## 2024 Bi-Weekly Medical Rates

Medical Plan		2024 Medical Wellness Rate	2024 Medical Rate
High Option	Employee only	\$86.92	\$110.00
	Employee + Spouse/DP	\$182.53	\$228.69
	Employee + Child(ren)	\$156.46	\$179.54
	Family	\$252.07	\$298.23
Low Option	Employee only	\$60.35	\$83.43
	Employee + Spouse/DP	\$126.73	\$172.89
	Employee + Child(ren)	\$108.63	\$131.70
	Family	\$175.01	\$221.16
CDHP*	Employee only	\$49.46	\$49.46
	Employee + Spouse/DP	\$103.88	\$103.88
	Employee + Child(ren)	\$89.04	\$89.04
	Family	\$143.45	\$143.45

#### Please Note:

Medical Wellness Rate - Applies if you and your spouse/DP earn the wellness incentive Medical Rate - Applies if you and your spouse/DP *do not* earn the wellness incentive \*Wellness Incentive is deposited into Health Savings Account



### 2024 Weekly Medical Rates

Medical Plan		2024 Medical Wellness Rate	2024 Medical Rate
High Option	Employee only	\$43.46	\$55.00
	Employee + Spouse/DP	\$91.27	\$114.34
	Employee + Child(ren)	\$78.23	\$89.77
	Family	\$126.04	\$149.11
Low Option	Employee only	\$30.18	\$41.71
	Employee + Spouse/DP	\$63.37	\$86.44
	Employee + Child(ren)	\$54.31	\$65.85
	Family	\$87.51	\$110.58
CDHP*	Employee only	\$24.73	\$24.73
	Employee + Spouse/DP	\$51.94	\$51.94
	Employee + Child(ren)	\$44.52	\$44.52
	Family	\$71.73	\$71.73

#### Please Note:

Medical Wellness Rate - Applies if you and your spouse/DP earn the wellness incentive Medical Rate - Applies if you and your spouse/DP *do not* earn the wellness incentive \*Wellness Incentive is deposited into Health Savings Account



# 2024 Monthly Medical Rates

Medical Plan		2024 Medical Wellness Rate	2024 Medical Rate
High Option	Employee only	\$188.33	\$238.33
	Employee + Spouse/DP	\$395.49	\$495.49
	Employee + Child(ren)	\$339.00	\$389.00
	Family	\$546.16	\$646.16
Low Option	Employee only	\$130.76	\$180.76
	Employee + Spouse/DP	\$274.59	\$374.59
	Employee + Child(ren)	\$235.36	\$285.36
	Family	\$379.19	\$479.19
CDHP*	Employee only	\$107.17	\$107.17
	Employee + Spouse/DP	\$225.07	\$225.07
	Employee + Child(ren)	\$192.91	\$192.91
	Family	\$310.81	\$310.81

### Please Note:

Medical Wellness Rate - Applies if you and your spouse/DP earn the wellness incentive Medical Rate - Applies if you and your spouse/DP *do not* earn the wellness incentive \*Wellness Incentive is deposited into Health Savings Account

