

HEALTH INSURANCE RATES

January 1, 2025 to December 31, 2025

	Employee Deduction Per Pay Period	Employee Total Monthly Premium	County Paid Portion (monthly)	Total Monthly Premium
Employee	\$81.06	\$162.12	\$995.88	\$1,158.00
Employee + Spouse	\$231.06	\$462.12	\$1,070.88	\$1,533.00
Employee + Children	\$188.06	\$376.12	\$1,070.88	\$1,447.00
Family	\$715.56	\$1,431.12	\$1,070.88	\$2,502.00

Highway – AHY