



2027 BI-WEEKLY CONTRIBUTIONS

Below are the **bi-weekly costs** for medical depending on what plan you choose.

HSP MEDICAL (ANTHEM BCBS)

Salary	Less than \$50,000	\$50,000 to \$89,000	\$90,000 to \$119,999	\$120,000 or more
Employee Only	\$59.64	\$67.91	\$82.65	\$91.47
Employee + Spouse	\$126.49	\$159.66	\$193.71	\$215.19
Employee + Child(ren)	\$75.90	\$100.32	\$131.72	\$148.07
Employee + Family	\$169.87	\$211.04	\$256.34	\$284.29

HSP HPN MEDICAL (ANTHEM BCBS)

Salary	Less than \$50,000	\$50,000 to \$89,000	\$90,000 to \$119,999	\$120,000 or more
Employee Only	\$29.50	\$43.14	\$56.51	\$64.83
Employee + Spouse	\$69.32	\$101.59	\$132.42	\$152.73
Employee + Child(ren)	\$37.46	\$54.88	\$83.76	\$99.19
Employee + Family	\$94.31	\$134.31	\$175.35	\$201.75

PPO MEDICAL (ANTHEM BCBS)

Salary	Less than \$50,000	\$50,000 to \$89,000	\$90,000 to \$119,999	\$120,000 or more
Employee Only	\$80.85	\$91.46	\$109.99	\$134.18
Employee + Spouse	\$175.17	\$214.93	\$258.70	\$315.50
Employee + Child(ren)	\$112.12	\$141.18	\$180.00	\$221.66
Employee + Family	\$234.41	\$284.09	\$341.76	\$416.82

*Does not include the 100/month spousal surcharge or \$50/month tobacco surcharge.



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PPO HPN MEDICAL (ANTHEM BCBS)

Salary	Less than \$50,000	\$50,000 to \$89,000	\$90,000 to \$119,999	\$120,000 or more
Employee Only	\$48.79	\$58.39	\$74.22	\$93.94
Employee + Spouse	\$100.01	\$137.40	\$174.82	\$221.14
Employee + Child(ren)	\$53.31	\$80.51	\$114.37	\$147.82
Employee + Family	\$135.09	\$181.64	\$230.93	\$292.14

You will pay an additional \$100 per month spousal surcharge if your spouse has access to other medical coverage, but you choose to cover them under an Allegion medical plan.

You will pay an additional \$50 per month tobacco surcharge if you enroll in an Allegion medical plan and use any kind of tobacco or nicotine product.

DENTAL (DELTA DENTAL)

	DPPO PLAN	DPPO BUY-UP PLAN
Employee Only	\$5.08	\$6.72
Employee + Spouse	\$10.15	\$13.28
Employee + Child(ren)	\$12.00	\$15.80
Employee + Family	\$18.92	\$25.21

VISION (VSP)

VISION PLAN
\$2.83
\$5.64
\$6.04
\$9.65

*Does not include the 100/month spousal surcharge or \$50/month tobacco surcharge.