

LIFE INSURANCE RATES: ACTIVES AND RETIREES

PEIA offers basic and optional decreasing term life insurance.

Basic life insurance premiums for active employees are paid by the employer. Retirees pay the monthly premium listed below for their basic life insurance. We've provided these rates for informational purposes only.

Dependent life insurance premiums are paid by the active or retired policyholder. The rates are listed below for your information

Optional life insurance premiums are paid by the active or retired policyholder. The rates are listed on the preceding pages.

Remember, you can view and/or change your current coverages by visiting peia.wv.gov, logging in to “**Manage My Benefits**” and following the instructions on the screen. Some limitations may apply.

For a complete description of the life insurance benefits, please see the Group Term Life Certificate of Insurance.

Retired Employee's Basic Life Insurance Rates Retired Employee's Basic Life Monthly Premium	
Under age 67 (\$5,000)	\$11.14
Age 67 and over (\$2,500)	\$5.56

Active Employee's Basic Life and AD&D Insurance Rates		
Age	Amount of Coverage	Monthly Premium
Under age 65	\$10,000	\$1.76
Ages 65-69	\$6,500	\$1.14
Age 70 and above	\$5,000	\$0.88

Retired Employee Dependent Life Insurance Monthly Premiums	
Plan 1 (\$5,000 Spouse/\$2,000 child)	\$8.42
Plan 2 (\$10,000 Spouse/\$4,000 child)	\$16.80
Plan 3 (\$15,000 Spouse/\$7,500 child)	\$25.28
Plan 4 (\$20,000 Spouse/\$10,000 child)	\$33.70
Plan 5 (\$40,000 Spouse/\$15,000 child)	\$67.40

Active Employee Dependent Life and AD&D Insurance Monthly Premiums	
Plan 1 (\$5,000 Spouse/\$2,000 child)	\$2.46
Plan 2 (\$10,000 Spouse/\$4,000 child)	\$4.92
Plan 3 (\$15,000 Spouse/\$7,500 child)	\$7.36
Plan 4 (\$20,000 Spouse/\$10,000 child)	\$9.82
Plan 5 (\$40,000 Spouse/\$15,000 child)	\$19.64



Be there for your loved ones with life insurance coverage from MetLife.

WV PEIA has chosen MetLife to be your life insurance provider effective July 1, 2022. Optional life insurance is a simple, affordable way to help protect your loved ones and the future you've worked hard to build. If you are currently enrolled, you can increase your optional life insurance by following the instructions to the right starting July 1, 2022.



63% of employees worry about the financial security of their loved ones in the event of premature death.¹

Scan now to learn more about your coverage options or visit metlife.com/WV-PEIA/.



Enrollment Made Easy:

- Choose the right coverage amount for you and your family.
- Answer some health questions.
- Receive a decision online.²

Keep in mind: Insurance needs may increase as your life changes — for example, getting married, starting a family, or purchasing a home.

1. MetLife 19th Annual U.S. Employee Benefit Trends Study 2021.

2. All applications for coverage are subject to review and approval by MetLife. If you choose to apply for increased coverage, the increase may be subject to underwriting. MetLife will review your information and evaluate your request for coverage based upon your answers to the health questions, MetLife's underwriting rules and other information you authorize us to review. In certain cases, MetLife may request additional information to evaluate your request for coverage.

MetLife Group Term Life and AD&D insurance is issued by Metropolitan Life Insurance Company, 200 Park Avenue, New York, NY 10166 under Policy Form GPN99/G2130-S.

Nothing in these materials is intended to be advice for any particular situation or individual.

Like most group insurance policies, MetLife group life insurance policies contain certain exclusions, limitations and requirements for maintaining coverage in force. Any such exclusions, limitations and requirements will be described in the life insurance certificate.

ACTIVE EMPLOYEE'S OPTIONAL LIFE AND AD&D INSURANCE: TOBACCO-FREE

The Tobacco-free rates are charged to those who have submitted an affidavit stating that the policyholder does not use tobacco. To update your tobacco status, go to the web site, peia.wv.gov, and log into "Manage My Benefits" or call PEIA at 1-888-680-7342.

