2025 HEALTH, DENTAL, AND VISION BIWEEKLY RATES FOR ACTIVE EMPLOYEES

Employees who waive medical insurance, and qualify, will receive biweekly Waiver Credit: Full-time \$100; Part-time 20 \$50

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	FULL-TIME									
	UHC HDHP OON (IN/OUT OF NETWORK)									
	Premium Subsidy Payroll Annual Deduction HSA/HRA									
Employee	\$336.19	\$325.29	\$10.90	\$1,200.00						
Emp+Spouse	\$723.10	\$695.19	\$27.91	\$2,400.00						
Emp+Child(ren)	\$618.33	\$597.42	\$20.91	\$2,400.00						
Emp+Family	\$1,057.01	\$976.22	\$80.79	\$2,400.00						
		UHC CDI	H PLAN							
	Premium	Subsidy	Payroll Deduction	Annual HSA/HRA						
Employee	\$546.24	\$463.66	\$82.58	\$0.00						
Emp+Spouse	\$1,174.86	\$994.66	\$180.20	\$0.00						
Emp+Child(ren)	\$1,004.58	\$852.22	\$152.36	\$0.00						
Emp+Family	\$1,717.26	\$1,430.47	\$286.79	\$0.00						

HEALTH PLANS

PART-TIME 20								
UHC HDHP OON (IN/OUT OF NETWORK)								
Premium Subsidy Payroll Annual Deduction HSA/HRA								
\$336.19	\$263.99	\$72.20	\$1,200.00					
\$723.10	\$639.73	\$83.37	\$2,400.00					
\$618.33	\$540.55	\$77.78	\$2,400.00					
\$1,057.01	\$923.38	\$133.63	\$2,400.00					
	UHC CDI	H PLAN						
Premium	Premium Subsidy Payroll Annual Deduction HSA/HRA							
\$546.24	\$401.55	\$144.69	\$0.00					
\$1,174.86	\$937.56	\$237.30	\$0.00					
\$1,004.58	\$796.08	\$208.50	\$0.00					
\$1,717.26	\$1,376.26	\$341.00	\$0.00					

HEALTH SAVINGS ACCOUNT CONTRIBUTION GUIDELINES

MEDICAL PLANS	TIER OF COVERAGE	COUNTY FUNDED (PRORATED FOR NEW HIRES)	ELIGIBLE EMPLOYEE CONTRIBUTION - UNDER AGE 55	TOTAL 2025 CONTRIBUTION ALLOWED BY IRS	CATCHUP CONTRIBUTION FOR MEMBERS AGE 55+	
HDHP OON	Employee Only	Employee Only \$1,200		\$4,300	\$1,000	
	Employee + Dependent(s)	nployee + Dependent(s) \$2,400		\$8,550	\$1,000 per member age 55+	
CDH	Not Eligible	\$0	\$0	N/A	N/A	

*Catch-up contributions are HSA contributions made in addition to any regular HSA contributions. Maximum Catch-up contribution for 2025 is \$1,000. You are eligible to make catch-up contributions if you meet the eligibility requirements for regular contributions and have attained age 55 by the end of your taxable year.

DENTAL AND VISION PLANS

	Employee	Emp+Spouse/DP	Emp+Child(ren)	Emp+Family
Dental – DHMO Humana	\$5.42	\$9.74	\$10.84	\$13.00
Dental – DPPO United HealthCare	\$16.46	\$32.67	\$38.32	\$54.53
Vision – Humana	\$4.11	\$8.24	\$7.81	\$12.28

PREPAID LEGAL – US Legal \$7.73 biweekly

EMPLOYEES WITH DOMESTIC PARTNER COVERAGE AND/OR OVER AGE DEPENDENT (CHILD AGE 26-30 on 1/1/2025) COVERAGE

Per IRS rules, deduction is broken into pre- and after-tax; a portion of the County's subsidy is subject to Imputed Income tax.

	UHC HDHP OON					UHC CDH				
FULLTIME	Deduction			Imputed Annual		Deductio	Imputed	Annual		
	Full	Pre-Tax	After-Tax	Income	HSA/HRA	Full	Pre-Tax	After-Tax	Income	HSA/HRA
Emp+CH over 26 (Child+\$20)	40.91	10.90	30.01	272.12	2,400	172.36	82.58	89.78	388.56	0
Emp+Family w/ child over 26 (Family+\$20)	100.79	27.91	72.88	281.03	2,400	306.79	180.20	126.59	435.80	0
Emp+DP	27.91	10.90	17.01	369.89	2,400	180.20	82.58	97.62	531.00	0
Emp+CH of DP	20.91	10.90	10.01	272.12	2,400	152.36	82.58	69.78	388.56	0
Emp+CH of DP over 26 (CH+\$20)	40.91	10.90	30.01	272.12	2,400	172.36	82.58	89.78	388.56	0
Emp+DP+CH w/ no child of DP	80.79	20.91	59.88	378.80	2,400	286.79	152.36	134.43	578.25	0
Emp+DP+CH of DP	80.79	10.90	69.89	650.92	2,400	286.79	82.58	204.21	966.81	0
Emp+DP+CH over 26 w/ no child of DP (Fam+\$20)	100.79	10.90	89.89	650.92	2,400	306.79	82.58	224.21	966.81	0
Emp+DP+CH of DP over 26 (Fam+\$20)	100.79	10.90	89.89	650.92	2,400	306.79	82.58	224.21	966.81	0

	UHC HDHP OON					UHC CDH				
PT20	Deduction			Imputed	Annual	Deduction			Imputed	Annual
	Full	Pre-Tax	After-Tax	Income	HSA/HRA	Full	Pre-Tax	After-Tax	Income	HSA/HRA
Emp+CH over 26 (Child+\$20)	97.78	72.20	25.58	276.55	2,400	228.50	144.69	83.81	394.53	0
Emp+Family w/ child over 26 (Family+\$20)	153.63	83.37	70.26	283.65	2,400	361.00	237.30	123.70	438.69	0
Emp+DP	83.37	72.20	11.17	375.73	2,400	237.30	144.69	92.61	536.01	0
Emp+CH of DP	77.78	72.20	5.58	276.55	2,400	208.50	144.69	63.81	394.53	0
Emp+CH of DP over 26 (CH+\$20)	97.78	72.20	25.58	276.55	2,400	228.50	144.69	83.81	394.53	0
Emp+DP+CH w/ no child of DP	133.63	77.78	55.85	382.83	2,400	341.00	208.50	132.50	580.18	0
Emp+DP+CH of DP	133.63	72.20	61.43	659.38	2,400	341.00	144.69	196.31	974.71	0
Emp+DP+CH over 26 w/ no child of DP (Fam+\$20)	153.63	72.20	81.43	659.38	2,400	361.00	144.69	216.31	974.71	0
Emp+DP+CH of DP over 26 (Fam+\$20)	153.63	72.20	81.43	659.38	2,400	361.00	144.69	216.31	974.71	0