

2026/2027 Payroll Deductions

Biweekly Payroll Deductions

July 1, 2026 Through June 30, 2027 (26 Pay Periods)

If you do not enroll in HEP, you'll pay an additional \$46.15 per paycheck for the cost of coverage. (Employees on semimonthly pay schedules will have slightly higher premiums.)

Employee = just you, an active state employee

Employee + 1 = state employee and one enrolled dependent (spouse or child)

Family = state employee and more than one enrolled dependent

FLES¹ = two married state employees with at least one enrolled dependent.

Medical Plans	Employee		Employee + 1		Family		FLES ¹	
	Biweekly Rate	Annual Total	Biweekly Rate	Annual Total	Biweekly Rate	Annual Total	Biweekly Rate	Annual Total
Quality First Select Access STATE BLUECARE PRIME NETWORK NEW ENROLLMENT (ON OR AFTER JULY 1, 2026)	\$63.66	\$1,655.16	\$166.73	\$4,334.98	\$212.80	\$5,532.80	\$123.68	\$3,215.68
IF ENROLLED PRIOR TO JULY 1, 2026	\$60.63	\$1,576.38	\$160.06	\$4,161.56	\$204.62	\$5,320.12	\$118.53	\$3,081.78
Primary Care Access STATE BLUECARE NETWORK	\$67.00	\$1,742.00	\$180.77	\$4,700.02	\$229.88	\$5,976.88	\$125.70	\$3,268.20
Standard Access STATE BLUECARE NETWORK	\$72.73	\$1,890.98	\$203.59	\$5,293.34	\$266.64	\$6,932.64	\$140.42	\$3,650.92
Expanded Access STATE BLUECARE NETWORK	\$86.16	\$2,240.16	\$231.67	\$6,023.42	\$274.96	\$7,148.96	\$152.50	\$3,965.00
State Preferred POS Closed to new enrollment	\$149.51	\$3,887.26	\$436.63	\$11,352.38	\$513.21	\$13,343.46	\$299.36	\$7,783.36
Out-of-Area	\$90.33	\$2,348.58	\$280.07	\$7,281.82	\$327.61	\$8,517.86	\$159.39	\$4,144.14

Dental Plans	Employee		Employee + 1		Family		FLES ¹	
	Biweekly Rate	Annual Total	Biweekly Rate	Annual Total	Biweekly Rate	Annual Total	Biweekly Rate	Annual Total
Total Care DHMO	\$0.00	\$0.00	\$5.10	\$132.60	\$7.22	\$187.72	\$2.97	\$77.22
Enhanced	\$0.00	\$0.00	\$11.53	\$299.78	\$11.53	\$299.78	\$5.90	\$153.40
Basic	\$0.00	\$0.00	\$11.77	\$306.02	\$11.77	\$306.02	\$6.03	\$156.78
Dental Care DHMO Closed to new enrollment	\$0.00	\$0.00	\$4.08	\$106.08	\$5.79	\$150.54	\$2.38	\$61.88



The Total Care DHMO Plan uses the same DHMO network as the Dental Care DHMO Plan, but offers better coverage and lower costs.

¹ The Family Less Employed Spouse (FLES) rate is available only when both spouses work for the state of Connecticut and are enrolled in active coverage, eligible for health insurance, and enrolled in the same plan, along with at least one child. If you are enrolled in the FLES coverage level, both you and your spouse must enroll in order to participate in the Health Enhancement Program.