

Boston Office 2026 Employee Monthly Healthcare Costs

Employees Earning	BCBS POS	BCBS HDHP	CIGNA Dental	VSP Vision
< \$85,000				
Just You	\$167.00	\$182.00	\$10.40	\$1.64
You + Spouse/DP	\$445.00	\$482.00	\$27.70	\$3.58
You + Child(ren)	\$388.00	\$424.00	\$36.38	\$3.70
You + Family	\$743.00	\$776.00	\$58.00	\$6.52
\$85,001 - \$170,000				
Just You	\$267.00	\$289.00	\$15.20	\$2.38
You + Spouse/DP	\$642.00	\$660.00	\$33.84	\$4.48
You + Child(ren)	\$563.00	\$588.00	\$43.18	\$4.60
You + Family	\$1,040.00	\$1,021.00	\$66.52	\$7.66
\$170,001 - \$255,000				
Just You	\$346.00	\$354.00	\$18.18	\$2.88
You + Spouse/DP	\$859.00	\$874.00	\$48.10	\$6.28
You + Child(ren)	\$759.00	\$773.00	\$63.10	\$6.44
You + Family	\$1422.00	\$1,377.00	\$100.46	\$11.36

Boston Office 2026 Employee Monthly Healthcare Cost

Employees Earning	BCBS POS	BCBS HDHP	CIGNA Dental	VSP Vision
\$255,001 - \$340,000				
Just You	\$438.00	\$435.00	\$25.56	\$4.02
You + Spouse/DP	\$1,011.00	\$1,013.00	\$61.50	\$8.08
You + Child(ren)	\$890.00	\$902.00	\$79.54	\$8.28
You + Family	\$1,618.00	\$1,575.00	\$124.46	\$14.18
\$340,001				
Just You	\$482.00	\$479.00	\$28.12	\$4.58
You + Spouse/DP	\$1,071.00	\$1,074.00	\$68.10	\$9.28
You + Child(ren)	\$956.00	\$959.00	\$88.14	\$9.50
You + Family	\$1,717.00	\$1,664.00	\$138.10	\$16.32

Boston Office

2026 **Exempt** Per Pay Period Contribution Schedule

Employees Earning	BCBS POS	BCBS HDHP	CIGNA Dental	VSP Vision
< \$85,000				
Just You	\$83.50	\$91.00	\$5.20	\$0.82
You + Spouse/DP	\$222.50	\$241.00	\$13.85	\$1.79
You + Child(ren)	\$194.00	\$212.00	\$18.19	\$1.85
You + Family	\$371.50	\$388.00	\$29.00	\$3.26
\$85,001 - \$170,000				
Just You	\$133.50	\$144.50	\$7.60	\$1.19
You + Spouse/DP	\$321.00	\$330.00	\$16.92	\$2.24
You + Child(ren)	\$281.50	\$294.00	\$21.59	\$2.30
You + Family	\$520.00	\$510.50	\$33.26	\$3.83
\$170,001 - \$255,000				
Just You	\$173.00	\$177.00	\$9.09	\$1.44
You + Spouse/DP	\$429.50	\$437.00	\$24.05	\$3.14
You + Child(ren)	\$379.50	\$386.50	\$31.55	\$3.22
You + Family	\$711.00	\$688.50	\$50.23	\$5.68

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2026 **Exempt** Per Pay Period Contribution Schedule

Employees Earning	BCBS POS	BCBS HDHP	CIGNA Dental	VSP Vision
\$255,001 - \$340,000				
Just You	\$219.00	\$217.50	\$12.78	\$2.01
You + Spouse/DP	\$505.50	\$506.50	\$30.75	\$4.04
You + Child(ren)	\$445.00	\$451.00	\$39.77	\$4.14
You + Family	\$809.00	\$787.50	\$62.23	\$7.09
\$340,001				
Just You	\$241.00	\$239.50	\$14.06	\$2.29
You + Spouse/DP	\$535.50	\$537.00	\$34.05	\$4.64
You + Child(ren)	\$478.00	\$479.50	\$44.07	\$4.75
You + Family	\$858.50	\$832.00	\$69.05	\$8.16

Boston Office

2026 **Non-Exempt** Per Pay Period Contribution Schedule

Employees Earning	BCBS POS	BCBS HDHP	CIGNA Dental	VSP Vision
< \$85,000				
Just You	\$77.08	\$84.00	\$4.80	\$0.76
You + Spouse/DP	\$205.38	\$222.46	\$12.78	\$1.65
You + Child(ren)	\$179.08	\$195.69	\$16.79	\$1.71
You + Family	\$342.92	\$358.15	\$26.77	\$3.01
\$85,001 - \$170,000				
Just You	\$123.23	\$133.38	\$7.02	\$1.10
You + Spouse/DP	\$296.31	\$304.62	\$15.62	\$2.07
You + Child(ren)	\$259.85	\$271.38	\$19.93	\$2.12
You + Family	\$480.00	\$471.23	\$30.70	\$3.54
\$170,001 - \$255,000				
Just You	\$159.69	\$163.38	\$8.39	\$1.33
You + Spouse/DP	\$396.46	\$403.38	\$22.20	\$2.90
You + Child(ren)	\$350.31	\$356.77	\$29.12	\$2.97
You + Family	\$656.31	\$635.54	\$46.37	\$5.24

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2026 **Non-Exempt** Per Pay Period Contribution Schedule

Employees Earning	BCBS POS	BCBS HDHP	CIGNA Dental	VSP Vision
\$255,001 - \$340,000				
Just You	\$202.15	\$200.77	\$11.80	\$1.86
You + Spouse/DP	\$466.62	\$467.54	\$28.38	\$3.73
You + Child(ren)	\$410.77	\$416.31	\$36.71	\$3.82
You + Family	\$746.77	\$726.92	\$57.44	\$6.54
\$340,001				
Just You	\$222.46	\$221.08	\$12.98	\$2.11
You + Spouse/DP	\$494.31	\$495.69	\$31.43	\$4.28
You + Child(ren)	\$441.23	\$442.62	\$40.68	\$4.38
You + Family	\$792.46	\$768.00	\$63.74	\$7.53