

# 2025 - 2026 Monthly Employee Premium Cost Share

< Costs will vary for those groups currently in bargaining >

BCBS Medical/Prescription - Staff, Fixed Term Faculty, Medical Faculty & Postdoctoral Research Fellows												
Monthly	PART-TIME EMPLOYEE Monthly Contributions						FULL-TIME EMPLOYEE Monthly Contributions					
	BCBS Plans w/ CVS Caremark Prescription	PPO2	HSA Advantage		Advantage Plus		BCBS Plans w/ CVS Caremark Prescription	PPO2	HSA Advantage		Advantage Plus	
			HSA Advantage	CMU HSA Contribution	Advantage Plus	CMU HSA Contribution			HSA Advantage	CMU HSA Contribution	Advantage Plus	CMU HSA Contribution
	Single	\$166.56	\$65.44	\$4.56	\$0.00	\$27.80	Single	\$166.56	\$65.44	\$4.56	\$0.00	\$27.80
	2-Person	\$1,057.67	\$840.32	\$4.56	\$679.98	\$27.80	2-Person	\$344.79	\$135.18	\$12.30	\$0.00	\$60.70
	Family	\$1,440.77	\$1,173.45	\$4.56	\$972.30	\$27.80	Family	\$421.41	\$165.16	\$15.63	\$0.00	\$74.86

MESSA Medical/Prescription - Regular Faculty 01/01/2026 - 12/31/2026										
Monthly	9-MONTH REGULAR FACULTY Monthly Contributions					12-MONTH REGULAR FACULTY Monthly Contributions				
	MESSA Plans	ABC Plan 1 3 Tier Rx	ABC Plan 2 5 Tier Rx	Choices 300/600 3 Tier Rx	Choices 500/1000 5 Tier Rx	MESSA Plans	ABC Plan 1 3 Tier Rx	ABC Plan 2 5 Tier Rx	Choices 300/600 3 Tier Rx	Choices 500/1000 5 Tier Rx
	Single	\$287.31	\$155.41	\$508.08	\$373.28	Single	\$215.48	\$116.56	\$381.06	\$279.96
	2-Person	\$686.95	\$390.19	\$1,183.68	\$880.39	2-Person	\$515.21	\$292.64	\$887.76	\$660.29
	Family	\$911.52	\$542.23	\$1,529.70	\$1,152.26	Family	\$683.64	\$406.67	\$1,147.27	\$864.19

Guardian Dental - Regular Faculty						
Monthly	9-MONTH REGULAR FACULTY Monthly Contributions			12-MONTH REGULAR FACULTY Monthly Contributions		
	Dental Plans (Guardian)		CORE	Dental Plans (Guardian)		CORE
	Single		\$11.76	Single		\$8.82
	2-Person		\$24.23	2-Person		\$18.17
	Family		\$30.22	Family		\$22.67

Guardian Dental - Staff, Fixed Term Faculty, Medical Faculty & Postdoctoral Research Fellows						
Monthly	PART-TIME EMPLOYEE Monthly Contributions			FULL-TIME EMPLOYEE Monthly Contributions		
	Dental Plans (Guardian)		CORE	Dental Plans (Guardian)		CORE
	Single		\$38.78	Single		\$6.16
	2-Person		\$79.89	2-Person		\$12.70
	Family		\$99.67	Family		\$15.84

VSP Vision - All Benefit-Eligible Employees*						
Monthly	9-MONTH EMPLOYEE Monthly Contributions			12-MONTH EMPLOYEE Monthly Contributions		
	Vision Plans (VSP)		STANDARD	Vision Plans (VSP)		STANDARD
	Single		\$8.53	Single		\$6.40
	2-Person		\$17.09	2-Person		\$12.82
	Family		\$27.49	Family		\$20.62

\*Postdoctoral Research Fellows not eligible for vision coverage.

Note: This document is designed to give you an estimate of the cost for benefits. Some actual costs may vary.



HUMAN RESOURCES  
**BENEFITS & WELLNESS**  
CENTRAL MICHIGAN UNIVERSITY

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