2026 Benefit Rates



(20 pay periods per year)

(20 pay periods per year							
Medical - Classic	Total	ASU	Employee	Medical - Premier	Total	ASU	Employee
Employee only	\$438.00	\$366.00		Employee only	\$452.40	\$366.00	\$86.40
Employee + Spouse	\$864.60	\$582.60		Employee + Spouse	\$891.00	\$582.60	\$308.40
Employee + Child(ren) Family	\$681.60 \$1,086.00	\$469.20 \$774.00	\$212.40 \$312.00	Employee + Child(ren) Family	\$703.20 \$1,120.20	\$469.20 \$771.60	\$234.00 \$348.60
Medical - Health Savings Plan	Total	ASU	Employee	, within	Ÿ1,12U.2U	72.00	Ç3.3.00
Employee only	\$395.40	\$364.20	\$31.20				
Employee + Spouse	\$783.60	\$588.60	\$195.00				
Employee + Child(ren)	\$618.00	\$466.80	\$151.20				
Family	\$985.20	\$778.20	\$207.00				
Dental - Low			Employee	Dental -High			Employee
Employee only				Employee only			\$27.79
Employee + Spouse				Employee + Spouse			\$58.07
Employee + Child(ren)				Employee + Child(ren)			\$55.81
Family			\$56.02	Family			\$87.13
Life/AD&D Insurance		ASU		Vision			Employee
Per \$1,000 of annual salary Maximum Coverage 1.5 x annual	calanı mavimu	\$0.15		Employee only			\$4.88 \$9.07
Waximum coverage 1.5 x annuar	salary, maxima	111 230,000		Employee + Spouse Employee + Child(ren)			\$9.25
				Family			\$14.02
Employee Optional Life ¹			Employee	Spouse Optional Life			Employee
Your Current Age (Rates per \$25,	000 of coverage)	p.o,ee	Employee's Current Age (R	Rates per \$5.000 o	f	p.io y e e
less than 30	, coverage	,	\$1.14	. ,		,	\$0.23
30 but less than 35				30 but less than 35			\$0.26
35 but less than 40			\$1.66	35 but less than 40			\$0.34
40 but less than 45				40 but less than 45			\$0.49
45 but less than 50				45 but less than 50			\$0.79
50 but less than 55				50 but less than 55			\$1.27
55 but less than 60 60 but less than 65				55 but less than 60 60 but less than 65			\$1.99 \$3.06
65 and over contact HR for rates	and coverage le	vel	\$15.50	Must purchase Optional Lij	fe to nurchase Sno	ouse Life.	\$5.00
Basic Dependent Life	and coverage is	ASU		Optional Child Life	re to parenase spe	ruse Lije.	Employee
Per Covered employee		\$0.34		\$5,000			\$0.60
(\$2,000 per eligible dependent)		Ş0.5 4		\$10,000			\$1.20
Optional AD&D Insurance			Employee	Optional AD&D Insurance		Fm	ployee
Employee Only		_		Family			\$0.96
(Per \$25,000 of Coverage)			,	(Per \$25,000 Employee/\$1	2,500 Spouse/\$2,	500 Child)	7
Short Term Disability (STD) ²				Short Term Disability (STD		,	
Per \$150 of coverage – 14 day el	mination	Ei	mployee	Per \$150 of coverage – 7 a	lav elimination		Employee
less than 25			\$3.67		,		\$4.18
25 but less than 30				25 but less than 30			\$4.10
30 but less than 35				30 but less than 35			\$4.39
35 but less than 45			\$4.46	35 but less than 45			\$4.97
45 but less than 50				45 but less than 50			\$5.90
50 but less than 55				50 but less than 55			\$6.98
55 but less than 60				55 but less than 60			\$8.35
60 but less than 65 over 65			\$9.86 \$0.00	60 but less than 65 over 65			\$11.02 \$0.00
Critical Care Insurance - Employe	o and Child(rer	-)	30.00	Spouse Critical Care Insura	ance (50% of FE co	verage)	\$0.00
			Employee		ance (50% of EE co	overage	Employee
Your Current Age (Rates per \$10,	000 of coverag	e)	***	Employee's Current Age			**
less than 25				less than 25			\$3.55
25 but less than 30 30 but less than 35				25 but less than 30 30 but less than 35			\$4.18 \$4.99
35 but less than 40				35 but less than 40			\$6.25
40 but less than 45				40 but less than 45			\$8.05
45 but less than 50				45 but less than 50			\$10.57
50 but less than 55			\$8.84	50 but less than 55			\$13.81
55 but less than 60				55 but less than 60			\$18.58
60 but less than 65				60 but less than 65			\$25.87
65 but less than 70				65 but less than 70			\$37.21
70				70 but less than 75			\$56.38 \$70.33
70 but less than 75			Ş40.5Z	75 and over Employee must purchase (Critical Illness to n	urchase snows	\$70.33
75 and over	onthly salary			= - monovee must pulchase t	Littical IIII1ESS tO P	urchase spouse	. coverage. spouse
75 and over Long Term Disability – 60% of m		ASIL -	mnlovee		ree henefit		
75 and over Long Term Disability – 60% of m \$370,000 Maximum Salary	Total		mployee	coverage is 50% of employ	ree benefit.		
75 and over Long Term Disability – 60% of m \$370,000 Maximum Salary Per \$100 of monthly salary		ASU E 1 \$0.13	\$0.00	coverage is 50% of employ	ree benefit.		Employee
75 and over Long Term Disability – 60% of m \$370,000 Maximum Salary Per \$100 of monthly salary Accident Insurance	Total		\$0.00 Employee	coverage is 50% of employ Other Benefits		irc	Employee
75 and over Long Term Disability – 60% of m \$370,000 Maximum Salary Per \$100 of monthly salary Accident Insurance Employee only	Total		\$0.00 Employee \$5.48	coverage is 50% of employ Other Benefits Cancer Insurance – 3 levels	s offered plus ride		Employee
75 and over Long Term Disability – 60% of m \$370,000 Maximum Salary Per \$100 of monthly salary Accident Insurance	Total		\$0.00 Employee \$5.48	coverage is 50% of employ Other Benefits Cancer Insurance – 3 levels Rates without riders range	s offered plus ride		Employee

additional increments of \$50 to a maximum of \$600 per week, limited to 66% of your weekly salary. Rates will increase as you move to a new age tier. Please refer to your summary plan descriptions for eligibility and coverage.
Prepared by ASU System Office 11/18/2025