

# State Specific Information

## Simplified Critical Illness

As approved, some state insurance departments may require modifications to policy application, contract language, benefits, rates and other features. Please refer to the individual contracts specific to each state as the ultimate authority.

*This applies to policy Form No. I H0810 and CI 005. This information is for agent use only. It is not for use with consumers.*

**The following chart represents some of those key differences:**

State Specific Information for Simplified Critical Illness	
Arkansas	<ul style="list-style-type: none"> <li>• Policy has state-specific rates (included in the illustration system and rate sheets).</li> <li>• Spouse Critical Illness Rider has state-specific rates (included in the illustration system and rate sheets).</li> <li>• Waiting period for Category 1 (Cancer) is 30 days.</li> </ul>
California	<ul style="list-style-type: none"> <li>• Policy has state-specific rates (included in the illustration system and rate sheets).</li> <li>• Spouse Critical Illness Rider has state-specific rates (included in the illustration system and rate sheets).</li> <li>• Advanced Alzheimer's is not a covered condition.</li> <li>• Minimum benefit amount for the policy, Spouse Critical Illness Rider and Dependent Child Critical Illness Rider is \$10,000.</li> </ul>
Colorado	<ul style="list-style-type: none"> <li>• Policy has state-specific rates (included in the illustration system and rate sheets).</li> <li>• Spouse Critical Illness Rider has state-specific rates (included in the illustration system and rate sheets).</li> <li>• Return of Premium Rider has state-specific rates (included in the illustration system and rate sheets).</li> </ul>
Florida	<ul style="list-style-type: none"> <li>• Policy form CI 005.</li> <li>• Policy has state-specific rates (included in the illustration system and rate sheets).</li> <li>• Spouse Critical Illness Rider has state-specific rates (included in the illustration system and rate sheets).</li> <li>• Return of Premium Rider has state-specific rates (included in the illustration system and rate sheets).</li> <li>• Policy issued through age 59.</li> </ul>
Georgia	<ul style="list-style-type: none"> <li>• Policy has state-specific rates (included in the illustration system and rate sheets).</li> <li>• Spouse Critical Illness Rider has state-specific rates (included in the illustration system and rate sheets).</li> <li>• Paralysis as defined in the policy may be the result of either an accident and/or a sickness.</li> <li>• Disability Waiver of Premium Rider is not available.</li> </ul>

State Specific Information for Simplified Critical Illness	
	<ul style="list-style-type: none"> <li>The Return of Premium Rider is not available.</li> <li>Waiting period for all categories is 30 days. If the insured receives a diagnosis of a specified critical illness within 30 days following the issue date or last reinstatement date they may either (1) return the policy for a full refund of premium, or (2) continue the coverage to provide payment of benefits in the event of a diagnosis during the coverage effective period.</li> </ul>
Idaho	<ul style="list-style-type: none"> <li>Policy has state-specific rates (included in the illustration system and rate sheets).</li> <li>Spouse Critical Illness Rider has state-specific rates (included in the illustration system and rate sheets).</li> <li>Waiting period for Category 1 (Cancer) is 30 days following the policy's issue date or 10 days following the last reinstatement date. No benefits are payable for Category 1 diagnoses during the waiting period.</li> </ul>
Illinois	<ul style="list-style-type: none"> <li>Policy has state-specific rates (included in the illustration system and rate sheets).</li> <li>Waiting period for Category 1 (Cancer) is 30 days.</li> </ul>
Iowa	<ul style="list-style-type: none"> <li>Return of Premium rider is not available.</li> </ul>
Maine	<ul style="list-style-type: none"> <li>Policy has state-specific rates (included in the illustration system and rate sheets).</li> <li>Spouse Critical Illness Rider has state-specific rates (included in the illustration system and rate sheets).</li> <li>Waiting period for Category 1 (Cancer) is 30 days.</li> </ul>
Minnesota	<ul style="list-style-type: none"> <li>Policy has state-specific rates (included in the illustration system and rate sheets).</li> <li>Spouse Critical Illness Rider has state-specific rates (included in the illustration system and rate sheets).</li> <li>Return of Premium Rider has state-specific rates (included in the illustration system and rate sheets).</li> <li>Policy form CI 005</li> <li>Policy issued through age 59.</li> </ul>
Montana	<ul style="list-style-type: none"> <li>Policy has state-specific rates (included in the illustration system and rate sheets).</li> <li>Spouse Critical Illness Rider has state-specific rates (included in the illustration system and rate sheets).</li> <li>Waiver of Premium Rider has state-specific rates (included in the illustration system and rate sheets).</li> </ul>
New Hampshire	<ul style="list-style-type: none"> <li>Policy, Spouse Critical Illness Rider and Children's Critical Illness Rider have state-specific rates (included in the illustration system and rate sheets).</li> <li>Waiting period for Category 1 (Cancer) is 30 days.</li> <li>Coverage does not include the Return of Premium upon Death of Insured Person benefit.</li> <li>Return of Premium Rider is not available.</li> </ul>
New Jersey	<ul style="list-style-type: none"> <li>Policy and Spouse Critical Illness Rider have state-specific rates (included in the illustration system and rate sheets).</li> <li>Policy does not include a waiting period for Cancer.</li> <li>Return of Premium Rider, Waiver of Premium Rider and the Accidental Death Benefit</li> </ul>

