

2025 Active Employees Monthly Health Premiums

ALL REGIONS				
	BCBST NETWORK S	CIGNA LOCALPLUS	BCBST NETWORK P	CIGNA OPEN ACCESS
PREMIER PPO				
Employee Only	\$755	\$755	\$830	\$830
Employee + Child(ren)	\$1,244	\$1,244	\$1,329	\$1,329
Employee + Spouse	\$1,698	\$1,698	\$1,848	\$1,848
Employee + Spouse + Child(ren)	\$1,961	\$1,961	\$2,111	\$2,111
STANDARD PPO				
Employee Only	\$701	\$701	\$776	\$776
Employee + Child(ren)	\$1,156	\$1,156	\$1,241	\$1,241
Employee + Spouse	\$1,577	\$1,577	\$1,727	\$1,727
Employee + Spouse + Child(ren)	\$1,822	\$1,822	\$1,972	\$1,972
LIMITED PPO				
Employee Only	\$662	\$662	\$737	\$737
Employee + Child(ren)	\$1,091	\$1,091	\$1,176	\$1,176
Employee + Spouse	\$1,490	\$1,490	\$1,640	\$1,640
Employee + Spouse + Child(ren)	\$1,720	\$1,720	\$1,870	\$1,870
LOCAL CDHP/HSA				
Employee Only	\$578	\$578	\$653	\$653
Employee + Child(ren)	\$953	\$953	\$1,038	\$1,038
Employee + Spouse	\$1,300	\$1,300	\$1,450	\$1,450
Employee + Spouse + Child(ren)	\$1,502	\$1,502	\$1,652	\$1,652

The premium amounts shown reflect the total monthly premium. Please see your agency benefit coordinator for your monthly deduction and your employer's contribution, if applicable.