

# Central Nine Career Center

## Health Insurance Rate Changes

### Effective 11/1/26 through 10/31/27



*Please note that new deductions will start on the October 9, 2026 payroll.*

Life Insurance: \$1.00 Per Year

Long Term Disability Insurance: \$1.00 Per Year

<b>MEDICAL</b>				
Medical Plan	New Rates Per Month	C9 Pays Per Month	Employee Pays Per Month	Payroll Deduction Per Pay (24 Pays)
<b>PPO \$1,800</b>				
Employee Only	\$974.00	\$783.32	\$190.68	\$95.34
Employee + Spouse	\$2,191.00	\$1,793.78	\$397.22	\$198.61
Employee + Child(ren)	\$1,812.00	\$1,495.05	\$316.95	\$158.48
Family Coverage	\$2,845.00	\$2,258.36	\$586.64	\$293.32
<b>PPO \$5,300*</b>				
Employee Only	\$758.00	\$758.00	\$0.00	\$0.00
Employee + Spouse	\$1,704.00	\$1,704.00	\$0.00	\$0.00
Employee + Child(ren)	\$1,419.00	\$1,419.00	\$0.00	\$0.00
Family Coverage	\$2,214.00	\$2,214.00	\$0.00	\$0.00
<i>*Employees Electing any tier on the PPO \$5,000 pay \$1.00 per year</i>				
<b>\$2,300 HSA Qualified Plan</b>				
Employee Only	\$895.00	\$763.86	\$131.14	\$65.57
Employee + Spouse	\$2,012.00	\$1,753.48	\$258.52	\$129.26
Employee + Child(ren)	\$1,668.00	\$1,466.89	\$201.11	\$100.56
Family Coverage	\$2,614.00	\$2,202.49	\$411.51	\$205.76
<b>\$3,400 HSA Qualified Plan</b>				
Employee Only	\$803.00	\$726.49	\$76.51	\$38.26
Employee + Spouse	\$1,805.00	\$1,637.30	\$167.70	\$83.85
Employee + Child(ren)	\$1,497.00	\$1,371.84	\$125.16	\$62.58
Family Coverage	\$2,348.00	\$2,102.63	\$245.37	\$122.69
<b>DENTAL</b>				
Employee Only	\$32.00	\$14.92	\$17.08	\$8.54
Employee + Spouse	\$65.00	\$30.29	\$34.71	\$17.36
Employee + Child(ren)	\$70.00	\$32.62	\$37.38	\$18.69
Family Coverage	\$104.00	\$31.20	\$72.80	\$36.40
<b>VISION</b>				
<b>Vision Base Plan</b>				
Employee Only	\$6.17	\$0	\$6.17	\$3.09
Employee + Spouse	\$12.35	\$0	\$12.35	\$6.18
Employee + Child(ren)	\$13.21	\$0	\$13.21	\$6.61
Family Coverage	\$21.11	\$0	\$21.11	\$10.56
<b>Vision Buy-Up Plan</b>				
Employee Only	\$9.79	\$0	\$9.79	\$4.90
Employee + Spouse	\$19.59	\$0	\$19.59	\$9.80
Employee + Child(ren)	\$20.96	\$0	\$20.96	\$10.48
Family Coverage	\$33.50	\$0	\$33.50	\$16.75

Certified employees are eligible for coverage on the 1<sup>st</sup> day of the month following their date of hire.

Non-certified employees are eligible for coverage on the 1<sup>st</sup> day of the month following 60 days of employment.