



MONTHLY Employee premiums – effective January 1, 2026

2026 Premium Rates by Salary Bands						
Medical PPO	<\$50,000	\$50,000 to \$75,000	\$75,000 to \$100,000	\$100,000 to \$150,000	\$150,000 to \$200,000	>\$200,000
Employee Only	\$172.70	\$181.34	\$189.97	\$198.61	\$215.88	\$233.15
Employee+Spouse	\$312.87	\$328.52	\$344.16	\$359.80	\$391.09	\$422.38
Employee+Child(ren)	\$305.85	\$321.14	\$336.43	\$351.73	\$382.31	\$412.90
Family	\$499.94	\$524.94	\$549.93	\$574.93	\$624.92	\$674.91

2026 Premium Rates by Salary Bands						
Medical QHDHP	<\$50,000	\$50,000 to \$75,000	\$75,000 to \$100,000	\$100,000 to \$150,000	\$150,000 to \$200,000	>\$200,000
Employee Only	\$41.54	\$43.62	\$45.70	\$47.78	\$51.93	\$56.08
Employee+Spouse	\$180.09	\$189.10	\$198.10	\$207.11	\$225.11	\$243.12
Employee+Child(ren)	\$239.47	\$251.44	\$263.42	\$275.39	\$299.34	\$323.28
Family	\$397.26	\$417.12	\$436.99	\$456.85	\$496.58	\$536.30

DENTAL	w/Medical enrollment	<u>without Medical enrollment</u>	VISION	w/Medical enrollment	<u>without Medical enrollment</u>
Employee Only	\$19.45	\$40.61	Employee Only	\$3.50	\$6.90
Employee+Spouse	\$35.83	\$74.84	Employee+Spouse	\$6.66	\$13.11
Employee+Child(ren)	\$34.39	\$71.82	Employee+Child(ren)	\$7.00	\$13.80
Family	\$53.21	\$111.12	Family	\$10.29	\$20.28