The Cost of Your Benefits

Cancer Insurance 20 Pay Rates					
COVERAGE LEVEL	lssue age	Named insured	Employee and spouse	One- parent family	Two-parent family
Level 1	17-75	\$7.59	\$15.18	\$7.68	\$15.27
Level 2	17-75	\$9.33	\$18.66	\$9.51	\$18.84
Level 3	17-75	\$12.84	\$25.68	\$13.11	\$25.95
Level 4	17-75	\$17.82	\$35.64	\$18.18	\$36.00