# Rate Sheet for East Central Independent School District

**Employee** - Coverage and **monthly** cost for Employee Optional Life Insurance.
Rates are effective as of 9/1/2016.

The chart below shows possible coverage amounts and corresponding costs per pay-period.

Find your age bracket (as of the effective date of coverage) to determine the associated cost for the coverage amount you choose.

| Coverage Amounts | <29 | 30-34 | 35-39 | 40-44 | 45-49 | 50-54 | 55-59 | 60-64 | 65-69 | 70+ |
|---|---|---|---|---|---|---|---|---|---|---|
| **$ 10,000** | 0.34 | 0.43 | 0.68 | 0.85 | 1.28 | 1.96 | 3.66 | 5.19 | 8.76 | 14.96 |
| **$ 20,000** | 0.68 | 0.86 | 1.36 | 1.70 | 2.56 | 3.92 | 7.32 | 10.38 | 17.52 | 29.92 |
| **$ 30,000** | 1.02 | 1.29 | 2.04 | 2.55 | 3.84 | 5.88 | 10.98 | 15.57 | 26.28 | 44.88 |
| **$ 40,000** | 1.36 | 1.72 | 2.72 | 3.40 | 5.12 | 7.84 | 14.64 | 20.76 | 35.04 | 59.84 |
| **$ 50,000** | 1.70 | 2.15 | 3.40 | 4.25 | 6.40 | 9.80 | 18.30 | 25.95 | 43.80 | 74.80 |
| **$ 60,000** | 2.04 | 2.58 | 4.08 | 5.10 | 7.68 | 11.76 | 21.96 | 31.14 | 52.56 | 89.76 |
| **$ 70,000** | 2.38 | 3.01 | 4.76 | 5.95 | 8.96 | 13.72 | 25.62 | 36.33 | 61.32 | 104.72 |
| **$ 80,000** | 2.72 | 3.44 | 5.44 | 6.80 | 10.24 | 15.68 | 29.28 | 41.52 | 70.08 | 119.68 |
| **$ 90,000** | 3.06 | 3.87 | 6.12 | 7.65 | 11.52 | 17.64 | 32.94 | 46.71 | 78.84 | 134.64 |
| **$ 100,000** | 3.40 | 4.30 | 6.80 | 8.50 | 12.80 | 19.60 | 36.60 | 51.90 | 87.60 | 149.60 |
| **$ 110,000** | 3.74 | 4.73 | 7.48 | 9.35 | 14.08 | 21.56 | 40.26 | 57.09 | 96.36 | 164.56 |
| **$ 120,000** | 4.08 | 5.16 | 8.16 | 10.20 | 15.36 | 23.52 | 43.92 | 62.28 | 105.12 | 179.52 |
| **$ 130,000** | 4.42 | 5.59 | 8.84 | 11.05 | 16.64 | 25.48 | 47.58 | 67.47 | 113.88 | 194.48 |
| **$ 140,000** | 4.76 | 6.02 | 9.52 | 11.90 | 17.92 | 27.44 | 51.24 | 72.66 | 122.64 | 209.44 |
| **$ 150,000** | 5.10 | 6.45 | 10.20 | 12.75 | 19.20 | 29.40 | 54.90 | 77.85 | 131.40 | 224.40 |
| **$ 160,000** | 5.44 | 6.88 | 10.88 | 13.60 | 20.48 | 31.36 | 58.56 | 83.04 | 140.16 | 239.36 |
| **$ 170,000** | 5.78 | 7.31 | 11.56 | 14.45 | 21.76 | 33.32 | 62.22 | 88.23 | 148.92 | 254.32 |
| **$ 180,000** | 6.12 | 7.74 | 12.24 | 15.30 | 23.04 | 35.28 | 65.88 | 93.42 | 157.68 | 269.28 |
| **$ 190,000** | 6.46 | 8.17 | 12.92 | 16.15 | 24.32 | 37.24 | 69.54 | 98.61 | 166.44 | 284.24 |
| **$ 200,000** | 6.80 | 8.60 | 13.60 | 17.00 | 25.60 | 39.20 | 73.20 | 103.80 | 175.20 | 299.20 |
| **$ 210,000** | 7.14 | 9.03 | 14.28 | 17.85 | 26.88 | 41.16 | 76.86 | 108.99 | 183.96 | 314.16 |
| **$ 220,000** | 7.48 | 9.46 | 14.96 | 18.70 | 28.16 | 43.12 | 80.52 | 114.18 | 192.72 | 329.12 |
| **$ 230,000** | 7.82 | 9.89 | 15.64 | 19.55 | 29.44 | 45.08 | 84.18 | 119.37 | 201.48 | 344.08 |
| **$ 240,000** | 8.16 | 10.32 | 16.32 | 20.40 | 30.72 | 47.04 | 87.84 | 124.56 | 210.24 | 359.04 |
| **$ 250,000** | 8.50 | 10.75 | 17.00 | 21.25 | 32.00 | 49.00 | 91.50 | 129.75 | 219.00 | 374.00 |

**Spouse** - Coverage and **monthly c**ost for Spouse Optional Life Insurance.
Rates are effective as of 9/1/2016.

The chart below shows possible coverage amounts and corresponding costs per pay-period.

Find your age bracket (as of the effective date of coverage) to determine the associated cost for the coverage amount you choose.

| Coverage Amounts | <29 | 30-34 | 35-39 | 40-44 | 45-49 | 50-54 | 55-59 | 60-64 | 65-69 | 70+ |
|---|---|---|---|---|---|---|---|---|---|---|
| **$ 5,000** | 0.17 | 0.22 | 0.34 | 0.43 | 0.64 | 0.98 | 1.83 | 2.60 | 4.38 | 7.48 |
| **$ 10,000** | 0.34 | 0.43 | 0.68 | 0.85 | 1.28 | 1.96 | 3.66 | 5.19 | 8.76 | 14.96 |
| **$ 15,000** | 0.51 | 0.65 | 1.02 | 1.28 | 1.92 | 2.94 | 5.49 | 7.79 | 13.14 | 22.44 |
| **$ 20,000** | 0.68 | 0.86 | 1.36 | 1.70 | 2.56 | 3.92 | 7.32 | 10.38 | 17.52 | 29.92 |
| **$ 25,000** | 0.85 | 1.08 | 1.70 | 2.13 | 3.20 | 4.90 | 9.15 | 12.98 | 21.90 | 37.40 |
| **$ 30,000** | 1.02 | 1.29 | 2.04 | 2.55 | 3.84 | 5.88 | 10.98 | 15.57 | 26.28 | 44.88 |
| **$ 35,000** | 1.19 | 1.51 | 2.38 | 2.98 | 4.48 | 6.86 | 12.81 | 18.17 | 30.66 | 52.36 |
| **$ 40,000** | 1.36 | 1.72 | 2.72 | 3.40 | 5.12 | 7.84 | 14.64 | 20.76 | 35.04 | 59.84 |
| **$ 45,000** | 1.53 | 1.94 | 3.06 | 3.83 | 5.76 | 8.82 | 16.47 | 23.36 | 39.42 | 67.32 |
| **$ 50,000** | 1.70 | 2.15 | 3.40 | 4.25 | 6.40 | 9.80 | 18.30 | 25.95 | 43.80 | 74.80 |

**Child** - Coverage and **monthly** cost for Child Optional Life Insurance.

Rates are effective as of 9/1/2016.

| Coverage Amounts | Cost |
|---|---|
| **$10,000** | 1.00 |