# 2026 Active Employee Health Plan – Full Plan Costs

| | Anchor | Anchor Plus | Anchor Choice | Anchor Dental | Anchor Dental Plus | Anchor Dental Platinum | Anchor Vision | Anchor Vision Plus |
|---|---|---|---|---|---|---|---|---|
| **Individual Plan** | | | | | | | | |
| **Annual** | $10,932.12 | $11,696.88 | $10,822.08 | $423.00 | $474.48 | $547.20 | $64.68 | $92.52 |
| **Monthly** | $911.01 | $974.74 | $901.84 | $35.25 | $39.54 | $45.60 | $5.39 | $7.71 |
| **Biweekly (26 pay period)** | $420.47 | $449.88 | $416.23 | $16.27 | $18.25 | $21.05 | $2.49 | $3.56 |
| **Biweekly (20 pay period)** | $546.61 | $584.84 | $541.10 | $21.15 | $23.72 | $27.36 | $3.23 | $4.63 |
| **Family Plan** | | | | | | | | |
| **Annual** | $30,648.12 | $32,791.80 | $30,338.88 | $1,095.60 | $1,229.16 | $1,417.56 | $178.56 | $255.48 |
| **Monthly** | $2,554.01 | $2,732.65 | $2,528.24 | $91.30 | $102.43 | $118.13 | $14.88 | $21.29 |
| **Biweekly (26 pay period)** | $1,178.77 | $1,261.22 | $1,166.88 | $42.14 | $47.28 | $54.52 | $6.87 | $9.83 |
| **Biweekly (20 pay period)** | $1,532.41 | $1,639.59 | $1,516.94 | $54.78 | $61.46 | $70.88 | $8.93 | $12.77 |