

**Educators Health Alliance**  
**Renewal Rates for Health, Dental, and Dual Choice Options**  
**Effective September 1, 2025**  
**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)
<b>\$650 Deductible</b>	<b>NEtwork Blue</b>	\$910.28	\$1,684.02	\$1,911.57	\$2,566.75
<b>\$850 Deductible</b>	<b>NEtwork Blue</b>	\$885.68	\$1,638.54	\$1,859.96	\$2,497.44
<b>\$1,050 Deductible</b>	<b>NEtwork Blue</b>	\$863.10	\$1,596.76	\$1,812.52	\$2,433.76
<b>\$1,200 Deductible</b>	<b>NEtwork Blue</b>	\$848.46	\$1,569.62	\$1,781.71	\$2,392.39
<b>\$1,450 Deductible</b>	<b>NEtwork Blue</b>	\$833.99	\$1,542.95	\$1,751.39	\$2,351.70
<b>\$1,900 Deductible</b>	<b>NEtwork Blue</b>	\$798.95	\$1,478.09	\$1,677.79	\$2,252.87
<b>\$4,000 Deductible HSA-Eligible</b>	<b>NEtwork Blue</b>	\$647.31	\$1,197.58	\$1,359.39	\$1,825.29
<b>\$2,500 Deductible (Dual Choice Only)</b>	<b>NEtwork Blue</b>	\$728.21	\$1,347.23	\$1,529.28	\$2,053.42
<b>\$3,800 Deductible HSA-Eligible (Dual Choice Only)</b>	<b>NEtwork Blue</b>	\$728.21	\$1,347.23	\$1,529.28	\$2,053.42

Health Coverage - Retirees	Network	Renewal Rates			
		Employee	Ee & Child(ren)	Ee & Spouse	Ee, Spouse & Child(ren)
<b>\$400 Deductible</b>	<b>PSBC/Blueprint Health</b>	\$894.95	\$1,586.52	\$1,879.37	\$2,375.69
<b>\$1,050 Deductible</b>	<b>NEtwork Blue</b>	\$966.81	\$1,713.89	\$2,030.28	\$2,566.45
<b>\$4,000 Deductible HSA-Eligible</b>	<b>NEtwork Blue</b>	\$725.13	\$1,285.43	\$1,522.76	\$1,924.82
<b>\$2,500 Deductible</b>	<b>NEtwork Blue</b>	\$815.75	\$1,446.05	\$1,713.02	\$2,165.37
<b>\$3,800 Deductible HSA-Eligible</b>	<b>NEtwork Blue</b>	\$815.75	\$1,446.05	\$1,713.02	\$2,165.37

Dental Coverage	Network	Renewal Rates			
		Employee	Ee & Child(ren)	Ee & Spouse	Ee, Spouse & Child(ren)
<b>100% A, 75% B Coverage - Option 1</b>	<b>Network BLUE Dental</b>	\$29.51	\$54.56	\$61.92	\$83.18
<b>100% A, 80% B, 70% C Coverage - Option 3</b>	<b>Network BLUE Dental</b>	\$62.64	\$115.91	\$131.55	\$176.65
<b>PPO - 100% A, 75% B, 50% C Coverage - Option 2</b>	<b>Network BLUE Dental</b>	\$31.78	\$58.76	\$66.70	\$89.61
<b>PPO - 100% A, 80% B, 80% C, 50% D Coverage - Option 4</b>	<b>Network BLUE Dental</b>	\$57.03	\$105.51	\$119.79	\$160.88
<b>PPO - 100% A, B, &amp; C Coverage - Option 5</b>	<b>Network BLUE Dental</b>	\$62.41	\$115.48	\$131.09	\$176.06