



## GROUP LEVEL TERM LIFE INSURANCE

Underwritten by New York Life Insurance Company, NY NY 10010  
(policy form GMR)

### 20-Year Level Term Life Insurance Current 2017 Monthly Rates per \$50,000 benefit

Members may apply for \$100,000 – \$2,000,000 in \$50,000 increments.  
Spouses/Domestic Partners\* may apply for \$100,000 – \$1,000,000 in \$50,000 increments.

Issue Age	\$100,000 to \$200,000				\$200,001 to \$499,999					
	Male		Female		Male			Female		
	Non-smoker	Smoker	Non-smoker	Smoker	Preferred	Standard	Smoker	Preferred	Standard	Smoker
17-20	\$7.88	\$14.05	\$6.42	\$10.30	\$3.84	\$5.55	\$9.50	\$3.13	\$4.30	\$6.67
21	7.88	14.05	6.42	10.34	3.84	5.55	9.50	3.13	4.30	6.71
22	7.88	14.05	6.42	10.34	3.84	5.55	9.50	3.13	4.30	6.71
23	7.88	14.05	6.42	10.34	3.84	5.55	9.50	3.13	4.30	6.71
24	7.88	14.05	6.42	10.34	3.84	5.55	9.50	3.13	4.30	6.71
25	7.88	14.05	6.42	10.34	3.84	5.55	9.50	3.17	4.30	6.71
26	7.88	14.05	6.42	10.55	3.88	5.55	9.50	3.17	4.30	6.88
27	7.88	14.25	6.42	10.92	3.88	5.55	9.55	3.17	4.30	7.13
28	7.88	14.34	6.42	11.30	3.88	5.55	9.67	3.17	4.30	7.46
29	7.88	14.59	6.42	11.71	3.88	5.55	9.80	3.17	4.30	7.80
30	7.88	14.96	6.42	12.09	3.88	5.55	10.09	3.17	4.30	8.05
31	7.88	15.59	6.55	12.59	3.88	5.55	10.50	3.17	4.38	8.30
32	7.96	16.25	6.75	12.88	3.88	5.63	11.05	3.21	4.59	8.55
33	8.05	17.21	6.88	13.21	3.88	5.71	11.71	3.34	4.75	8.88
34	8.21	18.13	7.13	13.88	3.88	5.88	12.38	3.42	4.96	9.21
35	8.30	19.21	7.55	14.42	3.88	6.05	13.17	3.50	5.25	9.75
36	8.63	20.13	7.75	15.55	4.00	6.30	13.84	3.67	5.55	10.46
37	9.05	21.13	8.05	16.71	4.13	6.55	14.55	3.75	5.75	11.38
38	9.55	22.30	8.34	18.13	4.38	6.88	15.46	3.92	6.09	12.38
39	10.09	23.75	8.88	19.63	4.67	7.30	16.50	4.09	6.50	13.46
40	10.92	25.75	9.25	21.00	5.05	7.92	17.96	4.34	6.88	14.46
41	11.71	28.42	9.80	22.42	5.50	8.63	19.88	4.63	7.30	15.55
42	12.88	31.75	10.34	23.92	6.09	9.50	22.25	5.00	7.80	16.55
43	14.09	35.38	11.00	25.34	6.71	10.59	24.96	5.34	8.25	17.63
44	15.38	39.38	11.75	27.05	7.46	11.59	27.84	5.88	8.84	18.92
45	16.75	43.30	12.63	28.88	8.17	12.71	30.67	6.34	9.55	20.21
46	18.05	47.21	13.55	30.96	8.92	13.71	33.50	6.88	10.34	21.67
47	19.34	51.34	14.63	33.21	9.80	14.80	36.50	7.46	11.17	23.30
48	20.67	55.75	15.71	35.63	10.67	15.88	39.67	8.13	12.21	25.09
49	22.30	60.34	16.92	38.21	11.63	17.25	43.00	8.80	13.21	27.00
50	24.42	65.25	18.25	40.96	12.63	18.96	46.55	9.50	14.30	28.92
51	27.05	70.38	19.63	43.75	13.59	21.21	50.25	10.34	15.30	30.96
52	30.05	76.09	20.88	46.80	14.59	23.75	54.38	11.13	16.38	33.21
53	33.63	81.92	22.38	50.00	15.71	26.80	58.67	12.05	17.50	35.55
54	37.55	88.09	24.21	53.55	17.09	30.05	63.13	13.09	18.96	38.00

\*The term spouse shall read as Domestic Partner throughout.

These competitive monthly premium rates are based on your actual age as of the effective date of your insurance. Once you lock in your rate, there are no scheduled increases for the initial 20-year term of your coverage. Only non-smokers meeting the highest underwriting standards will qualify for "Preferred" rates. Other non-smokers may qualify for the higher "Standard" rates. (Note: Smokers may only qualify for Smoker Rates.) Upon approval of your Application, you will be notified of the rate classification for each approved person. Coverage terminates at age 75. For assistance estimating your monthly rates for your desired coverage amount, use the insurance calculator at [www.aptainsuranceplans.com/life](http://www.aptainsuranceplans.com/life) or call the plan administrator at 1.800.982.9491.



## GROUP LEVEL TERM LIFE INSURANCE

Underwritten by New York Life Insurance Company, NY NY 10010  
(policy form GMR)

### 20-Year Level Term Life Insurance Current 2017 Monthly Rates per \$50,000 benefit

Members may apply for \$100,000 – \$2,000,000 in \$50,000 increments.  
Spouses/Domestic Partners\* may apply for \$100,000 – \$1,000,000 in \$50,000 increments.

