

# HIGGINS AUTO WRECKING

## 2021 Open Enrollment



The benefits of good hard work.<sup>SM</sup>  
**ALL BENEFITS PAID DIRECTLY TO YOU!**

Need to Enroll? Have Questions? Need to file a claim?

CA, Weekly, Per Paycheck, Non-Tobacco, AAA SAMPLE Rates

If you cannot make it onsite Call the Call Center • 866-612-0006 or  
[Click here to Schedule an appointment with your Benefit Counselor ☺](#)

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### ACCIDENT – On and Off Job with \$50 health screening & \$200 mammogram benefit

Pays for injuries such as dislocations, separations, fractures, broken bones, burns, lacerations, emergency dental work, eye injury & more.

\*see plan for coverage details\* Spouse Disability coverage available.

COVERAGE	EMPLOYEE ONLY	EMPLOYEE + SPOUSE	1-PARENT FAMILY	2-PARENT FAMILY
Preferred	\$ 5.92	\$ 8.29	\$ 8.58	\$ 10.94

### DISABILITY with \$50 health screening, \$70 cervical screening and \$200 mammogram benefits

Disabilities due to an On or Off-job injury or sickness will receive up to 45% of your monthly salary and Health Screening Benefits. Plans are offered with a 6, 12 or 24 month benefit period, with several Elimination Period options.

Sample Rates below are based on 6 Month Benefit Period, 0 Day Accident / 7 Day Sickness Elimination *\*In addition to state disability\**

AGE	\$ 500/MONTH	\$ 1,000/MONTH
17 – 49	\$ 6.60	\$ 12.56
50 – 64	\$ 8.88	\$ 17.13

### CRITICAL ILLNESS with a \$50 health screening benefit (\$70 Cervical Screening \$200 Mammography)

Pays a lump sum benefit for Cancer, Heart Attack, Stroke, End-Stage Renal Failure, Major Organ Failure, Permanent Paralysis due to a covered accident, Coma and Blindness. Coverage for subsequent diagnosis for same or different critical illness. This plan is not H S A Compliant

\*Spouse Coverage Limit is 50% / Child Coverage Limit is 25%\* Employee/Child(ren) & Employee/Spouse Rates speak with your Benefit Counselor

Age	Employee Coverage \$5K/\$10K/\$20K	Family Coverage \$5K/\$10K/\$20K	Age	Employee Coverage \$5K/\$10K/\$20K	Family Coverage \$5K/\$10K/\$20K
17-24	\$1.54/\$2.02/\$2.49/\$2.96	\$2.55/\$3.46/\$4.37/\$5.29	45-49	\$3.25/\$5.43/\$7.61/\$9.79	\$5.18/\$8.72/\$12.27/\$15.81
25-29	\$1.77/\$2.48/\$3.18/\$3.89	\$2.91/\$4.18/\$5.45/\$6.72	50-54	\$4.19/\$7.30/\$10.42/\$13.53	\$6.61/\$11.59/\$16.56/\$21.53
30-34	\$2.02/\$2.96/\$3.91/\$4.85	\$3.28/\$4.92/\$6.56/\$8.19	55-59	\$4.96/\$8.85/\$12.74/\$16.62	\$7.81/\$13.99/\$20.16/\$26.33
35-39	\$2.37/\$3.68/\$4.98/\$6.29	\$3.83/\$6.02/\$8.22/\$10.41	60-64	\$6.30/\$11.52/\$16.75/\$21.98	\$9.87/\$18.09/\$26.32/\$34.55
40-44	\$2.69/\$4.30/\$5.92/\$7.53	\$4.31/\$6.97/\$9.64/\$12.30			

### INDIVIDUAL MEDICAL BRIDGE Hospital Confinement & a \$100

Helps to off-set medical expenses when the covered person is admitted to the hospital for more than 20 hours with additional coverage for Diagnostic Test and Outpatient Surgery. \*see plan for coverage details\*

Age	Employee (EE)/ EE Spouse/ EE Child(ren)/Family In patient Coverage Limit \$1,000	Age	Employee (EE)/ EE Spouse/ EE Child(ren)/Family In patient Coverage Limit \$1,500
17-49	\$8.19 / \$15.28 / \$10.09 / \$17.19	17-49	\$9.51 / \$17.79 / \$11.87 / \$20.16
50-59	\$10.46 / \$19.59 / \$12.37 / \$21.50	50-59	\$12.27 / \$23.03 / \$14.64 / \$25.40
60-64	\$12.80 / \$24.02 / \$14.70 / \$25.92	60-64	\$15.29 / \$28.76 / \$17.65 / \$31.12
65-75	\$15.21 / \$28.61 / \$17.11 / \$30.50	65-75	\$18.53 / \$34.92 / \$20.89 / \$37.28

### WHOLE & TERM LIFE

We have both Whole Life & Individual Term Life for 10, 15, 20 or 30 year terms. There are additional riders available; Guaranteed Option to Purchase Additional Coverage, Waiver or Premium, Accident Death, Spouse and Child Term Rider as well as stand along policies for your Spouse and Children. Please set up a time with your benefit counselor to discuss the pricing.