

9/1/2024-6/30/2025

Benchmark Plan

PPO 20/40 RX 15/40/70/75	Rates	Admin Fee 2% (WEX)	Total
Single	\$ 750.31	\$ 15.01	\$ 765.32
Adult/Child	\$ 1,154.72	\$ 23.09	\$ 1,177.81
Adult/Children	\$ 1,635.67	\$ 32.71	\$ 1,668.38
Employee/Spouse	\$ 1,730.21	\$ 34.60	\$ 1,764.81
Family	\$ 2,222.41	\$ 44.45	\$ 2,266.86

PPO 10/20 RX 15/30/50	Rates	Admin Fee 2% (WEX)	Total
Single	\$ 790.08	\$ 15.80	\$ 805.88
Adult/Child	\$ 1,215.93	\$ 24.32	\$ 1,240.25
Adult/Children	\$ 1,722.37	\$ 34.45	\$ 1,756.82
Employee/Spouse	\$ 1,821.92	\$ 36.44	\$ 1,858.36
Family	\$ 2,340.21	\$ 46.80	\$ 2,387.01

KPOS 30/40 RX 15/40/70/75	Rates	Admin Fee 2% (WEX)	Total
Single	\$ 720.65	\$ 14.41	\$ 735.06
Adult/Child	\$ 1,109.08	\$ 22.18	\$ 1,131.26
Adult/Children	\$ 1,571.03	\$ 31.42	\$ 1,602.45
Employee/Spouse	\$ 1,661.83	\$ 33.24	\$ 1,695.07
Family	\$ 2,134.58	\$ 42.69	\$ 2,177.27

United Concordia Flex	Rates	Admin Fee 2% (WEX)	Total
Single	\$ 22.57	\$ 0.45	\$ 23.02
Adult/Child	\$ 62.06	\$ 1.24	\$ 63.30
Adult/Children	\$ 62.06	\$ 1.24	\$ 63.30
Employee/Spouse	\$ 62.06	\$ 1.24	\$ 63.30
Family	\$ 62.06	\$ 1.24	\$ 63.30

United Concordia Plus	Rates	Admin Fee 2% (WEX)	Total
Single	\$ 18.20	\$ 0.36	\$ 18.56
Adult/Child	\$ 52.37	\$ 1.05	\$ 53.42
Adult/Children	\$ 52.37	\$ 1.05	\$ 53.42
Employee/Spouse	\$ 52.37	\$ 1.05	\$ 53.42
Family	\$ 52.37	\$ 1.05	\$ 53.42

Delta Dental	Rates	Admin Fee 2% (WEX)	Total
Single	\$ 31.60	\$ 0.63	\$ 32.23
Adult/Child	\$ 83.73	\$ 1.67	\$ 85.40
Adult/Children	\$ 83.73	\$ 1.67	\$ 85.40
Employee/Spouse	\$ 83.73	\$ 1.67	\$ 85.40
Family	\$ 83.73	\$ 1.67	\$ 85.40