SEBAC HEALTH INSURANCE FAQ 2026

Last Updated: July 14, 2026

Why did I see an increase in my premium share for my health insurance?	Our premium shares are a percentage of overall claims costs. Nearly every year, our plan has seen claims costs go up, although typically less than other plans do. Even still, we are sensitive to the fact that these last two years have seen large increases. Premium share increases are in response to those increased costs and inflation and reflect the previous year's plan usage and costing projected out over the next twelve months. That formula produced projected claims cost increases for the plan year starting 7/1/26 as compared to 7/1/25.
How does our premium increase compare to the rest of the nation?	Our premium shares are increasing around 11% this year depending on your plan selection, but our plan continues to be one of the most affordable comprehensive healthcare plans for both the employee and the employer when benefit mix is accounted for. Over time, our increases average well less than the national average as we focus on the long-term health of employees rather than short-term fixes which often increase long term costs. Year after year we are able to stay hyper competitive because of the creative and thoughtful work of our joint labor/ management Healthcare Cost Containment Committee to identify ways to improve the health of state employees and their families, thereby reducing healthcare costs. This approach of improving health outcomes rather than cutting benefits not only improves costs for employees and the State in the short-term, but in the long-term future of the plan as well.
Did all the different plan choices go up by the same percentage?	In most cases, yes. For further information on your specific plan choice, please reach out to your union steward or staff representative. If you are covered under the Quality First Select plan, you can review more information **HERE**.
What if I want to change my plan now?	The elections you make at open enrollment or when you're first eligible for coverage are in effect through June 30, 2027. If you have a qualifying status change, you may be able to change your elections mid-year (see **Eligibility**).
Am I able to enroll myself in one option and my eligible family member	No. You and the family members you enroll must all have the same medical option and/or the same

in another?	dental option (unless you have a family member who is also a state employee). However, you can enroll certain family members in medical and different family members in dental. For example, you can enroll yourself and your child for medical, but yourself only for dental. To enroll an eligible family member in a plan, you must enroll as well again unless that family member is also a state employee.
Did my medical coverage change at all?	No structural changes in benefits occurred in July of this year. As always, drug formularies and related pre-authorization rules are adjusted on an ongoing basis. Unlike the vast majority of plans, our plan respects the ultimate authority of our doctors to decide on prescription appropriateness, rather than that of an insurance carrier.
What is the cost of HEP?	The Health Enhancement Program (HEP) is a program that lowers costs for all state employees who get the nationally recommended healthcare screenings, and provides a further $100 per year reward for state employees with specific conditions for engaging in our programs for learning best practices about those conditions. Those conditions are diabetes, asthma, heart disease, high blood pressure, and high cholesterol. Learning best practices for managing these conditions keeps employees healthier and greatly reduces the risk of serious complications in the future. There is no cost to enroll. If you do not enroll in HEP, you will pay an additional $46.15 per paycheck for the cost of coverage. If you are not enrolled or are non-compliant with HEP there is an additional $350 per individual ($1,400 per family) maximum added to your annual deductible. You can learn more about HEP HERE. The vast majority of state employees sign up for, and are compliant, with the HEP. Of those who are non-compliant, the vast majority become compliant shortly thereafter and are able to regain the benefits of the HEP.
How are state union members fighting to keep quality healthcare affordable and accessible?	Our joint Healthcare Cost Containment Committee with the state has been a national model in restraining the growth of healthcare costs without reducing benefits or access, and while actually improving the health of state employees. Together, SEBAC and the State work to improve health outcomes for our state workforce and their families, thereby decreasing overall healthcare costs. When our workforce is healthy and thriving,

	the public services we all rely on improve. Reduced absenteeism, improved productivity and the assurance that quality healthcare doesn’t mean breaking the bank - all result in state workers being able to better provide the services they deliver to our communities every day. In addition to our work with our own plan, State workers through their political actions have been supportive of efforts to prevent insurance and pharmaceutical companies from profiteering and unduly increasing the cost of health insurance on the backs of all working families. We will continue to fight for better health and health care for all working families.