

January 1, 2025 - December 31, 2025

Gold Plan - ADMN 2

Single = \$1,000 deductible - \$2,500 Total Out of Pocket Expense per calendar year
 Family = \$3,000 deductible - \$5,000 Total Out of Pocket Expense per calendar year

Coverage (24 Pay)	Cost	Monthly Contribution		Per Paycheck (24)		Annual	
		Board	Employee	Board	Employee	Board	Employee
Single	\$1,114.89	\$1,059.15	\$55.74	\$529.57	\$27.87	\$12,709.77	\$668.94
Single + Child	\$1,852.05	\$1,759.45	\$92.60	\$879.73	\$46.30	\$21,113.43	\$1,111.23
Single + Spouse	\$2,099.07	\$1,994.12	\$104.95	\$997.06	\$52.48	\$23,929.38	\$1,259.44
Family	\$2,416.68	\$2,295.85	\$120.83	\$1,147.92	\$60.42	\$27,550.19	\$1,450.01

Silver Plan ADMN 2

Single = \$2,000 deductible - \$5,000 Total Out of Pocket Expense per calendar year
 Family = \$6,000 deductible - \$10,000 Total Out of Pocket Expense per calendar year

Coverage (24 Pay)	Cost	Monthly Contribution		Per Paycheck (24)		Annual	
		Board	Employee	Board	Employee	Board	Employee
Single	\$982.88	\$933.73	\$49.14	\$466.87	\$24.57	\$11,204.79	\$589.73
Single + Child	\$1,622.02	\$1,540.92	\$81.10	\$770.46	\$40.55	\$18,491.00	\$973.21
Single + Spouse	\$1,838.99	\$1,747.04	\$91.95	\$873.52	\$45.97	\$20,964.48	\$1,103.39
Family	\$2,206.25	\$2,095.94	\$110.31	\$1,047.97	\$55.16	\$25,151.30	\$1,323.75

HSA High Deductible Plan - ADMN2

Single = \$3,200 deductible - \$6,400 Total Out of Pocket Expense per calendar year
 Family = \$6,400 deductible - \$12,800 Total Out of Pocket Expense per calendar year

Coverage (24 Pay)	Cost	Monthly Contribution		Per Paycheck (24)		Annual	
		Board	Employee	Board	Employee	Board	Employee
Single	\$978.18	\$929.27	\$48.91	\$464.63	\$24.45	\$11,151.24	\$586.91
Single + Child	\$1,614.27	\$1,533.56	\$80.71	\$766.78	\$40.36	\$18,402.70	\$968.56
Single + Spouse	\$1,830.19	\$1,738.68	\$91.51	\$869.34	\$45.75	\$20,864.11	\$1,098.11
Family	\$3,119.71	\$2,963.73	\$155.99	\$1,481.86	\$77.99	\$35,564.73	\$1,871.83

Bronze High Deductible Plan - ADMN 2

Single = \$3,350 deductible - \$6,450 Total Out of Pocket Expense per calendar year
 Family = \$6,450 deductible - \$12,900 Total Out of Pocket Expense per calendar year

Coverage (24 Pay)	Cost	Monthly Contribution		Per Paycheck (24)		Annual	
		Board	Employee	Board	Employee	Board	Employee
Single	\$846.95	\$804.60	\$42.35	\$402.30	\$21.17	\$9,655.21	\$508.17
Single + Child	\$1,385.45	\$0.00	\$1,385.45	\$0.00	\$692.72	\$0.00	\$16,625.37
Single + Spouse	\$1,572.35	\$0.00	\$1,572.35	\$0.00	\$786.17	\$0.00	\$18,868.15
Family	\$1,998.44	\$0.00	\$1,998.44	\$0.00	\$999.22	\$0.00	\$23,981.24

HMO - ADMN 2

Single = \$0 deductible - \$1,500 Total Out of Pocket Expense per calendar year
 Family = \$0 deductible - \$3,000 Total Out of Pocket Expense per calendar year

Coverage (24 Pay)	Cost	Monthly Contribution		Per Paycheck (24)		Annual	
		Board	Employee	Board	Employee	Board	Employee
Single	\$913.54	\$867.86	\$45.68	\$433.93	\$22.84	\$10,414.36	\$548.12
Single + Child	\$1,577.68	\$1,498.80	\$78.88	\$749.40	\$39.44	\$17,985.55	\$946.61
Single + Spouse	\$1,777.29	\$1,688.43	\$88.86	\$844.21	\$44.43	\$20,261.11	\$1,066.37
Family	\$2,283.87	\$2,169.68	\$114.19	\$1,084.84	\$57.10	\$26,036.12	\$1,370.32