

# FORETHOUGHT LIFE INSURANCE COMPANY - Monthly Premium Rates \*

These rates apply to ZIP codes starting with: 559 through 567

	<u>Nonsmoker</u>	<u>Smoker</u>
<u>Basic Plan</u>		
ALL AGES	\$ 103.50	\$ 119.00
<u>Optional Riders - ALL AGES</u>		
Part A Deductible Rider	\$ 23.25	\$ 26.75
Preventive Medical Care Rider	\$ 5.42	\$ 6.25
Part B Excess Rider	\$ 3.75	\$ 4.33
Part B Deductible Rider	\$ 13.92	\$ 13.92
<u>Extended Basic</u>		
ALL AGES	\$ 283.33	\$ 325.83
<u>\$20 and \$50 Copayment</u>		
ALL AGES	\$ 110.92	\$ 127.58

\* To obtain annual, semiannual, or quarterly premiums, multiply the Monthly Premium Amount by 12, 6, or 3, respectively

# FORETHOUGHT LIFE INSURANCE COMPANY - Monthly Premium Rates \*

These rates apply to ZIP codes starting with: 550, 553, 555 through 558

	<u>Nonsmoker</u>	<u>Smoker</u>
<b><u>Basic Plan</u></b>		
ALL AGES	\$ 117.99	\$ 135.66
<b><u>Optional Riders - ALL AGES</u></b>		
Part A Deductible Rider	\$ 26.51	\$ 30.50
Preventive Medical Care Rider	\$ 6.18	\$ 7.13
Part B Excess Rider	\$ 4.28	\$ 4.94
Part B Deductible Rider	\$ 15.87	\$ 15.87
<b><u>Extended Basic</u></b>		
ALL AGES	\$ 323.00	\$ 371.45
<b><u>\$20 and \$50 Copayment</u></b>		
ALL AGES	\$ 126.45	\$ 145.45

\* To obtain annual, semiannual, or quarterly premiums, multiply the Monthly Premium Amount by 12, 6, or 3, respectively

# FORETHOUGHT LIFE INSURANCE COMPANY - Monthly Premium Rates \*

These rates apply to ZIP codes starting with: 551, 554

	<u>Nonsmoker</u>	<u>Smoker</u>
<b><u>Basic Plan</u></b>		
ALL AGES	\$ 134.55	\$ 154.70
<b><u>Optional Riders - ALL AGES</u></b>		
Part A Deductible Rider	\$ 30.23	\$ 34.78
Preventive Medical Care Rider	\$ 7.04	\$ 8.13
Part B Excess Rider	\$ 4.88	\$ 5.63
Part B Deductible Rider	\$ 18.09	\$ 18.09
<b><u>Extended Basic</u></b>		
ALL AGES	\$ 368.33	\$ 423.58
<b><u>\$20 and \$50 Copayment</u></b>		
ALL AGES	\$ 144.19	\$ 165.86

\* To obtain annual, semiannual, or quarterly premiums, multiply the Monthly Premium Amount by 12, 6, or 3, respectively