LIFESECURE INSURANCE COMPANY

lifesecure™

Critical Illness Insurance Monthly Premium Rates*

MARYLAND

INDIVIDUAL – NON-NICOTINE

Benefit Amount: $40,000

Age	MALE *Self Only*	FEMALE *Self Only*	MALE OR FEMALE *with Spouse***
18	$14.98	$16.18	$24.18
19	$14.98	$16.18	$24.18
20	$14.98	$16.18	$24.18
21	$14.98	$16.18	$24.18
22	$14.98	$16.18	$24.18
23	$15.78	$16.98	$25.78
24	$16.58	$17.78	$27.38
25	$17.38	$18.58	$28.98
26	$18.18	$19.78	$30.98
27	$18.98	$20.58	$32.58
28	$20.18	$21.38	$34.58
29	$21.38	$22.58	$36.98
30	$22.98	$23.78	$39.78
31	$24.58	$24.98	$42.58
32	$26.18	$26.18	$45.38
33	$27.78	$27.78	$48.58
34	$29.78	$29.38	$52.18
35	$31.78	$30.98	$55.78
36	$34.18	$32.98	$60.18
37	$36.58	$34.98	$64.58
38	$39.38	$36.98	$69.38
39	$42.18	$39.38	$74.58
40	$45.38	$41.78	$80.18
41	$48.98	$44.18	$86.18
42	$52.58	$46.98	$92.58
43	$56.18	$49.38	$98.58
44	$60.18	$52.18	$105.38

Age	MALE *Self Only*	FEMALE *Self Only*	MALE OR FEMALE *with Spouse***
45	$64.18	$54.58	$111.78
46	$68.58	$57.38	$118.98
47	$73.38	$60.58	$126.98
48	$78.58	$63.38	$134.98
49	$83.78	$66.18	$142.98
50	$89.38	$69.38	$151.78
51	$94.98	$72.58	$160.58
52	$101.38	$76.18	$170.58
53	$107.38	$79.78	$180.18
54	$113.78	$83.38	$190.18
55	$120.58	$86.98	$200.58
56	$127.78	$90.98	$211.78
57	$135.38	$95.38	$223.78
58	$143.38	$100.18	$236.58
59	$151.78	$104.98	$249.78
60	$160.58	$110.18	$263.78
61	$169.78	$115.78	$278.58
62	$179.78	$121.78	$294.58
63	$189.38	$127.78	$310.18
64	$199.38	$133.78	$326.18
65	$210.58	$140.98	$344.58
66	$222.98	$148.58	$364.58
67	$236.58	$156.98	$386.58
68	$253.78	$167.78	$414.58
69	$274.98	$180.98	$448.98
70	$303.38	$199.38	$495.78

Note: Each dependent child is automatically covered with a $2,500 Benefit Amount – *at no additional cost*

* To review monthly premiums for different benefit amounts and scenarios, visit **www.YourLifeSecure.com** and login to your secure portal to run quotes.

** Premium rates shown above assume an opposite gender spouse who is the same age and nicotine status as the policyholder. Different rates apply for nicotine users – see other page.

Policy Series LS-CI-0001 MD
LS-CI-I-0306-40K MD 07/18

LIFESECURE INSURANCE COMPANY

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Critical Illness Insurance Monthly Premium Rates*

MARYLAND

INDIVIDUAL – NICOTINE

Benefit Amount: $40,000

Age	MALE *Self Only*	FEMALE *Self Only*	MALE OR FEMALE *with Spouse***
18	$20.58	$18.98	$32.58
19	$20.58	$18.98	$32.58
20	$20.58	$18.98	$32.58
21	$20.58	$18.98	$32.58
22	$20.58	$18.98	$32.58
23	$22.18	$20.18	$35.38
24	$23.38	$21.38	$37.78
25	$24.98	$22.58	$40.58
26	$26.58	$23.78	$43.38
27	$28.58	$25.38	$46.98
28	$30.98	$26.98	$50.98
29	$33.38	$28.58	$54.98
30	$36.18	$30.58	$59.78
31	$39.38	$32.58	$64.98
32	$42.58	$34.98	$70.58
33	$46.18	$37.38	$76.58
34	$50.18	$40.18	$83.38
35	$54.58	$43.38	$90.98
36	$59.38	$46.58	$98.98
37	$64.58	$50.18	$107.78
38	$70.58	$53.78	$117.38
39	$76.98	$57.78	$127.78
40	$84.18	$62.18	$139.38
41	$92.18	$66.58	$151.78
42	$100.58	$71.78	$165.38
43	$108.18	$76.98	$178.18
44	$116.18	$82.18	$191.38
45	$124.98	$87.78	$205.78
46	$133.78	$94.18	$220.98
47	$143.78	$100.58	$237.38
48	$154.58	$106.98	$254.58
49	$166.18	$113.38	$272.58
50	$178.58	$120.58	$292.18
51	$191.38	$128.18	$312.58
52	$205.38	$136.18	$334.58
53	$218.98	$144.18	$356.18
54	$233.38	$152.18	$378.58
55	$248.98	$160.98	$402.98
56	$265.38	$170.18	$428.58
57	$282.58	$180.18	$455.78
58	$300.58	$190.58	$484.18
59	$319.78	$201.38	$514.18
60	$339.38	$212.58	$544.98
61	$360.58	$224.58	$578.18
62	$382.58	$237.38	$612.98
63	$403.78	$249.38	$646.18
64	$425.78	$262.18	$680.98
65	$450.18	$276.18	$719.38
66	$475.78	$290.98	$759.78
67	$504.18	$307.38	$804.58
68	$542.58	$327.38	$862.98
69	$589.38	$352.18	$934.58
70	$654.98	$387.38	$1,035.38

Note: Each dependent child is automatically covered with a $2,500 Benefit Amount – *at no additional cost*

* To review monthly premiums for different benefit amounts and scenarios, visit **www.YourLifeSecure.com** and login to your secure portal to run quotes.

** Premium rates shown above assume an opposite gender spouse who is the same age and nicotine status as the policyholder. Different rates apply for non-nicotine – see other page.

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