

CURRENT MEDICAL INS. UNITED HEALTHCARE PLAN 1	MONTHLY PREMIUM	% PAID BY EMPLOYER	EMPLOYER COST/MO	EMPLOYEE COST/MO	EMPLOYEE BIWEEKLY COST
EMPLOYEE - SINGLE	\$ 1,264.89	94%	\$ 1,189.89	\$ 75.00	\$ 34.62
N/A	\$ -		\$ -	\$ -	
N/A	\$ -		\$ -	\$ -	
FAMILY	\$ 2,612.49	78%	\$ 2,043.45	\$ 569.04	\$ 262.63

CURRENT MEDICAL INS. HIGH DEDUCTIBLE UNITED HEALTHCARE PLAN 5	MONTHLY PREMIUM	% PAID BY EMPLOYER	EMPLOYER COST/MO	EMPLOYEE COST/MO	EMPLOYEE BIWEEKLY COST
EMPLOYEE - SINGLE	\$ 1,064.92	100%	\$ 1,064.92	\$ -	\$ -
N/A	\$ 2,199.48	84.45%	\$ 1,859.11	\$ 340.37	\$ 157.09
N/A	\$ 2,199.48	84.45%	\$ 1,859.11	\$ 340.37	\$ 157.09
FAMILY	\$ 2,199.48	84.45%	\$ 1,859.11	\$ 340.37	\$ 157.09

CURRENT MEDICAL INS. UNITED HEALTHCARE PLAN 2	MONTHLY PREMIUM	% PAID BY EMPLOYER	EMPLOYER COST/MO	EMPLOYEE COST/MO	EMPLOYEE BIWEEKLY COST
EMPLOYEE - SINGLE	\$ 1,195.08	95.80%	\$ 1,145.08	\$ 50.00	\$ 23.08
N/A	\$ -		\$ -	\$ -	\$ -
N/A	\$ -		\$ -	\$ -	\$ -
FAMILY	\$ 2,468.31	81.24%	\$ 2,005.18	\$ 463.13	\$ 213.75

CURRENT DENTAL INS. HUMANA PPO	MONTHLY PREMIUM	% PAID BY EMPLOYER	EMPLOYER COST/MO	EMPLOYEE COST/MO	EMPLOYEE BIWEEKLY COST
EMPLOYEE - SINGLE	\$ 31.55	100%	\$ 31.55	\$ -	\$ -
FAMILY	\$ 97.71	35.45%	\$ 34.64	\$ 63.07	\$ 29.11

CURRENT VISION INS. HUMANA PPO	MONTHLY PREMIUM	% PAID BY EMPLOYER	EMPLOYER COST/MO	EMPLOYEE COST/MO	EMPLOYEE BIWEEKLY COST
EMPLOYEE - SINGLE	\$ 6.96	100%	\$ 6.96	\$ -	\$ -
FAMILY	\$ 17.75	39.21%	\$ 6.96	\$ 10.79	\$ 4.98

RENEWAL 2025 BLUE OPTIONS MEDICAL PLAN # 03768 TIERS	MONTHLY PREMIUM TOTAL COST	% PAID BY EMPLOYER	EMPLOYER COST/MO
EMPLOYEE - SINGLE	\$ 951.73	94%	\$ 894.62
EMPLOYEE + SPOUSE	\$ 2,169.95	78%	\$ 1,692.56
EMPLOYEE + CHILDREN	\$ 1,903.47	78%	\$ 1,484.70
FAMILY	\$ 3,045.54	78%	\$ 2,375.52

RENEWAL 2025 BLUE OPTIONS MEDICAL PLAN # 03768 TIERS	MONTHLY PREMIUM TOTAL COST	% PAID BY EMPLOYER	EMPLOYER COST/MO	EMPLOYEE COST/MO	EMPLOYEE BIWEEKLY COST
EMPLOYEE - SINGLE	\$ 951.73	94%	\$ 894.62	\$ 57.10	\$ 26.35
EMPLOYEE + SPOUSE	\$ 2,169.95	78%	\$ 1,692.56	\$ 477.38	\$ 220.33
EMPLOYEE + CHILDREN	\$ 1,903.47	78%	\$ 1,484.70	\$ 418.77	\$ 193.27
FAMILY	\$ 3,045.54	78%	\$ 2,375.52	\$ 670.01	\$ 309.23

