The cost of this life insurance is based upon the member and spouse's gender, amount of insurance requested, usage of tobacco/nicotine products, health status, and attained age on the date coverage is issued. Premium contributions will vary depending upon the options chosen.

Only non-smokers meeting the highest underwriting standards will qualify for "Super-Preferred" rates. Other non-smokers may qualify for the higher "Preferred" or "Non-Smoker" rates. (Note: Smokers may only qualify for "Preferred Smoker" or "Smoker" Rates.) Upon approval of your application, you will be notified of the rate classification for each approved person.

Current 2023 Monthly Premium Contributions† Per \$10,000 Benefit Amount Face Amounts \$100,000† - \$249,999††

Issue Age	Male Super Preferred Nonsmoker	Male Super Preferred Nonsmoker 20% Premium Credit**	Male Preferred Nonsmoker	Male Preferred Nonsmoker 20% Premium Credit**	Male Nonsmoker	Male Nonsmoker 20% Premium Credit**	Male Preferred Smoker	Male Preferred Smoker 20% Premium Credit**	Male Smoker	Male Smoker 20% Premium Credit**
20	\$0.95	\$0.76	\$1.01	\$0.82	\$1.28	\$1.03	\$2.70	\$2.17	\$3.20	\$2.57
21	0.95	0.76	1.01	0.82	1.28	1.03	2.70	2.17	3.20	2.57
22	0.95	0.76	1.01	0.82	1.28	1.03	2.70	2.17	3.20	2.57
23	0.95	0.76	1.01	0.82	1.28	1.03	2.70	2.17	3.20	2.57
24	0.95	0.76	1.01	0.82	1.28	1.03	2.70	2.17	3.20	2.57
25	0.95	0.76	1.01	0.82	1.28	1.03	2.70	2.17	3.20	2.57
26	0.95	0.76	1.01	0.82	1.28	1.03	2.70	2.17	3.20	2.57
27	0.95	0.76	1.01	0.82	1.28	1.03	2.70	2.17	3.20	2.57
28	0.95	0.76	1.01	0.82	1.28	1.03	2.70	2.17	3.20	2.57
29	0.95	0.76	1.01	0.82	1.28	1.03	2.70	2.17	3.20	2.57
30	0.95	0.76	1.01	0.82	1.28	1.03	2.70	2.17	3.20	2.57
31	0.97	0.78	1.04	0.83	1.31	1.05	2.84	2.28	3.37	2.70
32	0.99	0.79	1.07	0.86	1.35	1.08	2.99	2.39	3.54	2.83
33	1.00	0.81	1.10	0.88	1.39	1.12	3.12	2.50	3.70	2.96
34	1.02	0.82	1.12	0.90	1.42	1.14	3.27	2.62	3.86	3.09
35	1.04	0.83	1.16	0.93	1.45	1.17	3.40	2.73	4.02	3.22
36	1.10	0.88	1.20	0.97	1.53	1.23	3.63	2.91	4.30	3.44
37	1.15	0.93	1.25	1.01	1.60	1.28	3.85	3.08	4.56	3.65
38	1.21	0.98	1.30	1.05	1.67	1.34	4.06	3.25	4.84	3.88
39	1.27	1.02	1.35	1.08	1.75	1.40	4.29	3.43	5.10	4.08
40	1.34	1.08	1.40	1.12	1.83	1.47	4.50	3.61	5.37	4.30
41	1.40	1.12	1.49	1.19	1.97	1.58	4.91	3.93	5.89	4.72
42	1.46	1.18	1.59	1.28	2.10	1.68	5.32	4.26	6.40	5.13
43	1.53	1.23	1.68	1.35	2.25	1.81	5.74	4.59	6.92	5.54
44	1.59	1.28	1.77	1.42	2.39	1.92	6.14	4.92	7.44	5.95
45	1.65	1.33	1.86	1.49	2.54	2.03	6.55	5.25	7.95	6.37
46	1.83	1.47	2.07	1.66	2.78	2.23	7.17	5.74	8.70	6.97
47	2.00	1.61	2.26	1.82	3.04	2.43	7.80	6.24	9.45	7.57
48	2.17	1.74	2.46	1.98	3.29	2.63	8.42	6.74	10.20	8.16
49	2.35	1.88	2.66	2.13	3.54	2.83	9.05	7.24	10.95	8.77
50	2.52	2.02	2.85	2.28	3.79	3.03	9.65	7.73	11.70	9.37
51	2.83	2.27	3.20	2.57	4.21	3.38	10.60	8.48	12.84	10.28
52	3.15	2.52	3.55	2.84	4.64	3.72	11.55	9.24	13.98	11.18
53	3.46	2.78	3.90	3.12	5.05	4.05	12.49	9.99	15.11	12.09
54	3.78	3.03	4.23	3.38	5.48	4.38	13.43	10.75	16.25	13.01

[†]Payable semiannually, annually, quarterly or via the monthly Electronic Funds Transfer (EFT) option as described previously.

