



California Federal Employees

CA Payroll Premium rates are Biweekly for industry Class C.
Rate sheet prepared by DANA PURNELL & COMPANY, INC. 7/25/26 9:34 PM

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CANCER PROTECTION ASSURANCE PLAN LEVEL 3 - Series B70300

Age	Coverage	Premium	IDR	SDR	Total
18-64	INDIVIDUAL	\$21.86	\$2.75	\$0.42	\$25.03
18-64	INSURED/SPOUSE	\$37.32	\$6.48	\$0.42	\$44.22
18-64	ONE-PARENT FAMILY	\$21.86	\$2.75	\$0.42	\$25.03
18-64	TWO-PARENT FAMILY	\$37.32	\$6.48	\$0.42	\$44.22

IDR* = Optional Initial Diagnosis Rider (Series B70050) 5 units (\$500)
SDR* = Optional Specified Disease Rider (Series B70052)

AFLAC ACCIDENT INSURANCE - 24-HOUR ACCIDENT INCLUDING WELLNESS BENEFIT OPTION 3 - Series A38000

Age	Coverage	Premium	Total
18-64	INDIVIDUAL	\$15.65	\$15.65
18-64	INSURED/SPOUSE	\$22.16	\$22.16
18-64	ONE PARENT FAMILY	\$26.33	\$26.33
18-64	TWO PARENT FAMILY	\$32.26	\$32.26

Age	Coverage	Aflac Plus Rider
18-29	INDIVIDUAL	\$1.44
30-39		\$2.10
40-49		\$3.66
50-64		\$6.12
18-29	INSURED/SPOUSE	\$2.76
30-39		\$4.14
40-49		\$6.90
50-64		\$11.16
18-29	ONE PARENT FAMILY	\$2.76
30-39		\$3.12
40-49		\$4.32
50-64		\$6.36
18-29	TWO PARENT FAMILY	\$3.48
30-39		\$4.62
40-49		\$7.02
50-64		\$11.22

AFLAC-SHORT TERM DISABILITY - Series A-57600

Elimination Period Accident/Sickness - 14/14 DAYS

Annual Income		\$40,000	\$42,000	\$44,000	\$46,000	\$48,000	\$50,000	\$52,000	\$54,000	\$56,000	\$58,000
Monthly Benefit		\$2,000	\$2,100	\$2,200	\$2,300	\$2,400	\$2,500	\$2,600	\$2,700	\$2,800	\$2,900
Benefit Period	Age										
6 MONTHS	18-49	\$36.00	\$37.80	\$39.60	\$41.40	\$43.20	\$45.00	\$46.80	\$48.60	\$50.40	\$52.20
	50-64	\$48.00	\$50.40	\$52.80	\$55.20	\$57.60	\$60.00	\$62.40	\$64.80	\$67.20	\$69.60
12 MONTHS	18-49	\$51.60	\$54.18	\$56.76	\$59.34	\$61.92	\$64.50	\$67.08	\$69.66	\$72.24	\$74.82
	50-64	\$66.00	\$69.30	\$72.60	\$75.90	\$79.20	\$82.50	\$85.80	\$89.10	\$92.40	\$95.70

Age	Coverage	Aflac Plus Rider
18-29	INDIVIDUAL	\$1.44
30-39		\$2.10
40-49		\$3.66
50-64		\$6.12

Age	Coverage	Aflac Value Rider
18-59	INDIVIDUAL	\$5.04



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AFLAC HOSPITAL CHOICE - OPTION 1 Benefit Amount \$1,000 - Series B40100

