



WorldWide Expatriate Association Premium Calculation Table

Premium Calculations:

Mark the options for the coverage that you are applying for and write that premium in the right hand column.

Total the premiums in the right hand column, and you have your total monthly premium.

All premiums are subject to change January 1 of each year. The following rates are effective January 1, 2004.

***PLEASE CHOOSE EITHER THE STANDARD PLAN OR THE LIMITED PLAN, NOT BOTH. BOTH MEDICAL PLANS INCLUDE \$10,000 LIFE AND AD&D.**

	Applicant Only					Two Party†					Family†					Premium
	Under 30	30-39	40-49	50-59	60-69	Under 30	30-39	40-49	50-59	60-69	Under 30	30-39	40-49	50-59	60-69	
Standard Plan* This plan is world wide and includes benefits payable in the United States.																
\$250	<input type="checkbox"/> \$114	<input type="checkbox"/> \$151	<input type="checkbox"/> \$189	<input type="checkbox"/> \$317	<input type="checkbox"/> \$478	<input type="checkbox"/> \$243	<input type="checkbox"/> \$323	<input type="checkbox"/> \$404	<input type="checkbox"/> \$678	<input type="checkbox"/> \$1011	<input type="checkbox"/> \$356	<input type="checkbox"/> \$475	<input type="checkbox"/> \$593	<input type="checkbox"/> \$919	<input type="checkbox"/> \$1353	
\$500	<input type="checkbox"/> \$101	<input type="checkbox"/> \$135	<input type="checkbox"/> \$168	<input type="checkbox"/> \$281	<input type="checkbox"/> \$423	<input type="checkbox"/> \$215	<input type="checkbox"/> \$287	<input type="checkbox"/> \$359	<input type="checkbox"/> \$598	<input type="checkbox"/> \$890	<input type="checkbox"/> \$316	<input type="checkbox"/> \$421	<input type="checkbox"/> \$526	<input type="checkbox"/> \$811	<input type="checkbox"/> \$1202	
\$1000	<input type="checkbox"/> \$89	<input type="checkbox"/> \$118	<input type="checkbox"/> \$148	<input type="checkbox"/> \$244	<input type="checkbox"/> \$368	<input type="checkbox"/> \$189	<input type="checkbox"/> \$252	<input type="checkbox"/> \$315	<input type="checkbox"/> \$520	<input type="checkbox"/> \$769	<input type="checkbox"/> \$277	<input type="checkbox"/> \$369	<input type="checkbox"/> \$461	<input type="checkbox"/> \$703	<input type="checkbox"/> \$1038	
\$2500	<input type="checkbox"/> \$82	<input type="checkbox"/> \$111	<input type="checkbox"/> \$138	<input type="checkbox"/> \$231	<input type="checkbox"/> \$346	<input type="checkbox"/> \$177	<input type="checkbox"/> \$236	<input type="checkbox"/> \$295	<input type="checkbox"/> \$490	<input type="checkbox"/> \$730	<input type="checkbox"/> \$259	<input type="checkbox"/> \$346	<input type="checkbox"/> \$431	<input type="checkbox"/> \$665	<input type="checkbox"/> \$985	
\$5000	<input type="checkbox"/> \$66	<input type="checkbox"/> \$88	<input type="checkbox"/> \$109	<input type="checkbox"/> \$183	<input type="checkbox"/> \$275	<input type="checkbox"/> \$140	<input type="checkbox"/> \$187	<input type="checkbox"/> \$234	<input type="checkbox"/> \$389	<input type="checkbox"/> \$579	<input type="checkbox"/> \$205	<input type="checkbox"/> \$274	<input type="checkbox"/> \$342	<input type="checkbox"/> \$527	<input type="checkbox"/> \$781	
Limited Plan* This plan eliminates coverage in the United States.																
\$250	<input type="checkbox"/> \$87	<input type="checkbox"/> \$115	<input type="checkbox"/> \$143	<input type="checkbox"/> \$242	<input type="checkbox"/> \$382	<input type="checkbox"/> \$184	<input type="checkbox"/> \$245	<input type="checkbox"/> \$306	<input type="checkbox"/> \$513	<input type="checkbox"/> \$767	<input type="checkbox"/> \$269	<input type="checkbox"/> \$358	<input type="checkbox"/> \$447	<input type="checkbox"/> \$693	<input type="checkbox"/> \$1035	