^{††}As previously noted, member and spouse benefits under this insurance are available in \$10,000 multiples.

^{*}Male rates apply to all coverage issued to Montana residents, regardless of a person's sex.

^{**}The current premium credit is not guaranteed and subject to change, however the 20- Year Level Term Life Insurance for ACP members has returned premium credits for several years. The current annual premium for all eligible children is \$12.00 for \$5,000 of life insurance.

The cost of this life insurance is based upon the member and spouse's gender, amount of insurance requested, usage of tobacco/nicotine products, health status, and attained age on the date coverage is issued. Premium contributions will vary depending upon the options chosen.

Only non-smokers meeting the highest underwriting standards will qualify for "Super-Preferred" rates. Other non-smokers may qualify for the higher "Preferred" or "Non-Smoker" rates. (Note: Smokers may only qualify for "Preferred Smoker" or "Smoker" Rates.) Upon approval of your application, you will be notified of the rate classification for each approved person.

Current 2023 Monthly Premium Contributions† Per \$10,000 Benefit Amount Face Amounts \$100,000† - \$249,999††

Issue Age	Female* Super Preferred Nonsmoker	Female* Super Preferred Nonsmoker 20% Premium Credit**	Female* Preferred Nonsmoker	Female* Preferred Nonsmoker 20% Premium Credit**	Female* Nonsmoker	Female* Nonsmoker 20% Premium Credit**	Female* Preferred Smoker	Female* Preferred Smoker 20% Premium Credit**	Female* Smoker	Female* Smoker 20% Premium Credit**
20	\$0.80	\$0.65	\$0.89	\$0.72	\$1.04	\$0.83	\$1.91	\$1.53	\$2.19	\$1.75
21	0.80	0.65	0.89	0.72	1.04	0.83	1.91	1.53	2.19	1.75
22	0.80	0.65	0.89	0.72	1.04	0.83	1.91	1.53	2.19	1.75
23	0.80	0.65	0.89	0.72	1.04	0.83	1.91	1.53	2.19	1.75
24	0.80	0.65	0.89	0.72	1.04	0.83	1.91	1.53	2.19	1.75
25	0.80	0.65	0.89	0.72	1.04	0.83	1.91	1.53	2.19	1.75
26	0.80	0.65	0.89	0.72	1.04	0.83	1.91	1.53	2.19	1.75
27	0.80	0.65	0.89	0.72	1.04	0.83	1.91	1.53	2.19	1.75
28	0.80	0.65	0.89	0.72	1.04	0.83	1.91	1.53	2.19	1.75
29	0.80	0.65	0.89	0.72	1.04	0.83	1.91	1.53	2.19	1.75
30	0.80	0.65	0.89	0.72	1.04	0.83	1.91	1.53	2.19	1.75
31	0.82	0.66	0.91	0.73	1.08	0.87	2.05	1.64	2.36	1.89
32	0.84	0.68	0.94	0.75	1.11	0.89	2.19	1.75	2.53	2.03
33	0.85	0.68	0.96	0.78	1.15	0.93	2.34	1.88	2.69	2.15
34	0.88	0.71	0.99	0.79	1.19	0.95	2.47	1.98	2.86	2.29
35	0.89	0.72	1.01	0.82	1.24	0.99	2.61	2.09	3.03	2.43
36	0.91	0.73	1.04	0.83	1.29	1.03	2.82	2.26	3.30	2.65
37	0.94	0.75	1.07	0.86	1.35	1.08	3.04	2.43	3.57	2.86
38	0.97	0.78	1.10	0.88	1.40	1.12	3.26	2.62	3.85	3.08
39	1.00	0.80	1.13	0.91	1.45	1.17	3.48	2.78	4.12	3.30
40	1.02	0.82	1.16	0.93	1.51	1.22	3.69	2.95	4.39	3.52
41	1.10	0.88	1.25	1.01	1.65	1.32	4.06	3.25	4.85	3.88
42	1.17	0.94	1.35	1.08	1.77	1.42	4.45	3.56	5.31	4.25
43	1.25	1.00	1.45	1.16	1.91	1.53	4.82	3.86	5.77	4.62
44	1.31	1.05	1.54	1.23	2.04	1.63	5.20	4.16	6.23	4.98
45	1.39	1.12	1.63	1.31	2.18	1.75	5.57	4.46	6.69	5.35
46	1.50	1.20	1.77	1.42	2.35	1.88	5.74	4.59	7.32	5.86
47	1.62	1.30	1.91	1.53	2.54	2.03	5.90	4.72	7.95	6.37
48	1.74	1.39	2.06	1.65	2.71	2.18	6.06	4.85	8.59	6.88
49	1.85	1.48	2.20	1.76	2.90	2.32	6.24	4.99	9.22	7.38
50	1.97	1.58	2.35	1.88	3.07	2.46	6.40	5.13	9.85	7.88
51	2.14	1.72	2.55	2.04	3.32	2.66	7.60	6.08	10.74	8.59
52	2.32	1.86	2.75	2.20	3.57	2.86	8.80	7.05	11.63	9.31
53	2.50	2.00	2.95	2.37	3.83	3.07	10.01	8.02	12.53	10.03
54	2.68	2.15	3.16	2.53	4.09	3.28	11.21	8.98	13.41	10.73

[†]Payable semiannually, annually, quarterly or via the monthly Electronic Funds Transfer (EFT) option as described previously.

