

# 2026 Benefit Rates

(24 pay periods per year)



| Medical - Classic                                      |          |          |          | Medical - Premier                                                    |          |          |          |
|--------------------------------------------------------|----------|----------|----------|----------------------------------------------------------------------|----------|----------|----------|
| Total                                                  | ASU      | Employee |          | Total                                                                | ASU      | Employee |          |
| Employee only                                          | \$365.00 | \$305.00 | \$60.00  | Employee only                                                        | \$377.00 | \$305.00 | \$72.00  |
| Employee + Spouse                                      | \$720.50 | \$485.50 | \$235.00 | Employee + Spouse                                                    | \$742.50 | \$485.50 | \$257.00 |
| Employee + Child(ren)                                  | \$568.00 | \$391.00 | \$177.00 | Employee + Child(ren)                                                | \$586.00 | \$391.00 | \$195.00 |
| Family                                                 | \$905.00 | \$645.00 | \$260.00 | Family                                                               | \$933.50 | \$643.00 | \$290.50 |
| Medical - Health Savings Plan                          |          |          |          |                                                                      |          |          |          |
| Total                                                  | ASU      | Employee |          |                                                                      |          |          |          |
| Employee only                                          | \$329.50 | \$303.50 | \$26.00  |                                                                      |          |          |          |
| Employee + Spouse                                      | \$653.00 | \$490.50 | \$162.50 |                                                                      |          |          |          |
| Employee + Child(ren)                                  | \$515.00 | \$389.00 | \$126.00 |                                                                      |          |          |          |
| Family                                                 | \$821.00 | \$648.50 | \$172.50 |                                                                      |          |          |          |
| Dental - Low                                           |          |          | Employee | Dental - High                                                        |          |          | Employee |
| Employee only                                          |          |          | \$15.74  | Employee only                                                        |          |          | \$23.16  |
| Employee + Spouse                                      |          |          | \$31.59  | Employee + Spouse                                                    |          |          | \$48.39  |
| Employee + Child(ren)                                  |          |          | \$29.68  | Employee + Child(ren)                                                |          |          | \$46.51  |
| Family                                                 |          |          | \$46.68  | Family                                                               |          |          | \$72.61  |
| Life/AD&D Insurance                                    |          |          | ASU      | Vision                                                               |          |          | Employee |
| Per \$1,000 of annual salary                           |          |          | \$0.12   | Employee only                                                        |          |          | \$4.07   |
| Maximum Coverage 1.5 x annual salary, maximum \$50,000 |          |          |          | Employee + Spouse                                                    |          |          | \$7.56   |
|                                                        |          |          |          | Employee + Child(ren)                                                |          |          | \$7.71   |
|                                                        |          |          |          | Family                                                               |          |          | \$11.68  |
| 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 coverage)               |          |          |          |
| 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                                           |          |          | \$3.06   | less than 25                                                         |          |          | \$3.48   |
| 25 but less than 30                                    |          |          | \$3.30   | 25 but less than 30                                                  |          |          | \$3.42   |
| 30 but less than 35                                    |          |          | \$3.24   | 30 but less than 35                                                  |          |          | \$3.66   |
| 35 but less than 45                                    |          |          | \$3.72   | 35 but less than 45                                                  |          |          | \$4.14   |
| 45 but less than 50                                    |          |          | \$4.44   | 45 but less than 50                                                  |          |          | \$4.92   |
| 50 but less than 55                                    |          |          | \$5.22   | 50 but less than 55                                                  |          |          | \$5.82   |
| 55 but less than 60                                    |          |          | \$6.18   | 55 but less than 60                                                  |          |          | \$6.96   |
| 60 but less than 65                                    |          |          | \$8.22   | 60 but less than 65                                                  |          |          | \$9.18   |
| 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                                           |          |          | \$1.67   | less than 25                                                         |          |          | \$2.96   |
| 25 but less than 30                                    |          |          | \$2.02   | 25 but less than 30                                                  |          |          | \$3.48   |
| 30 but less than 35                                    |          |          | \$2.47   | 30 but less than 35                                                  |          |          | \$4.16   |
| 35 but less than 40                                    |          |          | \$3.17   | 35 but less than 40                                                  |          |          | \$5.21   |
| 40 but less than 45                                    |          |          | \$4.17   | 40 but less than 45                                                  |          |          | \$6.71   |
| 45 but less than 50                                    |          |          | \$5.57   | 45 but less than 50                                                  |          |          | \$8.81   |
| 50 but less than 55                                    |          |          | \$7.37   | 50 but less than 55                                                  |          |          | \$11.51  |
| 55 but less than 60                                    |          |          | \$10.02  | 55 but less than 60                                                  |          |          | \$15.48  |
| 60 but less than 65                                    |          |          | \$14.07  | 60 but less than 65                                                  |          |          | \$21.56  |
| 65 but less than 70                                    |          |          | \$20.37  | 65 but less than 70                                                  |          |          | \$31.01  |
| 70 but less than 75                                    |          |          | \$31.02  | 70 but less than 75                                                  |          |          | \$46.98  |
| 75 and over                                            |          |          | \$38.77  | 75 and over                                                          |          |          | \$58.61  |
|                                                        |          |          |          | Employee must purchase Critical Illness to purchase spouse coverage. |          |          |          |
|                                                        |          |          |          | Maximum not to exceed 50% of employee benefit.                       |          |          |          |
| Long Term Disability                                   |          |          | Employee | Other Benefits                                                       |          |          | Employee |
| Per \$100 of monthly salary                            |          |          | 0        | Cancer Insurance – 3 levels offered plus riders.                     |          |          |          |
| Accident Insurance                                     |          |          |          | Rates without riders range from \$8.73 to \$28.25                    |          |          |          |
| Employee only                                          |          |          | \$4.57   | MASA - Medical Transport Services Emergent Plus                      |          |          | \$7.00   |
| Employee + Spouse                                      |          |          | \$8.29   |                                                                      |          |          |          |
| Employee + Child(ren)                                  |          |          | \$9.42   |                                                                      |          |          |          |
| Family                                                 |          |          | \$13.14  |                                                                      |          |          |          |

<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.