

# CVWD 2026 Insurance Premiums

Rates effective January 1, 2026

Medical Plans					
	Kaiser		Anthem Blue Cross		
	HMO	Consumer Driven Health Plan (CDHP)	Classic PPO	CalCare HMO	Consumer Driven Health Plan (CDHP)
Employee Only	\$846.30	\$612.35	\$977.28	\$1,093.97	\$781.81
Employee + I	\$1,692.60	\$1,224.70	\$1,954.56	\$2,187.94	\$1,563.62
Employee + Familiy	\$2,352.71	\$1,702.33	\$2,589.79	\$2,899.02	\$2,071.80

Dental Plans		
	MetLife	
	PPO	DHMO
Employee Only	\$60.71	\$21.31
Employee + Spouse	\$124.10	
Employee + Child(ren)	\$160.27	
Employee + Family	\$233.01	\$47.79

Vision Plan	
	Vision Service Plan (VSP)
Employee Only	\$10.79
Employee + I	\$16.76
Employee + Family	\$26.59