

Reserved.

Medical / Dental / Vision Rates

For associates who are paid weekly

Campus Foods





Weekly MEDICAL Premium

Plan and Coverage Tier	Rate	Wellness Rate Associate Only	Wellness Rate Associate & Spouse
Complete PPO			
Associate Only	\$81.23	\$69.69	\$69.69
Associate + Spouse	\$231.46	\$219.92	\$214.15
Associate + Child(ren)	\$146.31	\$134.77	\$134.77
Family	\$316.85	\$305.31	\$299.54
Balanced CDHP			
Associate Only	\$44.77	\$33.23	\$33.23
Associate + Spouse	\$127.62	\$116.08	\$110.31
Associate + Child(ren)	\$80.54	\$69.00	\$69.00
Family	\$174.69	\$163.15	\$157.38
Essentials PPO			
Associate Only	\$22.38	\$10.85	\$10.85
Associate + Spouse	\$63.69	\$52.15	\$46.38
Associate + Child(ren)	\$40.38	\$28.85	\$28.85
Family	\$87.23	\$75.69	\$69.92

More about Wellness Rates

You can reduce your per paycheck medical premiums by participating in our wellbeing program. Save \$50/month (\$600/year) for individual coverage or \$75/month (\$900/year) for Associate + Spouse or Family coverage.

Here's how it works:

Associates (and participating spouse) must complete 3 out of 7 items on the premium incentive checklist on Personify Health by November 30, 2025.

To get started:

Go to **Personify Health**

First time users must enter the passphrase "luckier-passionfruit-65" during

enrollment. If you're already registered, no passphrase is needed.

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Weekly **DENTAL** Premium

Plan and Coverage Tier	Rate
Dental Enhanced	
Associate Only	\$5.54
Associate + Spouse	\$11.31
Associate + Child(ren)	\$13.38
Family	\$19.62
Dental Basic	
Associate Only	\$1.95
Associate + Spouse	\$4.17
Associate + Child(ren)	\$4.87
Family	\$7.10

Weekly VISION Premium

Plan and Coverage Tier	Rate
Vision Enhanced	
Associate Only	\$0.82
Associate + Spouse	\$1.97
Associate + Child(ren)	\$1.48
Family	\$2.63
Vision Basic	
Associate Only	\$0.44
Associate + Spouse	\$1.05
Associate + Child(ren)	\$0.79
Family	\$1.39

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