

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 01/01/2025 - 12/31/2025										
Monthly	9-MONTH REGULAR FACULTY Monthly Contributions					12-MONTH REGULAR FACULTY Monthly Contributions				
	MESSA Plans	Choices 10/20	Choices 200/400	Choices 500/1000	ABC HSA Saver	MESSA Plans	Choices 10/20	Choices 200/400	Choices 500/1000	ABC HSA Saver
	Single	\$435.40	\$398.75	\$305.20	\$173.71	Single	\$326.55	\$299.06	\$228.90	\$130.28
	2-Person	\$1,020.15	\$937.69	\$727.21	\$431.35	2-Person	\$765.11	\$703.27	\$545.41	\$323.51
	Family	\$1,326.18	\$1,223.59	\$961.66	\$593.46	Family	\$994.63	\$917.69	\$721.24	\$445.09

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		\$12.71
	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
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CENTRAL MICHIGAN UNIVERSITY

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