

Licensed Staff													
80%	Employee costs are in Italics												
Licensed Employee* Full Time - <b>Single Policy</b>	Plan	Employee Out-of-Pocket Maximum by Plan	HRA/HSA** Funding by Employer 2023-2028	Annual Out-of-Pocket Exposure for Employee <b>After</b> HRA/HSA**	Total Monthly Premium 7/1/2027	Total Annual Premium	Annual Employer Premium Share	Annual Employee Premium Share	Employee Monthly Premium Share	Total Employee Annual Exposure Premium & Out-of-Pocket Share	Price per paycheck (Year Round Employee) 26 Paychecks	Price per paycheck (School Year Employee) 22 Paychecks	
Single	Platinum	\$2,800	\$1,900	\$900	\$1,435.18	\$17,222.16	\$12,684.58	\$4,537.58	\$378.13	\$5,437.58	\$174.52	\$226.88	
Single	Gold	\$3,100	\$1,900	\$1,200	\$1,407.39	\$16,888.68	\$12,684.58	\$4,204.10	\$350.34	\$5,404.10	\$161.70	\$210.21	
Single	Gold CDHP	\$2,500	\$1,900	\$600	\$1,321.31	\$15,855.72	\$12,684.58	\$3,171.14	\$264.26	\$3,771.14	\$121.97	\$158.56	
Single	Silver CDHP	\$4,000	\$1,900	\$2,100	\$1,209.57	\$14,514.84	\$11,611.87	\$2,902.97	\$241.91	\$5,002.97	\$111.65	\$145.15	
*If you are unsure if these costs apply to you, see "What employee segment am I in?" on our website.													
**HSA only available on Silver Plan													
Employer premium contributions for the <u>Platinum and Gold Plans</u> are identical to the employer premium contribution to the <u>Gold CDHP</u> .													
Premiums are set on a fiscal-year basis. These rates reflect changes as of July 1, 2026.													
Licensed Employee* Full Time - <b>Self &amp; Spouse Policy</b>	Plan	Employee Out-of-Pocket Maximum by Plan	HRA/HSA** Funding by Employer 2023-2028	Annual Out-of-Pocket Exposure for Employee <b>After</b> HRA/HSA**	Total Monthly Premium 7/1/2027	Total Annual Premium	Annual Employer Premium Share	Annual Employee Premium Share	Employee Monthly Premium Share	Total Employee Annual Exposure Premium & Out-of-Pocket Share	Price per paycheck (Year Round Employee) 26 Paychecks	Price per paycheck (School Year Employee) 22 Paychecks	
Self & Spouse	Platinum	\$5,600	\$4,000	\$1,600	\$2,870.38	\$34,444.56	\$23,822.21	\$10,622.35	\$885.20	\$12,222.35	\$408.55	\$531.12	
Self & Spouse	Gold	\$6,200	\$4,000	\$2,200	\$2,814.79	\$33,777.48	\$23,822.21	\$9,955.27	\$829.61	\$12,155.27	\$382.90	\$497.76	
Self & Spouse	Gold CDHP	\$5,000	\$4,000	\$1,000	\$2,481.48	\$29,777.76	\$23,822.21	\$5,955.55	\$496.30	\$6,955.55	\$229.06	\$297.78	
Self & Spouse	Silver CDHP	\$8,000	\$4,000	\$4,000	\$2,419.17	\$29,030.04	\$23,224.03	\$5,806.01	\$483.83	\$9,806.01	\$223.31	\$290.30	
*If you are unsure if these costs apply to you, see "What employee segment am I in?" on our website.													
**HSA only available on Silver Plan													
Employer premium contributions for the <u>Platinum and Gold Plans</u> are identical to the employer premium contribution to the <u>Gold CDHP</u> .													
Premiums are set on a fiscal-year basis. These rates reflect changes as of July 1, 2026.													
