

HIGH DEDUCTIBLE HEALTH PLAN

NON-MEDICARE PRIMARY for SUBSCRIBER and DEPENDENT(S) MONTHLY PREMIUM RATES

January 1, 2026 - December 31, 2026

COVERAGE TYPE	SUBSCRIBER MONTHLY PREMIUM	DEPENDENT MONTHLY PREMIUM	TOTAL SUBSCRIBER MONTHLY PREMIUM
Subscriber Only	\$101	\$0	\$101
Subscriber + Child(ren)	\$101	\$140	\$241
Subscriber + Spouse	\$101	\$495	\$596
Subscriber + Family	\$101	\$495	\$596

- NOTES:
1. The HDHP benefit option will be available only to employees eligible for coverage under G.S. §135.48.40(e).
 2. The employer share for subscribers is \$202.80.

