2026 Health Care Contributions

Your Health Plan employee contributions will be deducted from your pay on a pretax basis and determined based on your annual base salary as of December 31, 2025.

MEDICAL CONTRIBUTIONS

WEEKLY	HSA BASIC		HSA PLUS		PPO	
	Less than $50k	$50k or more	Less than $50k	$50k or more	Less than $50k	$50k or more
WITH TOBACCO-FREE PLEDGE						
Employee Only	$15.23	$24.46	$31.15	$49.85	$78.92	$126.23
Employee + Child(ren)	$24.00	$38.31	$49.15	$78.23	$124.15	$199.15
Employee + Spouse*	$30.00	$48.00	$61.62	$97.38	$150.69	$241.15
Family	$45.92	$73.62	$83.08	$138.92	$189.23	$303.46
WITHOUT TOBACCO-FREE PLEDGE						
Employee Only	$19.85	$31.85	$40.62	$64.85	$102.69	$164.08
Employee + Child(ren)	$31.15	$49.85	$63.92	$101.77	$161.77	$258.69
Employee + Spouse*	$38.77	$62.31	$74.54	$126.69	$195.92	$313.85
Family	$59.77	$95.77	$102.23	$180.69	$246.00	$394.38

BI-WEEKLY	HSA BASIC		HSA PLUS		PPO	
	Less than $50k	$50k or more	Less than $50k	$50k or more	Less than $50k	$50k or more
WITH TOBACCO-FREE PLEDGE						
Employee Only	$30.46	$48.92	$62.31	$99.69	$157.85	$252.46
Employee + Child(ren)	$48.00	$76.62	$98.31	$156.46	$248.31	$398.31
Employee + Spouse*	$60.00	$96.00	$123.23	$194.77	$301.38	$482.31
Family	$91.85	$147.23	$166.15	$277.85	$378.46	$606.92
WITHOUT TOBACCO-FREE PLEDGE						
Employee Only	$39.69	$63.69	$81.23	$129.69	$205.38	$328.15
Employee + Child(ren)	$62.31	$99.69	$127.85	$203.54	$323.54	$517.38
Employee + Spouse*	$77.54	$124.62	$149.08	$253.38	$391.85	$627.69
Family	$119.54	$191.54	$204.46	$361.38	$492.00	$788.77

* Employees that choose to cover a spouse will be required to certify that the spouse does not have coverage available through another employer. If your spouse has other coverage available and you enroll him/her in the Watts Water medical plan, there will be a $50 per month surcharge for enrollment.

DENTAL

	WEEKLY	BI-WEEKLY
Employee Only	$2.54	$5.08
Employee + Child(ren)	$4.96	$9.92
Employee + Spouse	$7.38	$14.77
Family	$9.92	$19.85

VISION

	WEEKLY	BI-WEEKLY
Employee Only	$2.28	$4.55
Employee + Child(ren)	$3.66	$7.32
Employee + Spouse	$3.58	$7.17
Family	$5.90	$11.80