Age	Coverage	Premium	EBR	HSSCR	Total
18-49	INDIVIDUAL	\$12.72	\$5.46	\$8.64	\$26.82
50-59		\$12.96	\$6.24	\$11.10	\$30.30
60-64		\$13.38	\$6.30	\$14.46	\$34.14
18-49	INSURED/SPOUSE	\$18.06	\$11.52	\$15.84	\$45.42
50-59		\$19.08	\$12.96	\$22.02	\$54.06
60-64		\$20.40	\$13.08	\$27.66	\$61.14
18-49	ONE-PARENT FAMILY	\$16.14	\$10.92	\$12.00	\$39.06
50-59		\$16.44	\$11.16	\$13.62	\$41.22
60-64		\$16.68	\$11.46	\$17.88	\$46.02
18-49	TWO-PARENT FAMILY	\$19.14	\$13.98	\$16.14	\$49.26
50-59		\$19.32	\$14.22	\$23.16	\$56.70
60-64		\$20.64	\$14.88	\$29.52	\$65.04

EBR*: Extended Benefit Rider Premium (Available for ages 18-75)

HSSCR*: Hospital Stay and Surgical Care Rider Premium (Available for ages 18-75)

Age	Coverage	Aflac Plus Rider
18-29	INDIVIDUAL	\$1.44
30-39		\$2.10
40-49		\$3.66
50-64		\$6.12
18-29	INSURED/SPOUSE	\$2.76
30-39		\$4.14
40-49		\$6.90
50-64		\$11.16
18-29	ONE-PARENT FAMILY	\$2.76
30-39		\$3.12
40-49		\$4.32
50-64		\$6.36
18-29	TWO-PARENT FAMILY	\$3.48
30-39		\$4.62
40-49		\$7.02
50-64		\$11.22

CRITICAL CARE PROTECTION POLICY - Series A74300

Critical Care Protection (Individual)

FOBBR: First Occurrence Building Benefit Rider (Rider Series A74050)

SHERR: Specified Health Event Recovery Benefit Rider (Rider Series A74051)

Age	Premium	FOBBR	SHERR	Total
18-35	\$8.22	\$1.08	\$0.54	\$9.84
36-45	\$11.64	\$1.98	\$1.32	\$14.94
46-55	\$17.16	\$2.34	\$2.16	\$21.66
56-64	\$23.76	\$2.58	\$3.06	\$29.40

Critical Care Protection (Insured/Spouse)

Age	Premium	FOBBR	SHERR	Total
18-35	\$15.78	\$2.16	\$1.08	\$19.02
36-45	\$20.88	\$3.96	\$2.22	\$27.06
46-55	\$32.16	\$4.68	\$3.72	\$40.56
56-64	\$45.84	\$5.16	\$5.70	\$56.70



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Critical Care Protection (One Parent Family)

Age	Premium	FOBBR	SHERR	Total
18-35	\$13.98	\$1.14	\$0.60	\$15.72
36-45	\$16.50	\$2.10	\$1.32	\$19.92
46-55	\$21.24	\$2.40	\$2.16	\$25.80
56-64	\$29.94	\$2.70	\$3.12	\$35.76

Critical Care Protection (Two Parent Family)

Age	Premium	FOBBR	SHERR	Total
18-35	\$17.88	\$2.22	\$1.14	\$21.24
36-45	\$22.74	\$4.08	\$2.40	\$29.22
46-55	\$34.08	\$4.74	\$4.02	\$42.84
56-64	\$49.08	\$5.28	\$6.00	\$60.36

DENTAL LEVEL 2 - Series A-82300R

* = Optional Orthodontic Rider (Series A82050) premium;** = Optional Cosmetic Rider (Series A82051) premium

Age	Coverage	Premium	Orthodontic Rider*	Cosmetic Rider**	Total
18-65	INDIVIDUAL	\$17.70	\$10.92	\$11.82	\$40.44
18-65	INSURED/SPOUSE	\$34.68	\$11.94	\$11.82	\$58.44
18-65	ONE-PARENT FAMILY	\$34.44	\$11.94	\$11.82	\$58.20
18-65	TWO-PARENT FAMILY	\$51.78	\$11.94	\$11.82	\$75.54

VISION NOW - Series VSN100

Age	Individual	Insured/Spouse	One Parent Family	Two Parent Family
18-39	\$6.42	\$10.11	\$10.57	\$13.34
40-49	\$8.72	\$14.72	\$12.18	\$17.22
50-65	\$13.11	\$22.57	\$15.18	\$23.03