State Specific Information for Simplified Critical Illness	
	<p>Rider are not available.</p> <ul style="list-style-type: none"> <li>Return of Premium upon Death of the Insured Person benefit is not available.</li> <li>The Major Organ Transplant benefit has been replaced with a Major Organ Failure benefit in both Category 2 and Category 3.</li> <li>The Coronary Bypass Surgery and Angioplasty benefits have been replaced with a Severe Coronary Artery Disease benefit.</li> <li>Coverage does not include the stipulation that diagnoses within separate categories need be separated by 180 days.</li> <li>Policy is guaranteed renewable for life.</li> </ul>
New Mexico	<ul style="list-style-type: none"> <li>If the insured receives benefits from Medicaid through the Human Services Department for a covered injury or sickness, benefits under this policy may be paid directly to the Human Services department.</li> </ul>
North Carolina	<ul style="list-style-type: none"> <li>Policy has state-specific rates (included in the illustration system and rate sheets).</li> <li>Spouse Critical Illness Rider has state-specific rates (included in the illustration system and rate sheets).</li> <li>Waiting period for Category 1 (Cancer) is 30 days.</li> </ul>
North Dakota	<ul style="list-style-type: none"> <li>Policy has state-specific rates (included in the illustration system and rate sheets).</li> <li>Spouse Critical Illness Rider has state-specific rates (included in the illustration system and rate sheets).</li> <li>Waiting period for Category 1 (Cancer) is 30 days.</li> </ul>
Oklahoma	<ul style="list-style-type: none"> <li>Policy has state-specific rates (included in the illustration system and rate sheets).</li> <li>Spouse Critical Illness Rider has state-specific rates (included in the illustration system and rate sheets).</li> <li>Waiting period for Category 1 (Cancer) is 30 days. Policy pays 10% of Category 1 benefit amount for the diagnosis of either invasive cancer or carcinoma in situ during the waiting period.</li> </ul>
Pennsylvania	<ul style="list-style-type: none"> <li>Policy has state-specific rates (included in the illustration system and rate sheets).</li> <li>Spouse Critical Illness Rider has state-specific rates (included in the illustration system and rate sheets).</li> <li>Accidental Death Benefit Rider is not available.</li> <li>Disability Waiver of Premium Rider is not available.</li> <li>Return of Premium Rider is not available.</li> <li>Diagnosis of Critical Illness is not required to be a "first ever" diagnosis or procedure, but rather the first diagnosis or procedure following the policy issue date.</li> <li>Waiting period for Category 1 (Cancer) is 30 days.</li> <li>Coverage does not include the Return of Premium upon Death of Insured Person benefit.</li> </ul>
South Dakota	<ul style="list-style-type: none"> <li>Policy has state-specific rates (included in the illustration system and rate sheets).</li> <li>Spouse Critical Illness Rider has state-specific rates (included in the illustration system and rate sheets).</li> </ul>

<b>State Specific Information for Simplified Critical Illness</b>	
	<ul style="list-style-type: none"> <li>• Policy does not require that diagnosis or procedure be a “first ever” diagnosis or procedure.</li> </ul>
Tennessee	<ul style="list-style-type: none"> <li>• Waiting period for Category 1 (Cancer) is 30 days following the policy’s issue date or 10 days following the last reinstatement date.</li> </ul>
Texas	<ul style="list-style-type: none"> <li>• Policy has state-specific rates (included in the illustration system and rate sheets).</li> <li>• Spouse Critical Illness Rider has state-specific rates (included in the illustration system and rate sheets).</li> <li>• Advanced Alzheimer’s disease is not covered.</li> <li>• Waiting period for Category 1 (Cancer) is 30 days.</li> </ul>
Utah	<ul style="list-style-type: none"> <li>• Policy has state-specific rates (included in the illustration system and rate sheets).</li> <li>• Spouse Critical Illness Rider has state-specific rates (included in the illustration system and rate sheets).</li> <li>• Return of Premium Rider has state-specific rates (included in the illustration system and rate sheets).</li> <li>• Waiting period for Category 1 (Cancer) is 30 days.</li> </ul>
Washington	<ul style="list-style-type: none"> <li>• Policy has state-specific rates (included in the illustration system and rate sheets).</li> <li>• Spouse Critical Illness Rider has state-specific rates (included in the illustration system and rate sheets).</li> <li>• Coma, Paralysis and Severe Burns are not covered conditions.</li> <li>• Accidental Death Benefit Rider is not available.</li> </ul>
West Virginia	<ul style="list-style-type: none"> <li>• Policy has state-specific rates (included in the illustration system and rate sheets).</li> <li>• Spouse Critical Illness Rider has state-specific rates (included in the illustration system and rate sheets).</li> <li>• Waiting period for Category 1 (Cancer) is 30 days.</li> </ul>



