



Prudential

RATE SHEET

Miller and Long Co., Inc.

All Active Full-Time Hourly Employees

Issued by **The Prudential Insurance Company of America (Prudential)**

Effective: 10/01/2021

EMPLOYEE VOLUNTARY TERM LIFE WEEKLY COST PER COVERAGE AMOUNT

Coverage is available in increments of \$10,000 to a maximum of \$100,000. Refer to the Voluntary Term Life section for evidence of insurability details. Initial rates based on age as of effective date of your coverage. Rates will change based on the following age schedule.

	\$10,000	\$20,000	\$30,000	\$40,000	\$50,000	\$60,000	\$70,000	\$80,000	\$90,000	\$100,000		
Age												
Under 25	\$0.13	\$0.26	\$0.39	\$0.52	\$0.65	\$0.78	\$0.90	\$1.03	\$1.16	\$1.29		
25-29	\$0.15	\$0.31	\$0.46	\$0.62	\$0.77	\$0.93	\$1.08	\$1.24	\$1.39	\$1.55		
30-34	\$0.21	\$0.42	\$0.62	\$0.83	\$1.04	\$1.25	\$1.45	\$1.66	\$1.87	\$2.08		
35-39	\$0.23	\$0.47	\$0.70	\$0.93	\$1.17	\$1.40	\$1.63	\$1.86	\$2.10	\$2.33		
40-44	\$0.26	\$0.52	\$0.78	\$1.03	\$1.29	\$1.55	\$1.81	\$2.07	\$2.33	\$2.58		
45-49	\$0.39	\$0.78	\$1.16	\$1.55	\$1.94	\$2.33	\$2.71	\$3.10	\$3.49	\$3.88		
50-54	\$0.60	\$1.19	\$1.79	\$2.38	\$2.98	\$3.57	\$4.17	\$4.76	\$5.36	\$5.95		
55-59	\$1.11	\$2.23	\$3.34	\$4.46	\$5.57	\$6.69	\$7.80	\$8.92	\$10.03	\$11.15		
60-64	\$1.71	\$3.42	\$5.13	\$6.84	\$8.55	\$10.26	\$11.97	\$13.68	\$15.39	\$17.10		
65-69	\$3.29	\$6.58	\$9.87	\$13.16	\$16.45	\$19.74	\$23.04	\$26.33	\$29.62	\$32.91		
70-100	\$5.34	\$10.68	\$16.01	\$21.35	\$26.69	\$32.03	\$37.36	\$42.70	\$48.04	\$53.38		

Rates may change as the insured enters a higher age category. Also, rates may change if plan experience requires a change for all insureds.

SPOUSE - VOLUNTARY DEPENDENT TERM LIFE WEEKLY COST PER COVERAGE AMOUNT

Coverage is available on your spouse in increments of \$10,000 to a maximum of \$100,000. **Please Note:** The Voluntary Dependent Term Life coverage amount on your spouse cannot exceed 100% of your Voluntary Term Life coverage amount. Refer to the Voluntary Dependent Term Life section for evidence of insurability details. Initial rates based on age as of effective date of your coverage. Rates will change based on the following age schedule.

	\$10,000	\$20,000	\$30,000	\$40,000	\$50,000	\$60,000	\$70,000	\$80,000	\$90,000	\$100,000		
Age												
Under 25	\$0.13	\$0.26	\$0.39	\$0.52	\$0.65	\$0.78	\$0.90	\$1.03	\$1.16	\$1.29		
25-29	\$0.15	\$0.31	\$0.46	\$0.62	\$0.77	\$0.93	\$1.08	\$1.24	\$1.39	\$1.55		
30-34	\$0.21	\$0.42	\$0.62	\$0.83	\$1.04	\$1.25	\$1.45	\$1.66	\$1.87	\$2.08		
35-39	\$0.23	\$0.47	\$0.70	\$0.93	\$1.17	\$1.40	\$1.63	\$1.86	\$2.10	\$2.33		
40-44	\$0.26	\$0.52	\$0.78	\$1.03	\$1.29	\$1.55	\$1.81	\$2.07	\$2.33	\$2.58		
45-49	\$0.39	\$0.78	\$1.16	\$1.55	\$1.94	\$2.33	\$2.71	\$3.10	\$3.49	\$3.88		
50-54	\$0.60	\$1.19	\$1.79	\$2.38	\$2.98	\$3.57	\$4.17	\$4.76	\$5.36	\$5.95		
55-59	\$1.11	\$2.23	\$3.34	\$4.46	\$5.57	\$6.69	\$7.80	\$8.92	\$10.03	\$11.15		
60-64	\$1.71	\$3.42	\$5.13	\$6.84	\$8.55	\$10.26	\$11.97	\$13.68	\$15.39	\$17.10		
65-69	\$3.29	\$6.58	\$9.87	\$13.16	\$16.45	\$19.74	\$23.04	\$26.33	\$29.62	\$32.91		
70-100	\$5.34	\$10.68	\$16.01	\$21.35	\$26.69	\$32.03	\$37.36	\$42.70	\$48.04	\$53.38		

Rates may change as the insured enters a higher age category. Also, rates may change if plan experience requires a change for all insureds. Spouse rate is based on Employee's age.

CHILDREN - VOLUNTARY DEPENDENT TERM LIFE WEEKLY COST PER COVERAGE AMOUNT

One premium rate covers all eligible children

Coverage is available on your children in increments of \$5,000, not to exceed a maximum of \$10,000. **Please note:** The Voluntary Dependent Term Life Insurance coverage amount on your children may not exceed 100% of your Voluntary Term Life coverage amount.

\$5,000	\$10,000
\$0.21	\$0.42

Implementation of the insurance plan(s) will depend on having a specific percentage of all eligible employees enrolling in the plan(s). If this percentage of enrollment level is not met, these coverage(s) may not be effective.

Benefits, exclusions and provisions may vary by state. Refer to the plan booklet for details.

For your coverage to become effective, you must be actively at work on the effective date of the plan. If you apply for an amount that requires satisfactory evidence of insurability to The Prudential Insurance Company of America, you must be actively at work on the date of approval for the amount requiring satisfactory evidence of insurability.

*Accelerated Death Benefit option is a feature that is made available to group life insurance participants. It is not a health, nursing home, or long-term care insurance benefit and is not designed to eliminate the need for those types of insurance coverage. The death benefit is reduced by the amount of the accelerated death benefit paid. There is no administrative fee to accelerate benefits. Receipt of accelerated death benefits may affect eligibility for public assistance and may be taxable. The federal income tax treatment of payments made under this rider depends upon whether the insured is the recipient of the benefits and is considered "terminally ill" or "chronically ill." You may wish to seek professional tax advice before exercising this option.

Group Insurance coverages are issued by The Prudential Insurance Company of America, a Prudential Financial company, Newark, NJ. The Booklet-Certificate contains all details, including any policy exclusions, limitations, and restrictions, which may apply. Contract Series: 83500

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