

## City of Jacksonville

## Health Insurance Premiums Full-Time Employees

Effective January 1, 2026

With 5% Contribution							
WITHOUT \$30 CAP	WITH \$30 CAP						
BU's: 10, 11, 13, 14, 70, 90, 120, 140	BU's: 7, 12, 21-29, 37, 81-89, 130, 131 (only)						

Plan Name Plan Options Plan Premiums

Bluecare 48 HMO	care 48 HMO		Per Pay Period	Per Pay Period		
	Employee Only		\$ 14.82	2 \$ 14.82		
	Employee & Spouse		\$ 171.6	1 \$ 171.61		
	Employee & Child(ren)		\$ 150.7	3 \$ 150.73		
	Employee & Family		\$ 320.0	5 \$ 320.05		

Bluecare 65 HMO HDHP		Pe	r Pay Period	Per	Pay Period
	Employee Only	\$	-	\$	-
	Employee & Spouse	\$	147.74	\$	147.74
	Employee & Child(ren)	\$	128.03	\$	128.03
	Employee & Family	\$	287.93	\$	287.93

BlueOptions 05782 PPO	Per Pay Period	Pe	r Pay Period
Employee Only	\$ 16.98	\$	15.00
Employee & Spouse	\$ 196.40	\$	194.41
Employee & Child(ren)	\$ 172.45	\$	170.47
Employee & Family	\$ 366.40	\$	364.42

BlueOptions 03768 UF Health EPO	Pe	er Pay Period	Pe	r Pay Period
Employee Only	\$	-	\$	-
Employee & Spouse	\$	147.74	\$	147.74
Employee & Child(ren)	\$	128.03	\$	128.03
Employee & Family	\$	287.93	\$	287.93

BlueCare 128/129 HMO QHDHP + HSA		Per Pay Period	Per Pay Period		
Employee Only	\$	14.82	\$	14.82	
Employee & Spouse	\$	171.36	\$	171.36	
Employee & Child(ren)	\$	150.73	\$	150.73	
Employee & Family	\$	320.05	\$	320.05	

Tricare Supplemental Plan - Retired Military or Reservist Only	Per Month	Pe	r Pay Period
Employee Only	\$ 68.42	\$	34.21
Employee & Spouse	\$ 134.30	\$	67.15
Employee & Child(ren)	\$ 134.30	\$	67.15
Employee & Family	\$ 180.93	\$	90.46
Continuing Spouse	\$ 68.42	\$	34.21
Continuing Child	\$ 68.42	\$	34.21
Continuing Spouse & Child(ren)	\$ 134.30	\$	67.15