Medical Insurance January 1, 2024 - December 31, 2024



Basic Plan- Consumer Driven Health Plan (CDHP) / Health Savings Account (HSA)

Basic Plan Premium		26	Pay	,		20 1	Pay		*Emp	oloyer Annual
	En	nployee	Ε	mployer	Em	ployee	Ε	mployer	HSA	Contribtution
Employee	\$	28.57	\$	332.81	\$	37.15	\$	432.65	\$	1,070.00
Employee/Child(ren)	\$	52.04	\$	643.65	\$	67.66	\$	836.75	\$	1,910.00
Employee/Spouse	\$	58.91	\$	725.54	\$	76.58	\$	947.10	\$	1,910.00
Employee/Family	\$	86.83	\$	1,073.88	\$	112.88	\$	1,396.05	\$	2,130.00
Tobacco Additional Premium)	26	Pay	,		20 1	Pay			
Employee	\$	19.23			\$	25.00				

Enhanced Plan - Consumer Driven Health Plan (CDHP) / Health Savings Account (HSA)

Enhanced Plan Premium		26	Pay	/		20 I	Pay		*Emp	oloyer Annual
	Er	nployee	Ε	mployer	Em	ployee	Ε	mployer	HSA	Contribtution
Employee	\$	39.24	\$	339.81	\$	51.01	\$	441.75	\$	1,070.00
Employee/Child(ren)	\$	75.70	\$	655.58	\$	98.41	\$	852.25	\$	1,910.00
Employee/Spouse	\$	85.68	\$	742.04	\$	111.39	\$	964.65	\$	1,910.00
Employee/Family	\$	126.30	\$	1,093.77	\$	164.18	\$	1,421.90	\$	2,130.00
Tobacco Additional Premium		26	Pay	,		20 1	Pay			
Employee	\$	19.23			\$	25.00				

Standard Plan

Employee

Enhanced Plan Premium	26 Employee		Pay	,	20 Pay				
			Employer		Employee		Employer		
Employee	\$	103.67	\$	294.08	\$	134.77	\$	382.30	
Employee/Child(ren)	\$	199.99	\$	567.38	\$	259.99	\$	737.60	
Employee/Spouse	\$	226.38	\$	624.23	\$	294.29	\$	834.90	
Employee/Family	\$	333.69	\$	946.62	\$	433.80	\$	1,230.60	
Tobacco Additional Premium	26 P			,	20 Pay				

\$

25.00

19.23

^{*}Lump sum employer Health Savings Account amount deposited each year in January if enrolled and eligible. New enrollments during the year will recieve a prorated contribution.

^{**}Your share of the benefit premium will be deducted from your pay in equal amounts in the applicable pay periods in a program year. The College does not prorate benefit premium deductions.