^{††}As previously noted, member and spouse benefits under this insurance are available in \$10,000 multiples.

^{*}Male rates apply to all coverage issued to Montana residents, regardless of a person's sex.

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Only non-smokers meeting the highest underwriting standards will qualify for "Super-Preferred" rates. Other non-smokers may qualify for the higher "Preferred" or "Non-Smoker" rates. (Note: Smokers may only qualify for "Preferred Smoker" or "Smoker" Rates.) Upon approval of your application, you will be notified of the rate classification for each approved person.

Current 2023 Monthly Premium Contributions† Per \$10,000 Benefit Amount Face Amounts \$250,000 - \$499,999††

Issue Age	Male Super Preferred Nonsmoker	Male Super Preferred Nonsmoker 20% Premium Credit**	Male Preferred Nonsmoker	Male Preferred Nonsmoker 20% Premium Credit**	Male Nonsmoker	Male Nonsmoker 20% Premium Credit**	Male Preferred Smoker	Male Preferred Smoker 20% Premium Credit**	Male Smoker	Male Smoker 20% Premium Credit**
20	\$0.70	\$0.57	\$0.75	\$0.60	\$0.98	\$0.78	\$2.14	\$1.72	\$2.58	\$2.07
21	0.70	0.57	0.75	0.60	0.98	0.78	2.14	1.72	2.58	2.07
22	0.70	0.57	0.75	0.60	0.98	0.78	2.14	1.72	2.58	2.07
23	0.70	0.57	0.75	0.60	0.98	0.78	2.14	1.72	2.58	2.07
24	0.70	0.57	0.75	0.60	0.98	0.78	2.14	1.72	2.58	2.07
25	0.70	0.57	0.75	0.60	0.98	0.78	2.14	1.72	2.58	2.07
26	0.70	0.57	0.75	0.60	0.98	0.78	2.14	1.72	2.58	2.07
27	0.70	0.57	0.75	0.60	0.98	0.78	2.14	1.72	2.58	2.07
28	0.70	0.57	0.75	0.60	0.98	0.78	2.14	1.72	2.58	2.07
29	0.70	0.57	0.75	0.60	0.98	0.78	2.14	1.72	2.58	2.07
30	0.70	0.57	0.75	0.60	0.98	0.78	2.14	1.72	2.58	2.07
31	0.71	0.58	0.78	0.63	1.01	0.82	2.28	1.83	2.73	2.18
32	0.73	0.58	0.81	0.65	1.05	0.85	2.40	1.93	2.89	2.32
33	0.74	0.59	0.84	0.68	1.08	0.87	2.54	2.03	3.03	2.43
34	0.75	0.60	0.87	0.70	1.11	0.89	2.67	2.14	3.19	2.55
35	0.75	0.61	0.90	0.73	1.15	0.93	2.80	2.25	3.35	2.68
36	0.81	0.65	0.94	0.75	1.22	0.98	3.00	2.41	3.59	2.88
37	0.88	0.71	0.99	0.79	1.30	1.04	3.21	2.58	3.84	3.08
38	0.93	0.75	1.03	0.83	1.37	1.10	3.41	2.53	4.09	3.28
39	0.99	0.79	1.08	0.87	1.45	1.16	3.62	2.90	4.33	3.47
40	1.04	0.83	1.12	0.90	1.52	1.22	3.82	3.06	4.58	3.67
41	1.11	0.89	1.21	0.98	1.66	1.33	4.20	3.37	5.05	4.05
42	1.18	0.95	1.30	1.05	1.88	1.45	4.58	3.67	5.52	4.42
43	1.25	1.01	1.40	1.12	1.94	1.55	4.96	3.98	6.00	4.81
44	1.31	1.05	1.49	1.19	2.08	1.67	5.34	4.28	6.47	5.18
45	1.39	1.12	1.58	1.27	2.22	1.78	5.71	4.58	6.95	5.56
46	1.55	1.24	1.77	1.42	2.46	1.98	6.30	5.04	7.62	6.10
47	1.71	1.38	1.97	1.58	2.71	2.18	6.87	5.50	8.31	6.65
48	1.88	1.51	2.15	1.73	2.95	2.36	7.44	5.95	9.00	7.20
49	2.04	1.63	2.35	1.88	3.20	2.56	8.02	6.42	9.68	7.75
50	2.20	1.77	2.53	2.03	3.44	2.75	8.59	6.88	10.36	8.29
51	2.50	2.01	2.86	2.29	3.85	3.08	9.45	7.57	11.41	9.13
52	2.81	2.25	3.20	2.56	4.26	3.42	10.32	8.26	12.45	9.96
53	3.11	2.49	3.53	2.83	4.67	3.74	11.19	8.95	13.49	10.79
54	3.42	2.74	3.85	3.08	5.07	4.06	12.06	9.65	14.54	11.63

[†]Payable semiannually, annually, quarterly or via the monthly Electronic Funds Transfer (EFT) option as described previously.

