

Employee costs are in Italics - Calculated at 80/20% Premium Split

Licensed Employee* Full Time - Single Policy	Plan	Employee Out-of-Pocket Maximum by Plan	HRA/HSA** Funding by Employer 2003-2027	Annual Out-of-Pocket Exposure for Employee <i>After</i> HRA/HSA**	Total Monthly Premium 7/1/2025	Total Annual Premium	Annual Employer Premium Share	Annual Employee Premium Share	Employee Monthly Premium Share	Total Employee Annual Premium & Out-of-Pocket Exposure
Single	Platinum	\$2,800	\$1,900	\$900	\$1,339.21	\$16,070.52	\$11,814.91	\$4,255.61	\$354.63	\$5,155.61
Single	Gold	\$3,100	\$1,900	\$1,200	\$1,312.77	\$15,753.24	\$11,814.91	\$3,938.33	\$328.19	\$5,138.33
Single	Gold CDHP	\$2,500	\$1,900	\$600	\$1,230.72	\$14,768.64	\$11,814.91	\$2,953.73	\$246.14	\$3,553.73
Single	Silver CDHP	\$4,000	\$1,900	\$2,100	\$1,134.21	\$13,610.52	\$10,888.42	\$2,722.10	\$226.84	\$4,822.10
<i>*If you are unsure if these costs apply to you, see "What employee segment am I in?" on our website.</i>										
<i>**HSA only available on Silver Plan</i>										
<i>Employer premium contributions for the <u>Platinum and Gold Plans</u> are identical to the employer premium contribution to the <u>Gold CDHP</u>.</i>										
<i>Premiums are set on a fiscal-year basis. These rates reflect changes as of July 1, 2025.</i>										

Licensed Employee* Full Time - Self & Spouse Policy	Plan	Employee Out-of-Pocket Maximum by Plan	HRA/HSA** Funding by Employer 2003-2027	Annual Out-of-Pocket Exposure for Employee <i>After</i> HRA/HSA**	Total Monthly Premium 7/1/2025	Total Annual Premium	Annual Employer Premium Share	Annual Employee Premium Share	Employee Monthly Premium Share	Total Employee Annual Premium & Out-of-Pocket Exposure
Self & Spouse	Platinum	\$5,600	\$4,000	\$1,600	\$2,678.44	\$32,141.28	\$22,189.06	\$9,952.22	\$829.35	\$11,552.22
Self & Spouse	Gold	\$6,200	\$4,000	\$2,200	\$2,625.55	\$31,506.60	\$22,189.06	\$9,317.54	\$776.46	\$11,517.54
Self & Spouse	Gold CDHP	\$5,000	\$4,000	\$1,000	\$2,311.36	\$27,736.32	\$22,189.06	\$5,547.26	\$462.27	\$6,547.26
Self & Spouse	Silver CDHP	\$8,000	\$4,000	\$4,000	\$2,268.44	\$27,221.28	\$21,777.02	\$5,444.26	\$453.69	\$9,444.26
<i>*If you are unsure if these costs apply to you, see "What employee segment am I in?" on our website.</i>										
<i>**HSA only available on Silver Plan</i>										
<i>Employer premium contributions for the <u>Platinum and Gold Plans</u> are identical to the employer premium contribution to the <u>Gold CDHP</u>.</i>										
<i>Premiums are set on a fiscal-year basis. These rates reflect changes as of July 1, 2025.</i>										

Licensed Employee* Full Time - Parent/Child(ren) Policy	Plan	Employee Out-of-Pocket Maximum by Plan	HRA/HSA** Funding by Employer 2003-2027	Annual Out-of-Pocket Exposure for Employee <i>After</i> HRA/HSA**	Total Monthly Premium 7/1/2025	Total Annual Premium	Annual Employer Premium Share	Annual Employee Premium Share	Employee Monthly Premium Share	Total Employee Annual Premium & Out-of-Pocket Exposure
Parent/Child(ren)	Platinum	\$5,600	\$4,000	\$1,600	\$2,239.37	\$26,872.44	\$18,266.30	\$8,606.14	\$717.18	\$10,206.14
Parent/Child(ren)	Gold	\$6,200	\$4,000	\$2,200	\$2,197.00	\$26,364.00	\$18,266.30	\$8,097.70	\$674.81	\$10,297.70
Parent/Child(ren)	Gold CDHP	\$5,000	\$4,000	\$1,000	\$1,902.74	\$22,832.88	\$18,266.30	\$4,566.58	\$380.55	\$5,566.58
Parent/Child(ren)	Silver CDHP	\$8,000	\$4,000	\$4,000	\$1,911.97	\$22,943.64	\$18,354.91	\$4,588.73	\$382.39	\$8,588.73
<i>*If you are unsure if these costs apply to you, see "What employee segment am I in?" on our website.</i>										
<i>**HSA only available on Silver Plan</i>										
<i>Employer premium contributions for the <u>Platinum and Gold Plans</u> are identical to the employer premium contribution to the <u>Gold CDHP</u>.</i>										
<i>Premiums are set on a fiscal-year basis. These rates reflect changes as of July 1, 2025.</i>										

Licensed Employee* Full Time - Family Policy	Plan	Employee Out-of-Pocket Maximum by Plan	HRA/HSA** Funding by Employer 2003-2027	Annual Out-of-Pocket Exposure for Employee <i>After</i> HRA/HSA**	Total Monthly Premium 7/1/2025	Total Annual Premium	Annual Employer Premium Share	Annual Employee Premium Share	Employee Monthly Premium Share	Total Employee Annual Premium & Out-of-Pocket Exposure
Family	Platinum	\$5,600	\$4,000	\$1,600	\$3,788.62	\$45,463.44	\$32,727.55	\$12,735.89	\$1,061.32	\$14,335.89
Family	Gold	\$6,200	\$4,000	\$2,200	\$3,716.11	\$44,593.32	\$32,727.55	\$11,865.77	\$988.81	\$14,065.77
Family	Gold CDHP	\$5,000	\$4,000	\$1,000	\$3,409.12	\$40,909.44	\$32,727.55	\$8,181.89	\$681.82	\$9,181.89
Family	Silver CDHP	\$8,000	\$4,000	\$4,000	\$3,227.61	\$38,731.32	\$30,985.06	\$7,746.26	\$645.52	\$11,746.26
<i>*If you are unsure if these costs apply to you, see "What employee segment am I in?" on our website.</i>										
<i>**HSA only available on Silver Plan</i>										
<i>Employer premium contributions for the <u>Platinum and Gold Plans</u> are identical to the employer premium contribution to the <u>Gold CDHP</u>.</i>										
<i>Premiums are set on a fiscal-year basis. These rates reflect changes as of July 1, 2025.</i>										