



Independent School District #879

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2025 MEDICAL RATES			
Plan Year: January 1st – December 31st			
Plans	Coverage	Full Monthly Premium	Rate Change
Advantage High Option	Single	\$938.34	-1.2%
	Family	\$2,490.72	-0.6%
Advantage Value Option	Single	\$845.28	-1.1%
	Family	\$2,242.18	-0.4%
Advantage HSA/VEBA Option	Single	\$650.90	-2.6%
	Family	\$1,723.48	-1.7%