HCI (Health insurance rates for 2026)

EnhancedBlue 3000 HMO
Employee Only Rates
Rates are Per Pay Period (24 periods)

Age	Employee	Spouse	Child
Under 14	$30.13		
15	$32.80		
16	$33.83		
17	$34.85		
18	$35.95		
19	$37.06		
20	$38.20		
21	$39.38		
22	$39.38		
23	$39.38		
24	$39.38		
25	$39.54		
26	$40.32		
27	$41.27		
28	$42.81		
29	$44.07		
30	$44.70		
31	$45.64		
32	$46.59		
33	$47.18		
34	$47.81		
35	$48.12		
36	$48.44		
37	$48.75		
38	$49.07		
39	$49.70		

Age	Employee	Spouse
40	$50.33	
41	$51.27	
42	$52.18	
43	$53.44	
44	$55.01	
45	$56.86	
46	$59.07	
47	$61.55	
48	$64.38	
49	$67.18	
50	$70.33	
51	$73.44	
52	$76.87	
53	$80.33	
54	$84.07	
55	$87.82	
56	$91.87	
57	$95.97	
58	$100.34	
59	$102.50	
60	$106.87	
61	$110.66	
62	$113.14	
63	$116.25	
64 and over	$118.14	

HCI (Health insurance rates for 2026)

EnhancedBlue 3000 HMO

Employee/Spouse Rates

Rates are Per Pay Period (24 periods)

Add Spouse rate to employee rate for total per pay period rate

Age	Employee	Spouse	Child
Under 14	$45.19	$150.63	
15	$49.20	$164.02	
16	$50.74	$169.13	
17	$52.28	$174.25	
18	$53.93	$179.77	
19	$55.58	$185.28	
20	$57.30	$190.99	
21	$59.07	$196.90	
22	$59.07	$196.90	
23	$59.07	$196.90	
24	$59.07	$196.90	
25	$59.30	$197.68	
26	$60.49	$201.62	
27	$61.90	$206.35	
28	$64.21	$214.03	
29	$66.10	$220.33	
30	$67.04	$223.48	
31	$68.46	$228.20	
32	$69.88	$232.93	
33	$70.76	$235.88	
34	$71.71	$239.03	
35	$72.18	$240.61	
36	$72.65	$242.18	
37	$73.13	$243.76	
38	$73.60	$245.33	
39	$74.54	$248.48	

Age	Employee	Spouse
40	$75.49	$251.63
41	$76.91	$256.36
42	$78.27	$260.89
43	$80.16	$267.19
44	$82.52	$275.06
45	$85.29	$284.32
46	$88.60	$295.34
47	$92.32	$307.75
48	$96.58	$321.92
49	$100.77	$335.90
50	$105.50	$351.66
51	$110.16	$367.21
52	$115.30	$384.34
53	$120.50	$401.67
54	$126.11	$420.37
55	$131.72	$439.08
56	$137.81	$459.36
57	$143.95	$479.83
58	$150.51	$501.69
59	$153.75	$512.52
60	$160.31	$534.37
61	$165.98	$553.28
62	$169.70	$565.68
63	$174.37	$581.23
64 and over	$177.21	$590.69

HCI (Health insurance rates for 2026)

EnhancedBlue 3000 HMO

Employee/Child(ren) Rates

Rates are Per Pay Period (24 periods)

Add per child rate to employee rate for total per pay period rate

Age	Employee	Spouse	Child
Under 14	$45.19		$45.19
15	$49.20		$49.20
16	$50.74		$50.74
17	$52.28		$52.28
18	$53.93		$53.93
19	$55.58		$55.58
20	$57.30		$57.30
21	$59.07		$59.07
22	$59.07		$59.07
23	$59.07		$59.07
24	$59.07		$59.07
25	$59.30		$59.30
26	$60.49		
27	$61.90		
28	$64.21		
29	$66.10		
30	$67.04		
31	$68.46		
32	$69.88		
33	$70.76		
34	$71.71		
35	$72.18		
36	$72.65		
37	$73.13		
38	$73.60		
39	$74.54		

