

RATES EFFECTIVE JANUARY 1, 2026 - DECEMBER 31, 2026

Plan	Base Monthly Premium	State & Plan Contribution	Employee Total Monthly Cost
PREMIUM			
Employee Only	\$567.54	\$365.58	\$201.96
Employee & Spouse	\$1,333.73	\$626.81	\$706.92
Employee & Child(ren)	\$1,106.71	\$649.43	\$457.28
Employee & Family	\$1,872.90	\$1,093.22	\$779.68
CLASSIC			
Employee Only	\$493.41	\$405.03	\$88.38
Employee & Spouse	\$1,159.52	\$811.76	\$347.76
Employee & Child(ren)	\$962.15	\$752.85	\$209.30
Employee & Family	\$1,628.25	\$1,236.37	\$391.88
BASIC			
Employee Only	\$435.48	\$392.24	\$43.24
Employee & Spouse	\$1,023.38	\$781.80	\$241.58
Employee & Child(ren)	\$849.19	\$709.17	\$140.02
Employee & Family	\$1,437.09	\$1,174.97	\$262.12
The Basic Plan meets the minimum essential coverage required under A.C.A.			

State Contribution is funded by legislation.
Plan Contribution is funded by ASE Trust Fund as Claims Reserve Allocation.