# AssurityBalance® Simplified Critical Illness Insurance

Annual Premium per \$1,000 Benefit

**For all states except\*:** AR, CO, FL, GA, ID, IL, IN, ME, MN, MT, NC, ND, NH, NJ, OK, PA, SD, TN, TX, UT, WA, WV

Issue Ages	Male		Female	
	Non-Tob	Tobacco	Non-Tob	Tobacco
18-25	3.85	4.99	3.37	4.21
26	4.41	5.86	3.67	4.73
27	4.97	6.73	3.97	5.26
28	5.53	7.60	4.27	5.78
29	6.09	8.47	4.57	6.31
30	6.65	9.34	4.87	6.83
31	7.15	10.12	5.15	7.31
32	7.66	10.90	5.42	7.79
33	8.16	11.69	5.70	8.27
34	8.67	12.47	5.97	8.75
35	9.17	13.25	6.25	9.23
36	9.97	14.99	6.84	10.48
37	10.77	16.73	7.43	11.73
38	11.58	18.47	8.03	12.98
39	12.38	20.21	8.62	14.23
40	13.18	21.95	9.21	15.48
41	14.01	23.78	9.83	16.80
42	14.84	25.60	10.45	18.12
43	15.67	27.43	11.07	19.44
44	16.50	29.25	11.69	20.76
45	17.33	31.08	12.31	22.08
46	18.32	32.72	12.82	22.92
47	19.31	34.35	13.34	23.76
48	20.30	35.99	13.85	24.59
49	21.29	37.62	14.37	25.43
50	22.28	39.26	14.88	26.27
51	23.38	41.04	15.38	27.07
52	24.48	42.82	15.89	27.86
53	25.58	44.59	16.39	28.66
54	26.68	46.37	16.90	29.45
55	27.78	48.15	17.40	30.25
56	28.88	50.12	18.10	31.10
57	29.98	52.20	18.70	32.06
58	31.08	54.30	19.40	33.00
59	32.28	56.42	20.00	33.95
60	34.08	59.13	21.68	38.73
61	35.88	61.84	23.36	43.50
62	37.68	64.55	25.03	48.28
63	39.48	67.26	26.71	53.06
64	41.28	69.97	28.39	57.83

**For the following states only:** AR, GA, ID, IL, ME, NC, ND, OK, TN, TX, WV

Issue Ages	Male		Female	
	Non-Tob	Tobacco	Non-Tob	Tobacco
18-25	4.04	5.24	3.54	4.42
26	4.63	6.15	3.85	4.97
27	5.22	7.07	4.17	5.52
28	5.81	7.98	4.48	6.07
29	6.39	8.89	4.80	6.63
30	6.98	9.81	5.11	7.17
31	7.51	10.63	5.41	7.68
32	8.04	11.45	5.69	8.18
33	8.57	12.27	5.99	8.68
34	9.10	13.09	6.27	9.19
35	9.63	13.91	6.56	9.69
36	10.47	15.74	7.18	11.00
37	11.31	17.57	7.80	12.32
38	12.16	19.39	8.43	13.63
39	13.00	21.22	9.05	14.94
40	13.84	23.05	9.67	16.25
41	14.71	24.97	10.32	17.64
42	15.58	26.88	10.97	19.03
43	16.45	28.80	11.62	20.41
44	17.33	30.71	12.27	21.80
45	18.20	32.63	12.93	23.18
46	19.24	34.36	13.46	24.07
47	20.28	36.07	14.01	24.95
48	21.32	37.79	14.54	25.82
49	22.35	39.50	15.09	26.70
50	23.39	41.22	15.62	27.58
51	24.55	43.09	16.15	28.42
52	25.70	44.96	16.68	29.25
53	26.86	46.82	17.21	30.09
54	28.01	48.69	17.75	30.92
55	29.17	50.56	18.27	31.76
56	30.32	52.63	19.01	32.66
57	31.48	54.81	19.64	33.66
58	32.63	57.02	20.37	34.65
59	33.89	59.24	21.00	35.65
60	35.78	62.09	22.76	40.66
61	37.67	64.93	24.52	45.68
62	39.56	67.78	26.29	50.69
63	41.45	70.62	28.05	55.71
64	43.34	73.47	29.81	60.72

