



2026 Medical Plan Premiums

Medical and Pharmacy Premium		Bi-Weekly Rates	
Cigna	Total Premium	Employee Contribution	County Contribution
HDHP Employee only	\$482.88	\$23.32	\$459.56
HDHP Employee + spouse	\$1,008.25	\$150.71	\$857.54
HDHP Employee + child(ren)	\$912.06	\$119.34	\$792.72
HDHP Employee + family	\$1,330.03	\$266.15	\$1,063.88
LDHP Employee only	\$525.18	\$38.85	\$486.33
LDHP Employee + spouse	\$1,074.49	\$180.71	\$893.78
LDHP Employee + child(ren)	\$979.61	\$147.17	\$832.44
LDHP Employee + family	\$1,419.87	\$310.24	\$1,109.63
SureFit Employee only	\$464.79	\$0.00	\$464.79
SureFit Employee + spouse	\$950.92	\$138.45	\$812.47
SureFit Employee + child(ren)	\$866.95	\$92.30	\$774.65
SureFit Employee + family	\$1,256.58	\$230.76	\$1,025.82