

Your 2026 Health Care Plan Options

PLAN FEATURE	ANTHEM BLUE CROSS TRADITIONAL PPO	ANTHEM BLUE CROSS DEDUCTIBLE PPO¹	CAPITAL DISTRICT PHYSICIANS' HEALTH PLAN (CDPHP)	INDEPENDENT HEALTH ASSOCIATION (IHA)	MVP
MONTHLY RATES					
Individual	\$1,468.27	\$1,345.96	\$1,388.31	\$1,181.72	\$1,324.16
Individual + Spouse/ Domestic Partner	\$3,067.35	\$2,822.79	\$2,915.46	\$2,836.14	\$3,125.20
Individual + Child(ren)	\$2,598.80	\$2,378.65	\$2,637.80	\$2,127.10	\$2,466.35
Family	\$4,392.99	\$4,027.27	\$3,887.28	\$3,308.82	\$3,295.29

Graduate Student and Postdoc Employee Health Plan through Anthem

MONTHLY RATES	
Individual	\$530.89
Individual + One	\$1,154.95
Family	\$1,516.88

Your 2026 Dental and Vision Plan Rates

2026 Dental Care Plan Offered through Delta Dental		2026 Vision Care Plans Administered by Davis Vision, Inc.			
Covers preventive, basic, major and orthodontic care.		Basic Vision Plan Provides a basic level of coverage for eye exams, and eyeglasses or contact lenses.		Vision Plan Plus Provides an enhanced level of coverage for eye exams, and eyeglasses or contact lenses.	
COVERAGE LEVEL	MONTHLY RATES	COVERAGE LEVEL	MONTHLY RATES	COVERAGE LEVEL	MONTHLY RATES
Individual	\$35.22	Individual	\$4.34	Individual	\$12.37
Family	\$83.27	Family	\$10.30	Family	\$29.05