bcu

BCU Coverage Premiums for 2025 For PR employees. Note: Rates are per month.

MEDICAL, DENTAL, VISION AND RX

	MCS Plan
Employee Only	\$30.00
Employee + Child(ren)	\$63.00
Employee + Spouse/Domestic Partner	\$66.00
Family	\$96.00

HOSPITAL INDEMNITY INSURANCE

	Low Plan	High Plan
Employee Only	\$7.56	\$15.13
Employee + Child(ren)	\$12.74	\$25.49
Employee + Spouse/Domestic Partner	\$16.89	\$33.78
Family	\$21.13	\$42.26

SUPPLEMENTAL ACCIDENT INSURANCE

Low Plan	High Plan
\$3.97	\$7.98
\$8.33	\$16.75
\$7.93	\$15.95
\$12.29	\$24.72

CRITICAL ILLNESS INSURANCE

\$10,000 Benefit				\$20,000	Benefit			
Age	Employee	Employee +Spouse	Employee +Children	Family	Employe e	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

\$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		
Monthly Rates per		
\$1,000 of Coverage		
\$0.025		
\$0.033		
\$0.040		
\$0.063		
\$0.080		
\$0.150		
\$0.258		
\$0.408		
\$0.565		
\$1.207		
	Monthly Rates per \$1,000 of Coverage \$0.025 \$0.033 \$0.040 \$0.063 \$0.080 \$0.150 \$0.258 \$0.408 \$0.408 \$0.565	

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	

IDENTITY THEFT PROTECTION

	Protection Plus
Employee Only	\$10.95
Family	\$16.95

LEGAL SERVICES

\$16.50 per month

WHOLE LIFE WITH LONG TERM CARE INSURANCE

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