

# 2026 Benefit Rates



(20 pay periods per year)

| Medical - Classic                                      |            |          |          | Medical - Premier                                                                                                |            |          |          |
|--------------------------------------------------------|------------|----------|----------|------------------------------------------------------------------------------------------------------------------|------------|----------|----------|
| Total                                                  | ASU        | Employee |          | Total                                                                                                            | ASU        | Employee |          |
| Employee only                                          | \$438.00   | \$366.00 | \$72.00  | Employee only                                                                                                    | \$452.40   | \$366.00 | \$86.40  |
| Employee + Spouse                                      | \$864.60   | \$582.60 | \$282.00 | Employee + Spouse                                                                                                | \$891.00   | \$582.60 | \$308.40 |
| Employee + Child(ren)                                  | \$681.60   | \$469.20 | \$212.40 | Employee + Child(ren)                                                                                            | \$703.20   | \$469.20 | \$234.00 |
| Family                                                 | \$1,086.00 | \$774.00 | \$312.00 | Family                                                                                                           | \$1,120.20 | \$771.60 | \$348.60 |
| Medical - Health Savings Plan                          |            |          |          |                                                                                                                  |            |          |          |
| Total                                                  | ASU        | Employee |          |                                                                                                                  |            |          |          |
| Employee only                                          | \$395.40   | \$364.20 | \$31.20  |                                                                                                                  |            |          |          |
| Employee + Spouse                                      | \$783.60   | \$588.60 | \$195.00 |                                                                                                                  |            |          |          |
| Employee + Child(ren)                                  | \$618.00   | \$466.80 | \$151.20 |                                                                                                                  |            |          |          |
| Family                                                 | \$985.20   | \$778.20 | \$207.00 |                                                                                                                  |            |          |          |
| Dental - Low                                           |            |          | Employee | Dental -High                                                                                                     |            |          | Employee |
| Employee only                                          |            |          | \$18.89  | Employee only                                                                                                    |            |          | \$27.79  |
| Employee + Spouse                                      |            |          | \$37.91  | Employee + Spouse                                                                                                |            |          | \$58.07  |
| Employee + Child(ren)                                  |            |          | \$35.62  | Employee + Child(ren)                                                                                            |            |          | \$55.81  |
| Family                                                 |            |          | \$56.02  | Family                                                                                                           |            |          | \$87.13  |
| Life/AD&D Insurance                                    |            |          | ASU      | Vision                                                                                                           |            |          | Employee |
| Per \$1,000 of annual salary                           |            |          | \$0.15   | Employee only                                                                                                    |            |          | \$4.88   |
| Maximum Coverage 1.5 x annual salary, maximum \$50,000 |            |          |          | Employee + Spouse                                                                                                |            |          | \$9.07   |
|                                                        |            |          |          | Employee + Child(ren)                                                                                            |            |          | \$9.25   |
|                                                        |            |          |          | Family                                                                                                           |            |          | \$14.02  |
| Employee Optional Life <sup>1</sup>                    |            |          | Employee | Spouse Optional Life                                                                                             |            |          | Employee |
| Your Current Age (Rates per \$25,000 of coverage)      |            |          |          | Employee's Current Age (Rates per \$5,000 of                                                                     |            |          |          |
| less than 30                                           |            |          | \$1.14   | less than 30                                                                                                     |            |          | \$0.23   |
| 30 but less than 35                                    |            |          | \$1.31   | 30 but less than 35                                                                                              |            |          | \$0.26   |
| 35 but less than 40                                    |            |          | \$1.66   | 35 but less than 40                                                                                              |            |          | \$0.34   |
| 40 but less than 45                                    |            |          | \$2.45   | 40 but less than 45                                                                                              |            |          | \$0.49   |
| 45 but less than 50                                    |            |          | \$3.92   | 45 but less than 50                                                                                              |            |          | \$0.79   |
| 50 but less than 55                                    |            |          | \$6.36   | 50 but less than 55                                                                                              |            |          | \$1.27   |
| 55 but less than 60                                    |            |          | \$9.95   | 55 but less than 60                                                                                              |            |          | \$1.99   |
| 60 but less than 65                                    |            |          | \$15.30  | 60 but less than 65                                                                                              |            |          | \$3.06   |
| 65 and over contact HR for rates and coverage level.   |            |          |          | Must purchase Optional Life to purchase Spouse Life.                                                             |            |          |          |
| Basic Dependent Life                                   |            |          | ASU      | Optional Child Life                                                                                              |            |          | Employee |
| Per Covered employee                                   |            |          | \$0.34   | \$5,000                                                                                                          |            |          | \$0.60   |
| (\$2,000 per eligible dependent)                       |            |          |          | \$10,000                                                                                                         |            |          | \$1.20   |
