

Educators Health Alliance
Renewal Rates for Health, Dental, and Dual Choice Options
Effective September 1, 2026
Standard Rates Only (Excluding Discounts or Surcharges)

Health Coverage - Active Employees	Network	Renewal Rates -- Standard			
		Employee	Ee & Child(ren)	Ee & Spouse	Ee, Spouse & Child(ren)
\$650 Deductible	NEtwork Blue	\$978.00	\$1,809.31	\$2,053.79	\$2,757.72
\$850 Deductible	NEtwork Blue	\$951.57	\$1,760.45	\$1,998.34	\$2,683.25
\$1,050 Deductible	NEtwork Blue	\$927.31	\$1,715.56	\$1,947.37	\$2,614.83
\$1,200 Deductible	NEtwork Blue	\$911.59	\$1,686.40	\$1,914.27	\$2,570.38
\$1,450 Deductible	NEtwork Blue	\$896.04	\$1,657.75	\$1,881.69	\$2,526.67
\$1,900 Deductible	NEtwork Blue	\$858.39	\$1,588.06	\$1,802.62	\$2,420.48
\$4,000 Deductible HSA-Eligible	NEtwork Blue	\$695.47	\$1,286.68	\$1,460.53	\$1,961.09
\$2,500 Deductible (Dual Choice Only)	NEtwork Blue	\$782.39	\$1,447.46	\$1,643.06	\$2,206.19
\$3,800 Deductible HSA-Eligible (Dual Choice Only)	NEtwork Blue	\$782.39	\$1,447.46	\$1,643.06	\$2,206.19

Health Coverage - Retirees	Network	Renewal Rates			
		Retiree Only	Ret & Child(ren)	Ret & Spouse	Ret, Spouse, & Child(ren)
\$400 Deductible	PSBC/Blueprint Health	\$961.53	\$1,704.56	\$2,019.20	\$2,552.44
\$1,050 Deductible	NEtwork Blue	\$1,038.74	\$1,841.40	\$2,181.33	\$2,757.39
\$4,000 Deductible HSA-Eligible	NEtwork Blue	\$779.08	\$1,381.07	\$1,636.05	\$2,068.03
\$2,500 Deductible	NEtwork Blue	\$876.44	\$1,553.64	\$1,840.47	\$2,326.47
\$3,800 Deductible HSA-Eligible	NEtwork Blue	\$876.44	\$1,553.64	\$1,840.47	\$2,326.47

Dental Coverage	Network	Renewal Rates			
		Employee	Ee & Child(ren)	Ee & Spouse	Ee, Spouse & Child(ren)
100% A, 75% B Coverage - Option 1	Network BLUE Dental	\$30.45	\$56.29	\$63.88	\$85.82
100% A, 80% B, 70% C Coverage - Option 3	Network BLUE Dental	\$64.63	\$119.58	\$135.72	\$182.25
PPO - 100% A, 75% B, 50% C Coverage - Option 2	Network BLUE Dental	\$32.79	\$60.62	\$68.81	\$92.45
PPO - 100% A, 80% B, 80% C, 50% D Coverage - Option 4	Network BLUE Dental	\$58.84	\$108.85	\$123.59	\$165.98
PPO - 100% A, B, & C Coverage - Option 5	Network BLUE Dental	\$64.39	\$119.14	\$135.25	\$181.64