Licensed Employee* Full Time - <b>Parent/Child(ren) Policy</b>	Plan	Employee Out-of-Pocket Maximum by Plan	HRA/HSA** Funding by Employer 2023-2028	Annual Out-of-Pocket Exposure for Employee <b>After</b> HRA/HSA**	Total Monthly Premium 7/1/2027	Total Annual Premium	Annual Employer Premium Share	Annual Employee Premium Share	Employee Monthly Premium Share	Total Employee Annual Exposure Premium & Out-of-Pocket Share	Price per paycheck (Year Round Employee) 26 Paychecks	Price per paycheck (School Year Employee) 22 Paychecks	
Parent/Child(ren)	Platinum	\$5,600	\$4,000	\$1,600	\$2,399.84	\$28,798.08	\$19,610.78	\$9,187.30	\$765.61	\$10,787.30	\$353.36	\$459.36	
Parent/Child(ren)	Gold	\$6,200	\$4,000	\$2,200	\$2,355.35	\$28,264.20	\$19,610.78	\$8,653.42	\$721.12	\$10,853.42	\$332.82	\$432.67	
Parent/Child(ren)	Gold CDHP	\$5,000	\$4,000	\$1,000	\$2,042.79	\$24,513.48	\$19,610.78	\$4,902.70	\$408.56	\$5,902.70	\$188.57	\$245.13	
Parent/Child(ren)	Silver CDHP	\$8,000	\$4,000	\$4,000	\$2,039.02	\$24,468.24	\$19,574.59	\$4,893.65	\$407.80	\$8,893.65	\$188.22	\$244.68	
*If you are unsure if these costs apply to you, see "What employee segment am I in?" on our website.													
**HSA only available on Silver Plan													
Employer premium contributions for the <u>Platinum and Gold Plans</u> are identical to the employer premium contribution to the <u>Gold CDHP</u> .													
Premiums are set on a fiscal-year basis. These rates reflect changes as of July 1, 2026.													
Licensed Employee* Full Time - <b>Family Policy</b>	Plan	Employee Out-of-Pocket Maximum by Plan	HRA/HSA** Funding by Employer 2023-2028	Annual Out-of-Pocket Exposure for Employee <b>After</b> HRA/HSA**	Total Monthly Premium 7/1/2027	Total Annual Premium	Annual Employer Premium Share	Annual Employee Premium Share	Employee Monthly Premium Share	Total Employee Annual Exposure Premium & Out-of-Pocket Share	Price per paycheck (Year Round Employee) 26 Paychecks	Price per paycheck (School Year Employee) 22 Paychecks	
Family	Platinum	\$5,600	\$4,000	\$1,600	\$4,060.11	\$48,721.32	\$35,136.38	\$13,584.94	\$1,132.08	\$15,184.94	\$522.50	\$679.25	
Family	Gold	\$6,200	\$4,000	\$2,200	\$3,983.95	\$47,807.40	\$35,136.38	\$12,671.02	\$1,055.92	\$14,871.02	\$487.35	\$633.55	
Family	Gold CDHP	\$5,000	\$4,000	\$1,000	\$3,660.04	\$43,920.48	\$35,136.38	\$8,784.10	\$732.01	\$9,784.10	\$337.85	\$439.20	
Family	Silver CDHP	\$8,000	\$4,000	\$4,000	\$3,442.08	\$41,304.96	\$33,043.97	\$8,260.99	\$688.42	\$12,260.99	\$317.73	\$413.05	
*If you are unsure if these costs apply to you, see "What employee segment am I in?" on our website.													
**HSA only available on Silver Plan													
Employer premium contributions for the <u>Platinum and Gold Plans</u> are identical to the employer premium contribution to the <u>Gold CDHP</u> .													
Premiums are set on a fiscal-year basis. These rates reflect changes as of July 1, 2026.													

Updated 05.08.2026 - No change to HSA/HRA Funding for 2023-2028