

2025 BALDWIN COUNTY HEALTH/DENTAL INSURANCE RATES

EMPLOYEE HEALTH INSURANCE RATES				
	TOTAL MONTHLY PREMIUMS	COUNTY PAYS MONTHLY	EMPLOYEE PAYS MONTHLY	EMPLOYEE PAYS BIWEEKLY
If employee participated/completed 2024 health incentive program				
SINGLE	\$ 728	\$ 676	\$ 52	\$ 26
EMPLOYEE + 1	\$ 1,812	\$ 1,546	\$ 266	\$ 133
FAMILY	\$ 1,812	\$ 1,480	\$ 332	\$ 166
If employee DID NOT participate/complete 2024 health incentive program:				
SINGLE	\$ 728	\$ 646	\$ 82	\$ 41
EMPLOYEE + 1	\$ 1,812	\$ 1,516	\$ 296	\$ 148
FAMILY	\$ 1,812	\$ 1,450	\$ 362	\$ 181

EMPLOYEE DENTAL RATES				
	TOTAL MONTHLY PREMIUMS	COUNTY PAYS MONTHLY	EMPLOYEE PAYS MONTHLY	EMPLOYEE PAYS BIWEEKLY
SINGLE	\$ 23	\$ -	\$ 23	\$ 11.50
EMPLOYEE + 1 (No ORTHO)	\$ 46		\$ 46	\$ 23
EMPLOYEE + 1 (ORTHO - child only)	\$ 57.50		\$ 57.50	\$ 28.75
FAMILY - NON-ORTHO	\$ 68	\$ -	\$ 68	\$ 34
FAMILY - ORTHO	\$ 85	\$ -	\$ 85	\$ 42.50

COBRA RATES				
	HEALTH		DENTAL	DENTAL-Ortho
SINGLE	\$ 742.56		\$ 23.46	
EMPLOYEE + 1	\$ 1,848.24		\$ 46.92	\$ 58.65
FAMILY	\$ 1,848.24		\$ 69.36	\$ 86.70

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25 YR RETIREE HEALTH INSURANCE RATES				
If retiree participated/completed 2024 health incentive program:				
	TOTAL MONTHLY PREMIUMS	COUNTY PAYS MONTHLY	EMPLOYEE PAYS MONTHLY	
(25) SINGLE	\$ 728	\$ 628	\$ 100	
(25) FAMILY	\$ 1,812	\$ 628	\$ 1,184	
If retiree DID NOT participate/complete 2024 health incentive program:				
(25) SINGLE	\$ 728	\$ 598	\$ 130	
(25) FAMILY	\$ 1,812	\$ 598	\$ 1,214	

30 YR RETIREE HEALTH INSURANCE RATES				
If retiree participated/completed 2024 health incentive program:				
	TOTAL MONTHLY PREMIUMS	COUNTY PAYS MONTHLY	EMPLOYEE PAYS MONTHLY	
(30) SINGLE	\$ 728	\$ 728	\$ -	
(30) FAMILY	\$ 1,812	\$ 728	\$ 1,084	
If retiree DID NOT participate/complete 2024 health incentive program:				
(30) SINGLE	\$ 728	\$ 698	\$ 30	
(30) FAMILY	\$ 1,812	\$ 698	\$ 1,114	