\$500	<input type="checkbox"/> \$77	<input type="checkbox"/> \$103	<input type="checkbox"/> \$128	<input type="checkbox"/> \$215	<input type="checkbox"/> \$326	<input type="checkbox"/> \$164	<input type="checkbox"/> \$219	<input type="checkbox"/> \$273	<input type="checkbox"/> \$453	<input type="checkbox"/> \$677	<input type="checkbox"/> \$238	<input type="checkbox"/> \$317	<input type="checkbox"/> \$396	<input type="checkbox"/> \$612	<input type="checkbox"/> \$911	
\$1000	<input type="checkbox"/> \$68	<input type="checkbox"/> \$91	<input type="checkbox"/> \$113	<input type="checkbox"/> \$186	<input type="checkbox"/> \$283	<input type="checkbox"/> \$144	<input type="checkbox"/> \$192	<input type="checkbox"/> \$240	<input type="checkbox"/> \$393	<input type="checkbox"/> \$585	<input type="checkbox"/> \$210	<input type="checkbox"/> \$277	<input type="checkbox"/> \$348	<input type="checkbox"/> \$531	<input type="checkbox"/> \$787	
\$2500	<input type="checkbox"/> \$63	<input type="checkbox"/> \$86	<input type="checkbox"/> \$105	<input type="checkbox"/> \$176	<input type="checkbox"/> \$267	<input type="checkbox"/> \$136	<input type="checkbox"/> \$180	<input type="checkbox"/> \$225	<input type="checkbox"/> \$371	<input type="checkbox"/> \$556	<input type="checkbox"/> \$196	<input type="checkbox"/> \$260	<input type="checkbox"/> \$325	<input type="checkbox"/> \$502	<input type="checkbox"/> \$748	
\$5000	<input type="checkbox"/> \$51	<input type="checkbox"/> \$67	<input type="checkbox"/> \$83	<input type="checkbox"/> \$139	<input type="checkbox"/> \$211	<input type="checkbox"/> \$107	<input type="checkbox"/> \$142	<input type="checkbox"/> \$178	<input type="checkbox"/> \$294	<input type="checkbox"/> \$439	<input type="checkbox"/> \$155	<input type="checkbox"/> \$207	<input type="checkbox"/> \$258	<input type="checkbox"/> \$398	<input type="checkbox"/> \$592	
Is spouse to remain in the US? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, multiply medical rate only x2																
																Medical Subtotal: \$
Optional Dental & Vision Coverage																
Not age based	<input type="checkbox"/> \$41					<input type="checkbox"/> \$79					<input type="checkbox"/> \$134					\$
Optional Life Insurance and AD&D Coverage. Life Insurance coverage is only available for the primary insured. \$10,000 is included in the basic medical premium, so all rates below are for the total life insurance amount, including the \$10,000. Coverage at a multiple of salary is limited to \$500,000.																
	Under 30	30-39	40-49	50-59	60-69											
\$50,000 Total Life and AD&D	<input type="checkbox"/> \$12	<input type="checkbox"/> \$12	<input type="checkbox"/> \$20	<input type="checkbox"/> \$46.80	<input type="checkbox"/> \$92.40	Not Available										
Rates per \$1000						Premium Calculator										
1x Salary Life	<input type="checkbox"/> \$.30	<input type="checkbox"/> \$.30	<input type="checkbox"/> \$.50	<input type="checkbox"/> \$1.17	<input type="checkbox"/> \$2.31	Annual Salary in US Dollars: \$ _____ - \$10,000 = \$ _____ ÷ 1000 = _____ X rate = _____										
2x Salary Life	<input type="checkbox"/> \$.30	<input type="checkbox"/> \$.30	<input type="checkbox"/> \$.50	<input type="checkbox"/> \$1.17	<input type="checkbox"/> \$2.31	Annual Salary in US Dollars: \$ _____ X 2 = \$ _____ - \$10,000 = \$ _____ ÷ 1000 = _____ X rate = _____										
																Total Monthly Premium: \$

† If a dependent spouse is remaining in the US, use the US rate for both, or 2x the overseas rate.