

**2024 WMHIP FULL-TIME EMPLOYEE RATES  
20 PAYS (School Year Pay Only)**

<b>20 PAYS - PAK A, Flex Blue, \$40 Drug Card,, \$1600/\$3200 Deductible</b>						
<b>Level of Coverage</b>	<b>PAK A (Health Insurance Coverage)</b>	<b>Annual Premium Cost</b>	<b>MDT 2024 Hard Cap</b>	<b>Employee Annual Premium Share</b>	<b>Per Pay Deduction (20 Pays)</b>	<b>H.S.A Contribution</b>
Single	\$705.75	\$8,469.00	\$7,702.85	\$766.15	\$38.31	\$0
Two Person	\$1,587.93	\$19,055.16	\$16,109.06	\$2,946.10	\$147.31	\$0
Full Family	\$1,976.10	\$23,713.20	\$21,007.83	\$2,705.37	\$135.27	\$0

<b>20 PAYS - PAK C, Flex Blue, 3 Tier/\$80 Drug Card, \$1600/\$3200 Deductible</b>						
<b>Level of Coverage</b>	<b>PAK C (Health Insurance Coverage)</b>	<b>Annual Premium Cost</b>	<b>MDT 2024 Hard Cap</b>	<b>Employee Annual Premium Share</b>	<b>Per Pay Deduction (20 Pays)</b>	<b>H.S.A Contribution</b>
Single	\$678.23	\$8,138.76	\$7,702.85	\$435.91	\$21.80	\$0
Two Person	\$1,525.99	\$18,311.88	\$16,109.06	\$2,202.82	\$110.15	\$0
Full Family	\$1,899.03	\$22,788.36	\$21,007.83	\$1,780.53	\$89.03	\$0

<b>20 PAYS - PAK D, Simply Blue 20% Co-Ins, RX 2 Drug Card, \$2000/\$4000 Deductible</b>						
<b>Level of Coverage</b>	<b>PAK C (Health Insurance Coverage)</b>	<b>Annual Premium Cost</b>	<b>MDT 2024 Hard Cap</b>	<b>Employee Annual Premium Share</b>	<b>Per Pay Deduction (20 Pays)</b>	<b>H.S.A Contribution</b>
Single	\$548.00	\$6,576.00	\$7,702.85	\$0.00	\$0.00	\$1,126.85
Two Person	\$1,233.00	\$14,796.00	\$16,109.06	\$0.00	\$0.00	\$1,313.06
Full Family	\$1,534.41	\$18,412.92	\$21,007.83	\$0.00	\$0.00	\$2,594.91