Age	Plan 1		Plan 2		Plan 3		Plan 4	
	Amount of Coverage	Monthly Premium	Amount of Coverage	Monthly Premium	Amount of Coverage	Monthly Premium	Amount of Coverage	Monthly Premium
Under 30	\$5,000	\$0.30	\$10,000	\$0.60	\$20,000	\$1.18	\$30,000	\$1.78
30-34	\$5,000	\$0.30	\$10,000	\$0.60	\$20,000	\$1.18	\$30,000	\$1.78
35-39	\$5,000	\$0.40	\$10,000	\$0.80	\$20,000	\$1.58	\$30,000	\$2.38
40-44	\$5,000	\$0.40	\$10,000	\$0.80	\$20,000	\$1.58	\$30,000	\$2.38
45-49	\$5,000	\$0.50	\$10,000	\$1.00	\$20,000	\$1.98	\$30,000	\$2.98
50-54	\$5,000	\$0.60	\$10,000	\$1.20	\$20,000	\$2.38	\$30,000	\$3.58
55-59	\$5,000	\$1.28	\$10,000	\$2.58	\$20,000	\$5.14	\$30,000	\$7.72
60-64	\$5,000	\$2.08	\$10,000	\$4.14	\$20,000	\$8.28	\$30,000	\$12.42
65-69	\$3,250	\$2.30	\$6,500	\$4.62	\$13,000	\$9.24	\$19,500	\$13.84
70+	\$2,250	\$2.66	\$4,500	\$5.32	\$9,000	\$10.64	\$13,500	\$15.98
Age	Plan 10		Plan 11		Plan 12		Plan 13	
	Amount of Coverage	Monthly Premium	Amount of Coverage	Monthly Premium	Amount of Coverage	Monthly Premium	Amount of Coverage	Monthly Premium
Under 30	\$100,000	\$5.90	\$150,000	\$8.86	\$200,000	\$11.80	\$250,000	\$14.76
30-34	\$100,000	\$5.90	\$150,000	\$8.86	\$200,000	\$11.80	\$250,000	\$14.76
35-39	\$100,000	\$7.90	\$150,000	\$11.86	\$200,000	\$15.80	\$250,000	\$19.76
40-44	\$100,000	\$7.90	\$150,000	\$11.86	\$200,000	\$15.80	\$250,000	\$19.76
45-49	\$100,000	\$9.90	\$150,000	\$14.86	\$200,000	\$19.80	\$250,000	\$24.76
50-54	\$100,000	\$11.90	\$150,000	\$17.86	\$200,000	\$23.80	\$250,000	\$29.76
55-59	\$100,000	\$25.70	\$150,000	\$38.56	\$200,000	\$51.40	\$250,000	\$64.26
60-64	\$100,000	\$41.40	\$150,000	\$62.10	\$200,000	\$82.80	\$250,000	\$103.50
65-69	\$65,000	\$46.16	\$97,500	\$69.22	\$130,000	\$92.30	\$162,500	\$115.38
70+	\$45,000	\$53.24	\$67,500	\$79.86	\$90,000	\$106.48	\$112,500	\$133.08