Age	Employee	Spouse
40	$75.49	
41	$76.91	
42	$78.27	
43	$80.16	
44	$82.52	
45	$85.29	
46	$88.60	
47	$92.32	
48	$96.58	
49	$100.77	
50	$105.50	
51	$110.16	
52	$115.30	
53	$120.50	
54	$126.11	
55	$131.72	
56	$137.81	
57	$143.95	
58	$150.51	
59	$153.75	
60	$160.31	
61	$165.98	
62	$169.70	
63	$174.37	
64 and over	$177.21	

HCI (Health insurance rates for 2026)

EnhancedBlue 3000 HMO
Employee/Family Rates
Rates are Per Pay Period (24 periods)

Age	Employee	Spouse	Child
Under 14	$45.19	$45.19	$45.19
15	$49.20	$49.20	$49.20
16	$50.74	$50.74	$50.74
17	$52.28	$52.28	$52.28
18	$53.93	$53.93	$53.93
19	$55.58	$55.58	$55.58
20	$57.30	$57.30	$57.30
21	$59.07	$59.07	$59.07
22	$59.07	$59.07	$59.07
23	$59.07	$59.07	$59.07
24	$59.07	$59.07	$59.07
25	$59.30	$59.30	$59.30
26	$60.49	$60.49	
27	$61.90	$61.90	
28	$64.21	$64.21	
29	$66.10	$66.10	
30	$67.04	$67.04	
31	$68.46	$68.46	
32	$69.88	$69.88	
33	$70.76	$70.76	
34	$71.71	$71.71	
35	$72.18	$72.18	
36	$72.65	$72.65	
37	$73.13	$73.13	
38	$73.60	$73.60	
39	$74.54	$74.54	

Age	Employee	Spouse
40	$75.49	$75.49
41	$76.91	$76.91
42	$78.27	$78.27
43	$80.16	$80.16
44	$82.52	$82.52
45	$85.29	$85.29
46	$88.60	$88.60
47	$92.32	$92.32
48	$96.58	$96.58
49	$100.77	$100.77
50	$105.50	$105.50
51	$110.16	$110.16
52	$115.30	$115.30
53	$120.50	$120.50
54	$126.11	$126.11
55	$131.72	$131.72
56	$137.81	$137.81
57	$143.95	$143.95
58	$150.51	$150.51
59	$153.75	$153.75
60	$160.31	$160.31
61	$165.98	$165.98
62	$169.70	$169.70
63	$174.37	$174.37
64 and over	$177.21	$177.21

HCI (Health insurance rates for 2026)

EnhancedBlue 3000 PPO
Employee Only Rates
Rates are Per Pay Period (24 periods)

Age	Employee	Spouse	Child
Under 14	$45.12		
15	$49.13		
16	$50.67		
17	$52.20		
18	$53.85		
19	$55.50		
20	$57.21		
21	$58.98		
22	$58.98		
23	$58.98		
24	$58.98		
25	$59.22		
26	$60.40		
27	$61.81		
28	$64.12		
29	$66.00		
30	$66.95		
31	$68.36		
32	$69.78		
33	$70.66		
34	$71.61		
35	$72.08		
36	$72.55		
37	$73.02		
38	$73.49		
39	$74.44		

Age	Employee	Spouse
40	$75.38	
41	$76.80	
42	$78.15	
43	$80.04	
44	$82.40	
45	$85.17	
46	$88.48	
47	$92.19	
48	$96.44	
49	$100.63	
50	$105.34	
51	$110.00	
52	$115.14	
53	$120.33	
54	$125.93	
55	$131.53	
56	$137.61	
57	$143.74	
58	$150.29	
59	$153.53	
60	$160.08	
61	$165.74	
62	$169.46	
63	$174.12	
64 and over	$176.95	

