

**Active Employee - monthly premiums**

**FY26** (July 1, 2025 thru June 30, 2026)

<b>Health Insurance</b>				
<b>Blue Care Elect Preferred (PPO) 00-2317697</b>				
Plan	Total	Employer Share	Employee Share	Bi-Weekly Deduction
Single	\$1,180.00	\$708.00	\$472.00	\$236.00
Family	\$3,221.00	\$1,932.60	\$1,288.40	\$644.20
<b>Network Blue New England (HMO) 00-4039048</b>				
Plan	Total	Employer Share	Employee Share	Bi-Weekly Deduction
Single	\$1,007.00	\$775.40	\$231.60	\$115.80
Double	\$2,344.00	\$1,640.80	\$703.20	\$351.60
Family	\$2,888.00	\$2,021.60	\$866.40	\$433.20

<b>Dental Insurance - 100% employee paid</b>		
<b>Altus Dental High Plus - 2911-0003</b>		
Plan	Total	Biweekly Deduction
Single	\$44.30	\$22.15
Double	\$88.60	\$44.30
Family	\$148.06	\$74.03
<b>Altus Dental High - 2911-0002</b>		
Plan	Total	Biweekly Deduction
Single	\$35.98	\$17.99
Double	\$71.94	\$35.97
Family	\$183.86	\$91.93
<b>Altus Dental Basic - 2911-0001</b>		
Plan	Total	Biweekly Deduction
Single	\$23.70	\$11.85
Double	\$47.38	\$23.69
Family	\$97.10	\$48.55

<b>Vision Insurance - 100% employee paid</b>		
<b>BCBSMA Blue 20/20 - 20619</b>		
Plan	Total	Biweekly Deduction
Employee	\$6.08	\$3.04
Employee w/Child(ren)	\$10.64	\$5.32
Employee & Spouse	\$10.34	\$5.17
Family	\$16.72	\$8.36

<b>Life Insurance</b>			
<b>Boston Mutual Life Insurance - 24938-00020</b>			
Plan	Total	Employer Share	Employee Share
\$5,000	\$7.10	\$4.26	\$2.84