

BI-WEEKLY EMPLOYEE CONTRIBUTIONS

2026 Rates

MEDICAL AND PRESCRIPTION	KAISER MEDICAL AND PRESCRIPTION			CAREFIRST MEDICAL AND PRESCRIPTION			CAREFIRST MEDICAL ¹		
	10-Month (20 Pays)	11-Month (24 Pays)	12-Month (26 Pays)	10-Month (20 Pays)	11-Month (24 Pays)	12-Month (26 Pays)	10-Month (20 Pays)	11-Month (24 Pays)	12-Month (26 Pays)
Active Employees with 0-8 Years of Service – 25% Contribution									
Employee Only	\$115.46	\$ 96.21	\$ 88.81	\$134.16	\$111.82	\$103.21	\$ 95.78	\$ 79.83	\$ 73.69
Employee + Child(ren)	\$230.91	\$192.43	\$177.63	\$268.35	\$223.63	\$206.43	\$191.59	\$159.66	\$147.38
Employee + Spouse	\$242.46	\$202.05	\$186.51	\$281.77	\$234.81	\$216.75	\$201.17	\$167.64	\$154.75
Family	\$300.19	\$250.16	\$230.92	\$353.26	\$294.38	\$271.74	\$252.21	\$210.17	\$194.01
Active Employees with 8+ Years of Service – 20% Contribution									
Employee Only	\$ 92.37	\$ 76.97	\$ 71.05	\$107.35	\$ 89.45	\$ 82.57	\$ 76.64	\$ 63.86	\$ 58.95
Employee + Child(ren)	\$184.73	\$153.94	\$142.10	\$214.68	\$178.91	\$165.14	\$153.27	\$127.73	\$117.90
Employee + Spouse	\$193.97	\$161.64	\$149.21	\$225.42	\$187.84	\$173.40	\$160.94	\$134.11	\$123.80
Family	\$240.15	\$200.13	\$184.74	\$282.60	\$235.52	\$217.40	\$201.77	\$168.15	\$155.21
DENTAL AND VISION	AETNA DENTAL PPO			CAREFIRST VISION			CVS CAREMARK PRESCRIPTION ¹		
	10-Month (20 Pays)	11-Month (24 Pays)	12-Month (26 Pays)	10-Month (20 Pays)	11-Month (24 Pays)	12-Month (26 Pays)	10-Month (20 Pays)	11-Month (24 Pays)	12-Month (26 Pays)
Active Employees with 0-8 Years of Service – 25% Contribution									
Employee Only	\$ 7.58	\$ 6.32	\$ 5.83	\$0.75	\$0.63	\$0.57	\$ 38.38	\$31.99	\$29.52
Employee + Child(ren)	\$15.16	\$12.63	\$11.66	\$1.50	\$1.25	\$1.16	\$ 76.76	\$63.97	\$59.05
Employee + Spouse	\$15.92	\$13.26	\$12.24	\$1.58	\$1.31	\$1.20	\$ 80.60	\$67.17	\$62.00
Family	\$21.97	\$18.31	\$16.91	\$2.18	\$1.81	\$1.68	\$101.05	\$84.21	\$77.73
Active Employees with 8+ Years of Service – 20% Contribution									
Employee Only	\$ 6.06	\$ 5.05	\$ 4.66	\$0.60	\$0.50	\$0.47	\$30.71	\$25.59	\$23.62
Employee + Child(ren)	\$12.12	\$10.10	\$ 9.33	\$1.20	\$1.00	\$0.93	\$61.41	\$51.18	\$47.24
Employee + Spouse	\$12.74	\$10.61	\$ 9.80	\$1.26	\$1.05	\$0.97	\$64.48	\$53.73	\$49.60
Family	\$17.58	\$14.65	\$13.53	\$1.74	\$1.45	\$1.34	\$80.83	\$67.37	\$62.19

Please note, the bi-weekly deduction amounts may vary slightly from the actual bi-weekly deductions due to rounding.

¹ Prior to January 1, 2021, if you elected CareFirst medical without prescription (or vice versa) or elected different coverage levels for medical and prescription, you can continue your current election(s) at 2026 rates.