

INSURANCE COST FOR SEPT 1, 2024 - AUGUST 31, 2025
Monthly

	Care Plus Plan A			Care Plus Plan B			HSA Plan C			Disability	Life Family	Life Single	
	Single	Two-party	Family	Single	Two-party	Family	Single	Two-party	Family				
Premium Cost	\$785.05	\$1,737.04	\$2,486.92	\$700.26	\$1,550.02	\$2,218.66	\$633.78	\$1,396.96	\$2,000.88				
HSA Deposit Difference (Certified)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$20.00	\$40.00	\$60.00				
Deposit in HSA (Classified & Admin)							\$66.48	\$153.06	\$217.78				
Deposit in HSA (Certified)	-	-	-	-	-	-	\$46.48	\$113.06	\$157.78				
Total Premium Cost	\$785.05	\$1,737.04	\$2,486.92	\$700.26	\$1,550.02	\$2,218.66	\$700.26	\$1,550.02	\$2,218.66	\$18.47	\$2.99	\$1.65	%
Contracted Classified													
1260+ hours per year	\$150.60	\$310.88	\$447.48	\$45.81	\$83.86	\$119.22	\$45.81	\$83.86	\$119.22	\$0.00	\$0.00	\$0.00	
1070 - 1259 hours per year	\$239.42	\$510.54	\$733.00	\$137.43	\$289.12	\$413.14	\$137.43	\$289.12	\$413.14	\$2.59	\$0.42	\$0.23	14.0%
890 - 1069 hours per year	\$334.59	\$724.47	\$1,038.92	\$235.60	\$509.05	\$728.06	\$235.60	\$509.05	\$728.06	\$5.36	\$0.87	\$0.48	29.0%
637 - 889 hours per year	\$423.41	\$924.13	\$1,324.44	\$327.22	\$714.31	\$1,021.98	\$327.22	\$714.31	\$1,021.98	\$7.94	\$1.29	\$0.71	43.0%
Bus Drivers	\$315.56	\$681.68	\$977.73	\$215.97	\$465.06	\$665.07	\$215.97	\$465.06	\$665.07	\$4.80	\$0.78	\$0.43	26.0%
Administrators	\$164.79	\$327.02	\$468.26	\$60.00	\$100.00	\$140.00	\$60.00	\$100.00	\$140.00	\$0.00	\$0.00	\$0.00	
Certified													
1.00 FTE	\$104.79	\$227.02	\$328.26	\$20.00	\$40.00	\$60.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	0.0%
.90 FTE	\$172.82	\$378.02	\$544.13	\$88.03	\$191.00	\$275.87	\$70.03	\$155.00	\$221.87	\$1.85	\$0.30	\$0.17	10.0%
.88 FTE	\$186.42	\$408.22	\$587.30	\$101.63	\$221.20	\$319.04	\$84.03	\$186.00	\$266.24	\$2.22	\$0.36	\$0.20	12.0%
.86 FTE	\$200.03	\$438.42	\$630.47	\$115.24	\$251.40	\$362.21	\$98.04	\$217.00	\$310.61	\$2.59	\$0.42	\$0.23	14.0%
.85 FTE	\$206.83	\$453.52	\$652.06	\$122.04	\$266.50	\$383.80	\$105.04	\$232.50	\$332.80	\$2.77	\$0.45	\$0.25	15.0%
.84 FTE	\$213.63	\$468.62	\$673.65	\$128.84	\$281.60	\$405.39	\$112.04	\$248.00	\$354.99	\$2.96	\$0.48	\$0.26	16.0%
.83 FTE	\$220.43	\$483.72	\$695.23	\$135.64	\$296.70	\$426.97	\$119.04	\$263.50	\$377.17	\$3.14	\$0.51	\$0.28	17.0%
.80 FTE	\$240.84	\$529.02	\$759.99	\$156.05	\$342.00	\$491.73	\$140.05	\$310.00	\$443.73	\$3.69	\$0.60	\$0.33	20.0%
.75 FTE	\$274.86	\$604.53	\$867.93	\$190.07	\$417.51	\$599.67	\$175.07	\$387.51	\$554.67	\$4.62	\$0.75	\$0.41	25.0%
.71 FTE	\$302.07	\$664.93	\$954.27	\$217.28	\$477.91	\$686.01	\$203.08	\$449.51	\$643.41	\$5.36	\$0.87	\$0.48	29.0%
.70 FTE	\$308.87	\$680.03	\$975.86	\$224.08	\$493.01	\$707.60	\$210.08	\$465.01	\$665.60	\$5.54	\$0.90	\$0.50	30.0%
.67 FTE	\$329.28	\$725.33	\$1,040.62	\$244.49	\$538.31	\$772.36	\$231.09	\$511.51	\$732.16	\$6.10	\$0.99	\$0.54	33.0%
.65 FTE	\$342.88	\$755.53	\$1,083.79	\$258.09	\$568.51	\$815.53	\$245.09	\$542.51	\$776.53	\$6.46	\$1.05	\$0.58	35.0%
.64 FTE	\$349.68	\$770.63	\$1,105.38	\$264.89	\$583.61	\$837.12	\$252.09	\$558.01	\$798.72	\$6.65	\$1.08	\$0.59	36.0%
.63 FTE	\$356.49	\$785.73	\$1,126.96	\$271.70	\$598.71	\$858.70	\$259.10	\$573.51	\$820.90	\$6.83	\$1.11	\$0.61	37.0%
.60 FTE	\$376.89	\$831.03	\$1,191.72	\$292.10	\$644.01	\$923.46	\$280.10	\$620.01	\$887.46	\$7.39	\$1.20	\$0.66	40.0%
.57 FTE	\$397.30	\$876.33	\$1,256.48	\$312.51	\$689.31	\$988.22	\$301.11	\$666.51	\$954.02	\$7.94	\$1.29	\$0.71	43.0%
.50 FTE	\$444.92	\$982.03	\$1,407.59	\$360.13	\$795.01	\$1,139.33	\$350.13	\$775.01	\$1,109.33	\$9.24	\$1.50	\$0.83	50.0%

