

2026 Non-SCA Bi-Weekly Payroll Deductions

2026 Non-SCA Bi-Weekly Premiums		Salary Band <\$55,000		Salary Band \$55,000+	
		Employee Cost		Employee Cost	
Plan	Level of Coverage	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
Anthem HSA	Employee Only	\$60.00	\$117.69	\$103.00	\$160.69
	Employee + Spouse	\$163.00	\$220.69	\$260.00	\$317.69
	Employee + Domestic Partner (DP)*	\$163.00	\$220.69	\$260.00	\$317.69
	Employee + Employee's Child(ren)	\$144.00	\$201.69	\$228.00	\$285.69
	Employee + DP's Child(ren)*	\$144.00	\$201.69	\$228.00	\$285.69
	Employee + Spouse + Child(ren)	\$230.00	\$287.69	\$360.00	\$417.69
	Employee + DP + Employee's Child(ren)*	\$230.00	\$287.69	\$360.00	\$417.69
	Employee + DP + DP's Child(ren)*	\$230.00	\$287.69	\$360.00	\$417.69

^{*} Imputed income will apply.

2026 Non-SCA Bi-Weekly Payroll Deductions cont.

2026 Non-SCA		Salary Band <\$55,000		Salary Band \$55,000+	
Bi-Weekly Premiums		Employee Cost		Employee Cost	
Plan	Level of Coverage	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
Anthem PPO	Employee Only	\$133.00	\$190.69	\$208.00	\$265.69
	Employee + Spouse	\$326.00	\$383.69	\$495.00	\$552.69
	Employee + Domestic Partner (DP)*	\$326.00	\$383.69	\$495.00	\$552.69
	Employee + Employee's Child(ren)	\$287.00	\$344.69	\$437.00	\$494.69
	Employee + DP's Child(ren)*	\$287.00	\$344.69	\$437.00	\$494.69
	Employee + Spouse + Child(ren)	\$466.00	\$523.69	\$694.00	\$751.69
	Employee + DP + Child(ren)*	\$466.00	\$523.69	\$694.00	\$751.69
	Employee + DP + DP's Child(ren)*	\$466.00	\$523.69	\$694.00	\$751.69
		Salary Band	<\$55,000	Salary Band \$	55,000+
Plan	Level of Coverage	Employee Cost		Employee Cost	
Kaiser Northern California	Employee Only	\$321.34		\$341.34	
	Employee + Spouse	\$790.84		\$850.84	
	Employee + Domestic Partner (DP)*	\$790.84		\$850.84	
	Employee + Employee's Child(ren)	\$731.98		\$782.98	
	Employee + DP's Child(ren)*	\$731.98		\$782.98	
	Employee + Spouse + Child(ren)	\$1,105.18		\$1,188.18	
	Employee + DP + Employee's Child(ren)*	\$1,105.18		\$1,188.18	
	Employee + DP + DP's Child(ren)*	\$1,105.18		\$1,188.18	

^{*} Imputed income will apply.

2026 Non-SCA Bi-Weekly Payroll Deductions cont.

		Salary Band <\$55,000	Salary Band \$55,000+	
Plan	Level of Coverage	Employee Cost	Employee Cost	
Kaiser Southern California	Employee Only	\$321.34	\$341.34	
	Employee + Spouse	\$790.84	\$850.84	
	Employee + Domestic Partner (DP)*	\$790.84	\$850.84	
	Employee + Employee's Child(ren)	\$731.98	\$782.98	
	Employee + DP's Child(ren)*	\$731.98	\$782.98	
	Employee + Spouse + Child(ren)	\$1,105.18	\$1,188.18	
	Employee + DP + Employee's Child(ren)*	\$1,105.18	\$1,188.18	
	Employee + DP + DP's Child(ren)*	\$1,105.18	\$1,188.18	
	Employee Only	\$0.00	\$0.00	
	Employee + Spouse	\$351.14	\$351.14	
Kaiser Hawaii	Employee + Domestic Partner (DP)*	\$351.14	\$351.14	
	Employee + Employee's Child(ren)	\$292.62	\$292.62	
	Employee + DP's Child(ren)*	\$292.62	\$292.62	
	Employee + Spouse + Child(ren)	\$535.49	\$535.49	
	Employee + DP + Employee's Child(ren)*	\$535.49	\$535.49	
	Employee + DP + DP's Child(ren)*	\$535.49	\$535.49	

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2026 Non-SCA Bi-Weekly Payroll Deductions cont.

2026 Non-SCA Bi-Weekly Premiums					
Plan	Level of Coverage	Employee Cost			
	Employee Only	\$9.12			
	Employee + Spouse	\$17.07			
	Employee + Domestic Partner (DP)*	\$17.07			
Delta	Employee + Employee's Child(ren)	\$16.94			
Dental	Employee + DP's Child(ren)*	\$16.94			
	Employee + Spouse + Child(ren)	\$25.14			
	Employee + DP + Employee's Child(ren)*	\$25.14			
	Employee + DP + DP's Child(ren)*	\$25.14			
	Employee Only	\$4.20			
	Employee + Spouse	\$6.14			
	Employee + Domestic Partner (DP)*	\$6.14			
VSP	Employee + Employee's Child(ren)	\$6.54			
Base	Employee + DP's Child(ren)*	\$6.54			
	Employee + Spouse + Child(ren)	\$10.06			
	Employee + DP + Employee's Child(ren)*	\$10.06			
	Employee + DP + DP's Child(ren)*	\$10.06			
	Employee Only	\$6.40			
	Employee + Spouse	\$9.34			
	Employee + Domestic Partner (DP)*	\$9.34			
VSP	Employee + Employee's Child(ren)	\$9.95			
Enhanced	Employee + DP's Child(ren)*	\$9.95			
	Employee + Spouse + Child(ren)	\$15.32			
	Employee + DP + Employee's Child(ren)*	\$15.32			
	Employee + DP + DP's Child(ren)*	\$15.32			

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