## January 1, 2027 - December 31, 2027
## USW

### Bronze High Deductible Plan

*Single: $3,350 deductible & $6,450 total out of pocket expense per calendar year*
*Family: $6,450 deductible & $12,900 total out of pocket expense per calendar year*

| | | Monthly Contribution | | Per Paycheck (24) | | Annual | |
|---|---|---|---|---|---|---|---|
| **Coverage (24 Pay)** | **Cost** | **Board** | **Employee** | **Board** | **Employee** | **Board** | **Employee** |
| Single | $1,194.38 | $1,134.66 | $59.72 | $567.33 | $29.86 | $13,615.93 | $716.63 |
| Single + Child | $1,953.78 | $0.00 | $1,953.78 | $0.00 | $976.89 | $0.00 | $23,445.36 |
| Single + Spouse | $2,217.35 | $0.00 | $2,217.35 | $0.00 | $1,108.68 | $0.00 | $26,608.20 |
| Family | $2,818.22 | $0.00 | $2,818.22 | $0.00 | $1,409.11 | $0.00 | $33,818.64 |

| | | Monthly Contribution | | Per Paycheck (18) | | Annual | |
|---|---|---|---|---|---|---|---|
| **Coverage (18 Pay)** | **Cost** | **Board** | **Employee** | **Board** | **Employee** | **Board** | **Employee** |
| Single | $1,592.51 | $1,512.88 | $79.63 | $756.44 | $39.81 | $13,615.93 | $716.63 |
| Single + Child | $2,605.04 | $0.00 | $2,605.04 | $0.00 | $1,302.52 | $0.00 | $23,445.36 |
| Single + Spouse | $2,956.47 | $0.00 | $2,956.47 | $0.00 | $1,478.23 | $0.00 | $26,608.20 |
| Family | $3,757.63 | $0.00 | $3,757.63 | $0.00 | $1,878.81 | $0.00 | $33,818.64 |