Plan 5		Plan 6		Plan 7		Plan 8		Plan 9	
Amount of Coverage	Monthly Premium	Amount of Coverage	Monthly Premium	Amount of Coverage	Monthly Premium	Amount of Coverage	Monthly Premium	Amount of Coverage	Monthly Premium
\$40,000	\$2.36	\$50,000	\$2.96	\$60,000	\$3.54	\$75,000	\$4.42	\$80,000	\$4.72
\$40,000	\$2.36	\$50,000	\$2.96	\$60,000	\$3.54	\$75,000	\$4.42	\$80,000	\$4.72
\$40,000	\$3.16	\$50,000	\$3.96	\$60,000	\$4.74	\$75,000	\$5.92	\$80,000	\$6.32
\$40,000	\$3.16	\$50,000	\$3.96	\$60,000	\$4.74	\$75,000	\$5.92	\$80,000	\$6.32
\$40,000	\$3.96	\$50,000	\$4.96	\$60,000	\$5.94	\$75,000	\$7.42	\$80,000	\$7.92
\$40,000	\$4.76	\$50,000	\$5.96	\$60,000	\$7.14	\$75,000	\$8.92	\$80,000	\$9.52
\$40,000	\$10.28	\$50,000	\$12.86	\$60,000	\$15.42	\$75,000	\$19.28	\$80,000	\$20.56
\$40,000	\$16.56	\$50,000	\$20.70	\$60,000	\$24.84	\$75,000	\$31.06	\$80,000	\$33.12
\$26,000	\$18.46	\$32,500	\$23.08	\$39,000	\$27.70	\$48,750	\$34.62	\$52,000	\$36.92
\$18,000	\$21.30	\$22,500	\$26.62	\$27,000	\$31.94	\$33,750	\$39.92	\$36,000	\$42.58
Plan 14		Plan 15		Plan 16		Plan 17		Plan 18	
Amount of Coverage	Monthly Premium	Amount of Coverage	Monthly Premium	Amount of Coverage	Monthly Premium	Amount of Coverage	Monthly Premium	Amount of Coverage	Monthly Premium
\$300,000	\$17.70	\$350,000	\$20.66	\$400,000	\$23.60	\$450,000	\$26.56	\$500,000	\$29.50
\$300,000	\$17.70	\$350,000	\$20.66	\$400,000	\$23.60	\$450,000	\$26.56	\$500,000	\$29.50
\$300,000	\$23.70	\$350,000	\$27.66	\$400,000	\$31.60	\$450,000	\$35.56	\$500,000	\$39.50
\$300,000	\$23.70	\$350,000	\$27.66	\$400,000	\$31.60	\$450,000	\$35.56	\$500,000	\$39.50
\$300,000	\$29.70	\$350,000	\$34.66	\$400,000	\$39.60	\$450,000	\$44.56	\$500,000	\$49.50
\$300,000	\$35.70	\$350,000	\$41.66	\$400,000	\$47.60	\$450,000	\$53.56	\$500,000	\$59.50
\$300,000	\$77.10	\$350,000	\$89.96	\$400,000	\$102.80	\$450,000	\$115.66	\$500,000	\$128.50
\$300,000	\$124.20	\$350,000	\$144.90	\$400,000	\$165.60	\$450,000	\$186.30	\$500,000	\$207.00
\$195,000	\$138.46	\$227,500	\$161.52	\$260,000	\$184.60	\$292,500	\$207.68	\$325,000	\$230.76
\$135,000	\$159.70	\$157,500	\$186.32	\$180,000	\$212.94	\$202,500	\$239.56	\$225,000	\$266.18

ACTIVE EMPLOYEE'S OPTIONAL LIFE AND AD&D INSURANCE: TOBACCO USER

Age	Plan 1		Plan 2		Plan 3		Plan 4	
	Amount of Coverage	Monthly Premium	Amount of Coverage	Monthly Premium	Amount of Coverage	Monthly Premium	Amount of Coverage	Monthly Premium
Under 30	\$5,000	\$0.40	\$10,000	\$0.80	\$20,000	\$1.58	\$30,000	\$2.38
30-34	\$5,000	\$0.40	\$10,000	\$0.80	\$20,000	\$1.58	\$30,000	\$2.38
35-39	\$5,000	\$0.50	\$10,000	\$1.00	\$20,000	\$1.98	\$30,000	\$2.98
40-44	\$5,000	\$0.50	\$10,000	\$1.00	\$20,000	\$1.98	\$30,000	\$2.98
45-49	\$5,000	\$0.70	\$10,000	\$1.38	\$20,000	\$2.76	\$30,000	\$4.14
50-54	\$5,000	\$0.90	\$10,000	\$1.78	\$20,000	\$3.56	\$30,000	\$5.34
55-59	\$5,000	\$2.08	\$10,000	\$4.14	\$20,000	\$8.28	\$30,000	\$12.42
60-64	\$5,000	\$3.36	\$10,000	\$6.72	\$20,000	\$13.42	\$30,000	\$20.14
65-69	\$3,250	\$3.84	\$6,500	\$7.68	\$13,000	\$15.38	\$19,500	\$23.06
70+	\$2,250	\$4.44	\$4,500	\$8.88	\$9,000	\$17.74	\$13,500	\$26.62
Age	Plan 10		Plan 11		Plan 12		Plan 13	
	Amount of Coverage	Monthly Premium	Amount of Coverage	Monthly Premium	Amount of Coverage	Monthly Premium	Amount of Coverage	Monthly Premium
Under 30	\$100,000	\$7.90	\$150,000	\$11.86	\$200,000	\$15.80	\$250,000	\$19.76
30-34	\$100,000	\$7.90	\$150,000	\$11.86	\$200,000	\$15.80	\$250,000	\$19.76
35-39	\$100,000	\$9.90	\$150,000	\$14.86	\$200,000	\$19.80	\$250,000	\$24.76
40-44	\$100,000	\$9.90	\$150,000	\$14.86	\$200,000	\$19.80	\$250,000	\$24.76
45-49	\$100,000	\$13.80	\$150,000	\$20.70	\$200,000	\$27.60	\$250,000	\$34.50
50-54	\$100,000	\$17.80	\$150,000	\$26.70	\$200,000	\$35.60	\$250,000	\$44.50
55-59	\$100,000	\$41.40	\$150,000	\$62.10	\$200,000	\$82.80	\$250,000	\$103.50
60-64	\$100,000	\$67.10	\$150,000	\$100.66	\$200,000	\$134.20	\$250,000	\$167.76
65-69	\$65,000	\$76.90	\$97,500	\$115.34	\$130,000	\$153.80	\$162,500	\$192.24
70+	\$45,000	\$88.74	\$67,500	\$133.12	\$90,000	\$177.48	\$112,500	\$221.86