^{††}As previously noted, member and spouse benefits under this insurance are available in \$10,000 multiples.

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Only non-smokers meeting the highest underwriting standards will qualify for "Super-Preferred" rates. Other non-smokers may qualify for the higher "Preferred" or "Non-Smoker" rates. (Note: Smokers may only qualify for "Preferred Smoker" or "Smoker" Rates.) Upon approval of your application, you will be notified of the rate classification for each approved person.

Current 2023 Monthly Premium Contributions† Per \$10,000 Benefit Amount Face Amounts \$250,000 - \$499,999††

Issue Age	Female* Super Preferred Nonsmoker	Female* Super Preferred Nonsmoker 20% Premium Credit**	Female* Preferred Nonsmoker	Female* Preferred Nonsmoker 20% Premium Credit**	Female* Nonsmoker	Female* Nonsmoker 20% Premium Credit**	Female* Preferred Smoker	Female* Preferred Smoker 20% Premium Credit**	Female* Smoker	Female* Smoker 20% Premium Credit**
20	\$0.49	\$0.39	\$0.56	\$0.45	\$0.75	\$0.60	\$1.54	\$1.23	\$1.81	\$1.45
21	0.49	0.39	0.56	0.45	0.75	0.60	1.54	1.23	1.81	1.45
22	0.49	0.39	0.56	0.45	0.75	0.60	1.54	1.23	1.81	1.45
23	0.49	0.39	0.56	0.45	0.75	0.60	1.54	1.23	1.81	1.45
24	0.49	0.39	0.56	0.45	0.75	0.60	1.54	1.23	1.81	1.45
25	0.49	0.39	0.56	0.45	0.75	0.60	1.54	1.23	1.81	1.45
26	0.49	0.39	0.56	0.45	0.75	0.60	1.54	1.23	1.81	1.45
27	0.49	0.39	0.56	0.45	0.75	0.60	1.54	1.23	1.81	1.45
28	0.49	0.39	0.56	0.45	0.75	0.60	1.54	1.23	1.81	1.45
29	0.49	0.39	0.56	0.45	0.75	0.60	1.54	1.23	1.81	1.45
30	0.49	0.39	0.56	0.45	0.75	0.60	1.54	1.23	1.81	1.45
31	0.51	0.42	0.60	0.48	0.79	0.63	1.66	1.33	1.98	1.58
32	0.53	0.43	0.61	0.49	0.82	0.66	1.80	1.45	2.14	1.72
33	0.55	0.44	0.64	0.52	0.85	0.68	1.94	1.55	2.30	1.85
34	0.56	0.45	0.66	0.53	0.90	0.73	2.08	1.67	2.47	1.98
35	0.58	0.47	0.70	0.56	0.94	0.75	2.21	1.78	2.64	2.12
36	0.62	0.50	0.72	0.58	1.00	0.80	2.44	1.95	2.91	2.33
37	0.65	0.52	0.75	0.61	1.06	0.85	2.65	2.12	3.18	2.55
38	0.67	0.54	0.79	0.63	1.11	0.89	2.86	2.29	3.45	2.77
39	0.70	0.57	0.81	0.65	1.17	0.94	3.09	2.48	3.73	2.98
40	0.73	0.58	0.84	0.68	1.24	0.99	3.30	2.65	4.00	3.20
41	0.80	0.64	0.93	0.75	1.36	1.09	3.67	2.94	4.45	3.57
42	0.85	0.68	1.01	0.82	1.49	1.19	4.04	3.23	4.90	3.93
43	0.92	0.74	1.10	0.88	1.62	1.30	4.40	3.53	5.36	4.29
44	1.00	0.80	1.19	0.95	1.75	1.40	4.77	3.82	5.80	4.65
45	1.06	0.85	1.27	1.02	1.88	1.51	5.14	4.12	6.26	5.02
46	1.16	0.93	1.40	1.12	2.05	1.64	5.32	4.26	6.89	5.52
47	1.26	1.02	1.53	1.23	2.21	1.78	5.51	4.42	7.51	6.02
48	1.36	1.09	1.65	1.33	2.39	1.92	5.70	4.56	8.14	6.52
49	1.47	1.18	1.77	1.42	2.56	2.05	5.89	4.72	8.76	7.02
50	1.57	1.26	1.90	1.53	2.74	2.19	6.07	4.86	9.38	7.51
51	1.73	1.38	2.09	1.68	2.99	2.39	7.23	5.78	10.26	8.22
52	1.90	1.52	2.27	1.82	3.23	2.58	8.40	6.72	11.15	8.92
53	2.05	1.64	2.45	1.97	3.48	2.78	9.55	7.64	12.01	9.62
54	2.20	1.77	2.64	2.12	3.73	2.98	10.71	8.58	12.90	10.32

[†]Payable semiannually, annually, quarterly or via the monthly Electronic Funds Transfer (EFT) option as described previously.

