# 2026 Benefit Premiums – Summit County Public Health

The charts below summarize County and Employee benefit premiums for coverage in 2026.

#### **MEDICAL & PRESCRIPTION COVERAGE**

Medical Mutua	<u>al</u>
PPO Advantac	ıе

	Employee Bi-Weekly	Employer Bi-Weekly
Single	\$73.25	\$415.10
Family	\$197.28	\$1,117.91

# Medical Mutual MedFlex Plan

	<b>Employee Bi-Weekly</b>	<b>Employer Bi-Weekly</b>
Single	\$36.26	\$326.30
Family	\$97.64	\$878.75

Medical Mutual Maximum Value Plan (HSA)

	Employee Bi-Weekly	Employer Bi-Weekly
Single	\$31.78	\$257.15
Family	\$85.59	\$692.51

# **SummaCare**

	<b>Employee Bi-Weekly</b>	<b>Employer Bi-Weekly</b>
Single	\$36.26	\$326.30
Family	\$97.64	\$878.75

## **DENTAL COVERAGE**

MetLife Dental PPO & MAC Plans

	Employee Bi-Weekly	Employer Bi-Weekly
Single	\$13.42	n/a
Family	\$39.76	n/a

### VISION COVERAGE

**VSP Vision** 

	Employee Bi-Weekly Em	ployer Bi-Weekly
Single	\$2.15	n/a
Family	\$5.93	n/a

Monthly Cash Incentive – County employees will receive a \$50 monthly cash incentive if they decline medical and prescription coverage and provide proof that they are covered under another medical plan outside the County's program. County employees that are married or a dependent to each other and elect County coverage under one employee are not eligible for the monthly cash incentive. You will still be eligible for the other employee benefit programs. Employees are subject to the applicable terms of their collective bargaining agreement.