Plan 5		Plan 6		Plan 7		Plan 8		Plan 9	
Amount of Coverage	Monthly Premium	Amount of Coverage	Monthly Premium	Amount of Coverage	Monthly Premium	Amount of Coverage	Monthly Premium	Amount of Coverage	Monthly Premium
\$40,000	\$3.16	\$50,000	\$3.96	\$60,000	\$4.74	\$75,000	\$5.92	\$80,000	\$6.32
\$40,000	\$3.16	\$50,000	\$3.96	\$60,000	\$4.74	\$75,000	\$5.92	\$80,000	\$6.32
\$40,000	\$3.96	\$50,000	\$4.96	\$60,000	\$5.94	\$75,000	\$7.42	\$80,000	\$7.92
\$40,000	\$3.96	\$50,000	\$4.96	\$60,000	\$5.94	\$75,000	\$7.42	\$80,000	\$7.92
\$40,000	\$5.52	\$50,000	\$6.90	\$60,000	\$8.28	\$75,000	\$10.36	\$80,000	\$11.04
\$40,000	\$7.12	\$50,000	\$8.90	\$60,000	\$10.68	\$75,000	\$13.36	\$80,000	\$14.24
\$40,000	\$16.56	\$50,000	\$20.70	\$60,000	\$24.84	\$75,000	\$31.06	\$80,000	\$33.12
\$40,000	\$26.84	\$50,000	\$33.56	\$60,000	\$40.26	\$75,000	\$50.32	\$80,000	\$53.68
\$26,000	\$30.76	\$32,500	\$38.44	\$39,000	\$46.14	\$48,750	\$57.68	\$52,000	\$61.52
\$18,000	\$35.50	\$22,500	\$44.38	\$27,000	\$53.24	\$33,750	\$66.56	\$36,000	\$71.00
Plan 14		Plan 15		Plan 16		Plan 17		Plan 18	
Amount of Coverage	Monthly Premium	Amount of Coverage	Monthly Premium	Amount of Coverage	Monthly Premium	Amount of Coverage	Monthly Premium	Amount of Coverage	Monthly Premium
\$300,000	\$23.70	\$350,000	\$27.66	\$400,000	\$31.60	\$450,000	\$35.56	\$500,000	\$39.50
\$300,000	\$23.70	\$350,000	\$27.66	\$400,000	\$31.60	\$450,000	\$35.56	\$500,000	\$39.50
\$300,000	\$29.70	\$350,000	\$34.66	\$400,000	\$39.60	\$450,000	\$44.56	\$500,000	\$49.50
\$300,000	\$29.70	\$350,000	\$34.66	\$400,000	\$39.60	\$450,000	\$44.56	\$500,000	\$49.50
\$300,000	\$41.40	\$350,000	\$48.30	\$400,000	\$55.20	\$450,000	\$62.10	\$500,000	\$69.00
\$300,000	\$53.40	\$350,000	\$62.30	\$400,000	\$71.20	\$450,000	\$80.10	\$500,000	\$89.00
\$300,000	\$124.20	\$350,000	\$144.90	\$400,000	\$165.60	\$450,000	\$186.30	\$500,000	\$207.00
\$300,000	\$201.30	\$350,000	\$234.86	\$400,000	\$268.40	\$450,000	\$301.96	\$500,000	\$335.50
\$195,000	\$230.68	\$227,500	\$269.14	\$260,000	\$307.58	\$292,500	\$346.02	\$325,000	\$384.48
\$135,000	\$266.22	\$157,500	\$310.60	\$180,000	\$354.96	\$202,500	\$399.34	\$225,000	\$443.70

