

FULL-TIME J.E.A. MEMBERS
2024 MESSA Health Care Premium Costs

ABC Plan 1, Mandatory Mail Order RX [PAK A] \$1600/\$3200 Deductible						
Monthly Medical Premium	Pak A (No Co-insurance)	Annual Premium Cost	MDT 2024 Hard Cap	Annual Premium Share	H.S.A ER Contribution	Per Pay Deduction (26 Pays)
Single	\$684.29	\$8,211.48	\$7,702.85	\$508.63	\$0.00	\$19.57
Two Person	\$1,539.65	\$18,475.80	\$16,109.06	\$2,366.74	\$0.00	\$91.03
Full Family	\$1,916.02	\$22,992.24	\$21,007.83	\$1,984.41	\$0.00	\$76.33

ABC Plan 1, 3 Tier ABC Mail Order RX & 10% co-ins [PAK C] \$1600/\$3200 Deductible						
Monthly Medical Premium	Pak C (10% Co-insurance)	Annual Premium Cost	MDT 2024 Hard Cap	Annual Premium Share	H.S.A ER Contribution	Per Pay Deduction (26 Pays)
Single	\$609.18	\$7,310.16	\$7,702.85	\$0.00	\$392.69	\$0.00
Two Person	\$1,370.66	\$16,447.92	\$16,109.06	\$338.86	\$0.00	\$13.04
Full Family	\$1,705.71	\$20,468.52	\$21,007.83	\$0.00	\$539.31	\$0.00

ABC Plan 2, 3 Tier ABC Mail RX & 10% co-ins [PAK D] \$2000/\$4000 Deductible						
Monthly Medical Premium	Pak D (10% Co-insurance)	Annual Premium Cost	MDT 2024 Hard Cap	Annual Premium Share	H.S.A ER Contribution	Per Pay Deduction (26 Pays)
Single	\$571.68	\$6,860.16	\$7,702.85	\$0.00	\$842.69	\$0.00
Two Person	\$1,286.27	\$15,435.24	\$16,109.06	\$0.00	\$673.82	\$0.00
Full Family	\$1,600.69	\$19,208.28	\$21,007.83	\$0.00	\$1,799.55	\$0.00