

## Regence BC/BS Premiums Per Paycheck 2024 - 2025

### Medical:

Participating Network		
Coverage Level	Traditional Premium	High Deductible Health Plan Premium
Single	\$71	\$48
Employee + 1 dependent	\$153	\$103
Employee + 2 dependents or more	\$212.50	\$150

Value Care Network		
Coverage Level	Traditional Premium	High Deductible Health Plan Premium
Single	\$35.50	\$15.50
Employee + 1 dependent	\$79	\$35.50
Employee + 2 dependents or more	\$107.50	\$48

Focal Point Network		
Coverage Level	Traditional Premium	High Deductible Health Plan Premium
Single	\$8.50	\$0
Employee + 1 dependent	\$19	\$0
Employee + 2 dependents or more	\$27.50	\$0

### Dental:

Coverage Level	Premium
Single	\$3
Employee + 1 dependent	\$5
Employee + 2 dependents or more	\$8.25

### Vision\* (Ameritas)

Coverage Level	Premium
Single	\$0
Employee + 1 dependent	\$0
Employee + 2 dependents or more	\$0

\*As a reminder, Regence does not cover the annual vision exam. The Vision Plan uses VSP providers or EyeMed providers and is administered by Ameritas. Please ensure all dependents are enrolled.

### Health Savings Account (HSA)

Must be enrolled in the High Deductible Health Plan to be eligible for the HSA.