Summit House (Health insurance rates for 2026)

EnhancedBlue 3000 HMO

Empoyee Only Rates

Rates are Per Pay Period (24 per pay period)

Age	Employee	Spouse	Child
Under 14	$56.18		
15	$61.17		
16	$63.08		
17	$64.99		
18	$67.05		
19	$69.11		
20	$71.24		
21	$73.44		
22	$73.44		
23	$73.44		
24	$73.44		
25	$73.73		
26	$75.20		
27	$76.96		
28	$79.83		
29	$82.18		
30	$83.35		
31	$85.12		
32	$86.88		
33	$87.98		
34	$89.16		
35	$89.74		
36	$90.33		
37	$90.92		
38	$91.51		
39	$92.68		

Age	Employee	Spouse
40	$93.86	
41	$95.62	
42	$97.31	
43	$99.66	
44	$102.59	
45	$106.05	
46	$110.16	
47	$114.79	
48	$120.07	
49	$125.29	
50	$131.16	
51	$136.96	
52	$143.35	
53	$149.82	
54	$156.79	
55	$163.77	
56	$171.34	
57	$178.97	
58	$187.12	
59	$191.16	
60	$199.31	
61	$206.37	
62	$210.99	
63	$216.79	
64 and over	$220.32	

Summit House (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	$69.15	$172.87	
15	$75.29	$188.23	
16	$77.64	$194.11	
17	$79.99	$199.98	
18	$82.52	$206.31	
19	$85.05	$212.64	
20	$87.68	$219.19	
21	$90.39	$225.97	
22	$90.39	$225.97	
23	$90.39	$225.97	
24	$90.39	$225.97	
25	$90.75	$226.87	
26	$92.56	$231.39	
27	$94.73	$236.82	
28	$98.25	$245.63	
29	$101.14	$252.86	
30	$102.59	$256.48	
31	$104.76	$261.90	
32	$106.93	$267.32	
33	$108.28	$270.71	
34	$109.73	$274.33	
35	$110.45	$276.14	
36	$111.18	$277.94	
37	$111.90	$279.75	
38	$112.62	$281.56	
39	$114.07	$285.17	

Age	Employee	Spouse
40	$115.51	$288.79
41	$117.68	$294.21
42	$119.76	$299.41
43	$122.66	$306.64
44	$126.27	$315.68
45	$130.52	$326.30
46	$135.58	$338.95
47	$141.28	$353.19
48	$147.78	$369.46
49	$154.20	$385.50
50	$161.43	$403.58
51	$168.57	$421.43
52	$176.44	$441.09
53	$184.39	$460.98
54	$192.98	$482.44
55	$201.56	$503.91
56	$210.87	$527.19
57	$220.27	$550.69
58	$230.31	$575.77
59	$235.28	$588.20
60	$245.31	$613.28
61	$253.99	$634.97
62	$259.68	$649.21
63	$266.82	$667.06
64 and over	$271.16	$677.91

Summit House (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	$69.15		$69.15
15	$75.29		$75.29
16	$77.64		$77.64
17	$79.99		$79.99
18	$82.52		$82.52
19	$85.05		$85.05
20	$87.68		$87.68
21	$90.39		$90.39
22	$90.39		$90.39
23	$90.39		$90.39
24	$90.39		$90.39
25	$90.75		$90.75
26	$92.56		
27	$94.73		
28	$98.25		
29	$101.14		
30	$102.59		
31	$104.76		
32	$106.93		
33	$108.28		
34	$109.73		
35	$110.45		
36	$111.18		
37	$111.90		
38	$112.62		
39	$114.07		

Age	Employee	Spouse
40	$115.51	
41	$117.68	
42	$119.76	
43	$122.66	
44	$126.27	
45	$130.52	
46	$135.58	
47	$141.28	
48	$147.78	
49	$154.20	
50	$161.43	
51	$168.57	
52	$176.44	
53	$184.39	
54	$192.98	
55	$201.56	
56	$210.87	
57	$220.27	
58	$230.31	
59	$235.28	
60	$245.31	
61	$253.99	
62	$259.68	
63	$266.82	
64 and over	$271.16	