RETIRED EMPLOYEE'S OPTIONAL LIFE INSURANCE: TOBACCO-FREE

The Tobacco-free rates are charged to those who have previously submitted an affidavit stating that the policyholder does not use tobacco.

Age	Plan 1		Plan 2		Plan 3		Plan 4		Plan 5	
	Amount of Coverage	Monthly Premium	Amount of Coverage	Monthly Premium	Amount of Coverage	Monthly Premium	Amount of Coverage	Monthly Premium	Amount of Coverage	Monthly Premium
<30	\$5,000	\$0.40	\$10,000	\$0.80	\$15,000	\$1.18	\$20,000	\$1.58	\$30,000	\$2.38
30-34	\$5,000	\$0.50	\$10,000	\$1.00	\$15,000	\$1.48	\$20,000	\$1.98	\$30,000	\$2.98
35-39	\$5,000	\$0.50	\$10,000	\$1.00	\$15,000	\$1.48	\$20,000	\$1.98	\$30,000	\$2.98
40-44	\$5,000	\$0.88	\$10,000	\$1.78	\$15,000	\$2.66	\$20,000	\$3.54	\$30,000	\$5.32
45-49	\$5,000	\$1.18	\$10,000	\$2.38	\$15,000	\$3.56	\$20,000	\$4.74	\$30,000	\$7.12
50-54	\$5,000	\$1.98	\$10,000	\$3.94	\$15,000	\$5.92	\$20,000	\$7.88	\$30,000	\$11.82
55-59	\$5,000	\$3.26	\$10,000	\$6.52	\$15,000	\$9.76	\$20,000	\$13.02	\$30,000	\$19.54
60-64	\$5,000	\$4.74	\$10,000	\$9.48	\$15,000	\$14.20	\$20,000	\$18.94	\$30,000	\$28.42
65-69	\$3,250	\$5.38	\$6,500	\$10.76	\$9,750	\$16.14	\$13,000	\$21.52	\$19,500	\$32.30
70 +	\$2,500	\$11.54	\$5,000	\$23.08	\$7,500	\$34.60	\$10,000	\$46.14	\$15,000	\$69.22
Age	Plan 6		Plan 7		Plan 8		Plan 9		Plan 10	
	Amount of Coverage	Monthly Premium	Amount of Coverage	Monthly Premium	Amount of Coverage	Monthly Premium	Amount of Coverage	Monthly Premium	Amount of Coverage	Monthly Premium
<30	\$40,000	\$3.16	\$50,000	\$3.96	\$75,000	\$5.92	\$100,000	\$7.90	\$150,000	\$11.86
30-34	\$40,000	\$3.96	\$50,000	\$4.96	\$75,000	\$7.42	\$100,000	\$9.90	\$150,000	\$14.86
35-39	\$40,000	\$3.96	\$50,000	\$4.96	\$75,000	\$7.42	\$100,000	\$9.90	\$150,000	\$14.86
40-44	\$40,000	\$7.08	\$50,000	\$8.86	\$75,000	\$13.28	\$100,000	\$17.70	\$150,000	\$26.56
45-49	\$40,000	\$9.48	\$50,000	\$11.86	\$75,000	\$17.78	\$100,000	\$23.70	\$150,000	\$35.56
50-54	\$40,000	\$15.76	\$50,000	\$19.70	\$75,000	\$29.56	\$100,000	\$39.40	\$150,000	\$59.10
55-59	\$40,000	\$26.04	\$50,000	\$32.56	\$75,000	\$48.82	\$100,000	\$65.10	\$150,000	\$97.66
60-64	\$40,000	\$37.88	\$50,000	\$47.36	\$75,000	\$71.02	\$100,000	\$94.70	\$150,000	\$142.06
65-69	\$26,000	\$43.06	\$32,500	\$53.82	\$48,750	\$80.74	\$65,000	\$107.64	\$97,500	\$161.46
70 +	\$20,000	\$92.28	\$25,000	\$115.36	\$37,500	\$173.02	\$50,000	\$230.70	\$75,000	\$346.06

