

Employee Premium Rates for 2024-2025

| PLAN | EMPLOYEE | EMPLOYEE & SPOUSE | EMPLOYEE & CHILD(REN) | EMPLOYEE & FAMILY |
|------------------------------------|---|---|---|---|
| EFFECTIVE SEPTEMBER 1, 2024 | | | | |
| UT SELECT Medical FULL-TIME | \$0 <i>no change</i> | \$335.94 \$23.44 <i>increase ▲</i> | \$351.36 \$24.52 <i>increase ▲</i> | \$661.56 \$46.16 <i>increase ▲</i> |
| UT SELECT Medical PART-TIME | \$390.12 \$27.22 <i>increase ▲</i> | \$930.54 \$64.92 <i>increase ▲</i> | \$872.30 \$60.86 <i>increase ▲</i> | \$1,388.22 \$96.86 <i>increase ▲</i> |
| UT SELECT Dental | \$28.52 <i>no change</i> | \$54.14 <i>no change</i> | \$59.66 <i>no change</i> | \$84.84 <i>no change</i> |
| UT SELECT Dental Plus | \$61.40 <i>no change</i> | \$116.60 <i>no change</i> | \$128.66 <i>no change</i> | \$183.30 <i>no change</i> |
| DeltaCare Dental HMO | \$8.71 \$0.09 <i>decrease ▼</i> | \$16.56 \$0.18 <i>decrease ▼</i> | \$18.31 \$0.19 <i>decrease ▼</i> | \$26.14 \$0.26 <i>decrease ▼</i> |
| Superior Vision | \$5.02 <i>no change</i> | \$7.90 <i>no change</i> | \$8.10 <i>no change</i> | \$12.84 <i>no change</i> |
| Superior Vision Plus | \$7.64 <i>no change</i> | \$11.98 <i>no change</i> | \$12.82 <i>no change</i> | \$18.10 <i>no change</i> |