HCI (Health insurance rates for 2026)

EnhancedBlue 3000 PPO
Employee/Spouse Rates

Rates are Per Pay Period (24 periods)

Add Spouse rate to employee rate for total per pay period rate

Age	Employee	Spouse	Child
Under 14	$63.17	$180.49	
15	$68.79	$196.53	
16	$70.93	$202.67	
17	$73.08	$208.80	
18	$75.39	$215.41	
19	$77.70	$222.01	
20	$80.10	$228.86	
21	$82.58	$235.93	
22	$82.58	$235.93	
23	$82.58	$235.93	
24	$82.58	$235.93	
25	$82.91	$236.88	
26	$84.56	$241.60	
27	$86.54	$247.26	
28	$89.76	$256.46	
29	$92.40	$264.01	
30	$93.72	$267.79	
31	$95.71	$273.45	
32	$97.69	$279.11	
33	$98.93	$282.65	
34	$100.25	$286.42	
35	$100.91	$288.31	
36	$101.57	$290.20	
37	$102.23	$292.09	
38	$102.89	$293.97	
39	$104.21	$297.75	

Age	Employee	Spouse
40	$105.53	$301.52
41	$107.51	$307.19
42	$109.41	$312.61
43	$112.06	$320.16
44	$115.36	$329.60
45	$119.24	$340.69
46	$123.87	$353.90
47	$129.07	$368.76
48	$135.01	$385.75
49	$140.88	$402.50
50	$147.48	$421.38
51	$154.01	$440.02
52	$161.19	$460.54
53	$168.46	$481.30
54	$176.30	$503.72
55	$184.15	$526.13
56	$192.65	$550.43
57	$201.24	$574.97
58	$210.40	$601.16
59	$214.95	$614.13
60	$224.11	$640.32
61	$232.04	$662.97
62	$237.24	$677.84
63	$243.76	$696.47
64 and over	$247.73	$707.79

HCI (Health insurance rates for 2026)

EnhancedBlue 3000 PPO
Employee/Child(ren) Rates

Rates are Per Pay Period (24 periods)

Add per child rate to employee rate for total per pay period rate

Age	Employee	Spouse	Child
Under 14	$63.17		$63.17
15	$68.79		$68.79
16	$70.93		$70.93
17	$73.08		$73.08
18	$75.39		$75.39
19	$77.70		$77.70
20	$80.10		$80.10
21	$82.58		$82.58
22	$82.58		$82.58
23	$82.58		$82.58
24	$82.58		$82.58
25	$82.91		$82.91
26	$84.56		
27	$86.54		
28	$89.76		
29	$92.40		
30	$93.72		
31	$95.71		
32	$97.69		
33	$98.93		
34	$100.25		
35	$100.91		
36	$101.57		
37	$102.23		
38	$102.89		
39	$104.21		

Age	Employee	Spouse
40	$105.53	
41	$107.51	
42	$109.41	
43	$112.06	
44	$115.36	
45	$119.24	
46	$123.87	
47	$129.07	
48	$135.01	
49	$140.88	
50	$147.48	
51	$154.01	
52	$161.19	
53	$168.46	
54	$176.30	
55	$184.15	
56	$192.65	
57	$201.24	
58	$210.40	
59	$214.95	
60	$224.11	
61	$232.04	
62	$237.24	
63	$243.76	
64 and over	$247.73	

HCI (Health insurance rates for 2026)

EnhancedBlue 3000 PPO
Employee/Family Rates
Rates are Per Pay Period (24 periods)

