

## BENEFITS RATE SHEET

Medical Plans	Contribution Based on 24 Pays			Contribution Based on 26 Pays		
	Medical	7/1/2025-6/30/2026		Medical	7/1/2025-6/30/2026	
PPO Plan	Employee Portion	YSU Portion	Total	Employee Portion	YSU Portion	Total
Single	\$112.98	\$451.90	\$564.88	\$104.28	\$417.14	\$521.42
Single +1	\$225.95	\$903.78	\$1129.73	\$208.57	\$834.26	\$1042.83
Family	\$310.68	\$1242.71	\$1553.39	\$286.78	\$1147.12	\$1,433.90

Consumer Driven Health Plan	Employee Portion	YSU Portion	Total	Employee Portion	YSU Portion	Total
Single	\$63.67	\$360.78	\$424.45	\$58.77	\$333.03	\$391.80
Family	\$175.08	\$992.12	\$1167.20	\$161.61	\$915.81	\$1077.42

Dental		1/1/2026-12/31/2026		Dental		1/1/2026-12/31/2026	
Dental	Employee Portion	YSU Portion	Total	Employee Portion	YSU Portion	Total	
Single	\$2.96	\$11.86	\$14.82	\$2.74	\$10.94	\$13.68	
Single +1	\$5.60	\$22.40	\$28.00	\$5.17	\$20.68	\$25.85	
Family	\$10.08	\$40.34	\$50.42	\$9.31	\$37.23	\$46.54	

Vision		1/1/2026 - 12/31/2026		Vision		1/1/2026 - 12/31/2026	
Vision	Employee Portion	YSU Portion	Total	Employee Portion	YSU Portion	Total	
Single	\$0.32	\$1.28	\$1.60	\$0.29	\$1.18	\$1.47	
Single +1	\$0.64	\$2.56	\$3.20	\$0.59	\$2.36	\$2.95	
Family	\$1.16	\$4.62	\$5.78	\$1.07	\$4.26	\$5.33	

Flexible Spending Account Administrative Cost						
			\$2.77			\$2.56