BENEFITS ENROLLMENT

Open Enrollment 2027
BENEFITS

HEALTH PLAN WEEKLY PREMIUMS

Weekly Insurance Premiums

	EMP	EMP/SP	EMP/CH	EMP/SP/CH(REN)
CORE PPO PLAN *Medical/Prescription*	$5.00	$55.72	$48.94	$67.30
HEALTH INVESTMENT PLAN *Medical/Prescription*	$16.84	$110.60	$97.15	$133.58
PREMIER PPO PLAN *Medical/Prescription*	$36.10	$179.33	$156.51	$244.76
DENTAL	$4.21	$8.85	$8.01	$12.64
VISION	$1.19	$2.26	$2.38	$3.50

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