

Critical Illness Coverage Premium Rates

The below premium charts have been created utilizing the rate information provided in the Mountaineer Flexible Benefits 2025 Shopper’s Guide, which details the rate per \$1,000 of coverage.

Employee Critical Illness Coverage

You can elect coverage for yourself in \$10,000 increments at levels between \$10,000 and \$50,000.

Rates Per Pay Period for 9 Month Faculty (18 pay periods per year)					
Employee Coverage Rates based on Age	Rate for \$10,000 Coverage	Rate for \$20,000 Coverage	Rate for \$30,000 Coverage	Rate for \$40,000 Coverage	Rate for \$50,000 Coverage
18-29	\$1.67	\$3.33	\$5.00	\$6.67	\$8.33
30-39	\$3.00	\$6.00	\$9.00	\$12.00	\$15.00
40-49	\$6.07	\$12.13	\$18.20	\$24.27	\$30.33
50-59	\$12.13	\$24.27	\$36.40	\$48.53	\$60.67
60-69	\$20.07	\$20.07	\$60.20	\$80.27	\$100.33
70+	\$33.93	\$67.87	\$101.80	\$135.73	\$169.67

Rates per Pay Period for 12 Month Faculty and Staff (24 pay periods per year)					
Employee Coverage Rates based on Age	Rate for \$10,000 Coverage	Rate for \$20,000 Coverage	Rate for \$30,000 Coverage	Rate for \$40,000 Coverage	Rate for \$50,000 Coverage
18-29	\$1.25	\$2.50	\$3.75	\$5.00	\$6.25
30-39	\$2.25	\$4.50	\$6.75	\$9.00	\$11.25
40-49	\$4.55	\$9.10	\$13.65	\$18.20	\$22.75
50-59	\$9.10	\$18.20	\$27.30	\$36.40	\$45.50
60-69	\$15.05	\$30.10	\$45.15	\$60.20	\$75.25
70+	\$25.45	\$50.90	\$76.35	\$101.80	\$127.25

Spousal Critical Illness Coverage

IF you elect coverage for yourself, you can elect coverage for your spouse in \$10,000 increments at levels between \$10,000 and \$50,000, NOT to exceed 100% of your coverage amount. For example, if you choose a \$20,000 level for yourself, you may not go above \$20,000 for your spouse.

Rates Per Pay Period for 9 Month Faculty (18 pay periods per year)

Spousal Coverage Rates based on Age	Rate for \$10,000 Coverage	Rate for \$20,000 Coverage	Rate for \$30,000 Coverage	Rate for \$40,000 Coverage	Rate for \$50,000 Coverage
18-29	\$1.67	\$3.33	\$5.00	\$6.67	\$8.33
30-39	\$3.00	\$6.00	\$9.00	\$12.00	\$15.00
40-49	\$6.07	\$12.13	\$18.20	\$24.27	\$30.33
50-59	\$12.13	\$24.27	\$36.40	\$48.53	\$60.67
60-69	\$20.07	\$20.07	\$60.20	\$80.27	\$100.33
70+	\$33.93	\$67.87	\$101.80	\$135.73	\$169.67

Rates per Pay Period for 12 Month Faculty and Staff (24 pay periods per year)

Spousal Coverage Rates based on Age	Rate for \$10,000 Coverage	Rate for \$20,000 Coverage	Rate for \$30,000 Coverage	Rate for \$40,000 Coverage	Rate for \$50,000 Coverage
18-29	\$1.25	\$2.50	\$3.75	\$5.00	\$6.25
30-39	\$2.25	\$4.50	\$6.75	\$9.00	\$11.25
40-49	\$4.55	\$9.10	\$13.65	\$18.20	\$22.75
50-59	\$9.10	\$18.20	\$27.30	\$36.40	\$45.50
60-69	\$15.05	\$30.10	\$45.15	\$60.20	\$75.25
70+	\$25.45	\$50.90	\$76.35	\$101.80	\$127.25

Critical Illness Coverage for Dependent Children

IF you elect coverage for yourself, you can elect coverage for each of your dependent children in \$1,000 increments at levels ranging from \$2,000-\$25,000 NOT to exceed 50% of your coverage amount. For example, if you choose a \$20,000 level for yourself, you may not go above \$10,000 for your child.

Coverage Rates Per Child

Coverage Level	\$2,000.00	\$3,000.00	\$4,000.00	\$5,000.00	\$6,000.00	\$7,000.00	\$8,000.00	\$9,000.00	\$10,000.00	\$11,000.00	\$12,000.00	\$13,000.00
Rates	\$0.05	\$0.08	\$0.11	\$0.13	\$0.16	\$0.19	\$0.21	\$0.24	\$0.27	\$0.29	\$0.32	\$0.35

Coverage Level	\$14,000.00	\$15,000.00	\$16,000.00	\$17,000.00	\$18,000.00	\$19,000.00	\$20,000.00	\$21,000.00	\$22,000.00	\$23,000.00	\$24,000.00	\$25,000.00
Rates	\$0.37	\$0.40	\$0.43	\$0.45	\$0.48	\$0.51	\$0.53	\$0.56	\$0.59	\$0.61	\$0.64	\$0.67