



## 2025-2026 Employee Premium Contribution Per Paycheck

Rates effective 10/1/2025

The below premiums apply to 24 semi-monthly pay periods:

	EE Only	EE + 1 or Spouse	EE + Child(ren)	EE + Family
Cigna - OAP PPO	\$0.00	\$240.00	\$237.50	\$415.50
Cigna - Standard "HMO"	\$32.50	\$281.00	\$278.50	\$466.50
Kaiser HMO	\$35.00	\$257.50	N/A*	\$455.50
Guardian Dental	\$24.09	\$45.40	\$53.78	\$75.32
Guardian VSP (Vision)	\$5.27	\$10.44	\$10.23	\$15.56

\* Kaiser only has 3 rate tables: EE, EE+1 and EE+2 or more.

\$225.00 medical insurance opt-out paid at **\$112.50 per pay period** can offset the following premium costs:



Dental Premiums



Vision Premiums



Healthcare FSA Contributions



Commuter FSA Contributions



Dependent Care FSA Contributions



Remaining Balance:  
Taxable Cash Compensation