

2026 RATE SHEET: DallasNews Corporation

MEDICAL

OPTION	Biweekly RATES			
<i>CDHP</i>	EMPLOYEE ONLY	EMPLOYEE & SPOUSE	EMPLOYEE & CHILD(REN)	EMPLOYEE & FAMILY
Less than \$55,000*	\$46.75	\$192.06	\$141.52	\$272.93
\$55,000-\$80,000*	\$59.24	\$235.39	\$175.37	\$331.44
\$80,000-\$105,000*	\$71.76	\$261.31	\$195.55	\$366.56
\$105,000 or more*	\$94.09	\$301.97	\$227.52	\$421.09

OPTION	Biweekly RATES			
PPO	EMPLOYEE ONLY	EMPLOYEE & SPOUSE	EMPLOYEE & CHILD(REN)	EMPLOYEE & FAMILY
Less than \$55,000*	\$67.40	\$242.22	\$180.94	\$340.31
\$50,000-\$80,000*	\$79.89	\$285.56	\$214.79	\$398.92
\$80,000-\$105,000*	\$92.41	\$311.49	\$234.96	\$433.94
\$105,000 or more*	\$114.75	\$352.14	\$266.94	\$488.47

Spousal Exclusion: If your spouse is employed and that company offers medical and/or dental, your spouse is ineligible for coverage under the DallasNews Corporation medical and/or dental.

DENTAL AND VISION

OPTION	Biweekly RATES			
	EMPLOYEE ONLY	EMPLOYEE & SPOUSE	EMPLOYEE & CHILD(REN)	EMPLOYEE & FAMILY
DENTAL				
Metlife Dental High Plan	\$9.50	\$19.56	\$18.79	\$29.19
Metlife Dental Low Plan	\$6.54	\$13.47	\$13.32	\$20.55
VISION				
Vision Service Plan	\$6.41	\$13.47	\$13.47	\$13.47

LIFE AND ACCIDENT

SUPPLEMENTAL LIFE*	
EMPLOYEE AGE	MONTHLY RATE PER \$1,000 OF COVERAGE
Less than 30	\$0.116
30-34	\$0.175
35-39	\$0.194
40-44	\$0.370
45-49	\$0.467
50-54	\$1.031
55-59	\$1.283
60-64	\$1.944
65-69	\$2.782
70+	\$4.297

DEPENDENT LIFE	
OPTION	MONTHLY RATE
Option 1	\$2.40
Option 2	\$1.20
Option 3	\$4.80
PERSONAL ACCIDENT*	
OPTION	MONTHLY RATE PER \$1,000
Employee Only	\$0.027
Employee & Family	\$0.045

*Supplemental Life and Personal Accident cost is based on employee's current benefit base salary and level of coverage.