

University of California San Francisco 2010 Premiums

SUPPLEMENTAL DISABILITY INSURANCE

To calculate your 2010 monthly premium
multiply the full-time monthly rate for your position (up to \$14,286)
by the appropriate premium factor listed below.

<u>AGE</u>	<u>WAITING PERIOD</u>			
	<u>7 DAYS</u>	<u>30 DAYS</u>	<u>90 DAYS</u>	<u>180 DAYS</u>
Under 35	0.0088	0.0032	0.0028	0.0011
35-39	0.0093	0.0036	0.0031	0.0015
40-44	0.0104	0.0044	0.0038	0.0023
45-49	0.0115	0.0052	0.0044	0.0029
50-54	0.0142	0.0066	0.0056	0.0044
55-59	0.017	0.0095	0.0080	0.0071
60-64	0.0235	0.0155	0.0132	0.0126
65-69	0.0208	0.0121	0.0103	0.0092
70 and over	0.0158	0.0067	0.0057	0.0037

ACCIDENTAL DEATH AND DISMEMBERMENT (AD&D) 2010

MONTHLY RATES

<u>COVERAGE AMOUNT</u>	<u>SELF</u>	<u>FAMILY</u>	<u>MODIFIED FAMILY</u>
10,000	0.14	0.24	0.17
20,000	0.28	0.48	0.34
30,000	0.42	0.72	0.51
40,000	0.56	0.96	0.68
50,000	0.70	1.20	0.85
60,000	0.84	1.44	1.02
70,000	0.98	1.68	1.19
80,000	1.12	1.92	1.36
90,000	1.26	2.16	1.53
100,000	1.40	2.40	1.70
125,000	1.75	3.00	2.12
150,000	2.10	3.60	2.55
175,000	2.45	4.20	2.97
200,000	2.80	4.80	3.40
300,000	4.20	7.20	5.10
400,000	5.60	9.60	6.80
500,000	7.00	12.00	8.50