| Optional AD&D Insurance                                |            |          | Employee | Optional AD&D Insurance                                                                                          |            |          | Employee |
| Employee Only                                          |            |          | \$0.67   | Family                                                                                                           |            |          | \$0.96   |
| (Per \$25,000 of Coverage)                             |            |          |          | (Per \$25,000 Employee/\$12,500 Spouse/\$2,500 Child)                                                            |            |          |          |
| Short Term Disability (STD) <sup>2</sup>               |            |          | Employee | Short Term Disability (STD) <sup>2</sup>                                                                         |            |          | Employee |
| Per \$150 of coverage – 14 day elimination             |            |          |          | Per \$150 of coverage – 7 day elimination                                                                        |            |          |          |
| less than 25                                           |            |          | \$3.67   | less than 25                                                                                                     |            |          | \$4.18   |
| 25 but less than 30                                    |            |          | \$3.96   | 25 but less than 30                                                                                              |            |          | \$4.10   |
| 30 but less than 35                                    |            |          | \$3.89   | 30 but less than 35                                                                                              |            |          | \$4.39   |
| 35 but less than 45                                    |            |          | \$4.46   | 35 but less than 45                                                                                              |            |          | \$4.97   |
| 45 but less than 50                                    |            |          | \$5.33   | 45 but less than 50                                                                                              |            |          | \$5.90   |
| 50 but less than 55                                    |            |          | \$6.26   | 50 but less than 55                                                                                              |            |          | \$6.98   |
| 55 but less than 60                                    |            |          | \$7.42   | 55 but less than 60                                                                                              |            |          | \$8.35   |
| 60 but less than 65                                    |            |          | \$9.86   | 60 but less than 65                                                                                              |            |          | \$11.02  |
| over 65                                                |            |          | \$0.00   | over 65                                                                                                          |            |          | \$0.00   |
| Critical Care Insurance - Employee and Child(ren)      |            |          | Employee | Spouse Critical Care Insurance (50% of EE coverage)                                                              |            |          | Employee |
| Your Current Age (Rates per \$10,000 of coverage)      |            |          |          | Employee's Current Age                                                                                           |            |          |          |
| less than 25                                           |            |          | \$2.00   | less than 25                                                                                                     |            |          | \$3.55   |
| 25 but less than 30                                    |            |          | \$2.42   | 25 but less than 30                                                                                              |            |          | \$4.18   |
| 30 but less than 35                                    |            |          | \$2.96   | 30 but less than 35                                                                                              |            |          | \$4.99   |
| 35 but less than 40                                    |            |          | \$3.80   | 35 but less than 40                                                                                              |            |          | \$6.25   |
| 40 but less than 45                                    |            |          | \$5.00   | 40 but less than 45                                                                                              |            |          | \$8.05   |
| 45 but less than 50                                    |            |          | \$6.68   | 45 but less than 50                                                                                              |            |          | \$10.57  |
| 50 but less than 55                                    |            |          | \$8.84   | 50 but less than 55                                                                                              |            |          | \$13.81  |
| 55 but less than 60                                    |            |          | \$12.02  | 55 but less than 60                                                                                              |            |          | \$18.58  |
| 60 but less than 65                                    |            |          | \$16.88  | 60 but less than 65                                                                                              |            |          | \$25.87  |
| 65 but less than 70                                    |            |          | \$24.44  | 65 but less than 70                                                                                              |            |          | \$37.21  |
| 70 but less than 75                                    |            |          | \$37.22  | 70 but less than 75                                                                                              |            |          | \$56.38  |
| 75 and over                                            |            |          | \$46.52  | 75 and over                                                                                                      |            |          | \$70.33  |
| Long Term Disability – 60% of monthly salary           |            |          |          | Employee must purchase Critical Illness to purchase spouse coverage. Spouse coverage is 50% of employee benefit. |            |          |          |
| \$370,000 Maximum Salary                               | Total      | ASU      | Employee |                                                                                                                  |            |          |          |
| Per \$100 of monthly salary                            | \$0.13     | \$0.13   | \$0.00   |                                                                                                                  |            |          |          |
| Accident Insurance                                     |            |          | Employee | Other Benefits                                                                                                   |            |          | Employee |
| Employee only                                          |            |          | \$5.48   | Cancer Insurance – 3 levels offered plus riders.                                                                 |            |          |          |
| Employee + Spouse                                      |            |          | \$9.95   | Rates without riders range from \$11.64 to \$37.67                                                               |            |          |          |
| Employee + Child(ren)                                  |            |          | \$11.30  |                                                                                                                  |            |          |          |
| Family                                                 |            |          | \$15.77  | MASA - Medical Transport Services Emergent Plus                                                                  |            |          | \$8.40   |

<sup>1</sup>Optional Life Insurance is limited to five times your annual salary. Rates will increase as you move to a new age tier. <sup>2</sup>Short Term Disability is available in additional increments of \$50 to a maximum of \$600 per week, limited to 66% of your weekly salary. Rates will increase as you move to a new age tier. Please refer to your summary plan descriptions for eligibility and coverage.

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