

State of Alaska

2025 AlaskaCare Employee Health Plan Premiums

Part-Time Employee

The monthly employee premiums for each option are listed below. The total premium cost for the options you select will be withheld from your salary each month. The monthly employee premiums will be split. Since most of these premiums are deducted before taxes are calculated, your taxable income is reduced.

The premiums on this sheet are effective 1/1/2025.

| MEDICAL | |
|---------------------------------------|--|
| Option | Monthly Employee Contribution: All AlaskaCare Employees |
| Standard Plan for Employee and Family | \$ 1,542.00 |
| Economy Plan for Employee and Family | 1,285.00 |
| Consumer Choice Employee and Family | 1,158.00 |
| Standard Plan for Employee Only | 560.00 |
| Economy Plan for Employee Only | 471.00 |
| Consumer Choice Employee Only | 406.50 |

| DENTAL | |
|---------------------------------------|--------------------------|
| Option | Monthly Employee Premium |
| Standard Plan for Employee and Family | \$ 187.00 |
| Economy Plan for Employee and Family | 28.00 |
| Standard Plan for Employee Only | 68.00 |
| Economy Plan for Employee Only | 11.00 |

Monthly employee premiums are subject to change.

| VISION | |
|---|--------------------------|
| Option | Monthly Employee Premium |
| No Coverage | \$ 0.00 |
| Managed Care Plan for Employee and Family | 40.00 |
| Managed Care Plan for Employee Only | 15.00 |

Monthly employee premiums are subject to change.

| HEALTH FLEXIBLE SPENDING ACCOUNT | |
|---|----------|
| Minimum Monthly Amount | \$ 25.00 |
| Maximum Monthly Amount | 250.00 |

You must contribute in whole dollar amounts. The premium amount you elect will be deducted from your paycheck in equal amounts throughout the year.