



# 2018 Monthly Rates

## Accident, Dental, Vision, Pet, Medicare Supplement, Life, LTD, and STD Insurance

(Ministers' Group)

To enroll in any of these plans, please ensure that eligibility requirements have been met, complete the appropriate enrollment form, and return to —

**Mail:** Brethren Benefit Trust, 1505 Dundee Ave., Elgin, IL 60120; **Fax:** 847-742-6336; **or Email:** insurance@cobbt.org

<b>Delta Dental Plan</b>								
	Option 1	Option 2	Option 3					
Employee	\$ 66.32	\$ 57.13	\$ 53.38					
Employee + One	119.59	103.08	93.98					
Employee + Family	185.27	158.67	144.04					
<b>EyeMed Vision Plan</b>								
	Option 1	Option 2	Option 3					
Employee	\$ 12.45	\$ 12.32	\$ 17.43					
Employee + One	17.27	17.02	26.74					
Employee + Family	22.00	21.67	35.93					
<b>Medicare Supplement Plan</b>								
Your age will determine the premium and will change as you progress through the age brackets.		Under age 65 (disabled)	Age 65	Age 66-69	Age 70-74	Age 75-79	Age 80-84	Age 85+
	<b>Option 1 Plan F</b>	\$341.91	\$188.91	\$197.91	\$222.91	\$254.91	\$275.91	\$275.91
	<b>Option 2 Plan F copay</b>	\$318.91	\$174.91	\$182.91	\$205.91	\$237.91	\$257.91	\$257.91
<b>Basic Life Insurance</b>								
								<b>Total Monthly Premium</b>
Basic and AD&D with \$50,000 coverage (Employed, under age 65)								\$ 20.00
Basic and AD&D with \$26,000 coverage (Employed, age 65 or older)								10.40
<b>Supplemental Life Insurance</b>								
Supplemental Life Insurance is available for the active employee, spouse, and dependent children. Please refer to the <i>Supplemental Life Insurance Rates</i> for detailed age-bracketed premiums.								
<b>Disability — Short-Term and Long-Term</b>								
LTD rate is 59 cents per \$100 of eligible salary. STD rate is age-rated per \$10 of eligible salary. Please refer to the <i>Short-Term Disability Budget Worksheet</i> or <i>Long-Term Disability Budget Worksheet</i> form to calculate your premium.								
<b>Accident Insurance</b>								
	Option 1	Option 2	Option 3					
Employee Only	\$ 10.24	\$ 13.44	\$ 17.18					
Employee and Spouse	15.43	20.80	27.05					
Employee and Child(ren)	21.52	29.60	38.58					
Employee and Family	26.81	37.08	48.61					
<b>Pet Insurance (Rates based on state of residence) Contact BSI for rates for other types of pets</b>								
	My Pet Protection		My Pet Protection w/Wellness					
Cat	\$8.22 to \$15.34		\$13.74 to \$25.65					
Dog	\$13.70 to \$25.57		\$22.90 to \$42.74					