

## 2023 Legal Insurance, Long Term Disability (LTD) Insurance, and Supplemental Life Insurance Program-Deduction Codes, Premiums, and Carrier Information

There are no changes to the premiums rates. The following table shows premiums, effective January 1, 2023.

### 2023 Legal Services Insurance Plan

**Group Number:** 10202

**Org. Code:** 075-081

Party Code	Monthly Premium
Individual	\$10.19
Family	\$17.74

### Carrier Contact Information for Legal Services Insurance Plan

#### ARAG Insurance Company

500 Grand Ave, Suite 100  
Des Moines, IA 50309-9958  
Toll-free: (866) 762-0972  
Fax: (515) 246-8816  
ARAGlegal.com/SOCinfo

### 2023 LTD Insurance Program—Excluded Employees

There are no changes to the factors used to calculate the monthly premiums. The following table shows the factors used to calculate the monthly premiums, effective January 1, 2023.

**Group Number:** 643146

**Org. Code:** 075-111

**Org. Code:** 075-119

Age	075 – 111 65% Coverage	075 – 119 55% Coverage
Under Age30	0.00026	0.00012
30 – 39	0.00073	0.00037
40 – 49	0.00173	0.00087
50 – 59	0.00347	0.00175
Over 60	0.00384	0.00195

**Carrier Contact Information for LTD Insurance**

**National Accounts Services SOC Team  
Standard Insurance Company**

900 SW 5<sup>th</sup> Avenue  
Portland, OR 97204-9805  
Direct line: (971) 321-8150  
Toll-free: (888) 641-7193  
Email: [socldforms@standard.com](mailto:socldforms@standard.com)  
[standard.com/mybenefits/california](http://standard.com/mybenefits/california)

**2023 Supplemental Life Insurance Premiums – Excluded Employees**

**Org. Code:** 075-107

Employees enrolled in the state-paid basic life insurance program may apply for supplemental coverage at any time. The following table provides the monthly rates for employees and dependents for supplemental coverage, effective January 1, 2023.

**Employee Coverage**

Age	Rate per \$10,000 Coverage
Under 25	\$0.60
25-29	\$0.64
30-34	\$0.78
35-39	\$0.85
40-44	\$1.05
45-49	\$1.50
50-54	\$2.22
55-59	\$4.02
60-64	\$6.09
65-69	\$11.58
70-74	\$18.69
75 and over	\$20.75

**Dependent Coverage**

Spouse/Domestic Partner	Child(ren) Coverage	Employee Age is less than 65	Employee Age is greater than 65
\$7,500	\$7,500	\$1.85	\$7.25
\$15,000	\$7,500	\$3.71	\$14.51
\$25,000	\$7,500	\$6.18	\$24.18
\$50,000	\$7,500	\$12.35	\$48.35

Employees may obtain enrollment and premium information by contacting MetLife.

**Carrier Contact Information for Supplemental Life Insurance**

Metropolitan Life Insurance  
Policy number 74503

MetLife Customer Service  
(800) 252-8524

<https://www.metlife.com/soc/>