

2024-2025 Health Insurance Rates.xlsx

Plan 0727 - \$500 Deductible (004)	Group	24/25 Employee Cost
Individual	B7505004	676.28
1 Dependent	B7505004	1,698.36
Family	B7505004	2,295.39
Family (2 Employees)	B7505004	1,846.80

Plan 03359 - \$1,000 Deductible (001)	Group	24/25 Employee Cost
Individual	B7505001	513.66
1 Dependent	B7505001	1,423.96
Family	B7505001	1,955.57
Family (2 Employees)	B7505001	1,506.98

Plan 05901 - \$2,000 Deductible (002)	Group	24/25 Employee Cost
Individual	B7505002	103.00
1 Dependent	B7505002	804.25
Family	B7505002	1,215.17
Family (2 Employees)	B7505002	766.58