



2026 Employee Premium Sheet		
Medical		
United Health Care EABG (PPO HDHP HSA \$5,000)		
	EE Monthly Cost	Weekly Cost
Employee Only	\$93.87	\$21.66
Employee + Spouse	\$488.61	\$112.76
Employee + Child(ren)	\$365.45	\$84.34
Family	\$672.35	\$155.16
United Health Care DQXM (Traditional PPO \$2,000)		
	EE Monthly Cost	Weekly Cost
Employee Only	\$239.71	\$55.32
Employee + Spouse	\$580.09	\$133.87
Employee + Child(ren)	\$433.87	\$100.12
Family	\$798.23	\$184.21
United Health Care DQW5 (Traditional EPO \$1,000)		
	EE Monthly Cost	Weekly Cost
Employee Only	\$287.13	\$66.26
Employee + Spouse	\$694.85	\$160.35
Employee + Child(ren)	\$519.70	\$119.93
Family	\$956.14	\$220.65
Dental		
SunLife Dental DPPO \$1500		
	EE Monthly Cost	Weekly Cost
Employee Only	\$12.40	\$2.86
Employee + Spouse	\$24.45	\$5.64
Employee + Child(ren)	\$32.67	\$7.54
Family	\$44.72	\$10.32
SunLife Dental DPPO \$2000		
	EE Monthly Cost	Weekly Cost
Employee Only	\$19.99	\$4.61
Employee + Spouse	\$39.87	\$9.20
Employee + Child(ren)	\$51.36	\$11.85
Family	\$71.00	\$16.38
Vision		
SunLife Vision		
	EE Monthly Cost	Weekly Cost
Employee Only	\$1.44	\$0.33
Employee + Spouse	\$2.87	\$0.66
Employee + Child(ren)	\$3.16	\$0.73
Family	\$4.59	\$1.06