



BCU Coverage Premiums for 2026

For PR employees. Note: Rates are per pay period unless otherwise noted.

MEDICAL, DENTAL, VISION AND RX

	MCS Plan
Employee Only	\$15.23
Employee + Child(ren)	\$31.85
Employee + Spouse/Domestic Partner	\$33.69
Family	\$48.92

HOSPITAL INDEMNITY INSURANCE

	Low Plan	High Plan
Employee Only	\$3.50	\$6.98
Employee + Child(ren)	\$5.88	\$11.76
Employee + Spouse/Domestic Partner	\$7.80	\$15.59
Family	\$9.75	\$19.50

SUPPLEMENTAL ACCIDENT INSURANCE

	Low Plan	High Plan
Employee Only	\$1.83	\$3.68
Employee + Child(ren)	\$3.84	\$7.73
Employee + Spouse/Domestic Partner	\$3.66	\$7.36
Family	\$5.67	\$11.41

CRITICAL ILLNESS INSURANCE (Monthly Rates)

	\$10,000 Benefit				\$20,000 Benefit			
Age	Employee	Employee +Spouse	Employee +Children	Family	Employee	Employee +Spouse	Employee +Children	Family
<20	\$1.55	\$2.67	\$1.55	\$2.67	\$3.10	\$5.34	\$3.10	\$5.34
20-24	\$1.95	\$3.27	\$1.95	\$3.27	\$3.90	\$6.54	\$3.90	\$6.54
25-29	\$2.51	\$4.12	\$2.51	\$4.12	\$5.02	\$8.24	\$5.02	\$8.24
30-34	\$3.26	\$5.25	\$3.26	\$5.25	\$6.52	\$10.50	\$6.52	\$10.50
35-39	\$4.44	\$7.02	\$4.44	\$7.02	\$8.88	\$14.04	\$8.88	\$14.04
40-44	\$7.03	\$11.21	\$7.03	\$11.21	\$14.06	\$22.42	\$14.06	\$22.42
45-49	\$11.73	\$18.99	\$11.73	\$18.99	\$23.46	\$37.98	\$23.46	\$37.98
50-54	\$18.28	\$29.30	\$18.28	\$29.30	\$36.56	\$58.60	\$36.56	\$58.60
55-59	\$26.66	\$42.02	\$26.66	\$42.02	\$53.32	\$84.04	\$53.32	\$84.04
60-64	\$38.27	\$60.09	\$38.27	\$60.09	\$76.54	\$120.18	\$76.54	\$120.18
65-69	\$54.32	\$85.69	\$54.32	\$85.69	\$108.64	\$171.38	\$108.64	\$171.38
70+	\$68.76	\$108.34	\$68.76	\$108.30	\$137.52	\$216.68	\$137.52	\$216.68

LONG-TERM DISABILITY ENHANCED INSURANCE (Monthly Rates)

\$0.140 per \$100 covered payroll

SUPPLEMENTAL AD&D

	Monthly Rates per \$1,000 of Coverage
Employee Only	\$0.012
Family	\$0.028

SUPPLEMENTAL LIFE INSURANCE

EMPLOYEE COVERAGE		DEPENDENT SPOUSE LIFE COVERAGE		DEPENDENT CHILD COVERAGE	
Current age	Monthly Rates per \$1,000 of Coverage	Current age	Monthly Rates per \$1,000 of Coverage	Current age	Monthly Rates per \$1,000 of Coverage
<20-29	\$0.025	<20-24	\$0.050		\$0.187
30-24	\$0.033	25-29	\$0.058		
35-39	\$0.040	30-34	\$0.072		
40-44	\$0.063	35-39	\$0.087		
45-49	\$0.080	40-44	\$0.100		
50-54	\$0.150	45-49	\$0.150		
55-59	\$0.258	50-54	\$0.230		
60-64	\$0.408	55-59	\$0.430		
65-69	\$0.565	60-64	\$0.660		
70-99	\$1.207	65-69	\$1.200		
		70-99	\$2.060		

IDENTITY THEFT PROTECTION

	Protection Plus
Employee Only	\$5.05
Family	\$7.82

LEGAL SERVICES

\$7.62 per pay period

WHOLE LIFE WITH LONG TERM CARE INSURANCE

For more information about cost and how to enroll, please visit bcubenefits.com under Protection.