80/20 & 70/30 Plan for Active Employees, Eligible Part-Time, Job Share and Leave of Absence Subscribers

	Enhanced PPO Plan (80/20) TOBACCO ATTESTATION COMPLETE?*		Base PPO Plan (70/30) TOBACCO ATTESTATION COMPLETE?*	
Monthly Premium Rates January 1, 2025 – December 31, 2025				
	YES	NO	YES	NO
SUBSCRIBER AND ALL DEPENDENTS ARE NON-MEDICARE				
Subscriber	\$50.00	\$110.00	\$25.00	\$85.00
Subscriber + Child(ren)	\$305.00	\$365.00	\$218.00	\$278.00
Subscriber + Spouse	\$700.00	\$760.00	\$590.00	\$650.00
Subscriber + Family	\$720.00	\$780.00	\$598.00	\$658.00
JOB SHARE EMPLOYEES (50% CONTRIBUTORY)				
Subscriber	\$387.31	\$447.31	\$362.31	\$422.31
Subscriber + Child(ren)	\$642.31	\$702.31	\$555.31	\$615.31
Subscriber + Spouse	\$1,037.31	\$1,097.31	\$927.31	\$987.31
Subscriber + Family	\$1,057.31	\$1,117.31	\$935.31	\$995.31
LOA FULLY PAID & PART-TIME (100% CONTRIBUTION)				
Subscriber	\$724.62	\$784.62	\$699.62	\$759.62
Subscriber + Child(ren)	\$979.62	\$1,039.62	\$892.62	\$952.62
Subscriber + Spouse	\$1,374.62	\$1,434.62	\$1,264.62	\$1,324.62
Subscriber + Family	\$1,394.62	\$1,454.62	\$1,272.62	\$1,332.62

Notes:

1. Employer Share for Active Subscribers is \$674.62 OR \$337.51 for 50% Contributory Active Subscribers.

