

**January 1, 2025 - December 31, 2025**

**USW**

<b>Gold Plan</b>							
<i>Single = \$1,000 deductible - \$2,500 Total Out of Pocket Expense per calendar year</i>							
<i>Family = \$3,000 deductible - \$5,000 Total Out of Pocket Expense per calendar year</i>							
Coverage	Cost	Monthly Contribution		Per Paycheck (24)		Annual	
		Board	Employee	Board	Employee	Board	Employee
Single	\$1,114.89	\$1,059.15	\$55.74	\$529.57	\$27.87	\$12,709.77	\$668.94
Single + Child	\$1,852.05	\$1,099.15	\$752.91	\$549.57	\$376.45	\$13,189.77	\$9,034.88
Single + Spouse	\$2,099.07	\$1,099.15	\$999.92	\$549.57	\$499.96	\$13,189.77	\$11,999.05
Family	\$2,416.68	\$1,099.15	\$1,317.54	\$549.57	\$658.77	\$13,189.77	\$15,810.43

  

Coverage (18 Pay)	Cost	Monthly Contribution		Per Paycheck (18)		Annual	
		Board	Employee	Board	Employee	Board	Employee
Single	\$1,486.52	\$1,412.20	\$74.33	\$706.10	\$37.16	\$12,709.77	\$668.94
Single + Child	\$2,469.41	\$1,465.53	\$1,003.88	\$732.77	\$501.94	\$13,189.77	\$9,034.88
Single + Spouse	\$2,798.76	\$1,465.53	\$1,333.23	\$732.77	\$666.61	\$13,189.77	\$11,999.05
Family	\$3,222.24	\$1,465.53	\$1,756.71	\$732.77	\$878.36	\$13,189.77	\$15,810.43

<b>Silver Plan</b>							
<i>Single = \$2,000 deductible - \$5,000 Total Out of Pocket Expense per calendar year</i>							
<i>Family = \$6,000 deductible - \$10,000 Total Out of Pocket Expense per calendar year</i>							
Coverage (24 Pay)	Cost	Monthly Contribution		Per Paycheck (24)		Annual	
		Board	Employee	Board	Employee	Board	Employee
Single	\$982.88	\$933.73	\$49.14	\$466.87	\$24.57	\$11,204.79	\$589.73
Single + Child	\$1,622.02	\$973.73	\$648.29	\$486.87	\$324.14	\$11,684.79	\$7,779.42
Single + Spouse	\$1,838.99	\$973.73	\$865.26	\$486.87	\$432.63	\$11,684.79	\$10,383.09
Family	\$2,206.25	\$973.73	\$1,232.52	\$486.87	\$616.26	\$11,684.79	\$14,790.27

  

Coverage (18 Pay)	Cost	Monthly Contribution		Per Paycheck (18)		Annual	
		Board	Employee	Board	Employee	Board	Employee
Single	\$1,310.50	\$1,244.98	\$65.53	\$622.49	\$32.76	\$11,204.79	\$589.73
Single + Child	\$2,162.69	\$1,298.31	\$864.38	\$649.15	\$432.19	\$11,684.79	\$7,779.42
Single + Spouse	\$2,451.99	\$1,298.31	\$1,153.68	\$649.15	\$576.84	\$11,684.79	\$10,383.09
Family	\$2,941.67	\$1,298.31	\$1,643.36	\$649.15	\$821.68	\$11,684.79	\$14,790.27

<b>HSA High Deductible Plan</b>							
<i>Single = \$2,800 deductible - \$5,600 Total Out of Pocket Expense per calendar year</i>							
<i>Family = \$5,600 deductible - \$11,200 Total Out of Pocket Expense per calendar year</i>							
Coverage (24 Pay)	Cost	Monthly Contribution		Per Paycheck (24)		Annual	
		Board	Employee	Board	Employee	Board	Employee
Single	\$978.18	\$929.27	\$48.91	\$464.63	\$24.45	\$11,151.24	\$586.91
Single + Child	\$1,614.27	\$969.27	\$645.00	\$484.63	\$322.50	\$11,631.24	\$7,740.03
Single + Spouse	\$1,830.19	\$969.27	\$860.92	\$484.63	\$430.46	\$11,631.24	\$10,330.98
Family	\$2,195.71	\$969.27	\$1,226.44	\$484.63	\$613.22	\$11,631.24	\$14,717.32

  

Coverage (18 Pay)	Cost	Monthly Contribution		Per Paycheck (18)		Annual	
		Board	Employee	Board	Employee	Board	Employee
Single	\$1,304.24	\$1,239.03	\$65.21	\$619.51	\$32.61	\$11,151.24	\$586.91
Single + Child	\$2,152.36	\$1,292.36	\$860.00	\$646.18	\$430.00	\$11,631.24	\$7,740.03
Single + Spouse	\$2,440.25	\$1,292.36	\$1,147.89	\$646.18	\$573.94	\$11,631.24	\$10,330.98
Family	\$2,927.62	\$1,292.36	\$1,635.26	\$646.18	\$817.63	\$11,631.24	\$14,717.32

<b>Bronze High Deductible Plan</b>							
<i>Single = \$3,350 deductible - \$6,450 Total Out of Pocket Expense per calendar year</i>							
<i>Family = \$6,450 deductible - \$12,900 Total Out of Pocket Expense per calendar year</i>							
Coverage (24 Pay)	Cost	Monthly Contribution		Per Paycheck (24)		Annual	
		Board	Employee	Board	Employee	Board	Employee
Single	\$846.95	\$804.60	\$42.35	\$402.30	\$21.17	\$9,655.21	\$508.17
Single + Child	\$1,385.45	\$0.00	\$1,385.45	\$0.00	\$692.72	\$0.00	\$16,625.37
Single + Spouse	\$1,572.35	\$0.00	\$1,572.35	\$0.00	\$786.17	\$0.00	\$18,868.15
Family	\$1,998.44	\$0.00	\$1,998.44	\$0.00	\$999.22	\$0.00	\$23,981.24

  

Coverage (18 Pay)	Cost	Monthly Contribution		Per Paycheck (18)		Annual	
		Board	Employee	Board	Employee	Board	Employee
Single	\$1,129.26	\$1,072.80	\$56.46	\$536.40	\$28.23	\$9,655.21	\$508.17
Single + Child	\$1,847.26	\$0.00	\$1,847.26	\$0.00	\$923.63	\$0.00	\$16,625.37
Single + Spouse	\$2,096.46	\$0.00	\$2,096.46	\$0.00	\$1,048.23	\$0.00	\$18,868.15
Family	\$2,664.58	\$0.00	\$2,664.58	\$0.00	\$1,332.29	\$0.00	\$23,981.24