To calculate the modal premium, multiply the number of units (benefit amount divided by 1,000) by the unit rate listed above, add the policy fee of \$50, multiply by the mode factor (annual, 1.00; semi-annual, 0.51; quarterly, 0.264; and monthly 0.088) and round to the nearest \$.01.

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## AssurityBalance® Simplified Critical Illness Insurance

Annual Premium per \$1,000 Benefit

For the following states only: FL, MN				
Issue Ages	Male		Female	
	Non-Tob	Tobacco	Non-Tob	Tobacco
18-25	3.39	4.39	2.97	3.70
26	3.88	5.16	3.23	4.16
27	4.37	5.92	3.49	4.63
28	4.87	6.69	3.76	5.09
29	5.36	7.45	4.02	5.55
30	5.85	8.22	4.29	6.01
31	6.29	8.91	4.53	6.43
32	6.74	9.59	4.77	6.86
33	7.18	10.29	5.02	7.28
34	7.63	10.97	5.25	7.70
35	8.07	11.66	5.50	8.12
36	8.77	13.19	6.02	9.22
37	9.48	14.72	6.54	10.32
38	10.19	16.25	7.07	11.42
39	10.89	17.78	7.59	12.52
40	11.60	19.32	8.10	13.62
41	12.33	20.93	8.65	14.78
42	13.06	22.53	9.20	15.95
43	13.79	24.14	9.74	17.11
44	14.52	25.74	10.29	18.27
45	15.25	27.35	10.83	19.43
46	16.12	28.79	11.28	20.17
47	16.99	30.23	11.74	20.91
48	17.86	31.67	12.19	21.64
49	18.74	33.11	12.65	22.38
50	19.61	34.55	13.09	23.12
51	20.57	36.12	13.53	23.82
52	21.54	37.68	13.98	24.52
53	22.51	39.24	14.42	25.22
54	23.48	40.81	14.87	25.92
55	24.45	42.37	15.31	26.62
56	25.41	44.11	15.93	27.37
57	26.38	45.94	16.46	28.21
58	27.35	47.78	17.07	29.04
59	28.41	49.65	17.60	29.88

For Colorado only				
Issue Ages	Male		Female	
	Non-Tob	Tobacco	Non-Tob	Tobacco
18-25	3.70	4.79	3.24	4.03
26	4.24	5.62	3.53	4.53
27	4.77	6.46	3.82	5.04
28	5.31	7.29	4.10	5.54
29	5.84	8.13	4.39	6.05
30	6.38	8.96	4.68	6.55
31	6.86	9.71	4.94	7.01
32	7.35	10.46	5.21	7.47
33	7.83	11.21	5.47	7.93
34	8.32	11.96	5.74	8.39
35	8.80	12.71	6.00	8.85
36	9.57	14.38	6.57	10.05
37	10.34	16.05	7.13	11.25
38	11.10	17.72	7.70	12.45
39	11.87	19.39	8.26	13.65
40	12.64	21.06	8.83	14.85
41	13.44	22.81	9.42	16.12
42	14.23	24.56	10.02	17.38
43	15.03	26.31	10.61	18.65
44	15.82	28.06	11.21	19.91
45	16.62	29.81	11.80	21.18
46	17.57	31.38	12.29	21.98
47	18.52	32.95	12.79	22.79
48	19.47	34.52	13.28	23.59
49	20.42	36.09	13.78	24.40
50	21.37	37.66	14.27	25.20
51	22.43	39.36	14.75	25.96
52	23.48	41.07	15.24	26.73
53	24.54	42.77	15.72	27.49
54	25.59	44.48	16.21	28.26
55	26.65	46.18	16.69	29.02
56	27.75	47.94	17.18	29.80
57	28.90	49.77	17.68	30.60
58	30.10	51.67	18.19	31.42
59	31.35	53.64	18.71	32.26
60	33.00	56.34	20.41	36.90
61	34.65	59.03	22.12	41.54
62	36.30	61.73	23.82	46.19
63	37.95	64.42	25.53	50.83
64	39.60	67.12	27.23	55.47

To calculate the modal premium, multiply the number of units (benefit amount divided by 1,000) by the unit rate listed above, add the policy fee of \$50, multiply by the mode factor (annual, 1.00; semi-annual, 0.51; quarterly, 0.264; and monthly 0.088) and round to the nearest \$.01.

