



# Thrive with Key

## 2026 Medical, Dental and Vision Plan Premiums (per pay period, 24/year)

		2026 Medical Premiums Per Pay			
Pay Band	Medical Plan Option	EE Only	EE + SP	EE + CH	Family
<b>Band 1</b> \$75K or less	Key Medical 1	\$102	\$285	\$210	\$392
	Key Medical 2	\$49	\$182	\$116	\$249
	Key Medical 3	\$19	\$114	\$59	\$154
<b>Band 2</b> Greater than \$75K and less than \$150K	Key Medical 1	\$131	\$348	\$256	\$472
	Key Medical 2	\$72	\$224	\$150	\$302
	Key Medical 3	\$40	\$159	\$89	\$207
<b>Band 3</b> \$150K or above	Key Medical 1	\$146	\$376	\$277	\$506
	Key Medical 2	\$86	\$252	\$171	\$337
	Key Medical 3	\$54	\$187	\$110	\$243

Pay band is determined based on earnings received (base salary, overtime, cash commissions and short-term incentives) from pay dates between Oct. 1, 2024, through Sept. 30, 2025. Note: Your pay band is assigned annually and may change from year to year. If you were hired/rehired on Oct. 1, 2024, or later, your pay band will be determined based on the greater of earnings received from pay dates between Oct. 1, 2024, through Sept. 30, 2025, (base salary, overtime, cash commissions and short-term incentives) or your annualized base pay (or Annual Benefits Base Rate (ABBR), if applicable).

Vision	2026 Premiums Per Pay
EE	\$3.54
EE + CH	\$7.06
EE + SP	\$6.52
Family	\$10.37

Dental	2026 Premiums Per Pay
EE	\$9
EE + CH	\$21
EE + SP	\$17
Family	\$30

Note: If you are enrolling your domestic partner in any coverage, please review important information regarding tax implications on the following pages.

EE = Employee Only

EE+SP = Employee + Spouse/partner

EE+CH = Employee + One or more Child(ren)

Family = Employee + Spouse/partner + Child(ren)

# 2026 Biweekly Imputed Income (24 Pay Dates) for Domestic Partner Coverage

## What Is Imputed Income?

The definition of imputed income is benefits employees receive that aren't part of their salary or wages but still get taxed as part of their income. The employee is responsible for paying the tax on the value of certain benefits as determined by the IRS, which includes health and accident insurance for domestic partners.

Enrolled Dependents	Pay Band	Key Medical 1 Imputed Income	Key Medical 2 Imputed Income	Key Medical 3 Imputed Income	Dental Imputed Income	Vision Imputed Income
DP	Less than \$75,000	\$638	\$536	\$464	\$26	\$2.98
	\$75,000.00–\$149,999.99	\$672	\$555	\$488		
	\$150,000.00 or more	\$685	\$569	\$502		
DP+EEs CH	Less than \$75,000	\$638	\$536	\$464	\$26	\$2.98
	\$75,000.00–\$149,999.99	\$672	\$555	\$488		
	\$150,000.00 or more	\$685	\$569	\$502		
DP+DPs CH	Less than \$75,000	\$1,109	\$927	\$800	\$43	\$6.83
	\$75,000.00–\$149,999.99	\$1,160	\$957	\$832		
	\$150,000.00 or more	\$1,179	\$978	\$854		
DP+EEs CH+DPs CH	Less than \$75,000	\$638	\$538	\$464	\$18	\$3.31
	\$75,000.00–\$149,999.99	\$672	\$557	\$487		
	\$150,000.00 or more	\$685	\$571	\$502		

## Example:

An employee in the \$75,000–\$149,999.99 pay band who enrolled a domestic partner in Key Medical 1 and the dental plan should expect the following each bi-weekly pay that includes health and insurance premium deductions:

### Medical coverage

- Pretax deduction for your premium contribution
- Taxable value of coverage (imputed income) of \$672.00

### Dental coverage

- Pretax deduction for your premium contribution
- Taxable value of coverage (imputed income) of \$26.00

DP = Domestic Partner Only

DP+EEs CH = Domestic Partner + Employee's Child(ren)

DP+DPs CH = Domestic Partner and Domestic Partner's Child(ren)

DP+EEs CH+DPs CH = Domestic Partner, Employee's Child(ren), and Domestic Partner's Child(ren)

# 2026 Biweekly Imputed Income (24 Pay Dates) for Domestic Partner Coverage (continued)

Enrolled Dependents	Coverage Level	AD&D Imputed Income
<b>DP</b>	\$50,000	\$0.23
	\$100,000	\$0.45
	\$250,000	\$1.13
	\$500,000	\$2.25
	\$750,000	\$3.38
	\$1,000,000	\$4.50
<b>DP+EEs CH</b>	\$50,000	\$0.23
	\$100,000	\$0.45
	\$250,000	\$1.13
	\$500,000	\$2.25
	\$750,000	\$3.38
	\$1,000,000	\$4.50
<b>DP+DPs CH</b>	\$50,000	\$0.25
	\$100,000	\$0.50
	\$250,000	\$1.25
	\$500,000	\$2.50
	\$750,000	\$3.75
	\$1,000,000	\$5.00
<b>DP+EEs CH+DPs CH</b>	\$50,000	\$0.23
	\$100,000	\$0.45
	\$250,000	\$1.13
	\$500,000	\$2.25
	\$750,000	\$3.38
	\$1,000,000	\$4.50

DP = Domestic Partner Only

DP+EEs CH = Domestic Partner + Employee's Child(ren)

DP+DPs CH = Domestic Partner and Domestic Partner's Child(ren)

DP+EEs CH+DPs CH = Domestic Partner, Employee's Child(ren), and Domestic Partner's Child(ren)