

# Health and Dental Insurance Monthly Premiums

## Effective January 1 to December 31, 2026

### MEDICAL PLANS

Plan Name Coverage Options	Total Premium	District Share	Employee Share	District Increase	Employee Increase
<b>HDHP/HSA</b>					
Employee Only	\$734	\$618	\$116	\$0	\$0
Employee/Spouse	\$954	\$618	\$336	\$0	\$0
Employee/Children	\$887	\$618	\$269	\$0	\$0
Employee/Family	\$1,106	\$618	\$488	\$0	\$0
Tobacco Surcharge			\$30		
<b>Blue Choice Low Option PPO</b>					
Employee Only	\$754	\$618	\$136	\$0	\$0
Employee/Spouse	\$1,004	\$618	\$386	\$0	\$0
Employee/Children	\$925	\$618	\$307	\$0	\$0
Employee/Family	\$1,175	\$618	\$557	\$0	\$0
Tobacco Surcharge			\$30		
<b>Blue Choice High Option PPO</b>					
Employee Only	\$962	\$618	\$344	\$0	\$0
Employee/Spouse	\$1,305	\$618	\$687	\$0	\$0
Employee/Children	\$1,188	\$618	\$570	\$0	\$0
Employee/Family	\$1,528	\$618	\$910	\$0	\$0
Tobacco Surcharge			\$30		

### DENTAL PLANS

Plan Name Coverage Options	Employee Share	Employee Increase
<b>Delta Dental PPO Low</b>		
Employee Only	\$16	\$0
Employee/Spouse	\$29	\$0
Employee/Children	\$37	\$0
Employee/Family	\$55	\$0
<b>Delta Dental PPO High</b>		
Employee Only	\$30	\$0
Employee/Spouse	\$55	\$0
Employee/Children	\$70	\$0
Employee/Family	\$93	\$0