Medical PPO Rates Effective July 1, 2025 - June 30, 2026

Salary Range	Medical Type	% of Premium	Monthly Premium	Annual Premium	Employee Annual Cost Based on % of Premium	Employee Bi- weekly Cost Based on % of Premium*	Employer Annual Cost
0 - \$50,000.00	Single	4.3%	\$842.12	\$10,105.42	\$436.56	\$18.19	\$9,668.86
\$50,000.01 - \$75,000.00	Single	11.2%	\$842.12	\$10,105.42	\$1,134.96	\$47.29	\$8,970.46
\$75,000.01 +	Single	21.6%	\$842.12	\$10,105.42	\$2,182.56	\$90.94	\$7,922.86
0 - \$50,000.00	EE + Child(ren)	4.3%	\$2,021.72	\$24,260.60	\$1,047.84	\$43.66	\$23,212.76
\$50,000.01 - \$75,000.00	EE + Child(ren)	11.2%	\$2,021.72	\$24,260.60	\$2,724.48	\$113.52	\$21,536.12
\$75,000.01 +	EE + Child(ren)	21.6%	\$2,021.72	\$24,260.60	\$5,239.68	\$218.32	\$19,020.92
0 - \$50,000.00	EE + Spouse/Partner	4.3%	\$2,267.96	\$27,215.50	\$1,175.52	\$48.98	\$26,039.98
\$50,000.01 - \$75,000.00	EE + Spouse/Partner	11.2%	\$2,267.96	\$27,215.50	\$3,056.40	\$127.35	\$24,159.10
\$75,000.01 +	EE + Spouse/Partner	21.6%	\$2,267.96	\$27,215.50	\$5,877.84	\$244.91	\$21,337.66
0 - \$50,000.00	Family	4.3%	\$2,609.97	\$31,319.60	\$1,352.88	\$56.37	\$29,966.72
\$50,000.01 - \$75,000.00	Family	11.2%	\$2,609.97	\$31,319.60	\$3,517.44	\$146.56	\$27,802.16
\$75,000.01 +	Family	21.6%	\$2,609.97	\$31,319.60	\$6,764.16	\$281.84	\$24,555.44
*NOTE: Bi-weekly deductions are over 24 pay periods.							