



The Hartford Active Employee Rates – Active as of 1/1/2021

Coverage	Rate			
Critical Illness Insurance	Plan 1: Monthly Rates for \$10,000 Benefit			
Age Range	EE only	EE+SP	EE+CH	Family
18-24	\$0.90	\$1.30	\$1.40	\$1.90
25-29	\$1.00	\$1.50	\$1.50	\$2.00
30-34	\$1.60	\$2.40	\$2.10	\$2.90
35-39	\$2.50	\$3.80	\$3.10	\$4.40
40-44	\$4.10	\$6.30	\$4.70	\$6.90
45-49	\$6.70	\$10.00	\$7.10	\$10.50
50-54	\$10.00	\$15.10	\$10.30	\$15.50
55-59	\$14.40	\$21.70	\$14.50	\$22.10
60-64	\$21.10	\$31.90	\$21.00	\$32.10
65-69	\$32.20	\$48.90	\$31.80	\$48.90
70-74	\$49.10	\$74.40	\$48.40	\$74.00
75-79	\$49.10	\$74.40	\$48.40	\$74.00
>80	\$52.50	\$80.20	\$53.00	\$80.70

Coverage	Rate			
Critical Illness Insurance	Plan 2: Monthly Rates for \$20,000 Benefit			
Age Range	EE only	EE+SP	EE+CH	Family
18-24	\$1.80	\$2.60	\$2.80	\$3.80
25-29	\$2.00	\$3.00	\$3.00	\$4.00
30-34	\$3.20	\$4.80	\$4.20	\$5.80
35-39	\$5.00	\$7.60	\$6.20	\$8.80
40-44	\$8.20	\$12.60	\$9.40	\$13.80
45-49	\$13.40	\$20.00	\$14.20	\$21.00
50-54	\$20.00	\$30.20	\$20.60	\$31.00
55-59	\$28.80	\$43.40	\$29.00	\$44.20
60-64	\$42.20	\$63.80	\$42.00	\$64.20
65-69	\$64.40	\$97.80	\$63.60	\$97.80
70-74	\$98.20	\$148.80	\$96.80	\$148.00
75-79	\$98.20	\$148.80	\$96.80	\$148.00
>80	\$105.00	\$160.40	\$106.00	\$161.40

Coverage	Rate	
Accident Insurance		
Employee	\$5.17	Monthly Rate
Employee & Spouse	\$8.11	
Employee & Child(ren)	\$8.62	
Employee & Family	\$13.58	

Coverage	Rate	Rate	
Hospital Indemnity Insurance	Plan 1	Plan 2	
Employee	\$7.56	\$15.12	Monthly Rate
Employee & Spouse	\$15.64	\$31.28	
Employee & Child(ren)	\$14.42	\$28.83	
Employee & Family	\$23.53	\$47.07	