

## Health Care Plan Options and Costs Changes from 2025 to 2026

## **Employee Contributions Per Pay Period**

Administrators, Board of Trustees, Confidentials, POA, Supervisors, WVMCEA

Community College District	DeltaCare HMO			DeltaCare HMO & VSP			Delta PPO			Delta PPO & VSP		
	2025	2026	Change from 2025	2025	2026	Change from 2025	2025	2026	Change from 2025	2025	2026	Change from 2025
Anthem Select HMO Employee Only Employee +1 Employee + 2 or More	\$63.31	\$0.00	-\$63.31	\$77.71	\$0.00	-\$77.71	\$117.42	\$19.56	-\$97.86	\$131.82	\$33.96	-\$97.86
	\$192.30	\$3.83	-\$188.47	\$206.70	\$18.23	-\$188.47	\$246.41	\$57.94	-\$188.47	\$260.81	\$72.34	-\$188.47
	\$269.70	\$26.85	-\$242.85	\$284.10	\$41.25	-\$242.85	\$323.81	\$80.96	-\$242.85	\$338.21	\$95.36	-\$242.85
Anthem Traditional HMO Employee Only Employee +1 Employee + 2 or More	\$307.06	\$241.24	-\$65.82	\$321.46	\$255.64	-\$65.82	\$361.17	\$295.35	-\$65.82	\$375.57	\$309.75	-\$65.82
	\$679.80	\$555.41	-\$124.39	\$694.20	\$569.81	-\$124.39	\$733.91	\$609.52	-\$124.39	\$748.31	\$623.92	-\$124.39
	\$903.45	\$743.91	-\$159.54	\$917.85	\$758.31	-\$159.54	\$957.56	\$798.02	-\$159.54	\$971.96	\$812.42	-\$159.54
Blue Shield Access+ HMO Employee Only Employee +1 Employee + 2 or More	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$30.94	\$0.00	-\$30.94	\$45.34	\$0.00	-\$45.34
	\$19.34	\$0.00	- <b>\$19.34</b>	\$33.74	\$0.00	- <b>\$33.74</b>	\$73.45	\$0.00	-\$73.45	\$87.85	\$3.66	-\$84.19
	\$44.85	\$0.00	- <b>\$44.85</b>	\$59.25	\$0.00	- <b>\$59.25</b>	\$98.96	\$0.00	-\$98.96	\$113.36	\$6.08	-\$107.28
Blue Shield Trio HMO Employee Only Employee +1 Employee + 2 or More	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$9.96	\$0.00	-\$9.96
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$2.69	\$0.00	- <b>\$2.69</b>	\$17.09	\$0.00	-\$17.09
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$6.97	\$0.00	- <b>\$6.97</b>	\$21.37	\$0.00	-\$21.37
Kaiser HMO Employee Only Employee +1 Employee + 2 or More	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
UnitedHealthCare Alliance HMO Employee Only Employee +1 Employee + 2 or More	\$0.00	\$0.00	\$0.00	\$5.64	\$0.00	-\$5.64	\$45.35	\$0.00	-\$45.35	\$59.75	\$0.00	-\$59.75
	\$48.16	\$0.00	- <b>\$48.16</b>	\$62.56	\$0.00	-\$62.56	\$102.27	\$0.00	-\$102.27	\$116.67	\$0.00	-\$116.67
	\$82.32	\$0.00	- <b>\$82.32</b>	\$96.72	\$0.00	-\$96.72	\$136.43	\$0.00	-\$136.43	\$150.83	\$0.00	-\$150.83
UnitedHealthCare Harmony HMO Employee Only Employee +1 Employee + 2 or More	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PERS Gold PPO Employee Only Employee +1 Employee + 2 or More	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PERS Platinum PPO Employee Only Employee +1 Employee + 2 or More	\$282.76	\$299.30	\$16.54	\$297.16	\$313.70	\$16.54	\$336.87	\$353.41	\$16.54	\$351.27	\$367.81	\$16.54
	\$631.20	\$671.53	\$40.33	\$645.60	\$685.93	\$40.33	\$685.31	\$725.64	\$40.33	\$699.71	\$740.04	\$40.33
	\$840.27	\$894.86	\$54.59	\$854.67	\$909.26	\$54.59	\$894.38	\$948.97	\$54.59	\$908.78	\$963.37	\$54.59
PORAC PPO (Association Plan) Employee Only Employee +1 Employee + 2 or More	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00