Age	Employee	Spouse	Child
Under 14	$63.17	$63.17	$63.17
15	$68.79	$68.79	$68.79
16	$70.93	$70.93	$70.93
17	$73.08	$73.08	$73.08
18	$75.39	$75.39	$75.39
19	$77.70	$77.70	$77.70
20	$80.10	$80.10	$80.10
21	$82.58	$82.58	$82.58
22	$82.58	$82.58	$82.58
23	$82.58	$82.58	$82.58
24	$82.58	$82.58	$82.58
25	$82.91	$82.91	$82.91
26	$84.56	$84.56	
27	$86.54	$86.54	
28	$89.76	$89.76	
29	$92.40	$92.40	
30	$93.72	$93.72	
31	$95.71	$95.71	
32	$97.69	$97.69	
33	$98.93	$98.93	
34	$100.25	$100.25	
35	$100.91	$100.91	
36	$101.57	$101.57	
37	$102.23	$102.23	
38	$102.89	$102.89	
39	$104.21	$104.21	

Age	Employee	Spouse
40	$105.53	$105.53
41	$107.51	$107.51
42	$109.41	$109.41
43	$112.06	$112.06
44	$115.36	$115.36
45	$119.24	$119.24
46	$123.87	$123.87
47	$129.07	$129.07
48	$135.01	$135.01
49	$140.88	$140.88
50	$147.48	$147.48
51	$154.01	$154.01
52	$161.19	$161.19
53	$168.46	$168.46
54	$176.30	$176.30
55	$184.15	$184.15
56	$192.65	$192.65
57	$201.24	$201.24
58	$210.40	$210.40
59	$214.95	$214.95
60	$224.11	$224.11
61	$232.04	$232.04
62	$237.24	$237.24
63	$243.76	$243.76
64 and over	$247.73	$247.73

HCI (Health insurance rates for 2026)

CompleteBlue 4000 POS
Employee Only Rates
Rates are Per Pay Period (24 periods)

Age	Employee	Spouse	Child
Under 14	$27.76		
15	$30.23		
16	$31.17		
17	$32.11		
18	$33.13		
19	$34.14		
20	$35.20		
21	$36.28		
22	$36.28		
23	$36.28		
24	$36.28		
25	$36.43		
26	$37.16		
27	$38.03		
28	$39.44		
29	$40.60		
30	$41.18		
31	$42.05		
32	$42.93		
33	$43.47		
34	$44.05		
35	$44.34		
36	$44.63		
37	$44.92		
38	$45.21		
39	$45.79		

Age	Employee	Spouse
40	$46.37	
41	$47.24	
42	$48.08	
43	$49.24	
44	$50.69	
45	$52.40	
46	$54.43	
47	$56.71	
48	$59.33	
49	$61.90	
50	$64.80	
51	$67.67	
52	$70.83	
53	$74.02	
54	$77.47	
55	$80.91	
56	$84.65	
57	$88.43	
58	$92.45	
59	$94.45	
60	$98.48	
61	$101.96	
62	$104.25	
63	$107.11	
64 and over	$108.85	

HCI (Health insurance rates for 2026)

CompleteBlue 4000 POS
Employee/Spouse Rates
Rates are Per Pay Period (24 periods)

Age	Employee	Spouse	Child
Under 14	$41.64	$138.79	
15	$45.34	$151.13	
16	$46.75	$155.84	
17	$48.17	$160.56	
18	$49.69	$165.64	
19	$51.22	$170.72	
20	$52.79	$175.98	
21	$54.43	$181.42	
22	$54.43	$181.42	
23	$54.43	$181.42	
24	$54.43	$181.42	
25	$54.65	$182.15	
26	$55.73	$185.78	
27	$57.04	$190.13	
28	$59.16	$197.21	
29	$60.90	$203.01	
30	$61.77	$205.92	
31	$63.08	$210.27	
32	$64.39	$214.63	
33	$65.20	$217.35	
34	$66.07	$220.25	
35	$66.51	$221.70	
36	$66.95	$223.15	
37	$67.38	$224.60	
38	$67.82	$226.05	
39	$68.69	$228.96	