^{††}As previously noted, member and spouse benefits under this insurance are available in \$10,000 multiples.

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Current 2023 Monthly Premium Contributions† Per \$10,000 Benefit Amount Face Amounts \$500,000 - \$999,999††

Issue Age	Male Super Preferred Nonsmoker	Male Super Preferred Nonsmoker 20% Premium Credit**	Male Preferred Nonsmoker	Male Preferred Nonsmoker 20% Premium Credit**	Male Nonsmoker	Male Nonsmoker 20% Premium Credits**	Male Preferred Smoker	Male Preferred Smoker 20% Premium Credit**	Male Smoker	Male Smoker 20% Premium Credit**
20	\$0.54	\$0.43	\$0.61	\$0.49	\$0.85	\$0.68	\$1.94	\$1.55	\$2.36	\$1.89
21	0.54	0.43	0.61	0.49	0.85	0.68	1.94	1.55	2.36	1.89
22	0.54	0.43	0.61	0.49	0.85	0.68	1.94	1.55	2.36	1.89
23	0.54	0.43	0.61	0.49	0.85	0.68	1.94	1.55	2.36	1.89
24	0.54	0.43	0.61	0.49	0.85	0.68	1.94	1.55	2.36	1.89
25	0.54	0.43	0.61	0.49	0.85	0.68	1.94	1.55	2.36	1.89
26	0.54	0.43	0.61	0.49	0.85	0.68	1.94	1.55	2.36	1.89
27	0.54	0.43	0.61	0.49	0.85	0.68	1.94	1.55	2.36	1.89
28	0.54	0.43	0.61	0.49	0.85	0.68	1.94	1.55	2.36	1.89
29	0.54	0.43	0.61	0.49	0.85	0.68	1.94	1.55	2.36	1.89
30	0.54	0.43	0.61	0.49	0.85	0.68	1.94	1.55	2.36	1.89
31	0.55	0.45	0.63	0.51	0.90	0.72	2.08	1.67	2.52	2.02
32	0.57	0.46	0.64	0.52	0.93	0.75	2.20	1.77	2.66	2.13
33	0.58	0.47	0.65	0.53	0.97	0.78	2.35	1.88	2.81	2.25
34	0.60	0.48	0.66	0.53	1.00	0.81	2.47	1.98	2.96	2.38
35	0.61	0.49	0.69	0.55	1.04	0.83	2.60	2.08	3.11	2.49
36	0.65	0.52	0.72	0.58	1.11	0.89	2.80	2.25	3.36	2.69
37	0.67	0.54	0.75	0.61	1.19	0.95	3.01	2.42	3.60	2.88
38	0.71	0.58	0.80	0.64	1.27	1.02	3.21	2.58	3.85	3.08
39	0.74	0.59	0.83	0.67	1.35	1.08	3.41	2.73	4.10	3.28
40	0.78	0.63	0.87	0.70	1.42	1.14	3.62	2.90	4.34	3.48
41	0.85	0.68	0.97	0.78	1.55	1.25	4.00	3.20	4.80	3.84
42	0.94	0.75	1.08	0.87	1.70	1.36	4.37	3.50	5.27	4.22
43	1.01	0.82	1.19	0.95	1.84	1.48	4.75	3.80	5.74	4.59
44	1.10	0.88	1.30	1.04	1.98	1.58	5.12	4.10	6.20	4.96
45	1.18	0.95	1.40	1.13	2.11	1.69	5.50	4.40	6.66	5.33
46	1.34	1.08	1.60	1.28	2.36	1.89	6.06	4.85	7.34	5.88
47	1.49	1.19	1.80	1.44	2.61	2.09	6.62	5.30	8.00	6.41
48	1.65	1.32	1.99	1.59	2.85	2.28	7.20	5.76	8.68	6.95
49	1.80	1.45	2.18	1.75	3.10	2.48	7.76	6.22	9.35	7.48
50	1.95	1.57	2.37	1.90	3.35	2.68	8.33	6.67	10.02	8.02
51	2.25	1.80	2.69	2.15	3.75	3.01	9.18	7.35	11.05	8.84
52	2.53	2.03	3.02	2.42	4.17	3.34	10.04	8.03	12.07	9.66
53	2.81	2.25	3.35	2.68	4.58	3.67	10.90	8.72	13.09	10.48
54	3.10	2.48	3.66	2.93	4.98	3.98	11.75	9.40	14.11	11.29

[†]Payable semiannually, annually, quarterly or via the monthly Electronic Funds Transfer (EFT) option as described previously.

^{††}As previously noted, member and spouse benefits under this insurance are available in \$10,000 multiples.

