

Blue Cross/Blue Shield Medical Plan 2026 Rates				
Plan	Tier	2026 Monthly Rate	* 2026 Monthly Premium Credit	Clergy/Conf Staff Monthly Cost
B1000	Participant	\$1,294	\$882	\$412.00
B1000	Participant+1	\$2,459	\$1,665	\$794.00
B1000	Family	\$3,364	\$2,274	\$1,090.00
C2000 with HRA	Participant	\$1,242	\$882	\$360.00
C2000 with HRA	Participant+1	\$2,360	\$1,665	\$695.00
C2000 with HRA	Family	\$3,230	\$2,274	\$956.00
C3000 with HRA	Participant	\$1,082	\$882	\$200.00
C3000 with HRA	Participant+1	\$2,055	\$1,665	\$390.00
C3000 with HRA	Family	\$2,813	\$2,274	\$539.00
New H2000 with HSA	Participant	\$1,211	\$882	\$329.00
New H2000 with HSA	Participant+1	\$2,301	\$1,665	\$636.00
New H2000 with HSA	Family	\$3,149	\$2,274	\$875.00
H2500 with HSA	Participant	\$1,040	\$882	\$158.00
H2500 with HSA	Participant+1	\$1,976	\$1,665	\$311.00
H2500 with HSA	Family	\$2,704	\$2,274	\$430.00
H5000 with HSA	Participant	\$976	\$882	\$94.00
H5000 with HSA	Participant+1	\$1,854	\$1,665	\$189.00
H5000 with HSA	Family	\$2,538	\$2,274	\$264.00

Cigna Dental Plan 2026 Rates		
Plan	Tier	2026 Rate
Passive PPO 2000	Participant	\$55
Passive PPO 2000	Participant+1	\$110
Passive PPO 2000	Family	\$165
Dental PPO	Participant	\$45
Dental PPO	Participant+1	\$90
Dental PPO	Family	\$135
Dental HMO	Participant	\$18
Dental HMO	Participant+1	\$32
Dental HMO	Family	\$56

Vision (VSP) Buy-Up Plan 2026 Rates		
Plan	Tier	2026 Rate
Full Service	Participant	\$9
Full Service	Participant+1	\$14
Full Service	Family	\$22
Premier	Participant	\$15
Premier	Participant+1	\$25
Premier	Family	\$40

*Churches are required to pay at least \$695 of each lay person premium.