Age	Employee	Spouse
40	$69.56	$231.86
41	$70.86	$236.21
42	$72.12	$240.39
43	$73.86	$246.19
44	$76.03	$253.45
45	$78.59	$261.98
46	$81.64	$272.14
47	$85.07	$283.57
48	$88.99	$296.63
49	$92.85	$309.51
50	$97.21	$324.02
51	$101.51	$338.36
52	$106.24	$354.14
53	$111.03	$370.10
54	$116.20	$387.34
55	$121.37	$404.57
56	$126.98	$423.26
57	$132.64	$442.13
58	$138.68	$462.27
59	$141.67	$472.24
60	$147.71	$492.38
61	$152.94	$509.80
62	$156.37	$521.23
63	$160.67	$535.56
64 and over	$163.28	$544.26

HCI (Health insurance rates for 2026)

CompleteBlue 4000 POS
Employee/Child(ren) Rates
Rates are Per Pay Period (24 periods)

Age	Employee	Spouse	Child
Under 14	$41.64		$41.64
15	$45.34		$45.34
16	$46.75		$46.75
17	$48.17		$48.17
18	$49.69		$49.69
19	$51.22		$51.22
20	$52.79		$52.79
21	$54.43		$54.43
22	$54.43		$54.43
23	$54.43		$54.43
24	$54.43		$54.43
25	$54.65		$54.65
26	$55.73		
27	$57.04		
28	$59.16		
29	$60.90		
30	$61.77		
31	$63.08		
32	$64.39		
33	$65.20		
34	$66.07		
35	$66.51		
36	$66.95		
37	$67.38		
38	$67.82		
39	$68.69		

Age	Employee	Spouse
40	$69.56	
41	$70.86	
42	$72.12	
43	$73.86	
44	$76.03	
45	$78.59	
46	$81.64	
47	$85.07	
48	$88.99	
49	$92.85	
50	$97.21	
51	$101.51	
52	$106.24	
53	$111.03	
54	$116.20	
55	$121.37	
56	$126.98	
57	$132.64	
58	$138.68	
59	$141.67	
60	$147.71	
61	$152.94	
62	$156.37	
63	$160.67	
64 and over	$163.28	

HCI (Health insurance rates for 2026)

CompleteBlue 4000 POS
Employee/Family Rates
Rates are Per Pay Period (24 periods)

Age	Employee	Spouse	Child
Under 14	$41.64	$41.64	$41.64
15	$45.34	$45.34	$45.34
16	$46.75	$46.75	$46.75
17	$48.17	$48.17	$48.17
18	$49.69	$49.69	$49.69
19	$51.22	$51.22	$51.22
20	$52.79	$52.79	$52.79
21	$54.43	$54.43	$54.43
22	$54.43	$54.43	$54.43
23	$54.43	$54.43	$54.43
24	$54.43	$54.43	$54.43
25	$54.65	$54.65	$54.65
26	$55.73	$55.73	
27	$57.04	$57.04	
28	$59.16	$59.16	
29	$60.90	$60.90	
30	$61.77	$61.77	
31	$63.08	$63.08	
32	$64.39	$64.39	
33	$65.20	$65.20	
34	$66.07	$66.07	
35	$66.51	$66.51	
36	$66.95	$66.95	
37	$67.38	$67.38	
38	$67.82	$67.82	
39	$68.69	$68.69	

Age	Employee	Spouse
40	$69.56	$69.56
41	$70.86	$70.86
42	$72.12	$72.12
43	$73.86	$73.86
44	$76.03	$76.03
45	$78.59	$78.59
46	$81.64	$81.64
47	$85.07	$85.07
48	$88.99	$88.99
49	$92.85	$92.85
50	$97.21	$97.21
51	$101.51	$101.51
52	$106.24	$106.24
53	$111.03	$111.03
54	$116.20	$116.20
55	$121.37	$121.37
56	$126.98	$126.98
57	$132.64	$132.64
58	$138.68	$138.68
59	$141.67	$141.67
60	$147.71	$147.71
61	$152.94	$152.94
62	$156.37	$156.37
63	$160.67	$160.67
64 and over	$163.28	$163.28