Issue Age	\$500,000 to \$999,999						\$1,000,000 to \$2,000,000					
	Male			Female			Male			Female		
	Preferred	Standard	Smoker	Preferred	Standard	Smoker	Preferred	Standard	Smoker	Preferred	Standard	Smoker
17-20	\$3.55	\$5.21	\$9.17	\$2.80	\$3.96	\$6.42	\$3.21	\$4.84	\$8.75	\$2.42	\$3.50	\$6.09
21	3.55	5.21	9.17	2.80	3.96	6.42	3.21	4.84	8.75	2.42	3.50	6.13
22	3.55	5.21	9.17	2.80	3.96	6.42	3.21	4.84	8.75	2.42	3.50	6.13
23	3.55	5.21	9.17	2.80	3.96	6.42	3.21	4.84	8.75	2.42	3.50	6.13
24	3.55	5.21	9.17	2.80	3.96	6.42	3.21	4.84	8.75	2.42	3.50	6.13
25	3.55	5.21	9.17	2.80	3.96	6.42	3.21	4.84	8.75	2.42	3.50	6.13
26	3.55	5.21	9.17	2.80	3.96	6.59	3.21	4.84	8.75	2.42	3.50	6.21
27	3.55	5.21	9.30	2.84	3.96	6.80	3.21	4.84	8.84	2.42	3.50	6.46
28	3.55	5.21	9.38	2.84	4.00	7.13	3.21	4.84	8.88	2.42	3.50	6.67
29	3.55	5.21	9.50	2.84	4.00	7.42	3.21	4.84	9.05	2.42	3.50	7.05
30	3.55	5.21	9.80	2.84	4.00	7.71	3.21	4.84	9.38	2.42	3.55	7.34
31	3.55	5.21	10.21	2.88	4.05	8.05	3.21	4.84	9.84	2.46	3.63	7.67
32	3.59	5.30	10.71	2.92	4.25	8.25	3.21	4.92	10.30	2.50	3.84	7.92
33	3.59	5.42	11.38	3.00	4.46	8.50	3.21	5.05	10.92	2.55	3.96	8.13
34	3.59	5.55	12.09	3.09	4.63	8.92	3.21	5.17	11.63	2.63	4.17	8.55
35	3.59	5.75	12.84	3.21	4.92	9.42	3.21	5.38	12.38	2.75	4.42	9.09
36	3.67	5.96	13.55	3.30	5.21	10.21	3.34	5.55	13.05	2.88	4.67	9.80
37	3.84	6.25	14.25	3.42	5.46	11.05	3.46	5.88	13.80	2.96	4.92	10.67
38	4.05	6.59	15.13	3.59	5.80	12.09	3.67	6.17	14.67	3.13	5.30	11.67
39	4.34	7.05	16.13	3.75	6.17	13.13	3.92	6.63	15.67	3.34	5.63	12.71
40	4.67	7.59	17.59	4.00	6.59	14.13	4.30	7.17	17.09	3.55	6.05	13.71
41	5.21	8.30	19.55	4.30	7.00	15.21	4.75	7.88	19.00	3.80	6.46	14.75
42	5.80	9.21	21.96	4.67	7.46	16.25	5.34	8.80	21.38	4.17	6.88	15.80
43	6.42	10.25	24.63	5.09	7.96	17.34	5.96	9.80	24.05	4.55	7.46	16.88
44	7.13	11.25	27.46	5.55	8.55	18.59	6.59	10.75	26.80	5.05	8.00	18.09
45	7.80	12.42	30.34	6.05	9.21	19.88	7.30	11.88	29.67	5.50	8.59	19.46
46	8.59	13.42	33.21	6.50	10.00	21.38	8.05	12.88	32.46	6.00	9.34	20.92
47	9.46	14.46	36.17	7.13	10.88	23.00	8.84	13.92	35.42	6.55	10.25	22.50
48	10.34	15.59	39.34	7.80	11.88	24.75	9.75	15.00	38.55	7.25	11.25	24.25
49	11.30	16.96	42.71	8.42	12.88	26.63	10.75	16.38	41.88	7.92	12.25	26.09
50	12.30	18.63	46.21	9.25	14.00	28.63	11.75	18.09	45.38	8.71	13.38	28.05
51	13.30	20.88	50.00	10.05	15.00	30.67	12.75	20.25	49.13	9.46	14.38	30.09
52	14.25	23.42	54.09	10.84	16.05	32.84	13.67	22.80	53.17	10.34	15.46	32.30
53	15.38	26.46	58.34	11.75	17.21	35.17	14.84	25.84	57.42	11.21	16.59	34.55
54	16.71	29.71	62.80	12.80	18.67	37.67	16.17	28.96	61.84	12.25	18.05	37.05

\*The term spouse shall read as Domestic Partner throughout.

These competitive monthly premium rates are based on your actual age as of the effective date of your insurance. Once you lock in your rate, there are no scheduled increases for the initial 20-year term of your coverage. Only non-smokers meeting the highest underwriting standards will qualify for "Preferred" rates. Other non-smokers may qualify for the higher "Standard" rates. (Note: Smokers may only qualify for Smoker Rates.) Upon approval of your Application, you will be notified of the rate classification for each approved person. Coverage terminates at age 75. For assistance estimating your monthly rates for your desired coverage amount, use the insurance calculator at [www.aptainsuranceplans.com/life](http://www.aptainsuranceplans.com/life) or call the plan administrator at 1.800.982.9491.