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## AssurityBalance® Simplified Critical Illness Insurance

Annual Premium per \$1,000 Benefit

For Montana only					For Pennsylvania only				
Issue Ages	Male		Female		Issue Ages	Male		Female	
	Non-Tob	Tobacco	Non-Tob	Tobacco		Non-Tob	Tobacco	Non-Tob	Tobacco
18-25	3.61	4.60	3.61	4.60	18-25	4.44	5.76	3.89	4.86
26	4.04	5.30	4.04	5.30	26	5.09	6.77	4.24	5.47
27	4.47	6.00	4.47	6.00	27	5.74	7.78	4.59	6.07
28	4.90	6.69	4.90	6.69	28	6.39	8.78	4.93	6.68
29	5.33	7.39	5.33	7.39	29	7.03	9.78	5.28	7.29
30	5.76	8.09	5.76	8.09	30	7.68	10.79	5.62	7.89
31	6.15	8.72	6.15	8.72	31	8.26	11.69	5.95	8.45
32	6.54	9.35	6.54	9.35	32	8.84	12.60	6.26	9.00
33	6.93	9.98	6.93	9.98	33	9.43	13.50	6.59	9.55
34	7.32	10.61	7.32	10.61	34	10.01	14.40	6.90	10.11
35	7.71	11.24	7.71	11.24	35	10.59	15.30	7.22	10.66
36	8.41	12.74	8.41	12.74	36	11.52	17.31	7.90	12.10
37	9.10	14.23	9.10	14.23	37	12.44	19.33	8.58	13.55
38	9.81	15.73	9.81	15.73	38	13.38	21.33	9.27	14.99
39	10.50	17.22	10.50	17.22	39	14.30	23.34	9.96	16.43
40	11.20	18.72	11.20	18.72	40	15.22	25.36	10.64	17.88
41	11.92	20.29	11.92	20.29	41	16.18	27.47	11.35	19.40
42	12.65	21.86	12.65	21.86	42	17.14	29.57	12.07	20.93
43	13.37	23.44	13.37	23.44	43	18.10	31.68	12.78	22.45
44	14.10	25.01	14.10	25.01	44	19.06	33.78	13.50	23.98
45	14.82	26.58	14.82	26.58	45	20.02	35.89	14.22	25.50
46	15.57	27.82	15.57	27.82	46	21.16	37.80	14.81	26.48
47	16.33	29.06	16.33	29.06	47	22.31	39.68	15.41	27.45
48	17.08	30.29	17.08	30.29	48	23.45	41.57	15.99	28.40
49	17.83	31.53	17.83	31.53	49	24.59	43.45	16.60	29.37
50	18.58	32.77	18.58	32.77	50	28.07	49.46	18.74	33.10
51	19.38	34.06	19.38	34.06	51	29.46	51.71	19.38	34.10
52	20.19	35.34	20.19	35.34	52	30.84	53.95	20.02	35.10
53	20.99	36.63	20.99	36.63	53	32.23	56.18	20.65	36.11
54	21.79	37.91	21.79	37.91	54	33.61	58.43	21.30	37.10
55	22.59	39.20	22.59	39.20	55	35.00	60.67	21.92	38.11
56	23.49	40.61	23.49	40.61	56	36.38	63.16	22.81	39.19
57	24.34	42.13	24.34	42.13	57	37.78	65.77	23.57	40.39
58	25.24	43.65	25.24	43.65	58	39.16	68.42	24.44	41.58
59	26.14	45.19	26.14	45.19	59	40.67	71.09	25.20	42.78
60	27.88	48.93	27.88	48.93	60	42.94	74.50	27.31	48.80
61	29.62	52.67	29.62	52.67	61	45.21	77.92	29.43	54.81
62	31.36	56.42	31.36	56.42	62	47.47	81.33	31.54	60.83
63	33.10	60.16	33.10	60.16	63	49.74	84.75	33.66	66.84
64	34.84	63.90	34.84	63.90	64	52.01	88.16	35.77	72.86

To calculate the modal premium, multiply the number of units (benefit amount divided by 1,000) by the unit rate listed above, add the policy fee of \$50, multiply by the mode factor (annual, 1.00; semi-annual, 0.51; quarterly, 0.264; and monthly 0.088) and round to the nearest \$.01.

