

2025 MONTHLY PREMIUMS

MEDICAL	PLAN		TOTAL		CITY	EMPLOYEE
AWARE CO-PAY	EMPLOYEE	\$	1,457.14	\$	1,018.28	\$ 438.86
	EMPLOYEE+CHILD(REN)	\$	2,141.70	\$	1,186.92	\$ 954.78
	EMPLOYEE+SPOUSE	\$	2,243.50	\$	1,243.14	\$ 1,000.36
	FAMILY	\$	2,736.54	\$	1,512.12	\$ 1,224.42
AWARE VEBA 1*	EMPLOYEE	\$	1,127.84	\$	814.62	\$ 313.22
	EMPLOYEE+CHILD(REN)	\$	1,657.70	\$	886.96	\$ 770.74
	EMPLOYEE+SPOUSE	\$	1,736.50	\$	933.74	\$ 802.76
	FAMILY	\$	2,118.12	\$	1,157.60	\$ 960.52
AWARE VEBA 2*	EMPLOYEE	\$	1,196.32	\$	814.64	\$ 381.68
	EMPLOYEE+CHILD(REN)	\$	1,758.36	\$	886.96	\$ 871.40
	EMPLOYEE+SPOUSE	\$	1,841.92	\$	933.74	\$ 908.18
	FAMILY	\$	2,246.72	\$	1,157.60	\$ 1,089.12

*The City of Eagan will make **quarterly VEBA contributions** into a Health Reimbursement Account (HRA):

- \$375 for Employee coverage
- \$750 for Employee+Spouse, Employee+Children and Family coverage

DENTAL	PLAN		TOTAL		CITY	EMPLOYEE
BASE PLAN	EMPLOYEE	\$	27.00	\$	20.26	\$ 6.74
	EMPLOYEE+CHILD(REN)	\$	51.00	\$	38.26	\$ 12.74
	EMPLOYEE+SPOUSE	\$	54.50	\$	40.88	\$ 13.62
	FAMILY	\$	88.50	\$	66.38	\$ 22.12
BUY UP w/LITTLE PARTNERS	EMPLOYEE	\$	44.40	\$	20.26	\$ 24.14
	EMPLOYEE+CHILD(REN)	\$	84.00	\$	38.26	\$ 45.74
	EMPLOYEE+SPOUSE	\$	89.20	\$	40.88	\$ 48.32
	FAMILY	\$	141.40	\$	66.38	\$ 75.02

FLEXIBLE SPENDING ACCOUNT (FSA)	PLAN		Annual Max Election		EMPLOYEE
HEALTH CARE		elect up to \$	3,300.00	*projected limit	bi-weekly deduction
DEPENDENT CARE		elect up to \$	5,000.00		bi-weekly deduction

LEGAL	PLAN		TOTAL		CITY	EMPLOYEE
METLAW	FAMILY	\$	19.50	\$	-	\$ 19.50

VISION	PLAN		TOTAL		CITY	EMPLOYEE
	EMPLOYEE	\$	4.38	\$	-	\$ 4.38
	EMPLOYEE+CHILD(REN)	\$	9.22	\$	-	\$ 9.22
	EMPLOYEE+SPOUSE	\$	7.68	\$	-	\$ 7.68
	FAMILY	\$	11.40	\$	-	\$ 11.40

NEW ACCIDENT INSURANCE	PLAN		TOTAL		CITY	EMPLOYEE
	EMPLOYEE	\$	7.88	\$	-	\$ 7.88
	EMPLOYEE+CHILD(REN)	\$	14.00	\$	-	\$ 14.00
	EMPLOYEE+SPOUSE	\$	12.46	\$	-	\$ 12.46
	FAMILY	\$	21.68	\$	-	\$ 21.68