

CITY OF YOUNGSTOWN
MONTHLY MEDICAL & RX/DENTAL/VISION PREMIUMS [3/1/2026-1/31/2027]

UHC MEDICAL & RX [\$500/\$1,000 DEDUCTIBLE]

PLAN TIER	TOTAL MONTHLY COST TO CITY 3/1/2026-1/31-2027	10% MONTHLY EMPLOYEE CONTRIBUTION 3/1/2026-1/31/2027
Employee	\$1,023.43	\$102.34
Employee/Spouse	\$2,200.39	\$220.04
Employee/Child(ren)	\$2,098.05	\$209.81
Employee/Spouse/Child(ren)	\$3,479.69	\$347.97

GUARDIAN DENTAL [EXCLUDING AFSCME] NO CHANGE
[DEDUCTIBLE \$50/150]

<u>PLAN TIER</u>	TOTAL MONTHLY COST TO CITY	10% EMPLOYEE CONTRIBUTION*
Employee	\$23.14	\$2.31
Employee/Spouse	\$53.94	\$5.39
Employee/Child(ren)	\$48.79	\$4.88
Employee/Spouse/Child(ren)	\$82.20	\$8.22

GUARDIAN VISION [EXCLUDING AFSCME] NO CHANGE

<u>PLAN TIER</u>	TOTAL MONTHLY COST TO CITY	10% EMPLOYEE CONTRIBUTION*
Employee	\$5.76	\$0.58
Employee/Spouse	\$11.17	\$1.12
Employee/Child(ren)	\$10.07	\$1.01
Employee/Spouse/Child(ren)	\$17.23	\$1.72