



Employee Insurance Rates

Effective: January 1, 2026 – December 31, 2026

Medical (PPO) Insurance Rates

(Employees who complete the annual Health Risk Assessment (HRA) receive a discounted rate, shown below.)*

Coverage Tier	Total Premium	County Pays	Employee Pays (With HRA)	Employee Pays (Without HRA)	Bi-Weekly Deduction
Employee Only	\$735.00	\$540.00	\$195.00	\$295.00	\$97.50 (HRA) / \$147.50 (No HRA)
Employee + Spouse	\$1,146.00	\$701.00	\$445.00	\$545.00	\$222.50 (HRA) / \$272.50 (No HRA)
Employee + Child	\$1,336.00	\$906.00	\$430.00	\$530.00	\$215.00 (HRA) / \$265.00 (No HRA)
Family	\$1,660.00	\$1,115.00	\$545.00	\$645.00	\$272.50 (HRA) / \$322.50 (No HRA)

What is a Health Risk Assessment (HRA)?

The County's **Health Risk Assessment (HRA)** is part of our wellness program and must be completed within the initial enrollment period and then annually—via a lab draw and medical provider review—by September 30 to qualify for discounted medical insurance rates. Employees may complete the HRA at the Employee Primary Health Care Clinic at no cost or through their personal provider with results submitted for confirmation.

Dental Insurance Rates

Plan Option	Coverage Tier	Employee Monthly	Bi-Weekly Deduction
Low Plan	Employee Only	\$20.97	\$10.49
Low Plan	Family	\$58.59	\$29.30
High Plan	Employee Only	\$42.07	\$21.04
High Plan	Family	\$111.67	\$55.84

Vision Insurance Rates

Plan Option	Coverage Tier	Employee Monthly	Bi-Weekly Deduction
Low Plan	Employee Only	\$5.41	\$2.71
Low Plan	Family	\$12.79	\$6.40
High Plan	Employee Only	\$9.80	\$4.90
High Plan	Family	\$26.97	\$13.49