

## Bi-Weekly Contributions

### Effective 10/1/2025

Tier Level	Medical Choice 2500	Medical Choice 1000	Dental	Vision
Employee	\$52.25	\$123.08	\$9.36	\$2.90
Employee + Spouse	\$189.63	\$322.71	\$24.39	\$5.81
Employee + Child(ren)	\$156.52	\$265.41	\$16.29	\$6.22
Family	\$255.86	\$437.35	\$29.07	\$9.93