^{*}Male rates apply to all coverage issued to Montana residents, regardless of a person's sex.

^{**}The current premium credit is not guaranteed and subject to change, however the 20- Year Level Term Life Insurance for ACP members has returned premium credits for several years. The current annual premium for all eligible children is \$12.00 for \$5,000 of life insurance.

The cost of this life insurance is based upon the member and spouse's gender, amount of insurance requested, usage of tobacco/nicotine products, health status, and attained age on the date coverage is issued. Premium contributions will vary depending upon the options chosen.

Only non-smokers meeting the highest underwriting standards will qualify for "Super-Preferred" rates. Other non-smokers may qualify for the higher "Preferred" or "Non-Smoker" rates. (Note: Smokers may only qualify for "Preferred Smoker" or "Smoker" Rates.) Upon approval of your application, you will be notified of the rate classification for each approved person.

Current 2023 Monthly Premium Contributions† Per \$10,000 Benefit Amount Face Amounts \$500,000 - \$999,999††

Issue Age	Female* Super Preferred Nonsmoker	Female* Super Preferred Nonsmoker 20% Premium Credit**	Female* Preferred Nonsmoker	20% Premium Credit**	Female* Nonsmoker	Female* Nonsmoker 20% Premium Credit**	Female* Preferred Smoker	Female* Preferred Smoker 20% Premium Credit**	Female* Smoker	Female* Smoker 20% Premium Credit**
20	\$0.36	\$0.29	\$0.43	\$0.35	\$0.62	\$0.50	\$1.30	\$1.04	\$1.55	\$1.25
21	0.36	0.29	0.43	0.35	0.62	0.50	1.30	1.04	1.55	1.25
22	0.36	0.29	0.43	0.35	0.62	0.50	1.30	1.04	1.55	1.25
23	0.36	0.29	0.43	0.35	0.62	0.50	1.30	1.04	1.55	1.25
24	0.36	0.29	0.43	0.35	0.62	0.50	1.30	1.04	1.55	1.25
25	0.36	0.29	0.43	0.35	0.62	0.50	1.30	1.04	1.55	1.25
26	0.36	0.29	0.43	0.35	0.62	0.50	1.30	1.04	1.55	1.25
27	0.36	0.29	0.43	0.35	0.62	0.50	1.30	1.04	1.55	1.25
28	0.36	0.29	0.43	0.35	0.62	0.50	1.30	1.04	1.55	1.25
29	0.36	0.29	0.43	0.35	0.62	0.50	1.30	1.04	1.55	1.25
30	0.36	0.29	0.43	0.35	0.62	0.50	1.30	1.04	1.55	1.25
31	0.38	0.31	0.45	0.36	0.66	0.53	1.43	1.15	1.71	1.38
32	0.40	0.32	0.46	0.38	0.70	0.57	1.55	1.25	1.86	1.49
33	0.42	0.34	0.48	0.38	0.75	0.60	1.68	1.35	2.02	1.62
34	0.44	0.35	0.50	0.41	0.79	0.63	1.81	1.45	2.18	1.75
35	0.45	0.37	0.53	0.43	0.83	0.67	1.94	1.55	2.34	1.88
36	0.48	0.38	0.56	0.45	0.89	0.72	2.15	1.73	2.58	2.07
37	0.51	0.42	0.60	0.48	0.95	0.76	2.35	1.88	2.84	2.28
38	0.54	0.43	0.64	0.52	1.01	0.82	2.56	2.05	3.10	2.48
39	0.57	0.46	0.67	0.54	1.07	0.86	2.77	2.22	3.35	2.68
40	0.60	0.48	0.71	0.58	1.13	0.91	2.98	2.38	3.60	2.88
41	0.66	0.53	0.81	0.64	1.26	1.02	3.32	2.66	4.03	3.23
42	0.73	0.58	0.88	0.71	1.39	1.12	3.67	2.94	4.46	3.58
43	0.80	0.64	0.95	0.76	1.52	1.12	4.02	3.22	4.88	3.91
44	0.85	0.68	1.03	0.83	1.65	1.32	4.36	3.49	5.30	4.25
45	0.92	0.74	1.11	0.89	1.77	1.42	4.70	3.77	5.74	4.59
46	1.02	0.82	1.24	0.99	1.95	1.56	4.89	3.92	6.32	5.06
47	1.11	0.89	1.35	1.08	2.12	1.70	5.07	4.06	6.90	5.53
48	1.21	0.98	1.47	1.18	2.30	1.84	5.25	4.21	7.50	6.00
49	1.31	1.05	1.59	1.28	2.47	1.98	5.44	4.35	8.08	6.47
50	1.42	1.14	1.72	1.38	2.67	2.12	5.62	4.50	8.67	6.94
51	1.56	1.25	1.90	1.52	2.90	2.32	6.70	5.37	9.50	7.60
52	1.72	1.38	2.07	1.66	3.14	2.52	7.79	6.23	10.32	8.26
53	1.86	1.49	2.25	1.80	3.39	2.72	8.87	7.10	11.15	8.92
54	2.02	1.62	2.41	1.93	3.64	2.92	9.95	7.17	11.97	9.58

[†]Payable semiannually, annually, quarterly or via the monthly Electronic Funds Transfer (EFT) option as described previously.

