

## McHenry County Department of Human Resources

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## **Benefit Insurance Rate Sheet**

Voluntary Plan - Critical Illness

Rates Effective: January 1, 2026 - December 31, 2026

			\$10,000.00											
\$10,000		Based on 26 Pay Periods	Under 25	25 - 29	30 - 34	35 - 39	40 - 44	45 - 49	50 -54	55 - 599	60 - 64	65 - 69	70++	
	Member Only	Per Payroll	\$0.72	\$1.09	\$1.62	\$1.98	\$2.29	\$3.03	\$4.46	\$6.30	\$9.05	\$12.17	\$17.72	
	Member + Spouse	Per Payroll	\$1.18	\$1.79	\$2.63	\$3.17	\$3.61	\$4.62	\$6.64	\$9.22	\$13.09	\$17.53	\$25.47	
	Member + Child(ren)	Per Payroll	\$1.42	\$1.80	\$2.33	\$2.68	\$3.00	\$3.73	\$5.17	\$7.00	\$9.75	\$12.87	\$18.42	
	Family (member, spouse, and	Per Payroll children)	\$2.05	\$2.65	\$3.49	\$4.03	\$4.48	\$5.49	\$7.50	\$10.08	\$13.96	\$18.39	\$26.34	

			\$20,000.00											
\$20,000		Based on 26 Pay Periods	Under 25	25 - 29	30 - 34	35 - 39	40 - 44	45 - 49	50 -54	55 - 599	60 - 64	65 - 69	70++	
	Member Only	Per Payroll	\$1.20	\$1.96	\$3.01	\$3.72	\$4.35	\$5.82	\$8.70	\$12.37	\$17.87	\$24.11	\$35.22	
	Member + Spouse	Per Payroll	\$1.91	\$3.12	\$4.79	\$5.88	\$6.76	\$8.80	\$12.83	\$17.98	\$25.73	\$34.60	\$50.49	
	Member + Child(ren)	Per Payroll	\$2.33	\$3.07	\$4.14	\$4.85	\$5.47	\$6.95	\$9.82	\$13.49	\$18.99	\$25.23	\$36.34	
	Family (member, spouse, and	Per Payroll children)	\$3.29	\$4.50	\$6.18	\$7.26	\$8.14	\$10.18	\$14.21	\$19.36	\$27.11	\$35.98	\$51.87	

			\$30,000.00											
\$30,000		ed on 26 Periods	Under 25	25 - 29	30 - 34	35 - 39	40 - 44	45 - 49	50 -54	55 - 599	60 - 64	65 - 69	70++	
	Member Only Per P	Payroll	\$1.69	\$2.82	\$4.41	\$5.47	\$6.42	\$8.63	\$12.94	\$18.44	\$26.69	\$36.05	\$52.71	
	Member + Spouse Per P	Payroll	\$2.64	\$4.45	\$6.96	\$8.60	\$9.91	\$12.98	\$19.01	\$26.74	\$38.37	\$51.67	\$75.50	
	Member + Child(ren) Per P	Payroll	\$3.23	\$4.36	\$5.95	\$7.01	\$7.95	\$10.17	\$14.46	\$19.98	\$28.22	\$37.58	\$54.25	
	Family Per P (member, spouse, and children	Payroll en)	\$4.53	\$6.35	\$8.86	\$10.49	\$11.81	\$14.87	\$20.90	\$28.63	\$40.26	\$53.57	\$77.40	