

2025 Monthly Voluntary Benefit Premiums

SCA/CBA/DBA



Prudential - Voluntary Life (Employee or Spouse) (Post Tax Deduction)			
AGE (BASED ON EMPLOYEE'S AGE AS OF JAN 1)	MONTHLY RATE PER \$1,000 OF COVERAGE	PREMIUM CALCULATION EXAMPLE	
<25	\$0.05	1. RATE FROM TABLE (I.E., AGE 30-34)	\$0.08
25-29	\$0.06		
30-34	\$0.08		
35-39	\$0.09		
40-44	\$0.12	2. COVERAGE AMOUNT DIVIDED BY \$1,000 (\$120,000)	120
45-49	\$0.21		
50-54	\$0.35		
55-59	\$0.57		
60-64	\$0.77	3. MONTHLY PREMIUM (1) X (2)	\$9.60
65-69	\$1.27		
70-74	\$2.06		
75+	\$2.06		

Prudential - Voluntary AD&D (Employee or Spouse) (Post Tax Deduction)	Prudential - Voluntary Child Life (Post Tax Deduction)
MONTHLY RATE PER \$1,000 OF COVERAGE	MONTHLY RATE PER \$1,000 OF COVERAGE
\$0.019	\$0.086

Prudential - Long Term Disability (Post Tax Deduction)	
AGE (BASED ON EMPLOYEE'S AGE AS OF JAN 1)	MONTHLY RATE PER \$100 OF PAYROLL
<25	\$0.161
25-29	\$0.221
30-34	\$0.330
35-39	\$0.459
40-44	\$0.614
45-49	\$0.834
50-54	\$1.060
55-59	\$1.304
60-64	\$1.366
65-69	\$1.426
70-74	\$1.426
75+	\$1.426

TRICARE Supplement (Pre Tax Deduction)	
Coverage Tier	Employee Cost
Employee Only	\$67.50
Employee + One	\$132.50
Employee + Family	\$178.50

Norton LifeLock - ID Theft Protection (Post Tax Deduction)	
Coverage Tier	Employee Cost
Employee Only	Essential Plan \$6.99
	Premier \$11.49
Employee & Family	Essential Plan \$13.98
	Premier \$22.98

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SCA/CBA/DBA (Continued)



MetLife Legal (Post Tax Deduction)	
Employee	\$16.50
Plus Parents	\$21.00

Pet Insurance (Post Tax Deduction)	
Rates vary	

Farmer's Auto & Home Insurance (Post Tax Deduction)	
Rates vary	

BASIC LIFE & AD&D & Short-Term Disability *		
Basic Life	\$0.0510 Per \$1,000 Benefit	May be subject to H&W or Payroll deduction*
Basic AD&D	\$0.0150 Per \$1,000 Benefit	May be subject to H&W or Payroll deduction*
Short-Term Disability	\$0.5400 Per \$10 Benefit	May be subject to H&W or Payroll deduction*

*may vary per Contract/CBA

Prudential - Hospital Indemnity (Post-Tax Deduction)			
Tier/Plan Option	Low Plan	Medium Plan	High Plan
Employee Only	\$9.20	\$15.97	\$26.15
Employee + Spouse	\$19.51	\$33.72	\$54.99
Employee + Child(ren)	\$13.24	\$22.90	\$36.95
Family	\$24.53	\$42.33	\$68.40

Prudential - Accident Insurance (Post-Tax Deduction)			
Tier/Plan Option	Low Plan	Medium Plan	High Plan
Employee Only	\$4.16	\$5.16	\$7.18
Employee + Spouse	\$6.20	\$7.72	\$10.76
Employee + Children	\$8.50	\$10.06	\$13.26
Employee + Family	\$11.37	\$13.65	\$18.27

Prudential - Critical Illness (Post-Tax Deduction)			
Employee Attained Age	Monthly Rate per \$1,000 of Coverage		
	Employee	Spouse	Child(ren)
<25	\$0.16	\$0.08	\$0.04
25-29	\$0.21	\$0.11	
30-34	\$0.30	\$0.16	
35-39	\$0.49	\$0.26	
40-44	\$0.81	\$0.44	
45-49	\$1.23	\$0.67	
50-54	\$1.85	\$0.99	
55-59	\$2.67	\$1.43	
60-64	\$3.82	\$2.06	
65-69	\$5.49	\$2.98	
70-74	\$7.25	\$3.97	
75-79	\$9.41	\$5.18	
80-84	\$12.86	\$6.92	
85+	\$18.32	\$9.98	