Cost of Coverage

2026 Employee Cost Per Paycheck
Full-Time Employees

EMPLOYEE CONTRIBUTION PER PAY PERIOD

MEDICAL PLANS	
	Cigna Captive PPO
Employee Only	$40.00
Employee + Spouse	$194.83
Employee + Child(ren)	$166.14
Family	$344.68
	Kaiser HMO California
Employee Only	$40.00
Employee + Spouse	$195.63
Employee + Child(ren)	$150.58
Family	$302.62
	Kaiser HMO Northwest
Employee Only	$40.00
Employee + Spouse	$148.28
Employee + Child(ren)	$127.63
Family	$251.56
	Kaiser HMO Washington
Employee Only	$40.00
Employee + Spouse	$155.24
Employee + Child(ren)	$146.29
Family	$256.52
DENTAL PLANS	
	Principal Dental PPO
Employee Only	$10.00
Employee + Spouse	$21.62
Employee + Child(ren)	$26.78
Family	$38.40
VISION PLANS	
	VSP Vision
Employee Only	$0.00
Employee + Spouse	$0.55
Employee + Child(ren)	$0.55
Family	$1.10