

# MEDICAL, DENTAL, AND VISION PLAN RATES

## 2025 Associate Bi-Weekly Payroll Deduction Rates

\$3,300 HSA						
		Salary <\$55,000		Salary ≥\$55,000 Non-Officer		Officers
Bi-Weekly (26 pay periods)	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
Individual	\$20.63	\$66.78	\$23.44	\$69.60	\$29.24	\$75.40
Individual + Spouse	\$74.55	\$166.86	\$82.21	\$174.52	\$102.56	\$194.87
Individual + Child(ren)	\$58.97	\$128.20	\$65.15	\$134.38	\$81.25	\$150.48
Individual + Family	\$164.36	\$256.67	\$178.80	\$271.10	\$223.20	\$315.51

\$1,850 HSA						
		Salary <\$55,000		Salary ≥\$55,000 Non-Officer		Officers
Bi-Weekly (26 pay periods)	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
Individual	\$36.04	\$82.20	\$38.26	\$84.41	\$47.72	\$93.87
Individual + Spouse	\$123.61	\$215.92	\$132.42	\$224.73	\$165.23	\$257.53
Individual + Child(ren)	\$97.30	\$166.53	\$103.60	\$172.83	\$129.23	\$198.46
Individual + Family	\$255.81	\$348.12	\$273.09	\$365.40	\$340.96	\$433.27

\$900 PPO						
		Salary <\$55,000		Salary ≥\$55,000 Non-Officer		Officers
Bi-Weekly (26 pay periods)	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
Individual	\$59.13	\$105.28	\$62.66	\$108.82	\$78.32	\$124.47
Individual + Spouse	\$189.61	\$281.92	\$202.85	\$295.15	\$253.54	\$345.85
Individual + Child(ren)	\$140.32	\$209.55	\$149.17	\$218.40	\$186.45	\$255.68
Individual + Family	\$339.59	\$431.89	\$362.16	\$454.47	\$452.66	\$544.97

\$400 PPO						
		Salary <\$55,000		Salary ≥\$55,000 Non-Officer		Officers
Bi-Weekly (26 pay periods)	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco	Non-Tobacco	Tobacco
Individual	\$99.64	\$145.80	\$106.61	\$152.76	\$133.26	\$179.41
Individual + Spouse	\$295.21	\$387.52	\$314.29	\$406.60	\$392.84	\$485.15
Individual + Child(ren)	\$219.24	\$288.48	\$233.76	\$302.99	\$292.17	\$361.40
Individual + Family	\$514.06	\$606.36	\$546.61	\$638.92	\$683.21	\$775.51

Dental and Vision Plans			
Bi-Weekly (26 pay periods)	Basic Plus Dental	Premier Dental w/ Ortho	Vision
Individual	\$18.89	\$29.39	\$5.45
Individual + Spouse	\$38.17	\$59.40	\$7.86
Individual + Child(ren)	\$34.20	\$53.22	\$7.99
Individual + Family	\$55.55	\$86.44	\$12.69

## 2025 Associate Weekly Payroll Deduction Rates

<b>\$3,300 HSA</b>						
	<b>Salary &lt; \$55,000</b>		<b>Salary ≥ \$55,000 Non-Officer</b>		<b>Officers</b>	
<b>Weekly (52 pay periods)</b>	<b>Non-Tobacco</b>	<b>Tobacco</b>	<b>Non-Tobacco</b>	<b>Tobacco</b>	<b>Non-Tobacco</b>	<b>Tobacco</b>
<b>Individual</b>	\$10.31	\$33.39	\$11.72	\$34.80	\$14.62	\$37.70
<b>Individual + Spouse</b>	\$37.28	\$83.43	\$41.11	\$87.26	\$51.28	\$97.44
<b>Individual + Child(ren)</b>	\$29.49	\$64.10	\$32.58	\$67.19	\$40.62	\$75.24
<b>Individual + Family</b>	\$82.18	\$128.33	\$89.40	\$135.55	\$111.60	\$157.76

<b>\$1,850 HSA</b>						
	<b>Salary &lt; \$55,000</b>		<b>Salary ≥ \$55,000 Non-Officer</b>		<b>Officers</b>	
<b>Weekly (52 pay periods)</b>	<b>Non-Tobacco</b>	<b>Tobacco</b>	<b>Non-Tobacco</b>	<b>Tobacco</b>	<b>Non-Tobacco</b>	<b>Tobacco</b>
<b>Individual</b>	\$18.02	\$41.10	\$19.13	\$42.21	\$23.86	\$46.94
<b>Individual + Spouse</b>	\$61.80	\$107.96	\$66.21	\$112.37	\$82.61	\$128.77
<b>Individual + Child(ren)</b>	\$48.65	\$83.26	\$51.80	\$86.42	\$64.62	\$99.23
<b>Individual + Family</b>	\$127.90	\$174.06	\$136.54	\$182.70	\$170.48	\$216.63

<b>\$900 PPO</b>						
	<b>Salary &lt; \$55,000</b>		<b>Salary ≥ \$55,000 Non-Officer</b>		<b>Officers</b>	
<b>Weekly (52 pay periods)</b>	<b>Non-Tobacco</b>	<b>Tobacco</b>	<b>Non-Tobacco</b>	<b>Tobacco</b>	<b>Non-Tobacco</b>	<b>Tobacco</b>
<b>Individual</b>	\$29.56	\$52.64	\$31.33	\$54.41	\$39.16	\$62.24
<b>Individual + Spouse</b>	\$94.81	\$140.96	\$101.42	\$147.58	\$126.77	\$172.92
<b>Individual + Child(ren)</b>	\$70.16	\$104.78	\$74.59	\$109.20	\$93.23	\$127.84
<b>Individual + Family</b>	\$169.79	\$215.95	\$181.08	\$227.23	\$226.33	\$272.48

<b>\$400 PPO</b>						
	<b>Salary &lt; \$55,000</b>		<b>Salary ≥ \$55,000 Non-Officer</b>		<b>Officers</b>	
<b>Weekly (52 pay periods)</b>	<b>Non-Tobacco</b>	<b>Tobacco</b>	<b>Non-Tobacco</b>	<b>Tobacco</b>	<b>Non-Tobacco</b>	<b>Tobacco</b>
<b>Individual</b>	\$49.82	\$72.90	\$53.31	\$76.38	\$66.63	\$89.70
<b>Individual + Spouse</b>	\$147.60	\$193.76	\$157.15	\$203.30	\$196.42	\$242.57
<b>Individual + Child(ren)</b>	\$109.62	\$144.24	\$116.88	\$151.50	\$146.08	\$180.70
<b>Individual + Family</b>	\$257.03	\$303.18	\$273.30	\$319.46	\$341.60	\$387.76

<b>Dental and Vision Plans</b>			
<b>Weekly (52 pay periods)</b>	<b>Basic Plus Dental</b>	<b>Premier Dental w/ Ortho</b>	<b>Vision</b>
<b>Individual</b>	\$9.44	\$14.70	\$2.73
<b>Individual + Spouse</b>	\$19.09	\$29.70	\$3.93
<b>Individual + Child(ren)</b>	\$17.10	\$26.61	\$3.99
<b>Individual + Family</b>	\$27.77	\$43.22	\$6.35