RETIRED EMPLOYEE'S OPTIONAL LIFE INSURANCE: TOBACCO-USER

Age	Plan 1		Plan 2		Plan 3		Plan 4		Plan 5	
	Amount of Coverage	Monthly Premium	Amount of Coverage	Monthly Premium	Amount of Coverage	Monthly Premium	Amount of Coverage	Monthly Premium	Amount of Coverage	Monthly Premium
Under 30	\$5,000	\$0.50	\$10,000	\$1.00	\$15,000	\$1.48	\$20,000	\$1.98	\$30,000	\$2.98
30-34	\$5,000	\$0.70	\$10,000	\$1.38	\$15,000	\$2.08	\$20,000	\$2.76	\$30,000	\$4.14
35-39	\$5,000	\$0.88	\$10,000	\$1.78	\$15,000	\$2.66	\$20,000	\$3.54	\$30,000	\$5.32
40-44	\$5,000	\$1.38	\$10,000	\$2.76	\$15,000	\$4.14	\$20,000	\$5.52	\$30,000	\$8.28
45-49	\$5,000	\$2.08	\$10,000	\$4.14	\$15,000	\$6.22	\$20,000	\$8.28	\$30,000	\$12.42
50-54	\$5,000	\$3.56	\$10,000	\$7.10	\$15,000	\$10.66	\$20,000	\$14.20	\$30,000	\$21.30
55-59	\$5,000	\$5.52	\$10,000	\$11.04	\$15,000	\$16.56	\$20,000	\$22.08	\$30,000	\$33.12
60-64	\$5,000	\$7.40	\$10,000	\$14.80	\$15,000	\$22.18	\$20,000	\$29.58	\$30,000	\$44.38
65-69	\$3,250	\$7.68	\$6,500	\$15.38	\$9,750	\$23.06	\$13,000	\$30.76	\$19,500	\$46.14
70 & over	\$2,500	\$16.96	\$5,000	\$33.92	\$7,500	\$50.88	\$10,000	\$67.84	\$15,000	\$101.76
Age	Plan 6		Plan 7		Plan 8		Plan 9		Plan 10	
	Amount of Coverage	Monthly Premium	Amount of Coverage	Monthly Premium	Amount of Coverage	Monthly Premium	Amount of Coverage	Monthly Premium	Amount of Coverage	Monthly Premium
Under 30	\$40,000	\$3.96	\$50,000	\$4.96	\$75,000	\$7.42	\$100,000	\$9.90	\$150,000	\$14.86
30-34	\$40,000	\$5.52	\$50,000	\$6.90	\$75,000	\$10.36	\$100,000	\$13.80	\$150,000	\$20.70
35-39	\$40,000	\$7.08	\$50,000	\$8.86	\$75,000	\$13.28	\$100,000	\$17.70	\$150,000	\$26.56
40-44	\$40,000	\$11.04	\$50,000	\$13.80	\$75,000	\$20.70	\$100,000	\$27.60	\$150,000	\$41.40
45-49	\$40,000	\$16.56	\$50,000	\$20.70	\$75,000	\$31.06	\$100,000	\$41.40	\$150,000	\$62.10
50-54	\$40,000	\$28.40	\$50,000	\$35.50	\$75,000	\$53.26	\$100,000	\$71.00	\$150,000	\$106.50
55-59	\$40,000	\$44.16	\$50,000	\$55.20	\$75,000	\$82.80	\$100,000	\$110.40	\$150,000	\$165.60
60-64	\$40,000	\$59.16	\$50,000	\$73.96	\$75,000	\$110.92	\$100,000	\$147.90	\$150,000	\$221.86
65-69	\$26,000	\$61.52	\$32,500	\$76.90	\$48,750	\$115.34	\$65,000	\$153.80	\$97,500	\$230.68
70 & over	\$20,000	\$135.68	\$25,000	\$169.60	\$37,500	\$254.40	\$50,000	\$339.20	\$75,000	\$508.80