

**LANCASTER**  
NEBRASKA  
C O U N T Y

**2026 Medical Plan Premiums - MONTHLY**

Unrepresented C, E, MSS		EE Cost	ER Cost	Total Rate
Deputy Sheriff Captains	<b>Employee Only</b>	\$40.66	\$772.42	\$813.08
IBEW General	<b>Employee + Spouse</b>	\$280.50	\$1,589.58	\$1,870.08
IBEW Engineering	<b>Employee + Child(ren)</b>	\$219.52	\$1,244.04	\$1,463.56
	<b>Family</b>	\$365.84	\$2,073.14	\$2,438.98
Juvenile Detention Officers		EE Cost	ER Cost	Total Rate
Deputy Sheriffs	<b>Employee Only</b>	\$43.30	\$822.84	\$866.14
	<b>Employee + Spouse</b>	\$298.80	\$1,693.32	\$1,992.12
	<b>Employee + Child(ren)</b>	\$233.86	\$1,325.18	\$1,559.04
	<b>Family</b>	\$389.72	\$2,208.50	\$2,598.22
Correctional Officers		EE Cost	ER Cost	Total Rate
	<b>Employee Only</b>	\$56.92	\$756.16	\$813.08
	<b>Employee + Spouse</b>	\$374.02	\$1,496.06	\$1,870.08
	<b>Employee + Child(ren)</b>	\$292.72	\$1,170.84	\$1,463.56
	<b>Family</b>	\$487.78	\$1,951.20	\$2,438.98

**2026 Dental Plan Premiums - MONTHLY**

Unrepresented C, E, MSS		EE Cost	ER Cost	Total Rate
Juvenile Detention Officers	<b>Employee Only</b>	\$8.46	\$25.38	\$33.84
	<b>Employee + Spouse</b>	\$19.44	\$58.38	\$77.82
	<b>Employee + Child(ren)</b>	\$15.22	\$45.68	\$60.90
	<b>Family</b>	\$29.70	\$89.16	\$118.86
Deputy Sheriff Captains		EE Cost	ER Cost	Total Rate
Deputy Sheriffs	<b>Employee Only</b>	\$0.00	\$33.84	\$33.84
	<b>Employee + Spouse</b>	\$15.56	\$62.26	\$77.82
	<b>Employee + Child(ren)</b>	\$12.18	\$48.72	\$60.90
	<b>Family</b>	\$23.76	\$95.10	\$118.86
IBEW General		EE Cost	ER Cost	Total Rate
IBEW Engineering	<b>Employee Only</b>	\$5.08	\$28.76	\$33.84
	<b>Employee + Spouse</b>	\$19.44	\$58.38	\$77.82
	<b>Employee + Child(ren)</b>	\$15.22	\$45.68	\$60.90
	<b>Family</b>	\$29.70	\$89.16	\$118.86
Correctional Officers		EE Cost	ER Cost	Total Rate
	<b>Employee Only</b>	\$3.04	\$30.80	\$33.84
	<b>Employee + Spouse</b>	\$25.28	\$52.54	\$77.82
	<b>Employee + Child(ren)</b>	\$19.78	\$41.12	\$60.90
	<b>Family</b>	\$38.62	\$80.24	\$118.86

**2026 Vision Plan Premiums - MONTHLY**

All Employees		EE Cost	ER Cost	Total Rate
	<b>Employee Only</b>	\$9.16	\$0.00	\$9.16
	<b>Employee + Spouse</b>	\$17.40	\$0.00	\$17.40
	<b>Employee + Child(ren)</b>	\$18.32	\$0.00	\$18.32
	<b>Family</b>	\$27.28	\$0.00	\$27.28