

Insurance Rates • WCHSTA Certified Staff • Effective 7/1/2025 - 6/30/2026

Insurance Plan	25/26 Total Annual Premium	Board Annual Premium	Employee Annual Premium	25/26 Wellness Program Rebate*	Employee Monthly Premium	Employee Per Paycheck Deduction	Actual Employee Per Paycheck Deduction* (after rebate)	Notes
PPO2 PLAN								
Medical - PPO2 - Single	\$10,081.56	\$7,493.43	\$2,588.13	\$51.76	\$215.68	\$107.84	\$105.68	Provider Search: PPO/PPO HDHP (Participating Provider Organization)
Medical - PPO2 - Single + Spouse	Not available	Not Available	Not Available	Not Available	Not Available	Not Available	Not Available	
Medical - PPO2 - Single + Child(ren)	Not available	Not Available	Not Available	Not Available	Not Available	Not Available	Not Available	
Medical - PPO2 - Family	\$34,411.92	\$25,577.72	\$8,834.21	\$176.68	\$736.18	\$368.09	\$360.73	
PPO3 HDHP PLAN WITH HSA								
Medical - PPO3 - Single	\$8,249.64	\$6,950.40	\$1,299.24	\$25.98	\$108.27	\$54.14	\$53.05	Board HSA annual contribution \$500 for single
Medical - PPO3 - Single + Spouse	Not available	Not Available	Not Available	Not Available	Not Available	Not Available	Not Available	Board HSA annual contribution \$1,000 for family
Medical - PPO3 - Single + Child(ren)	Not available	Not Available	Not Available	Not Available	Not Available	Not Available	Not Available	Provider Search:
Medical - PPO3 - Family	\$28,158.84	\$23,724.13	\$4,434.71	\$88.69	\$369.56	\$184.78	\$181.08	PPO/PPO HDHP (Participating Provider Organization)
PPO4 BLUE CHOICE OPTIONS PLAN								
Medical - PPO4 - Single	\$10,096.80	\$7,504.77	\$2,592.03	\$51.84	\$216.00	\$108.00	\$105.84	Provider Search: Blue Choice Options (BCO)
Medical - PPO4 - Single + Spouse	\$24,232.32	\$18,011.42	\$6,220.90	\$124.42	\$518.41	\$259.20	\$254.02	
Medical - PPO4 - Single + Child(ren)	\$19,184.16	\$14,259.21	\$4,924.95	\$98.50	\$410.41	\$205.21	\$201.10	
Medical - PPO4 - Family	\$31,300.44	\$23,265.03	\$8,035.41	\$160.71	\$669.62	\$334.81	\$328.11	
BLUE ADVANTAGE HMO								
Medical - HMO - Single	\$8,777.52	\$7,455.03	\$1,322.49	\$26.45	\$110.21	\$55.10	\$54.00	Provider Search: Blue Advantage HMO (ADV)
Medical - HMO - Single + Spouse	\$16,366.92	\$13,900.98	\$2,465.94	\$49.32	\$205.49	\$102.75	\$100.69	
Medical - HMO - Single + Child(ren)	\$17,352.24	\$14,737.84	\$2,614.40	\$52.29	\$217.87	\$108.93	\$106.75	
Medical - HMO - Family	\$24,941.76	\$21,183.89	\$3,757.87	\$75.16	\$313.16	\$156.58	\$153.45	
DENTAL								
Dental - Single	\$510.00	\$433.50	\$76.50	Not Available	\$6.38	\$3.19	\$3.19	
Dental - Family	\$1,382.40	\$1,105.92	\$276.48	Not Available	\$23.04	\$11.52	\$11.52	
VISION								
Vision - Single	\$78.48	\$0.00	\$78.48	Not Available	\$6.54	\$3.27	\$3.27	
Vision - Family	\$199.92	\$0.00	\$199.92	Not Available	\$16.66	\$8.33	\$8.33	
LIFE								
Basic Life & Accidental Death & Dis.						\$0.39	\$0.39	Variable rate - sample assumes salary of \$50,000/yr
Voluntary Life Insurance								See rate schedule online. Rates are by age group.
Dependent Life Insurance						\$0.63	\$0.63	
LONG TERM DISABILITY								
Long Term Disability						\$0.43	\$0.43	Variable rate - sample assumes salary of \$50,000/yr

Note: Due to rounding, some calculations will not be exact.