Plan D - Bronze QHDHP Plan
 Hourly Health Benefits Eligible Positions
 Working 30+ hrs. per week
 New employee enrollment date
 1st of month after 60 days
 Sept 1, 2024 - August 31, 2025

	Bronze Plan		
	Single	Two-party	Family
Monthly Premium Cost	\$527.14	\$1,156.87	\$1,658.31
Monthly Employee Cost	\$100.00	\$729.73	\$1,231.17
Monthly Employer Cost	\$427.14	\$427.14	\$427.14

INSURANCE COST FOR SEPT 1, 2024 - AUGUST 31, 2025
Monthly

	Care Plus Plan A			Care Plus Plan B			HSA Plan C			Life	Life
	Single	Two-party	Family	Single	Two-party	Family	Single	Two-party	Family	Family	Single
Premium Cost	\$785.05	\$1,737.04	\$2,486.92	\$700.26	\$1,550.02	\$2,218.66	\$633.78	\$1,396.96	\$2,000.88		
Deposit in HSA	-	-	-	-	-	-	\$66.48	\$153.06	\$217.78		
Total Premium Cost	\$785.05	\$1,737.04	\$2,486.92	\$700.26	\$1,550.02	\$2,218.66	\$700.26	\$1,550.02	\$2,218.66	\$2.99	\$1.65
Percent retiree pays											
0.0%	\$104.79	\$227.02	\$328.26	\$20.00	\$40.00	\$60.00	\$20.00	\$40.00	\$60.00	\$0.00	\$0.00
8.0%	\$159.21	\$347.82	\$500.95	\$74.42	\$160.80	\$232.69	\$74.42	\$160.80	\$232.69	\$0.24	\$0.13
14.0%	\$200.03	\$438.42	\$630.47	\$115.24	\$251.40	\$362.21	\$115.24	\$251.40	\$362.21	\$0.42	\$0.23
15.0%	\$206.83	\$453.52	\$652.06	\$122.04	\$266.50	\$383.80	\$122.04	\$266.50	\$383.80	\$0.45	\$0.25
16.0%	\$213.63	\$468.62	\$673.65	\$128.84	\$281.60	\$405.39	\$128.84	\$281.60	\$405.39	\$0.48	\$0.26
17.0%	\$220.43	\$483.72	\$695.23	\$135.64	\$296.70	\$426.97	\$135.64	\$296.70	\$426.97	\$0.51	\$0.28
20.0%	\$240.84	\$529.02	\$759.99	\$156.05	\$342.00	\$491.73	\$156.05	\$342.00	\$491.73	\$0.60	\$0.33
25.0%	\$274.86	\$604.53	\$867.93	\$190.07	\$417.51	\$599.67	\$190.07	\$417.51	\$599.67	\$0.75	\$0.41
26.0%	\$281.66	\$619.63	\$889.51	\$196.87	\$432.61	\$621.25	\$196.87	\$432.61	\$621.25	\$0.78	\$0.43
37.0%	\$356.49	\$785.73	\$1,126.96	\$271.70	\$598.71	\$858.70	\$271.70	\$598.71	\$858.70	\$1.11	\$0.61
43.0%	\$397.30	\$876.33	\$1,256.48	\$312.51	\$689.31	\$988.22	\$312.51	\$689.31	\$988.22	\$1.29	\$0.71
50.0%	\$444.92	\$982.03	\$1,407.59	\$360.13	\$795.01	\$1,139.33	\$360.13	\$795.01	\$1,139.33	\$1.50	\$0.83