



# 2025 Cost Sharing: Monthly & Bi-Weekly

Plan	Monthly Premium Non-Wellness	Monthly Premium Wellness	Bi-Weekly Premium Non-Wellness	Bi-Weekly Premium Wellness
<b>Plus Plan - Employees Earning up to \$42,078</b>				
Employee Only	\$70.00	\$0.00	\$32.31	\$0.00
Employee and Spouse	\$416.00	\$311.00	\$192.00	\$143.54
Employee and Child(ren)	\$344.00	\$274.00	\$158.77	\$126.46
Employee and Family	\$616.00	\$511.00	\$284.31	\$235.85
<b>Plus Plan - Employees Earning \$42,078 to \$150,000</b>				
Employee Only	\$215.00	\$145.00	\$99.23	\$66.92
Employee and Spouse	\$566.00	\$461.00	\$261.24	\$212.77
Employee and Child(ren)	\$492.00	\$422.00	\$227.08	\$194.77
Employee and Family	\$775.00	\$670.00	\$357.70	\$309.24
<b>Plus Plan - Employees Earning \$150,000 or more</b>				
Employee Only	\$233.00	\$163.00	\$107.54	\$75.23
Employee and Spouse	\$618.00	\$513.00	\$285.24	\$236.77
Employee and Child(ren)	\$536.00	\$466.00	\$247.38	\$215.08
Employee and Family	\$842.00	\$737.00	\$388.62	\$340.16
<b>Qualified High-Deductible Health Plan</b>				
Employee Only	\$132.00	\$62.00	\$60.92	\$28.62
Employee and Spouse	\$384.00	\$279.00	\$177.23	\$128.77
Employee and Child(ren)	\$328.00	\$258.00	\$151.38	\$119.07
Employee and Family	\$514.00	\$409.00	\$237.23	\$188.77
<b>Qualified High-Deductible Health Plan - Employees Earning \$150,000 or more</b>				
Employee Only	\$150.00	\$80.00	\$69.23	\$36.92
Employee and Spouse	\$430.00	\$325.00	\$198.46	\$150.00
Employee and Child(ren)	\$365.00	\$295.00	\$168.46	\$136.15
Employee and Family	\$578.00	\$473.00	\$266.77	\$218.31