

2024-25 EMPLOYEE CONTRIBUTIONS

Rates effective July 1, 2024 - June 30, 2025

PPO/HRA	BCBS Monthly Premium	Employee Percentage	Employee Monthly Contribution	Board of Education Monthly Contribution
PPO Single	\$ 853.67	15.0%	\$ 128.05	\$ 725.62
PPO Family	\$ 1,975.76	17.5%	\$ 345.76	\$ 1,630.00
Wellness Rate				
PPO - Single	\$ 853.67	10.0%	\$ 85.37	\$ 768.30
PPO - Family	\$ 1,975.76	12.5%	\$ 246.97	\$ 1,728.79

HMO Blue Advantage	BCBS Monthly Premium	Employee Percentage	Employee Monthly Contribution	Board of Education Monthly Contribution
HMO Single	\$ 663.99	5%	\$ 33.20	\$ 630.79
HMO Family	\$ 1,497.87	10%	\$ 149.79	\$ 1,348.08
Wellness Rate				
HMO Single	\$ 663.99	0%	\$ -	\$ 663.99
HMO Family	\$ 1,497.88	5%	\$ 74.89	\$ 1,422.99

HSA	BCBS Monthly Premium	Employee Percentage	Employee Monthly Contribution	Board of Education Monthly Contribution
HSA Single	\$ 781.49	15.0%	\$ 117.22	\$ 664.27
HSA Family	\$ 1,808.62	17.5%	\$ 316.51	\$ 1,492.11
Wellness Rate				
HSA Single	\$ 781.49	10.0%	\$ 78.14	\$ 703.35
HSA Family	\$ 1,808.62	12.5%	\$ 226.07	\$ 1,582.55

VSP Vision Rates	Employee Monthly Premium
Employee Only	\$9.92
Employee + Spouse	\$15.87
Employee + Child(ren)	\$16.20
Employee + Family	\$26.12