^{††}As previously noted, member and spouse benefits under this insurance are available in \$10,000 multiples.

^{*}Male rates apply to all coverage issued to Montana residents, regardless of a person's sex.

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Only non-smokers meeting the highest underwriting standards will qualify for "Super-Preferred" rates. Other non-smokers may qualify for the higher "Preferred" or "Non-Smoker" rates. (Note: Smokers may only qualify for "Preferred Smoker" or "Smoker" Rates.) Upon approval of your application, you will be notified of the rate classification for each approved person.

Current 2023 Monthly Premium Contributions† Per \$10,000 Benefit Amount Face Amounts \$1,000,000 - \$2,000,000††

Issue Age	Male Super Preferred Nonsmoker	Male Super Preferred Nonsmoker 20% Premium Credit**	Male Preferred Nonsmoker	Male Preferred Nonsmoker 20% Premium Credit**	Male Nonsmoker	Male Nonsmoker 20% Premium Credit**	Male Preferred Smoker	Male Preferred Smoker 20% Premium Credit**	Male Smoker	Male Smoker 20% Premium Credit**
20	\$0.46	\$0.38	\$0.55	\$0.45	\$0.80	\$0.65	\$1.85	\$1.48	\$2.26	\$1.82
21	0.46	0.38	0.55	0.45	0.80	0.65	1.85	1.48	2.26	1.82
22	0.46	0.38	0.55	0.45	0.80	0.65	1.85	1.48	2.26	1.82
23	0.46	0.38	0.55	0.45	0.80	0.65	1.85	1.48	2.26	1.82
24	0.46	0.38	0.55	0.45	0.80	0.65	1.85	1.48	2.26	1.82
25	0.46	0.38	0.55	0.45	0.80	0.65	1.85	1.48	2.26	1.82
26	0.46	0.38	0.55	0.45	0.80	0.65	1.85	1.48	2.26	1.82
27	0.46	0.38	0.55	0.45	0.80	0.65	1.85	1.48	2.26	1.82
28	0.46	0.38	0.55	0.45	0.80	0.65	1.85	1.48	2.26	1.82
29	0.46	0.38	0.55	0.45	0.80	0.65	1.85	1.48	2.26	1.82
30	0.46	0.38	0.55	0.45	0.80	0.65	1.85	1.48	2.26	1.82
31	0.46	0.38	0.57	0.46	0.84	0.68	1.98	1.58	2.40	1.93
32	0.50	0.41	0.58	0.47	0.88	0.71	2.10	1.68	2.55	2.05
33	0.53	0.43	0.60	0.48	0.91	0.73	2.22	1.78	2.69	2.15
34	0.55	0.44	0.61	0.49	0.95	0.76	2.35	1.88	2.84	2.28
35	0.56	0.45	0.63	0.51	0.99	0.79	2.48	1.98	2.99	2.39
36	0.60	0.48	0.66	0.53	1.06	0.85	2.68	2.15	3.22	2.58
37	0.63	0.51	0.71	0.58	1.13	0.91	2.89	2.32	3.46	2.78
38	0.66	0.53	0.75	0.60	1.20	0.96	3.08	2.47	3.71	2.98
39	0.70	0.56	0.79	0.63	1.27	1.02	3.28	2.63	3.95	3.16
40	0.73	0.58	0.83	0.67	1.35	1.08	3.48	2.78	4.19	3.35
41	0.81	0.65	0.93	0.75	1.48	1.18	3.84	3.08	4.64	3.72
42	0.89	0.72	1.03	0.83	1.62	1.30	4.20	3.37	5.09	4.08
43	0.97	0.78	1.13	0.91	1.75	1.41	4.57	3.66	5.53	4.43
44	1.04	0.83	1.25	1.00	1.89	1.52	4.93	3.95	5.98	4.78
45	1.12	0.90	1.35	1.08	2.02	1.62	5.30	4.24	6.43	5.15
46	1.27	1.02	1.53	1.23	2.26	1.82	5.85	4.68	7.08	5.67
47	1.43	1.15	1.71	1.38	2.50	2.00	6.39	5.12	7.73	6.18
48	1.57	1.26	1.90	1.52	2.74	2.19	6.94	5.55	8.39	6.72
49	1.72	1.38	2.09	1.68	2.98	2.38	7.49	5.99	9.04	7.23
50	1.88	1.51	2.27	1.82	3.21	2.58	8.03	6.43	9.69	7.75
51	2.14	1.72	2.58	2.07	3.60	2.88	8.85	7.08	10.66	8.53
52	2.41	1.93	2.90	2.32	4.01	3.22	9.68	7.75	11.65	9.32
53	2.69	2.15	3.20	2.57	4.40	3.53	10.50	8.40	12.63	10.11
54	2.96	2.38	3.51	2.82	4.80	3.84	11.32	9.06	13.61	10.89

[†]Payable semiannually, annually, quarterly or via the monthly Electronic Funds Transfer (EFT) option as described previously.

