

2025 Benefits cost for coverage

Under \$60,000 annual salary

	Employee Bi-Weekly Payroll Deduction	Employee Monthly Payroll Deduction	AU Monthly Contribution	AU + Employee Total Monthly Cost
CareFirst PPO				
Employee only	\$23.28	\$46.56	\$884.56	\$931.12
Employee + child(ren)	\$133.50	\$267.00	\$1,176.23	\$1,443.23
Employee + spouse	\$193.79	\$387.58	\$1,707.44	\$2,095.02
Family	\$249.49	\$498.98	\$2,198.20	\$2,697.18
CareFirst HDHP				
Employee only	\$17.46	\$34.92	\$663.42	\$698.34
Employee + child(ren)	\$100.13	\$200.25	\$882.18	\$1,082.43
Employee + spouse	\$145.34	\$290.68	\$1,280.58	\$1,571.26
Family	\$187.12	\$374.23	\$1,648.65	\$2,022.88
Kaiser HMO				
Employee only	\$16.21	\$32.41	\$615.80	\$648.21
Employee + child(ren)	\$110.25	\$220.50	\$971.41	\$1,191.91
Employee + spouse	\$137.18	\$274.35	\$1,208.61	\$1,482.96
Family	\$174.48	\$348.96	\$1,537.32	\$1,886.28
Delta Dental Basic				
Employee only	\$10.87	\$21.74	\$7.25	\$28.98
Employee + child(ren)	\$18.51	\$37.02	\$9.25	\$46.27
Employee + spouse	\$26.87	\$53.73	\$13.43	\$67.16
Family	\$33.61	\$67.22	\$16.80	\$84.02
Delta Dental Comprehensive				
Employee only	\$13.68	\$27.35	\$9.12	\$36.46
Employee + child(ren)	\$23.29	\$46.57	\$11.64	\$58.21
Employee + spouse	\$33.80	\$67.60	\$16.90	\$84.50
Family	\$42.29	\$84.58	\$21.14	\$105.72
CareFirst Vision Basic				
Employee only	\$1.99	\$3.98	\$0.00	\$3.98
Employee + child(ren)	\$4.18	\$8.36	\$0.00	\$8.36
Employee + spouse	\$3.98	\$7.96	\$0.00	\$7.96
Family	\$5.82	\$11.64	\$0.00	\$11.64
CareFirst Vision Enhanced				
Employee only	\$3.38	\$6.76	\$0.00	\$6.76
Employee + child(ren)	\$7.11	\$14.21	\$0.00	\$14.21
Employee + spouse	\$6.77	\$13.53	\$0.00	\$13.53
Family	\$9.90	\$19.79	\$0.00	\$19.79
Metlife Legal Plans	\$8.25	\$16.50	\$0.00	\$16.50
FSA Administrative Fee	\$0.72	\$1.45	\$1.50	\$2.95
HSA Administrative Fee	\$0.55	\$1.10	\$1.10	\$2.20
Optional Life Insurance	Varies	Varies	\$0.00	\$0.00