

AGE	SECURIAN (State of AZ) (per \$1,000 coverage per month)	THE HARTFORD (UArizona)** (per \$1,000 coverage per month)*														
18–24	\$0.06	\$0.058														
25–29	\$0.06	\$0.071														
30–34	\$0.068	\$0.071														
35–39	\$0.075	\$0.084														
40–44	\$0.121	\$0.109														
45–49	\$0.158	\$0.133														
50–54	\$0.249	\$0.183														
55–59	\$0.355	\$0.296														
60–64	\$0.626	\$0.470														
65–69	\$0.626	\$0.732														
Age 70+	\$0.981	\$0.732														
Election options	<p>Elect in \$5,000 increments.</p> <p>During Open Enrollment, increases may not exceed \$20,000.</p> <p>If you experience a qualifying life event during the year, you may elect any coverage option.</p>	<p>Option A: 1x annual salary</p> <p>Option B: 2x annual salary</p> <p>Option C: 3x annual salary</p> <p>Option D: 4x annual salary</p> <p>Option E: 5x annual salary</p> <p>Increases may not exceed one step during Open Enrollment. If you experience a qualifying life event during the year, you may elect any coverage option.</p>														
Minimum Coverage	\$5,000	1x annual salary rounded up to nearest \$1,000														
Maximum Coverage	\$500,000 or 3x annual salary; whichever is less	\$500,000 or 5x annual salary, whichever is less														
Spouse & Dependent Coverage	<p>Coverage for spouses and children only</p> <p>Monthly Cost</p> <table border="0"> <tr> <td>\$ 2,000</td> <td>\$ 0.94</td> </tr> <tr> <td>\$ 4,000</td> <td>\$ 1.88</td> </tr> <tr> <td>\$ 6,000</td> <td>\$ 2.82</td> </tr> <tr> <td>\$10,000</td> <td>\$ 4.70</td> </tr> <tr> <td>\$12,000</td> <td>\$ 5.64</td> </tr> <tr> <td>\$15,000</td> <td>\$ 7.05</td> </tr> <tr> <td>\$50,000*</td> <td>\$ 23.50</td> </tr> </table> <p>*Must have a minimum \$35,000 supplemental Life Insurance to elect \$50,000 dependent</p>	\$ 2,000	\$ 0.94	\$ 4,000	\$ 1.88	\$ 6,000	\$ 2.82	\$10,000	\$ 4.70	\$12,000	\$ 5.64	\$15,000	\$ 7.05	\$50,000*	\$ 23.50	<p>Coverage for spouses or domestic partners and children</p> <p>\$5,000 spouse or domestic partner</p> <p>\$5,000 each child</p> <p><u>Monthly Cost:</u></p> <p>\$0.718</p> <p>*Employee must be enrolled in one of Aetna insurance options (A–E, above) in order to elect dependent coverage.</p>
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Portability/ Conversion Options	<ul style="list-style-type: none"> Portability and Conversion Option 	<ul style="list-style-type: none"> Portability and Conversion Option Retiree Continuation Option 														

* With The Hartford, coverage levels automatically adjust for age and changes in salary.

** 1.5% of the premium is retained by the University to cover administrative costs.

Visit <http://hr.arizona.edu/employees-affiliates/benefits/insurance-benefits#hdr-8> for more information.