

## **Sutter County Medical Insurance Rates 2026 – DSA, POA, Fire Employees**

(24 pp)

Plan Name	Deductible	Out of Pocket Maximum	Co-ins.	Total Monthly Premium	County Monthly Contribution	Employee Monthly Contribution	Employee Bi-weekly Contribution
<b>PPO 1500</b>	<b>EE/Family</b>	<b>EE/Family</b>	<b>80/20</b>				
Single Employee	1500/3000	5000/10000	\$45 copay	\$1,331.50	\$977.25	\$354.25	\$177.13
Employee + 1				\$2,662.50	\$1,940.25	\$722.25	\$361.13
Family				\$3,766.50	\$2,713.25	\$1,053.25	\$526.63
<b>PPO 1000</b>			<b>80/20</b>				
Single Employee	1000/2000	4000/8000	\$45 copay	\$1,363.50	\$977.25	\$386.25	\$193.13
Employee + 1				\$2,717.50	\$1,940.25	\$777.25	\$388.63
Family				\$3,847.50	\$2,713.25	\$1,134.25	\$567.13
<b>KAISER HIGH</b>			<b>\$10 copay</b>				
Single Employee	0	1500/3000		\$1,672.50	\$977.25	\$695.25	\$347.63
Employee + 1				\$3,345.50	\$1,940.25	\$1,405.25	\$702.63
Family				\$4,730.50	\$2,713.25	\$2,017.25	\$1,008.63
<b>KAISER LOW</b>			<b>\$20 copay</b>				
Single Employee	0	1500/3000		\$1,570.50	\$977.25	\$593.25	\$296.63
Employee + 1				\$3,149.50	\$1,940.25	\$1,209.25	\$604.63
Family				\$4,450.50	\$2,713.25	\$1,737.25	\$868.63
<b>PPO 3400 (HDHP)</b>							
Single Employee	3400/6800	3400/6800		\$950.50	\$950.50	\$0.00	\$0.00
Employee + 1				\$1,892.50	\$1,892.50	\$0.00	\$0.00
Family				\$2,671.50	\$2,671.50	\$0.00	\$0.00