BCU Coverage Premiums for 2027

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

MEDICAL AND RX

	PPO Plan	HDHP
Employee Only	$84.18	$62.56
Employee + Child(ren)	$203.30	$154.56
Employee + Spouse/Domestic Partner	$212.98	$161.92
Family	$309.78	$235.52

DENTAL

	Basic Plan	Enhanced Plan	DHMO
Employee Only	$5.10	$7.19	$6.46
Employee + Child(ren)	$10.71	$15.09	$13.92
Employee + Spouse/Domestic Partner	$11.22	$15.81	$12.26
Family	$16.32	$22.99	$20.77

VISION

	PPO Plan
Employee Only	$3.46
Employee + Child(ren)	$6.57
Employee + Spouse/Domestic Partner	$6.92
Family	$10.17

SUPPLEMENTAL LIFE INSURANCE

EMPLOYEE COVERAGE	
Current age	Monthly Rates per $1,000 of Coverage
<20-29	$0.025
30-34	$0.033
35-39	$0.040
40-44	$0.063
45-49	$0.080
50-54	$0.150
55-59	$0.258
60-64	$0.408
65-69	$0.565
70-99	$1.207

DEPENDENT SPOUSE LIFE COVERAGE	
Current age	Monthly Rates per $1,000 of Coverage
<20-24	$0.050
25-29	$0.058
30-34	$0.072
35-39	$0.087
40-44	$0.100
45-49	$0.150
50-54	$0.230
55-59	$0.430
60-64	$0.660
65-69	$1.200
70-99	$2.060

DEPENDENT CHILD COVERAGE	
Current age	Monthly Rates per $1,000 of Coverage
	$0.187

SUPPLEMENTAL AD&D

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

LONG-TERM DISABILITY ENHANCED INSURANCE (Monthly Rates)

$0.140 per $100 covered payroll

HOSPITAL INDEMNITY INSURANCE

	Low Plan	High Plan
Employee Only	$3.14	$6.29
Employee + Child(ren)	$7.02	$14.03
Employee + Spouse/Domestic Partner	$5.29	$10.59
Family	$8.78	$17.55

SUPPLEMENTAL ACCIDENT INSURANCE

Low Plan	High Plan
$1.65	$3.31
$3.30	$6.72
$3.46	$6.96
$5.10	$10.22

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	$1.40	$2.40	$1.40	$2.40	$2.79	$4.81	$2.79	$4.81
20-24	$1.76	$2.94	$1.76	$2.94	$3.51	$5.89	$3.51	$5.89
25-29	$2.26	$3.71	$2.26	$3.71	$4.52	$7.42	$4.52	$7.42
30-34	$2.93	$4.73	$2.93	$4.73	$5.87	$9.45	$5.87	$9.45
35-39	$4.00	$6.32	$4.00	$6.32	$7.99	$12.64	$7.99	$12.64
40-44	$6.33	$10.09	$6.33	$10.09	$12.65	$20.18	$12.65	$20.18
45-49	$10.56	$17.09	$10.56	$17.09	$21.11	$34.18	$21.11	$34.18
50-54	$16.45	$26.37	$16.45	$26.37	$32.90	$52.74	$32.90	$52.74
55-59	$23.99	$37.82	$23.99	$37.82	$47.99	$75.64	$47.99	$75.64
60-64	$34.44	$54.08	$34.44	$54.08	$68.89	$108.16	$68.89	$108.16
65-69	$48.89	$77.12	$48.89	$77.12	$97.78	$154.24	$97.78	$154.24
70+	$61.88	$97.51	$61.88	$97.51	$123.77	$195.01	$123.77	$195.01

IDENTITY THEFT PROTECTION

	Protection Plus
Employee Only	$5.05
Family	$7.82

LEGAL SERVICES

$7.62 per pay period

PET INSURANCE

See further information based on the pet(s) you elect to cover. Available at any time on BenefitHub, at https://bcu.benefithub.com/.

WHOLE LIFE WITH LONG TERM CARE INSURANCE

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

BCU charges a $125 per month surcharge to employees that elect to cover spouses who are eligible for group medical coverage through their own employer, or to spouses that are retired and have access to a health plan through their previous employer or retirement plan. The surcharge does not affect spouses who are not working or who are not offered group health insurance by their employers. Please refer to bcubenefits.com for further details.