RENEWAL 2025 BLUE OPTIONS MEDICAL HIGH DEDUCTIBLE PLAN # 05190/05191 TIERS	MONTHLY PREMIUM TOTAL COST	% PAID BY EMPLOYER	EMPLOYER COST/MO	EMPLOYEE COST/MO	EMPLOYEE BIWEEKLY COST
EMPLOYEE - SINGLE	\$ 776.02	100%	\$ 776.02	\$ -	\$ -
EMPLOYEE + SPOUSE	\$ 1,769.32	84.45%	\$ 1,494.19	\$ 275.12	\$ 126.98
EMPLOYEE + CHILDREN	\$ 1,552.03	84.45%	\$ 1,310.68	\$ 241.34	\$ 111.38
FAMILY	\$ 2,483.25	84.45%	\$ 2,097.10	\$ 386.14	\$ 178.22

NOT OFFERED IN PLAN YEAR 2025-2026					

RENEWAL 2025 DENTAL INS. HUMANA PPO	MONTHLY PREMIUM	% PAID BY EMPLOYER	EMPLOYER COST/MO	EMPLOYEE COST/MO	EMPLOYEE BIWEEKLY COST
EMPLOYEE - SINGLE	\$ 32.80	100%	\$ 32.80	\$ -	\$ -
FAMILY	\$ 101.62	34.45%	\$ 32.80	\$ 68.82	\$ 31.76

RENEWAL 2025 VISION INS. HUMANA PPO	MONTHLY PREMIUM	% PAID BY EMPLOYER	EMPLOYER COST/MO	EMPLOYEE COST/MO	EMPLOYEE BIWEEKLY COST
EMPLOYEE - SINGLE	\$ 7.24	100%	\$ 7.24	\$ -	\$ -
FAMILY	\$ 18.46	39.21%	\$ 7.24	\$ 11.22	\$ 5.78

RENEWAL 2025 BLUE OPTIONS MEDICAL HIGH DEDUCTIBLE PLAN # 05190/05191 TIERS	MONTHLY PREMIUM TOTAL COST	% PAID BY EMPLOYER	EMPLOYER COST/MO	Delta Between PPO and HD/mo
EMPLOYEE - SINGLE	\$ 776.02	100%	\$ 776.02	118.6
EMPLOYEE + SPOUSE	\$ 1,769.32	84.45%	\$ 1,494.19	198.37
EMPLOYEE + CHILDREN	\$ 1,552.03	84.45%	\$ 1,310.68	174.02
FAMILY	\$ 2,483.25	84.45%	\$ 2,097.10	278.42

Employee 2025/2026 Bi- Weekly Cost Difference	Employer 2025/2026 Mnthly Cost Difference	Possible Number of Employees who will enroll	Estimated Employer Monthly Cost
\$ (8.27)	\$ (295.27)	51	45,625.62
\$ (42.30)	\$ (350.89)	6	10,155.36
\$ (69.36)	\$ (558.75)	7	10,392.90
\$ 46.60	\$ 332.07	37	87,894.24

Employee 2025/2026 Bi- Weekly Cost Difference	Employer 2025/2026 Mnthly Cost Difference	Possible Number of Employees who will enroll	Estimated Employer Monthly Cost
\$ -	\$ 776.02	2	1,552.04
\$ (30.11)	\$ (364.92)	0	0
\$ (45.71)	\$ (548.43)	1	1,310.68
\$ 21.13	\$ 237.99	0	0

Employee 2025/2026 Bi- Weekly Cost Difference	Employer 2025/2026 Mnthly Cost Difference	Possible Number of Employees who will enroll	Estimated Employer Monthly Cost
\$ -	\$ 32.80	72	2,361.60
\$ 2.65	\$ 1.84	65	2,132

Employee 2025/2026 Bi- Weekly Cost Difference	Employer 2025/2026 Mnthly Cost Difference	Possible Number of Employees who will enroll	Estimated Employer Monthly Cost
\$ -	\$ 7.24	68	492.32
\$ 0.80	\$ 0.28	63	456.12