

2026 and 2025

Employee + partner health care premium contributions (per-paycheck deductions) and imputed income

2026									
Plan Name		Pre-tax do	Post tax deductions	Imputed income					
Medical	Employee + Partner	Employee + Partner + 1 Child	Employee + Partner + 2 Children	Employee + Partner + 3+ Children	All Tiers*	All Tiers*			
UHC Choice Plus High Deductible	\$0.00	\$13.00	\$26.00	\$43.00	\$73.00	\$343.94			
UHC Choice Plus Plan (PPO)	\$103.00	\$143.00	\$175.00	\$234.00	\$122.00	\$504.17			
UHC Choice Plan (EPO)	\$248.00	\$346.00	\$482.00	\$570.00	\$302.00	\$497.93			
UHC PPO Plan (Hawaii)	\$64.00	\$98.00	\$125.00	\$173.00	\$141.00	\$343.35			
Kaiser CA HMO	\$69.00	\$97.00	\$126.00	\$161.00	\$87.00	\$411.66			
Kaiser OR HMO	\$61.00	\$107.00	\$124.00	\$147.00	\$69.00	\$277.56			
Dental									
Aetna DMO	\$0.00	\$3.00	\$7.00	\$13.00	\$13.00	\$1.51			
Aetna PPO	\$0.00	\$7.00	\$15.00	\$24.00	\$20.00	\$8.18			
Vision									
VSP Basic Plan	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$2.87			
VSP Plus Plan	\$7.00	\$10.00	\$13.00	\$16.00	\$7.00	\$3.65			

^{*}All tiers: Employee + partner + any number of children. Children must be qualified tax dependents.

2025

Plan Name		Pre-tax de	Post tax deductions	Imputed income		
Medical	Employee + Partner	Employee + Partner + 1 Child	Employee + Partner + 2 Children	Employee + Partner + 3+ Children	All Tiers*	All Tiers*
UHC Choice Plus High Deductible	\$0.00	\$11.69	\$23.37	\$37.98	\$64.75	\$304.74
UHC Choice Plus Plan (PPO)	\$91.25	\$127.36	\$155.84	\$208.15	\$107.78	\$447.14
UHC Choice Plan (EPO)	\$219.45	\$305.63	\$427.03	\$504.59	\$267.92	\$440.99
UHC PPO Plan (Hawaii)	\$64.06	\$97.74	\$124.87	\$172.64	\$140.99	\$381.09
Kaiser CA HMO	\$65.21	\$91.69	\$118.25	\$151.30	\$81.54	\$387.00
Kaiser OR HMO	\$56.82	\$99.81	\$115.29	\$136.81	\$63.72	\$258.35
Cigna Int'l. PPO (Medical/Dental/Vision)	\$84.18	\$129.78	\$167.86	\$232.35	\$146.14	\$384.12
Dental						
Aetna DMO	\$0.00	\$3.48	\$7.43	\$12.38	\$12.23	\$2.00
Aetna PPO	\$0.00	\$6.87	\$13.80	\$22.47	\$19.71	\$7.59
Vision						
VSP Basic Plan	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$2.87
VSP Plus Plan	\$6.79	\$9.38	\$11.98	\$15.24	\$7.62	\$3.04

^{*}All tiers: Employee + partner + any number of children. Children must be qualified tax dependents.