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## AssurityBalance® Simplified Critical Illness Insurance

Annual Premium per \$1,000 Benefit

For South Dakota only					For Utah only				
Issue Ages	Male		Female		Issue Ages	Male		Female	
	Non-Tob	Tobacco	Non-Tob	Tobacco		Non-Tob	Tobacco	Non-Tob	Tobacco
18-25	4.24	5.49	3.71	4.63	18-25	3.88	5.02	3.40	4.23
26	4.85	6.45	4.04	5.20	26	4.44	5.90	3.70	4.76
27	5.47	7.40	4.37	5.79	27	5.01	6.78	4.00	5.29
28	6.08	8.36	4.70	6.36	28	5.57	7.65	4.31	5.82
29	6.70	9.32	5.03	6.94	29	6.14	8.53	4.61	6.35
30	7.32	10.27	5.36	7.51	30	6.70	9.41	4.91	6.88
31	7.87	11.13	5.67	8.04	31	7.21	10.20	5.19	7.36
32	8.43	11.99	5.96	8.57	32	7.72	10.98	5.46	7.84
33	8.98	12.86	6.27	9.10	33	8.22	11.77	5.74	8.33
34	9.54	13.72	6.57	9.63	34	8.73	12.55	6.01	8.81
35	10.09	14.58	6.88	10.15	35	9.24	13.34	6.29	9.29
36	10.97	16.49	7.52	11.53	36	10.05	15.09	6.89	10.55
37	11.85	18.40	8.17	12.90	37	10.86	16.85	7.48	11.81
38	12.74	20.32	8.83	14.28	38	11.66	18.60	8.08	13.07
39	13.62	22.23	9.48	15.65	39	12.47	20.36	8.67	14.33
40	14.50	24.15	10.13	17.03	40	13.28	22.11	9.27	15.59
41	15.41	26.16	10.81	18.48	41	14.11	23.95	9.89	16.92
42	16.32	28.16	11.50	19.93	42	14.95	25.79	10.52	18.25
43	17.24	30.17	12.18	21.38	43	15.78	27.62	11.14	19.58
44	18.15	32.18	12.86	22.84	44	16.62	29.46	11.77	20.91
45	19.06	34.19	13.54	24.29	45	17.45	31.30	12.39	22.24
46	20.15	35.99	14.10	25.21	46	18.45	32.95	12.91	23.08
47	21.24	37.79	14.67	26.14	47	19.45	34.60	13.43	23.93
48	22.33	39.59	15.24	27.05	48	20.44	36.24	13.94	24.77
49	23.42	41.38	15.81	27.97	49	21.44	37.89	14.46	25.62
50	26.74	47.11	17.86	31.52	50	22.44	39.54	14.98	26.46
51	28.06	49.25	18.46	32.48	51	23.55	41.33	15.49	27.26
52	29.38	51.38	19.07	33.43	52	24.66	43.12	16.00	28.06
53	30.70	53.51	19.67	34.39	53	25.76	44.91	16.50	28.87
54	32.02	55.64	20.28	35.34	54	26.87	46.70	17.01	29.67
55	33.34	57.78	20.88	36.30	55	27.98	48.49	17.52	30.47
56	34.66	60.14	21.72	37.32	56	29.14	50.35	18.05	31.29
57	35.98	62.64	22.44	38.47	57	30.35	52.28	18.60	32.13
58	37.30	65.16	23.28	39.60	58	31.61	54.28	19.17	32.99
59	38.74	67.70	24.00	40.74	59	32.92	56.36	19.76	33.87
60	40.90	70.95	26.01	46.40	60	34.65	59.18	21.53	38.74
61	43.06	74.20	28.03	52.06	61	36.38	62.01	23.29	43.62
62	45.22	77.46	30.04	57.72	62	38.12	64.83	25.06	48.49
63	47.38	80.71	32.06	63.38	63	39.85	67.66	26.82	53.37
64	49.54	83.96	34.07	69.04	64	41.58	70.48	28.59	58.24

To calculate the modal premium, multiply the number of units (benefit amount divided by 1,000) by the unit rate listed above, add the policy fee of \$50, multiply by the mode factor (annual, 1.00; semi-annual, 0.51; quarterly, 0.264; and monthly 0.088) and round to the nearest \$.01.

**FOR AGENT USE ONLY. Not for use with consumers.** Policy form I H0810 or CI 005. Product availability, features and rates may vary by state. The policy may contain reductions of benefits, limitations and exclusions. For complete details of coverage, please contact Assurity Life Insurance Company or ask to review the policy for more information.





