Teachers

ISD 319 Medical Rates

September 1, 2024 thru August 31, 2025

		Premiums		HRA	
4th Qtr C/O	HD Option 1	Contributions	Monthly Rate	Contributions	**Annual Deductible
Single	Employer	80%	\$791.01	65%	\$1,202.50
	Employee	20%	\$197.75 \$988.76	35% -	\$647.50 \$1,850.00
Family	Employer Employee	80% 20%	\$1,752.86 \$438.22 \$2,191.08	65% 35%	\$2,405.00 \$1,295.00 \$3,700.00
	HD Option 2				
Single	Employer Employee	80% 20%	\$577.68 \$144.42 \$722.10	65% 35%	\$4,322.50 \$2,327.50 \$6,650.00
Family	Employer Employee	80% 20%	\$1,280.14 \$320.04 \$1,600.18	65% 35%	\$8,645.00 \$4,655.00 \$13,300.00

^{***}Deductible pro-rated for mid year enrollment