

## Empire Health Insurance Rates: 2025 Effective Date 1/1/2025

### Huntington Union Free School District

<b>Individual Coverage:</b>								
Unit	Pmts.	Old Rate Monthly	New Rate Monthly	Old Pay Deduction	New Pay Deduction	Percent	Effective Date	Deduction Start Date
<b>12 MO Grandfathered:</b> Clerical, Custodian, Non-Contractual	24	\$1,445.66	\$1,479.53	\$108.42	<b>\$110.96</b>	15%	1/1/2025	12/1/2024
<b>10 &amp; 11 MO: Grandfathered:</b> AMA Unit, Clerical, Hall, Non-Contractual, Nurse, Security	20	\$1,445.66	\$1,479.53	\$130.11	<b>\$133.16</b>	15%	1/1/2025	12/1/2024
<b>10 MO Grandfathered (2024-25 School Year):</b> Teacher, Administrator & Chairperson	20	\$1,445.66	\$1,479.53	\$156.13	<b>\$159.79</b>	18%	1/1/2025	12/1/2024
<b>12 MO:</b> Clerical, Custodian, Non-Contractual	24	\$1,445.66	\$1,479.53	\$144.57	<b>\$147.95</b>	20%	1/1/2025	12/1/2024
<b>10 MO:</b> Administrator, AMA Unit, Chairperson, Clerical, Hall, Nurse, Security, Teacher, Non-Contractual	20	\$1,445.66	\$1,479.53	\$173.48	<b>\$177.54</b>	20%	1/1/2025	12/1/2024
<b>10 MO:</b> Food Service (hired after 7/1/87 )	20	\$1,445.66	\$1,479.53	\$260.22	<b>\$266.32</b>	30%	1/1/2025	12/1/2024
<b>Family Coverage:</b>								
Unit	Pmts.	Old Rate Monthly	New Rate Monthly	Old Pay Deduction	New Pay Deduction	Percent	Effective Date	Deduction Start Date
<b>12 MO Grandfathered:</b> Clerical, Custodian, Non-Contractual	24	\$3,367.09	\$3,367.80	\$252.53	<b>\$252.59</b>	15%	1/1/2025	12/1/2024
<b>10 &amp; 11 MO Grandfathered:</b> Clerical, Hall, Non-Contractual, Nurse,	20	\$3,367.09	\$3,367.80	\$303.04	<b>\$303.10</b>	15%	1/1/2025	12/1/2024
<b>10 MO Grandfathered (2024-25 School Year):</b> Teacher, Administrator & Chairperson	20	\$3,367.09	\$3,367.80	\$363.65	<b>\$363.72</b>	18%	1/1/2025	12/1/2024
<b>12 MO:</b> Clerical, Custodian, Non-Contractual	24	\$3,367.09	\$3,367.80	\$336.71	<b>\$336.78</b>	20%	1/1/2025	12/1/2024
<b>10 MO:</b> Administrator, Chairperson, Clerical, Nurse, Teacher, Non-Contractual	20	\$3,367.09	\$3,367.80	\$404.05	<b>\$404.14</b>	20%	1/1/2025	12/1/2024
<b>10 MO:</b> Hall & Security	20	\$3,367.09	\$3,367.80	\$606.08	<b>\$606.20</b>	30%	1/1/2025	12/1/2024
<b>10 MO:</b> AMA Unit	20	\$3,367.09	\$3,367.80	\$505.06	<b>\$505.17</b>	25%	1/1/2025	12/1/2024
<b>10 MO:</b> Food Service (hired after 7/1/87)	20	\$3,367.09	\$3,367.80	\$808.10	<b>\$808.27</b>	40%	1/1/2025	12/1/2024
<b>Dental Insurance Ameritas eff: 9/1/2023 - 8/31/2025</b>								
Coverage Type (ADM. CHAIRS, CLK, SHHA, NON, NURSES, TCH)	Pmts.	Old Rate Monthly (METLIFE DENTAL)	New Rate Monthly	Old Amount Each Paycheck	New Amount Each Paycheck	Percent	Effective Date	
Individual Coverage - Cobra \$42.47	24	\$37.16	\$41.64	\$3.72	\$4.16	20%	9/1/2023	
Individual Coverage - Cobra \$42.47	20	\$37.16	\$41.64	\$4.46	\$5.00	20%	9/1/2023	
Employee Plus 1 Dependent - Cobra \$79.72	24	\$69.75	\$78.16	\$6.98	\$7.82	20%	9/1/2023	
Employee Plus 1 Dependent - Cobra \$79.72	20	\$69.75	\$78.16	\$8.37	\$9.38	20%	9/1/2023	
Family Coverage - Cobra \$138.36	24	\$121.12	\$135.64	\$12.11	\$13.56	20%	9/1/2023	
Family Coverage - Cobra \$138.36	20	\$121.12	\$135.64	\$14.53	\$16.28	20%	9/1/2023	
<b>Union Dental Deductions:</b>								
Coverage Type (AMA, FSW & SEC)	Pmts.		Monthly Rate		Pay Deduction	Percent		
Individual Coverage - Cobra \$28.15	20		\$27.60		\$13.80	100%		
Employee Plus 1 Dependent - Cobra \$56.30	20		\$55.20		\$27.60	100%		
Family Coverage - Cobra \$89.35	20		\$87.60		\$43.80	100%		