

Medical / Dental / Vision Rates

For associates who are paid bi-weekly **Arlington Union**

Bi-weekly MEDICAL Premium

Plan and Coverage Tier	Rate	Wellness Rate Associate only	Wellness Rate Associate and Spouse
Complete PPO			
Associate Only	\$114.55	\$91.48	\$91.48
Associate + Spouse	\$329.60	\$306.52	\$294.98
Associate + Child(ren)	\$206.00	\$182.92	\$182.92
Family	\$447.16	\$424.09	\$412.55
Balanced CDHP			
Associate Only	\$77.92	\$54.85	\$54.85
Associate + Spouse	\$224.20	\$201.12	\$189.59
Associate + Child(ren)	\$140.13	\$117.05	\$117.05
Family	\$304.18	\$281.10	\$269.56
Essentials PPO			
Associate Only	\$41.29	\$18.22	\$18.22
Associate + Spouse	\$118.81	\$95.73	\$84.19
Associate + Child(ren)	\$74.25	\$51.18	\$51.18
Family	\$161.19	\$138.11	\$126.57

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.

Bi-weekly DENTAL Premium

Plan and Coverage Tier	Rate
Dental Enhanced	
Associate Only	\$12.60
Associate + Spouse	\$26.44
Associate + Child(ren)	\$31.30
Family	\$45.35
Dental Basic	
Associate Only	\$3.91
Associate + Spouse	\$8.21
Associate + Child(ren)	\$9.71
Family	\$14.07

Bi-weekly VISION Premium

Plan and Coverage Tier	Rate		
Vision Enhanced			
Associate Only	\$2.06		
Associate + Spouse	\$4.96		
Associate + Child(ren)	\$3.69		
Family	\$6.62		
Vision Basic			
Associate Only	\$0.52		
Associate + Spouse	\$1.26		
Associate + Child(ren)	\$0.95		
Family	\$1.67		