

# HOUSE STAFF HEALTH CARE, DENTAL & VISION PREMIUMS

EFFECTIVE JANUARY 1, 2026

## DUKE SELECT (HMO MODEL) PREMIUMS

	INDIVIDUAL	EMPLOYEE/CHILD	EMPLOYEE/CHILDREN	EMPLOYEE/SPOUSE	FAMILY
TOTAL PREMIUM	\$682.00	\$1,017.00	\$1,272.00	\$1,597.00	\$1,868.00
DUKE CONTRIBUTION	\$682.00	\$852.00	\$978.00	\$1,136.00	\$1,271.00
<b>EMPLOYEE PREMIUM</b>	<b>\$0.00</b>	<b>\$165.00</b>	<b>\$294.00</b>	<b>\$461.00</b>	<b>\$597.00</b>

## DUKE OPTIONS (PPO MODEL) PREMIUMS

	INDIVIDUAL	EMPLOYEE/CHILD	EMPLOYEE/CHILDREN	EMPLOYEE/SPOUSE	FAMILY
TOTAL PREMIUM	\$1,431.00	\$1,934.00	\$2,274.00	\$2,793.00	\$3,266.00
DUKE CONTRIBUTION	\$1,297.00	\$1,552.00	\$1,723.00	\$1,976.00	\$2,213.00
<b>EMPLOYEE PREMIUM</b>	<b>\$134.00</b>	<b>\$382.00</b>	<b>\$551.00</b>	<b>\$817.00</b>	<b>\$1,053.00</b>

## DUKE USA (PPO MODEL) PREMIUMS

	INDIVIDUAL	EMPLOYEE/CHILD	EMPLOYEE/CHILDREN	EMPLOYEE/SPOUSE	FAMILY
TOTAL PREMIUM	\$988.00	\$1,347.00	\$1,762.00	\$1,991.00	\$2,600.00
DUKE CONTRIBUTION	\$932.00	\$1,118.00	\$1,363.00	\$1,443.00	\$1,798.00
<b>EMPLOYEE PREMIUM</b>	<b>\$56.00</b>	<b>\$229.00</b>	<b>\$399.00</b>	<b>\$548.00</b>	<b>\$802.00</b>

## DUKE ADVANTAGE (HDHP MODEL) PREMIUMS

	INDIVIDUAL	EMPLOYEE/CHILD	EMPLOYEE/CHILDREN	EMPLOYEE/SPOUSE	FAMILY
TOTAL PREMIUM	\$1,369.00	\$1,779.00	\$2,053.00	\$3,285.00	\$4,106.00
DUKE CONTRIBUTION	\$1,314.00	\$1,610.00	\$1,824.00	\$2,978.00	\$3,735.00
<b>EMPLOYEE PREMIUM</b>	<b>\$55.00</b>	<b>\$169.00</b>	<b>\$229.00</b>	<b>\$307.00</b>	<b>\$371.00</b>

## DENTAL PREMIUMS\*

	INDIVIDUAL	EMPLOYEE/CHILD	EMPLOYEE/CHILDREN	EMPLOYEE/SPOUSE	FAMILY
PPO PLAN PREMIUM	\$40.39	\$78.49		\$80.82	\$122.35
PLAN A PREMIUM	\$48.92	\$95.04		\$97.89	\$148.19
PLAN B PREMIUM	\$12.18	\$24.82		\$24.37	\$45.24

## VISION PREMIUMS\*

	INDIVIDUAL	EMPLOYEE/CHILD	EMPLOYEE/CHILDREN	EMPLOYEE/SPOUSE	FAMILY
PLAN PREMIUM	\$9.66	\$18.49	\$19.46	\$18.50	\$29.97

\*Same as Non-House Staff Rates