Summit House (Health insurance rates for 2026)

EnhancedBlue 3000 HMO

Employee/Family Rates

Rates are Per Pay Period (24 periods)

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

Age	Employee	Spouse	Child
Under 14	$77.79	$77.79	$77.79
15	$84.70	$84.70	$84.70
16	$87.35	$87.35	$87.35
17	$89.99	$89.99	$89.99
18	$92.84	$92.84	$92.84
19	$95.69	$95.69	$95.69
20	$98.64	$98.64	$98.64
21	$101.69	$101.69	$101.69
22	$101.69	$101.69	$101.69
23	$101.69	$101.69	$101.69
24	$101.69	$101.69	$101.69
25	$102.09	$102.09	$102.09
26	$104.13	$104.13	
27	$106.57	$106.57	
28	$110.53	$110.53	
29	$113.79	$113.79	
30	$115.41	$115.41	
31	$117.85	$117.85	
32	$120.29	$120.29	
33	$121.82	$121.82	
34	$123.45	$123.45	
35	$124.26	$124.26	
36	$125.07	$125.07	
37	$125.89	$125.89	
38	$126.70	$126.70	
39	$128.33	$128.33	

Age	Employee	Spouse
40	$129.95	$129.95
41	$132.39	$132.39
42	$134.73	$134.73
43	$137.99	$137.99
44	$142.05	$142.05
45	$146.84	$146.84
46	$152.53	$152.53
47	$158.94	$158.94
48	$166.26	$166.26
49	$173.48	$173.48
50	$181.61	$181.61
51	$189.64	$189.64
52	$198.49	$198.49
53	$207.44	$207.44
54	$217.10	$217.10
55	$226.76	$226.76
56	$237.23	$237.23
57	$247.81	$247.81
58	$259.09	$259.09
59	$264.69	$264.69
60	$275.97	$275.97
61	$285.74	$285.74
62	$292.14	$292.14
63	$300.18	$300.18
64 and over	$305.06	$305.06

Summit House (Health insurance rates for 2026)

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

Age	Employee	Spouse	Child
Under 14	$59.37		
15	$64.65		
16	$66.67		
17	$68.69		
18	$70.86		
19	$73.03		
20	$75.28		
21	$77.61		
22	$77.61		
23	$77.61		
24	$77.61		
25	$77.92		
26	$79.47		
27	$81.34		
28	$84.36		
29	$86.85		
30	$88.09		
31	$89.95		
32	$91.81		
33	$92.98		
34	$94.22		
35	$94.84		
36	$95.46		
37	$96.08		
38	$96.70		
39	$97.94		

Age	Employee	Spouse
40	$99.19	
41	$101.05	
42	$102.83	
43	$105.32	
44	$108.42	
45	$112.07	
46	$116.42	
47	$121.30	
48	$126.89	
49	$132.40	
50	$138.61	
51	$144.74	
52	$151.50	
53	$158.33	
54	$165.70	
55	$173.07	
56	$181.06	
57	$189.14	
58	$197.75	
59	$202.02	
60	$210.63	
61	$218.08	
62	$222.97	
63	$229.11	
64 and over	$232.83	

Summit House (Health insurance rates for 2026)

CompleteBlue 4000 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	$73.07	$182.68	
15	$79.57	$198.92	
16	$82.05	$205.13	
17	$84.54	$211.34	
18	$87.21	$218.03	
19	$89.88	$224.71	
20	$92.65	$231.64	
21	$95.52	$238.80	
22	$95.52	$238.80	
23	$95.52	$238.80	
24	$95.52	$238.80	
25	$95.90	$239.76	
26	$97.81	$244.53	
27	$100.11	$250.27	
28	$103.83	$259.58	
29	$106.89	$267.22	
30	$108.42	$271.04	
31	$110.71	$276.77	
32	$113.00	$282.50	
33	$114.43	$286.09	
34	$115.96	$289.91	
35	$116.73	$291.82	
36	$117.49	$293.73	
37	$118.25	$295.64	
38	$119.02	$297.55	
39	$120.55	$301.37	