## Health Care Plan Options and Costs Changes from 2025 to 2026 Employee Contributions Per Pay Period 11-Month Faculty

Community College District	DeltaCare HMO			DeltaCare HMO & VSP			Delta PPO			Delta PPO & VSP		
	2025	2026	Change from 2025	2025	2026	Change from 2025	2025	2026	Change from 2025	2025	2026	Change from 2025
Anthem Select HMO Employee Only Employee +1 Employee + 2 or More	\$69.07	\$0.00	-\$69.07	\$84.78	\$0.00	-\$84.78	\$128.10	\$21.34	-\$106.76	\$143.81	\$37.05	-\$106.76
	\$209.78	\$4.17	-\$205.61	\$225.49	\$19.88	-\$205.61	\$268.81	\$63.20	-\$205.61	\$284.52	\$78.91	-\$205.61
	\$294.22	\$29.29	-\$264.93	\$309.93	\$45.00	-\$264.93	\$353.25	\$88.32	-\$264.93	\$368.96	\$104.03	-\$264.93
Anthem Traditional HMO Employee Only Employee +1 Employee + 2 or More	\$334.98	\$263.17	-\$71.81	\$350.69	\$278.88	-\$71.81	\$394.01	\$322.20	-\$71.81	\$409.72	\$337.91	-\$71.81
	\$741.60	\$605.90	-\$135.70	\$757.31	\$621.61	-\$135.70	\$800.63	\$664.93	-\$135.70	\$816.33	\$680.64	-\$135.69
	\$985.59	\$811.53	-\$174.06	\$1,001.29	\$827.24	-\$174.05	\$1,044.61	\$870.56	-\$174.05	\$1,060.32	\$886.27	-\$174.05
Blue Shield Access+ HMO Employee Only Employee +1 Employee + 2 or More	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$33.76	\$0.00	-\$33.76	\$49.47	\$0.00	-\$49.47
	\$21.09	\$0.00	- <b>\$21.09</b>	\$36.80	\$0.00	- <b>\$36.80</b>	\$80.12	\$0.00	-\$80.12	\$95.83	\$3.99	-\$91.84
	\$48.93	\$0.00	- <b>\$48.93</b>	\$64.64	\$0.00	- <b>\$64.64</b>	\$107.96	\$0.00	-\$107.96	\$123.67	\$6.63	-\$117.04
Blue Shield Trio HMO Employee Only Employee +1 Employee + 2 or More	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$10.87	\$0.00	-\$10.87
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$2.93	\$0.00	- <b>\$2.93</b>	\$18.64	\$0.00	-\$18.64
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$7.61	\$0.00	- <b>\$7.61</b>	\$23.32	\$0.00	-\$23.32
Kaiser HMO Employee Only Employee +1 Employee + 2 or More	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
UnitedHealthCare Alliance HMO Employee Only Employee +1 Employee + 2 or More	\$0.00	\$0.00	\$0.00	\$6.16	\$0.00	-\$6.16	\$49.48	\$0.00	-\$49.48	\$65.19	\$0.00	-\$65.19
	\$52.53	\$0.00	- <b>\$52.53</b>	\$68.24	\$0.00	-\$68.24	\$111.56	\$0.00	-\$111.56	\$127.27	\$0.00	-\$127.27
	\$89.81	\$0.00	- <b>\$89.81</b>	\$105.52	\$0.00	-\$105.52	\$148.84	\$0.00	-\$148.84	\$164.55	\$0.00	-\$164.55
UnitedHealthCare Harmony HMO Employee Only Employee +1 Employee + 2 or More	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PERS Gold PPO Employee Only Employee +1 Employee + 2 or More	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PERS Platinum PPO Employee Only Employee +1 Employee + 2 or More	\$308.47	\$326.51	\$18.04	\$324.18	\$342.22	\$18.04	\$367.50	\$385.54	\$18.04	\$383.21	\$401.25	\$18.04
	\$688.58	\$732.57	\$43.99	\$704.29	\$748.28	\$43.99	\$747.61	\$791.60	\$43.99	\$763.32	\$807.31	\$43.99
	\$916.66	\$976.21	\$59.55	\$932.37	\$991.92	\$59.55	\$975.69	\$1,035.24	\$59.55	\$991.40	\$1,050.95	\$59.55



