

Health Premiums
Effective: July 1, 2025
15% Employee Cost Sharing

Plan Name	Coverage Type	Employee Pays per Month	Biweekly Payroll Deduction	City Pays	Total Cost Monthly
Highmark Delaware First State Basic	Employee Only	\$172.66	\$86.33	\$978.38	\$1,151.04
	Employee & Child(ren)	\$262.24	\$131.12	\$1,486.04	\$1,748.28
	Employee & Spouse	\$356.79	\$178.39	\$2,021.79	\$2,378.58
	Family	\$445.90	\$222.95	\$2,526.75	\$2,972.65
Highmark Delaware Comprehensive PPO	Employee Only	\$197.05	\$98.53	\$1,116.64	\$1,313.69
	Employee & Child(ren)	\$303.48	\$151.74	\$1,719.69	\$2,023.17
	Employee & Spouse	\$408.48	\$204.24	\$2,314.69	\$2,723.17
	Family	\$510.55	\$255.27	\$2,893.10	\$3,403.65
Aetna HMO	Employee Only	\$180.23	\$90.12	\$1,021.32	\$1,201.55
	Employee & Child(ren)	\$275.49	\$137.75	\$1,561.14	\$1,836.63
	Employee & Spouse	\$379.56	\$189.78	\$2,150.81	\$2,530.37
	Family	\$473.50	\$236.75	\$2,683.15	\$3,156.65
Aetna CDH Gold	Employee Only	\$178.68	\$89.34	\$1,012.54	\$1,191.22
	Employee & Child(ren)	\$272.78	\$136.39	\$1,545.77	\$1,818.55
	Employee & Spouse	\$370.05	\$185.03	\$2,096.96	\$2,467.01
	Family	\$470.01	\$235.00	\$2,663.37	\$3,133.38

Health Premiums
Effective: July 1, 2025
20% Employee Cost Sharing

Plan Name	Coverage Type	Employee Pays per Month	Biweekly Payroll Deduction	City Pays	Total Cost Monthly
Highmark Delaware First State Basic	Employee Only	\$230.21	\$115.10	\$920.83	\$1,151.04
	Employee & Child(ren)	\$349.66	\$174.83	\$1,398.62	\$1,748.28
	Employee & Spouse	\$475.72	\$237.86	\$1,902.86	\$2,378.58
	Family	\$594.53	\$297.27	\$2,378.12	\$2,972.65
Highmark Delaware Comprehensive PPO	Employee Only	\$262.74	\$131.37	\$1,050.95	\$1,313.69
	Employee & Child(ren)	\$404.63	\$202.32	\$1,618.54	\$2,023.17
	Employee & Spouse	\$544.63	\$272.32	\$2,178.54	\$2,723.17
	Family	\$680.73	\$340.37	\$2,722.92	\$3,403.65
Aetna HMO	Employee Only	\$240.31	\$120.16	\$961.24	\$1,201.55
	Employee & Child(ren)	\$367.33	\$183.66	\$1,469.30	\$1,836.63
	Employee & Spouse	\$506.07	\$253.04	\$2,024.30	\$2,530.37
	Family	\$631.33	\$238.68	\$2,525.32	\$3,156.65
Aetna CDH Gold	Employee Only	\$238.24	\$119.12	\$952.98	\$1,191.22
	Employee & Child(ren)	\$363.71	\$181.86	\$1,454.84	\$1,818.55
	Employee & Spouse	\$493.40	\$186.55	\$1,973.61	\$2,467.01
	Family	\$626.68	\$313.34	\$2,506.70	\$3,133.38

AFSCME Union Employees hired on or after May 20, 2015
DOE Union Employees hired on or after December 22, 2015
FOP Union Employees hired on or after October 9, 2015
IBEW Union Employees hired on or after July 1, 2014