2026 Resident and Fellow Premiums

Plan	Coverage Level			
Medical Rates ***Per Pay Period*** Based on 26 PP*	Well-Being[1] and Tobacco-Free	Non-Well-Being and Tobacco-Free	Well-Being[1] and Tobacco User	Non-Well-Being and Tobacco User
Banner Choice Plus	Medical Premium includes Pharmacy			
Employee	$0	$0	$80.77	$80.77
Employee + Spouse/DP	$0	$0	$161.54	$161.54
Employee + Children	$0	$0	$80.77	$80.77
Employee + Family	$0	$0	$161.54	$161.54
Banner Premier				
Employee	$0	$0	$80.77	$80.77
Employee + Spouse/DP	$0	$0	$161.54	$161.54
Employee + Children	$0	$0	$80.77	$80.77
Employee + Family	$0	$0	$161.54	$161.54
Banner Value				
Employee	$0	$0	$80.77	$80.77
Employee + Spouse/DP	$0	$0	$161.54	$161.54
Employee + Children	$0	$0	$80.77	$80.77
Employee + Family	$0	$0	$161.54	$161.54

*Weekly paid employees will see the weekly premium amounts in Workday

[1]Banner team members had the opportunity to participate in a variety of activities in our 2025 MyWell-Being Program, Nov. 1, 2024 – Oct. 31, 2025. Residents and Fellows meeting the MyWell-Being Program requirements will earn a $180 one-time cash award in 2026.

Dental			
Dental Rates ***Per Pay Period***	Premier Dental	Value Dental	Comprehensive Dental*
Employee	$18.46	$0	$0
Employee + Spouse/DP	$35.08	$0	$0
Employee + Children	$43.85	$0	$0
Employee + Family	$63.69	$0	$0

*Comprehensive Dental not available in some areas due to limited provider network.

Vision		
Vision Rates ***Per Pay Period***	Premier Vision	Value Vision
Employee	$7.38	$4.15
Employee + Spouse/DP	$14.77	$8.31
Employee + Children	$15.23	$8.31
Employee + Family	$18.00	$10.15

Employee Life Insurance and AD&D Rates	Age Rate	Monthly Rate/$1,000	Spouse Life Insurance and AD&D Rates	Age Rated	Monthly Rate/$1,000
Banner provides life/AD&D coverage equal to your base pay at no cost to you. You have the option of purchasing an additional 1 to 10 times at these rates.	Under 30	$0.036	Banner offers the option for the employee to purchase Supplemental Life Insurance for your spouse or domestic partner. Spouse Life coverage is age banded at these rates. There is a minimum coverage limit of $5,000 and a maximum coverage limit of $50,000. Child(ren) Life/AD&D Rates: $0.143/$1,000	Under 25	$0.081
	30-34	$0.046		25-29	$0.095
	35-39	$0.051		30-34	$0.123
	40-44	$0.070		35-39	$0.137
	45-49	$0.114		40-44	$0.151
	50-54	$0.176		45-49	$0.220
	55-59	$0.341		50-54	$0.331
	60-64	$0.476		55-59	$0.609
	65-69	$0.733		60-64	$0.929
	70-74	$1.168		65-69	$1.776
	75 & Over	$1.710		70& Over	$2.873

Legal	
MEtLife Legal Plan	Per Pay Period $6.00
Flexible Spending Accounts (FSA)	
Health Care FSA	Expenses not reimbursed by a medical plan for medical care for you or your dependents.
Dependent Care FSA	Expenses related for daycare or elder care for dependents so that you can work.

Our MyWell-Being Program offers Residents and Fellows on a medical plan a $180 one-time cash award in 2025. The incentive noted below is based upon when you were hired and your total points earned during the 2025 MyWell-Being Program, Nov. 1, 2024 – Oct. 31, 2025.

Date of Hire	Points Achieved & Discount Earned		
	30,000 Level 1	**50,000** Level 2	**70,000** Level 3
Current Team Members	--	--	$180
Q1 (Jan. 1 – March 31, 2026)	--	--	$180
Q2 (April 1 – June 30, 2026)	--	$180	--
Q3 (July 1 – Sept. 30, 2026)	$180	--	--