STATE OF NEW YORK

ANDREW M. CUOMO
GOVERNOR

DEPARTMENT OF CIVIL SERVICE
ALFRED E. SMITH STATE OFFICE BUILDING
ALBANY, NEW YORK 12239
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MANAGEMENT/CONFIDENTIAL GROUP LIFE INSURANCE
BIWEEKLY RATE SCHEDULE
Rates Effective September 8, 2011 Institution
Rates Effective September 1, 2011 Administration

	LIFE INSURANCE		AD&D		
	NON-SMOKER	SMOKER		SPOUSE'S LIFE	
ENROLLEE'S	RATE PER	RATE PER	RATE PER	PER $1,000**	
AGE	$1,000	$1,000	$1,000*	Employee's Age	Children***
Under age 25	0.014	0.017	0.000	0.017	0.23
25 TO 29	0.017	0.021	0.000	0.017	0.23
30 TO 34	0.023	0.028	0.000	0.034	0.23
35 TO 39	0.026	0.032	0.000	0.043	0.23
40 TO 44	0.028	0.035	0.000	0.059	0.23
45 TO 49	0.042	0.053	0.000	0.093	0.23
50 TO 54	0.064	0.080	0.000	0.144	0.23
55 TO 59	0.120	0.150	0.000	0.228	0.23
60 TO 64	0.184	0.230	0.000	0.329	0.23
65 TO 69	0.355	0.443	0.000	0.482	0.23
70 and over	0.576	0.719	0.000	0.600	0.23

* Maximum AD&D Benefit is $250,000
** Limited to one half the enrollee's coverage to a maximum of $20,000 and based on enrollee's age
*** This $0.23 premium cost provides $4,000 coverage for each eligible child

MANAGEMENT/CONFIDENTIAL GROUP ACCIDENT AND SICKNESS INSURANCE
LIMITED TO CURRENT ACCIDENT AND SICKNESS ENROLLEES AS OF JANUARY 1, 1986

	BASIC MONTHLY	EXTRA IN-HOSPITAL	EXTRA MONTHLY	
COVERAGE	BENEFIT	MONTHLY BENEFIT	INCOME BENEFIT	
$75	0.00	0.00	0.00	
100	0.00	0.00		
125	0.00	0.00		
			ADDITIONAL LOSS	
150	0.00	0.00	LIFE AND LIMB	
200	0.00	0.00	$10,000	$25,000
250	0.00	0.00		
			0.00	0.00
300	0.00	0.00		
400	0.00	0.00		

To determine Total Bi-weekly Cost, each calculation is rounded separately.