FY2027 Health Insurance Plans at a Glance

$500 Deductible

- Lowest Deductible
- Highest Premium
- Coinsurance: 80/20
- $4,000 Max Out of Pocket (2 Per Family Max)
- Rx $150 Deductible $10/$30/$45 Or 20%

Coverage	Monthly Employee	Monthly Employer
Employee Only	**$100.00**	**$978.00**
Employee + Child	**$375.00**	**$1,620.00**
Employee + Spouse	**$562.50**	**$1,432.50**
Employee + Children	**$615.00**	**$2,297.00**
Employee + Family	**$922.50**	**$1,989.50**

$1,000 Deductible

- Mid Deductible
- Mid Premium
- Coinsurance: 80/20
- $5,000 Max Out of Pocket (2 Per Family Max)
- Rx $150 Deductible $10/$30/$45 Or 20%

Coverage	Monthly Employee	Monthly Employer
Employee Only	**$50.00**	**$973.00**
Employee + Child	**$320.84**	**$1,573.16**
Employee + Spouse	**$401.05**	**$1,492.95**
Employee + Children	**$584.00**	**$2,180.00**
Employee + Family	**$730.00**	**$2,034.00**

High Deductible Plan + HSA

- Highest Deductible: $3,400
- Lowest Premium
- Coinsurance: 80/20
- **Health Savings Account: $1,800 contribution**
- $5,000 Max Out of Pocket (2 Per Family Max)
- Rx: 20% coinsurance after deductible

Coverage	Monthly Employee	Monthly Employer
Employee Only	**$8.34**	**$835.66**
Employee + Child	**$130.00**	**$1,430.00**
Employee + Spouse	**$229.17**	**$1,330.83**
Employee + Children	**$380.00**	**$1,899.00**
Employee + Family	**$481.10**	**$1,797.90**

Important Contacts

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