FY25 Proposed Medical/RX						
	FY24 Employee Monthly Premium	FY25 Employee Monthly Premium	Employee Increase	FY24 Employer Monthly HSA Contribution	FY25 Employer Monthly HSA Contribution	Employer Increase
Medical						
Plan I (HDHP w/HSA)						
Employee Only	\$0.00	\$0.00	\$0.00	\$123.46	\$123.46	\$0.00
Employee/Spouse	\$479.38	\$479.38	\$0.00	\$123.46	\$123.46	\$0.00
Employee/Children	\$157.12	\$157.12	\$0.00	\$123.46	\$123.46	\$0.00
Employee /Family	\$611.14	\$611.14	\$0.00	\$123.46	\$123.46	\$0.00
Medical						
Plan II (Co-Pay)						
Employee Only	\$35.00	\$35.00	\$0.00	NA	NA	NA
Employee/Spouse	\$625.22	\$625.22	\$0.00	NA	NA	NA
Employee/Children	\$230.04	\$230.04	\$0.00	NA	NA	NA
Employee /Family	\$793.44	\$793.44	\$0.00	NA	NA	NA