# AssurityBalance® Simplified Critical Illness Insurance

Annual Premium per \$1,000 Benefit

For Indiana Only				
Issue Ages	Male		Female	
	Non-Tob	Tobacco	Non-Tob	Tobacco
18-25	3.85	4.99	3.37	4.21
26	4.41	5.86	3.67	4.73
27	4.97	6.73	3.97	5.26
28	5.53	7.60	4.27	5.78
29	6.09	8.47	4.57	6.31
30	6.65	9.34	4.87	6.83
31	7.15	10.12	5.15	7.31
32	7.66	10.90	5.42	7.79
33	8.16	11.69	5.70	8.27
34	8.67	12.47	5.97	8.75
35	9.17	13.25	6.25	9.23
36	9.97	14.99	6.84	10.48
37	10.77	16.73	7.43	11.73
38	11.58	18.47	8.03	12.98
39	12.38	20.21	8.62	14.23
40	13.18	21.95	9.21	15.48
41	14.01	23.78	9.83	16.80
42	14.84	25.60	10.45	18.12
43	15.67	27.43	11.07	19.44
44	16.50	29.25	11.69	20.76
45	17.33	31.08	12.31	22.08
46	18.32	32.72	12.82	22.92
47	19.31	34.35	13.34	23.76
48	20.30	35.99	13.85	24.59
49	21.29	37.62	14.37	25.43
50	22.28	39.26	14.88	26.27
51	23.38	41.04	15.38	27.07
52	24.48	42.82	15.89	27.86
53	25.58	44.59	16.39	28.66
54	26.68	46.37	16.90	29.45
55	27.78	48.15	17.40	30.25
56	28.88	50.12	18.10	31.10
57	29.98	52.20	18.70	32.06
58	31.08	54.30	19.40	33.00
59	32.28	56.42	20.00	33.95
60	33.41	58.39	20.70	35.14
61	34.58	60.43	21.42	36.37
62	35.79	62.55	22.17	37.64
63	37.04	64.74	22.95	38.96
64	38.34	67.01	23.75	40.32

For New Hampshire only				
Issue Ages	Male		Female	
	Non-Tob	Tobacco	Non-Tob	Tobacco
18-25	3.69	4.78	3.23	4.03
26	4.22	5.61	3.52	4.52
27	4.76	6.44	3.80	5.03
28	5.29	7.27	4.09	5.53
29	5.83	8.10	4.38	6.03
30	6.37	8.94	4.66	6.54
31	6.85	9.69	4.93	6.99
32	7.33	10.43	5.19	7.45
33	7.81	11.18	5.45	7.91
34	8.29	11.92	5.71	8.37
35	8.78	12.68	5.99	8.83
36	9.55	14.34	6.55	10.02
37	10.32	16.01	7.11	11.22
38	11.08	17.67	7.68	12.42
39	11.85	19.34	8.24	13.61
40	12.62	21.00	8.81	14.81
41	13.40	22.75	9.40	16.07
42	14.20	24.50	9.99	17.34
43	14.99	26.24	10.58	18.60
44	15.79	27.99	11.18	19.86
45	16.58	29.74	11.78	21.13
46	17.53	31.30	12.26	21.93
47	18.48	32.87	12.76	22.73
48	19.42	34.43	13.24	23.53
49	20.37	36.00	13.74	24.34
50	21.32	37.56	14.23	25.14
51	22.37	39.26	14.72	25.90
52	23.43	40.96	15.20	26.66
53	24.47	42.66	15.68	27.43
54	25.53	44.37	16.16	28.19
55	26.58	46.08	16.64	28.95
56	27.68	47.83	17.15	29.73
57	28.83	49.67	17.67	30.52
58	30.03	51.57	18.21	31.34
59	31.27	53.54	18.77	32.18
60	32.92	56.22	20.45	36.81
61	34.56	58.91	22.13	41.44
62	36.21	61.59	23.80	46.07
63	37.85	64.28	25.48	50.70
64	39.50	66.96	27.16	55.33

To calculate the modal premium, multiply the number of units (benefit amount divided by 1,000) by the unit rate listed above, add the policy fee of \$50, multiply by the mode factor (annual, 1.00; semi-annual, 0.51; quarterly, 0.264; and monthly 0.088) and round to the nearest \$.01.

