	\$20,000	\$25,000	\$30,000	\$35,000	\$40,000	\$45,000	\$50,000
18-29	\$3.58	\$4.60	\$5.62	\$6.64	\$7.66	\$8.68	\$9.70	\$10.72	\$11.74	\$12.76
30-39	\$4.69	\$6.83	\$8.96	\$11.09	\$13.22	\$15.36	\$17.49	\$19.62	\$21.75	\$23.89
40-49	\$5.74	\$8.92	\$12.10	\$15.28	\$18.45	\$21.63	\$24.81	\$27.99	\$31.17	\$34.35
50-59	\$7.69	\$12.82	\$17.95	\$23.08	\$28.21	\$33.34	\$38.47	\$43.60	\$48.73	\$53.87
60+	\$14.67	\$26.79	\$38.90	\$51.02	\$63.13	\$75.25	\$87.36	\$99.47	\$111.59	\$123.70