



FY 2026 Working Rates 100% Premium Rates

100% MONTHLY PREMIUM

Plan	Coverage Tier	FY 2025	FY 2026		
			Rates	\$ Change	% Change
Blue Care Elect Deductible	Individual	\$1,522.00	\$1,647.00	\$125.00	8.2%
	Family	\$3,787.00	\$4,098.00	\$311.00	
Blue Care Elect Value Plan	Individual	\$1,684.00	\$1,822.00	\$138.00	
	Family	\$4,187.00	\$4,530.00	\$343.00	
Blue Care Elect PPO Saver (HSA)	Individual	\$1,155.00	\$1,250.00	\$95.00	
	Family	\$2,860.00	\$3,095.00	\$235.00	
Network Blue Deductible	Individual	\$884.00	\$956.00	\$72.00	
	Family	\$2,315.00	\$2,505.00	\$190.00	
Network Blue NE Value Plan	Individual	\$938.00	\$1,015.00	\$77.00	
	Family	\$2,459.00	\$2,661.00	\$202.00	
Network Blue NE Saver (HSA)	Individual	\$687.00	\$743.00	\$56.00	
	Family	\$1,898.00	\$2,054.00	\$156.00	
Access Blue NE Saver II	Individual	-	\$650.00	-	0.0%
	Family	-	\$1,785.00	-	

Senior Plan Rate - Effective January 1, 2026

BCBS Medex II with Blue Medicare PDP \$540.69