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**AssurityBalance®**  
**Simplified Critical Illness Insurance**  
Annual Premium per \$1,000 Benefit

For Washington only				
Issue Ages	Male		Female	
	Non-Tob	Tobacco	Non-Tob	Tobacco
18-25	3.59	4.65	3.15	3.91
26	4.12	5.46	3.43	4.40
27	4.63	6.27	3.71	4.89
28	5.16	7.08	3.98	5.38
29	5.67	7.89	4.26	5.87
30	6.19	8.70	4.54	6.36
31	6.66	9.43	4.80	6.81
32	7.14	10.16	5.06	7.25
33	7.60	10.88	5.31	7.70
34	8.08	11.61	5.57	8.15
35	8.54	12.34	5.83	8.59
36	9.29	13.96	6.38	9.76
37	10.04	15.58	6.92	10.92
38	10.78	17.20	7.48	12.09
39	11.52	18.83	8.02	13.25
40	12.27	20.45	8.57	14.42
41	13.05	22.15	9.15	15.65
42	13.82	23.84	9.73	16.87
43	14.59	25.54	10.30	18.11
44	15.36	27.24	10.88	19.33
45	16.14	28.94	11.46	20.56
46	17.06	30.47	11.93	21.34
47	17.98	31.99	12.42	22.13
48	18.90	33.51	12.89	22.90
49	19.83	35.04	13.38	23.69
50	20.75	36.56	13.85	24.47
51	21.78	38.21	14.32	25.20
52	22.80	39.87	14.80	25.95
53	23.83	41.52	15.26	26.69
54	24.84	43.18	15.74	27.44
55	25.87	44.83	16.20	28.17
56	26.94	46.54	16.68	28.93
57	28.06	48.32	17.17	29.71
58	29.22	50.17	17.66	30.50
59	30.44	52.08	18.17	31.32
60	32.04	54.70	19.82	35.83
61	33.64	57.31	21.48	40.33
62	35.24	59.93	23.13	44.84
63	36.84	62.54	24.79	49.35
64	38.45	65.17	26.44	53.85

To calculate the modal premium, multiply the number of units (benefit amount divided by 1,000) by the unit rate listed above, add the policy fee of \$50, multiply by the mode factor (annual, 1.00; semi-annual, 0.51; quarterly, 0.264; and monthly 0.088) and round to the nearest \$.01.

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## AssurityBalance® Simplified Critical Illness Insurance

Annual Premium per \$1,000 Benefit

For New Jersey Only									
Issue Ages	Male		Female		Issue Ages	Male		Female	
	Non-Tob	Tobacco	Non-Tob	Tobacco		Tob	Tobacco	Non-Tob	Tobacco
18-20	3.98	5.12	3.52	4.69	43	16.21	28.38	11.56	19.66
21	3.99	5.17	3.56	4.74	44	17.07	30.27	12.21	20.92
22	4.01	5.22	3.61	4.78	45	17.93	32.16	12.86	22.30
23	4.02	5.27	3.66	4.82	46	19.00	33.85	13.46	23.28
24	4.04	5.32	3.71	4.86	47	20.07	35.54	14.05	24.26
25	4.05	5.37	3.75	4.91	48	21.14	37.24	14.65	25.23
26	4.63	6.25	4.05	5.45	49	22.21	38.93	15.24	26.21
27	5.21	7.13	4.34	5.99	50	23.28	40.62	15.84	27.19
28	5.79	8.00	4.64	6.53	51	24.43	42.47	16.73	28.80
29	6.37	8.88	4.93	7.08	52	25.58	44.31	17.61	30.41
30	6.95	9.76	5.23	7.62	53	26.73	46.15	18.50	32.03
31	7.48	10.58	5.58	8.15	54	27.88	47.99	19.39	33.64
32	8.00	11.40	5.93	8.69	55	29.03	49.83	20.27	35.26
33	8.53	12.21	6.28	9.22	56	32.43	54.77	23.23	41.68
34	9.06	13.03	6.63	9.75	57	35.83	59.71	26.19	48.11
35	9.59	13.85	6.98	10.29	58	39.23	64.65	29.16	54.54
36	10.40	15.62	7.50	11.40	59	42.64	69.58	32.12	60.96
37	11.20	17.39	8.03	12.52	60	46.04	74.52	35.08	67.39
38	12.01	19.16	8.56	13.63	61	49.71	79.82	38.31	74.50
39	12.82	20.93	9.09	14.75	62	53.67	85.49	41.84	82.36
40	13.63	22.71	9.62	15.86	63	57.95	91.56	45.70	91.05
41	14.49	24.60	10.27	17.13	64	62.57	98.06	49.92	100.66
42	15.35	26.49	10.92	18.39					

To calculate the modal premium, multiply the number of units (benefit amount divided by 1,000) by the unit rate listed above, add the policy fee of \$50, multiply by the mode factor (annual, 1.00; semi-annual, 0.51; quarterly, 0.264; and monthly 0.088) and round to the nearest \$.01.

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