

Voluntary Benefits

January 1, 2024 - December 31, 2024



Accident

Employee Premium Deduction

	26 Pay	20 Pay
Employee	\$ 3.85	\$ 5.00
Employee/Child(ren)	\$ 9.47	\$ 12.31
Employee/Spouse	\$ 7.10	\$ 9.23
Employee/Family	\$ 12.72	\$ 16.54

Critical Illness

Employee Benefit Amount: Choice of \$10,000, \$20,000, or \$30,000

Spouse: Coverage mirrors employee election. Rate follows employee age and tobacco status.

Child: Coverage mirrors employee election, but at 25% of the employee benefit. No cost for child(ren).

Per-Pay Premium - Per \$1,000 of Coverage

Age Bracket	Non-Tobacco		Tobacco	
	26 Pay	20 Pay	26 Pay	20 Pay
Under 30	\$ 0.106	\$ 0.138	\$ 0.148	\$ 0.192
30-39	\$ 0.166	\$ 0.216	\$ 0.263	\$ 0.342
40-49	\$ 0.258	\$ 0.336	\$ 0.494	\$ 0.642
50-59	\$ 0.365	\$ 0.474	\$ 0.863	\$ 1.122
60-69	\$ 0.563	\$ 0.732	\$ 1.490	\$ 1.938
70+	\$ 1.048	\$ 1.362	\$ 2.945	\$ 3.828

Hospital Indemnity

Employee Premium Deduction

	26 Pay	20 Pay
Employee	\$ 4.71	\$ 6.12
Employee/Child(ren)	\$ 7.78	\$ 10.11
Employee/Spouse	\$ 9.27	\$ 12.05
Employee/Family	\$ 12.34	\$ 16.04

**Your share of the benefit costs will be deducted from your pay in equal amounts in the applicable pay periods in a program year. The College does not prorate benefit deductions.*