



220 S 27<sup>th</sup> St, Suite B, Tacoma, WA 98402  
Phone: 253-474-1214 ♦ 800-223-2449  
Fax: 253-474-7180  
Email: staff@unitedemployees.org

## 2026 Contribution Rates

Contribution Rates	Plan ID	Rate 1/1/2026	Increase (Decrease)	Rate 1/1/2025
<b>MEDICAL PLANS</b>				
<b>Composite Rate</b>				
• AV9	AV9	<b>1,170.00</b>	4.0% / 45.00	1,125.00
• AV8	AV8	<b>1,108.00</b>	4.0% / 43.00	1,065.00
• A6	A6	<b>1,090.00</b>	4.0% / 42.00	1,048.00
• A5	A5	<b>1,496.00</b>	4.0% / 58.00	1,438.00
<b>Tiered Rate</b>				
• A5 – Employee Only	A5E	<b>824.00</b>	4.0% / 32.00	792.00
• A5 – Employee + Spouse	A5ES	<b>1,646.00</b>	4.0% / 63.00	1,583.00
• A5 – Employee + Children	A5EC	<b>1,562.00</b>	4.0% / 60.00	1,502.00
• A5 – Family	A5F	<b>2,470.00</b>	4.0% / 95.00	2,375.00
<b>DENTAL PLANS</b>				
• D5 (sunsetting 1/1/27)	D5	<b>80.00</b>	No Change	80.00
• D7	D7	<b>100.00</b>	No Change	100.00
• D8	D8	<b>120.00</b>	No Change	120.00
<b>TIME LOSS PLANS</b>				
• TL2	TL2	<b>9.00</b>	No Change	9.00
• TL4	TL4	<b>25.00</b>	No Change	25.00
<b>VISION PLAN</b>				
• V3	V3	<b>25.00</b>	5.00	20.00

### For Your Information:

- January 2026 contribution is based on December 2025 hours.
- The above plans are available for new or renewing labor agreements with the exception of Plan D5. **Dental Plan D5** is being sunsetted, January 1, 2027 and is no longer available for bargaining.
- **Time Loss Plans** are only available to groups that participate in a UEBT Medical Plan.

### Provider Networks:

- All **Medical Plans** use the Premera Provider Network and VytliOne for pharmacy (previously named MaxorPlus). Medical Plans AV8 and AV9 use the Vision Source Plan (VSP) for Vision Network.
- **Dental Plans** use the Delta Dental Network. Participants have an individual choice between Delta Dental of WA and Willamette Dental of WA.
- **Vision Plan V3** uses the Vision Source Plan (VSP) for Vision Network.