Age	Employee	Spouse
40	$122.07	$305.19
41	$124.37	$310.92
42	$126.56	$316.41
43	$129.62	$324.05
44	$133.44	$333.61
45	$137.93	$344.83
46	$143.28	$358.20
47	$149.30	$373.25
48	$156.18	$390.44
49	$162.96	$407.40
50	$170.60	$426.50
51	$178.15	$445.37
52	$186.46	$466.14
53	$194.86	$487.16
54	$203.94	$509.84
55	$213.01	$532.53
56	$222.85	$557.12
57	$232.78	$581.96
58	$243.39	$608.47
59	$248.64	$621.60
60	$259.24	$648.11
61	$268.41	$671.03
62	$274.43	$686.08
63	$281.98	$704.94
64 and over	$286.56	$716.40

Summit House (Health insurance rates for 2026)

CompleteBlue 4000 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	$73.07		$73.07
15	$79.57		$79.57
16	$82.05		$82.05
17	$84.54		$84.54
18	$87.21		$87.21
19	$89.88		$89.88
20	$92.65		$92.65
21	$95.52		$95.52
22	$95.52		$95.52
23	$95.52		$95.52
24	$95.52		$95.52
25	$95.90		$95.90
26	$97.81		
27	$100.11		
28	$103.83		
29	$106.89		
30	$108.42		
31	$110.71		
32	$113.00		
33	$114.43		
34	$115.96		
35	$116.73		
36	$117.49		
37	$118.25		
38	$119.02		
39	$120.55		

Age	Employee	Spouse
40	$122.07	
41	$124.37	
42	$126.56	
43	$129.62	
44	$133.44	
45	$137.93	
46	$143.28	
47	$149.30	
48	$156.18	
49	$162.96	
50	$170.60	
51	$178.15	
52	$186.46	
53	$194.86	
54	$203.94	
55	$213.01	
56	$222.85	
57	$232.78	
58	$243.39	
59	$248.64	
60	$259.24	
61	$268.41	
62	$274.43	
63	$281.98	
64 and over	$286.56	

Summit House (Health insurance rates for 2026)

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

Age	Employee	Spouse	Child
Under 14	$82.21	$82.21	$82.21
15	$89.51	$89.51	$89.51
16	$92.31	$92.31	$92.31
17	$95.10	$95.10	$95.10
18	$98.11	$98.11	$98.11
19	$101.12	$101.12	$101.12
20	$104.24	$104.24	$104.24
21	$107.46	$107.46	$107.46
22	$107.46	$107.46	$107.46
23	$107.46	$107.46	$107.46
24	$107.46	$107.46	$107.46
25	$107.89	$107.89	$107.89
26	$110.04	$110.04	
27	$112.62	$112.62	
28	$116.81	$116.81	
29	$120.25	$120.25	
30	$121.97	$121.97	
31	$124.55	$124.55	
32	$127.13	$127.13	
33	$128.74	$128.74	
34	$130.46	$130.46	
35	$131.32	$131.32	
36	$132.18	$132.18	
37	$133.04	$133.04	
38	$133.90	$133.90	
39	$135.61	$135.61	

Age	Employee	Spouse
40	$137.33	$137.33
41	$139.91	$139.91
42	$142.38	$142.38
43	$145.82	$145.82
44	$150.12	$150.12
45	$155.17	$155.17
46	$161.19	$161.19
47	$167.96	$167.96
48	$175.70	$175.70
49	$183.33	$183.33
50	$191.92	$191.92
51	$200.41	$200.41
52	$209.76	$209.76
53	$219.22	$219.22
54	$229.43	$229.43
55	$239.64	$239.64
56	$250.70	$250.70
57	$261.88	$261.88
58	$273.81	$273.81
59	$279.72	$279.72
60	$291.65	$291.65
61	$301.96	$301.96
62	$308.73	$308.73
63	$317.22	$317.22
64 and over	$322.38	$322.38