

Medical premiums are deducted from each paycheck.  
There are 26 paychecks in 2024.

**2024 Augusta Health Full-Time Medical Premiums**

Biweekly Premium	POS Option			HDHP Option w/ HSA		
	Team Member	Employer	Total	Team Member	Employer	Total
Team Member Only	\$74.44	\$300.68	\$375.45	\$51.69	\$291.57	\$343.26
TM + Spouse	\$211.38	\$633.38	\$844.76	\$169.85	\$603.41	\$773.26
TM + Child	\$159.69	\$478.57	\$638.27	\$116.31	\$466.14	\$582.45
TM + Children	\$243.69	\$694.94	\$938.63	\$171.69	\$688.30	\$859.99
Family - FT	\$305.54	\$976.63	\$1,282.17	\$235.38	\$942.04	\$1,177.43
Family - 2 FT	\$214.15	\$1,068.01	\$1,282.17	\$165.23	\$1,012.20	\$1,177.43
Family - 1 FT / 1 PT	\$275.08	\$1,007.09	\$1,282.17	\$212.31	\$965.12	\$1,177.43

**2024 Augusta Health Part-Time Medical Premiums**

Biweekly Premium	POS Option			HDHP Option w/ HSA		
	Team Member	Employer	Total	Team Member	Employer	Total
Team Member Only	\$164.31	\$211.14	\$375.45	\$113.54	\$229.72	\$343.26
TM + Spouse	\$380.31	\$464.46	\$844.76	\$305.54	\$467.72	\$773.26
TM + Child	\$287.08	\$351.19	\$638.27	\$209.54	\$372.91	\$582.45
TM + Children	\$438.46	\$500.17	\$938.63	\$309.23	\$550.76	\$859.99
Family - PT	\$550.15	\$732.01	\$1,282.17	\$423.69	\$753.74	\$1,177.43
Family - 2 PT	\$458.77	\$823.40	\$1,282.17	\$353.54	\$823.89	\$1,177.43

**2024 COBRA Medical Monthly Rates**

Monthly Rate	POS Plan	HDHP Plan
Single	\$829.76	\$758.62
Member + Spouse	\$1,866.94	\$1,708.90
Member + Child	\$1,410.58	\$1,287.22
Member + Children	\$2,074.38	\$1,900.58
Family	\$2,833.60	\$2,602.12