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Current 2023 Monthly Premium Contributions† Per \$10,000 Benefit Amount Face Amounts \$1,000,000 - \$2,000,000††

Issue Age	Female* Super Preferred Nonsmoker	Female* Super Preferred Nonsmoker 20% Premium Credit**	Female* Preferred Nonsmoker	Female* Preferred Nonsmoker 20% Premium Credit**	Female* Nonsmoker	Female* Nonsmoker 20% Premium Credit**	Female* Preferred Smoker	Female* Preferred Smoker 20% Premium Credit**	Female* Smoker	Female* Smoker 20% Premium Credit**
20	\$0.32	\$0.26	\$0.38	\$0.31	\$0.56	\$0.45	\$1.21	\$0.98	\$1.46	\$1.18
21	0.32	0.26	0.38	0.31	0.56	0.45	1.21	0.98	1.46	1.18
22	0.32	0.26	0.38	0.31	0.56	0.45	1.21	0.98	1.46	1.18
23	0.32	0.26	0.38	0.31	0.56	0.45	1.21	0.98	1.46	1.18
24	0.32	0.26	0.38	0.31	0.56	0.45	1.21	0.98	1.46	1.18
25	0.32	0.26	0.38	0.31	0.56	0.45	1.21	0.98	1.46	1.18
26	0.32	0.26	0.38	0.31	0.56	0.45	1.21	0.98	1.46	1.18
27	0.32	0.26	0.38	0.31	0.56	0.45	1.21	0.98	1.46	1.18
28	0.32	0.26	0.38	0.31	0.56	0.45	1.21	0.98	1.46	1.18
29	0.32	0.26	0.38	0.31	0.56	0.45	1.21	0.98	1.46	1.18
30	0.32	0.26	0.38	0.31	0.56	0.45	1.21	0.98	1.46	1.18
31	0.34	0.28	0.40	0.32	0.61	0.49	1.35	1.08	1.62	1.30
32	0.35	0.28	0.42	0.34	0.65	0.52	1.46	1.18	1.77	1.42
33	0.37	0.30	0.44	0.35	0.70	0.56	1.59	1.28	1.92	1.54
34	0.39	0.32	045	0.37	0.73	0.58	1.72	1.38	2.08	1.67
35	0.41	0.33	0.47	0.38	0.76	0.62	1.84	1.48	2.22	1.78
36	0.44	0.35	0.51	0.42	0.83	0.67	2.04	1.63	2.47	1.98
37	0.47	0.38	0.55	0.44	0.89	0.72	2.25	1.80	2.72	2.18
38	0.50	0.41	0.58	0.47	0.95	0.76	2.45	1.96	2.96	2.38
39	0.53	0.43	0.62	0.50	1.00	0.81	2.65	2.12	3.21	2.58
40	0.55	0.45	0.65	0.53	1.07	0.86	2.85	2.28	3.46	2.78
41	0.62	0.50	0.74	0.59	1.19	0.95	3.19	2.55	3.88	3.11
42	0.69	0.55	0.81	0.65	1.31	1.05	3.51	2.82	4.30	3.44
43	0.74	0.59	0.90	0.72	1.44	1.15	3.85	3.08	4.70	3.77
44	0.80	0.65	0.98	0.78	1.56	1.25	4.20	3.36	5.12	4.10
45	0.85	0.68	1.05	0.85	1.68	1.35	4.54	3.63	5.53	4.43
46	0.96	0.78	1.17	0.94	1.85	1.48	4.70	3.77	6.10	4.88
47	1.05	0.85	1.28	1.03	2.02	1.62	4.89	3.92	6.66	5.33
48	1.15	0.92	1.40	1.12	2.20	1.76	5.07	4.06	7.23	5.78
49	1.25	1.00	1.52	1.22	2.36	1.89	5.25	4.21	7.79	6.23
50	1.34	1.08	1.63	1.31	2.54	2.03	5.43	4.35	8.35	6.68
51	1.48	1.18	1.80	1.45	2.77	2.22	6.48	5.18	9.15	7.33
52	1.63	1.31	1.97	1.58	3.01	2.42	7.51	6.02	9.95	7.96
53	1.77	1.42	2.13	1.71	3.25	2.61	8.55	6.84	10.74	8.59
54	1.92	1.54	2.30	1.84	3.49	2.79	9.59	7.68	11.54	9.23

[†]Payable semiannually, annually, quarterly or via the monthly Electronic Funds Transfer (EFT) option as described previously.

^{††}As previously noted, member and spouse benefits under this insurance are available in \$10,000 multiples.

^{*}Male rates apply to all coverage issued to Montana residents, regardless of a person's sex.

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