## Health Care Plan Options and Costs Changes from 2025 to 2026 Employee Contributions Per Pay Period 10-Month Faculty

Community College District	DeltaCare HMO			DeltaCare HMO & VSP				Delta PPO		Delta PPO & VSP		
	2025	2026	Change from 2025	2025	2026	Change from 2025	2025	2026	Change from 2025	2025	2026	Change from 2025
Anthem Select HMO Employee Only Employee +1 Employee + 2 or More	\$75.98	\$0.00	-\$75.98	\$93.26	\$0.00	-\$93.26	\$140.91	\$23.48	-\$117.43	\$158.19	\$40.76	-\$117.43
	\$230.76	\$4.59	-\$226.17	\$248.04	\$21.87	-\$226.17	\$295.69	\$69.52	-\$226.17	\$312.97	\$86.80	-\$226.17
	\$323.64	\$32.22	-\$291.42	\$340.92	\$49.50	-\$291.42	\$388.58	\$97.15	-\$291.43	\$405.86	\$114.43	-\$291.43
Anthem Traditional HMO Employee Only Employee +1 Employee + 2 or More	\$368.48	\$289.49	-\$78.99	\$385.76	\$306.77	-\$78.99	\$433.41	\$354.42	-\$78.99	\$450.69	\$371.70	-\$78.99
	\$815.76	\$666.49	-\$149.27	\$833.04	\$683.77	-\$149.27	\$880.69	\$731.42	-\$149.27	\$897.97	\$748.70	-\$149.27
	\$1,084.14	\$892.69	-\$191.45	\$1,101.42	\$909.97	-\$191.45	\$1,149.08	\$957.62	-\$191.46	\$1,166.36	\$974.90	-\$191.46
Blue Shield Access+ HMO Employee Only Employee +1 Employee + 2 or More	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$37.13	\$0.00	-\$37.13	\$54.41	\$0.00	-\$54.41
	\$23.20	\$0.00	- <b>\$23.20</b>	\$40.48	\$0.00	- <b>\$40.48</b>	\$88.14	\$0.00	-\$88.14	\$105.42	\$4.39	-\$101.03
	\$53.82	\$0.00	- <b>\$53.82</b>	\$71.10	\$0.00	- <b>\$71.10</b>	\$118.76	\$0.00	-\$118.76	\$136.04	\$7.29	-\$128.75
Blue Shield Trio HMO Employee Only Employee +1 Employee + 2 or More	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$11.96	\$0.00	-\$11.96
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$3.22	\$0.00	- <b>\$3.22</b>	\$20.50	\$0.00	-\$20.50
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$8.37	\$0.00	- <b>\$8.37</b>	\$25.65	\$0.00	-\$25.65
Kaiser HMO Employee Only Employee +1 Employee + 2 or More	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
UnitedHealthCare Alliance HMO Employee Only Employee +1 Employee + 2 or More	\$0.00	\$0.00	\$0.00	\$6.77	\$0.00	-\$6.77	\$54.42	\$0.00	-\$54.42	\$71.70	\$0.00	-\$71.70
	\$57.79	\$0.00	- <b>\$57.79</b>	\$75.07	\$0.00	-\$75.07	\$122.72	\$0.00	-\$122.72	\$140.00	\$0.00	-\$140.00
	\$98.79	\$0.00	- <b>\$98.79</b>	\$116.07	\$0.00	-\$116.07	\$163.72	\$0.00	-\$163.72	\$181.00	\$0.00	-\$181.00
UnitedHealthCare Harmony HMO Employee Only Employee + 1 Employee + 2 or More	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PERS Gold PPO Employee Only Employee +1 Employee + 2 or More	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PERS Platinum PPO Employee Only Employee +1 Employee + 2 or More	\$339.32	\$359.16	\$19.84	\$356.60	\$376.44	\$19.84	\$404.25	\$424.10	\$19.85	\$421.53	\$441.38	\$19.85
	\$757.44	\$805.83	\$48.39	\$774.72	\$823.11	\$48.39	\$822.37	\$870.76	\$48.39	\$839.65	\$888.04	\$48.39
	\$1,008.33	\$1,073.83	\$65.50	\$1,025.61	\$1,091.11	\$65.50	\$1,073.26	\$1,138.76	\$65.50	\$1,090.54	\$1,156.04	\$65.50