

# ANNUAL OPEN ENROLLMENT NOVEMBER 1 - 30, 2024

No Medical Plan Changes to Make? No Action Needed.

No FSA Re-Enrollment? Your Plan Ends 12/31/24.

## Part 1: Flexible Spending Program

### Health Care FSA and Dependent Care (Child Care) FSA Information for 2025

**1**

ALL FSA PARTICIPANTS MUST RE-ENROLL  
TO PARTICIPATE IN 2025.

UP TO \$640 OF ANY REMAINING FUNDS  
IN YOUR 2024 HEALTH ACCOUNT WILL  
AUTOMATICALLY ROLL INTO 2025.

**2**

**3**

DEPENDENT CARE FUNDS  
DO NOT ROLL OVER.

MAXIMUM HEALTH ELECTION: \$3,300  
MAXIMUM DEPENDENT CARE ELECTION:  
\$5,000

**4**

**5**

PRE-TAX DEDUCTIONS ARE TAKEN  
BIWEEKLY FROM YOUR PAY. THERE ARE  
26 PAY PERIODS IN THE 2025 PLAN YEAR.

**2024 PARTICIPANTS: IF YOU TAKE NO ACTION  
YOU WILL NOT BE ENROLLED IN AN FSA FOR 2025**

## Part 2:

# Medical Dental Plan Enrollment Enroll in a Plan, Change Your Plan, Add or Remove Dependents, or Take No Action to Continue Current Elections

**1**

**IF YOU WANT YOUR HEALTH/DENTAL PLANS TO REMAIN THE SAME IN 2025, NO ACTION IS NEEDED.**

**THE EFFECTIVE DATE FOR ENROLLMENTS AND CHANGES TO DEPENDENTS IS JANUARY 1, 2025.**

**2**

**3**

**SEE BELOW FOR 2025 MEDICAL PREMIUM RATES, PLAN SUMMARIES, PRESCRIPTION COVERAGE, AND OTHER INFORMATION.**

**SEE BELOW FOR INSTRUCTIONS ON ADDING A DOMESTIC PARTNER TO COVERAGE.**

**4**

**5**

**PREMIUM DEDUCTIONS ARE TAKEN BIWEEKLY FROM YOUR PAY. THERE ARE 26 PAYDAYS IN 2025.**

### **BENEFIT FAIRS**

Below are the dates for this year's fairs. Representatives from various benefits vendors, the Retirement Division, and the State Employees Benefits Team will be onsite to answer questions and provide additional information.

11/5/24	Waterbury, State Office Complex	10 am -- 3 pm
11/6/24	Montpelier, Pavilion Building	10 am -- 3 pm
11/7/24	Rutland, Asa Bloomer Office Complex	10 am -- 1 pm

**STATE OF VERMONT**  
**BI-WEEKLY ACTIVE GROUP PREMIUMS**  
 Effective January 1, 2025

<b>TOTAL CHOICE</b>				
<b>CLASS CODE</b>	<b>TOTAL PREMIUM</b>	<b>STATE SHARE</b>	<b>EMPLOYEE SHARE</b>	<b>DEFINITION</b>
<b>01</b>	\$751.46	\$601.17	\$150.29	One Person
<b>1A</b>	\$1,502.93	\$1,202.34	\$300.59	Two Person
<b>1B</b>	\$2,066.52	\$1,653.22	\$413.30	Family

<b>SELECTCARE POS</b>				
<b>CLASS CODE</b>	<b>TOTAL PREMIUM</b>	<b>STATE SHARE</b>	<b>EMPLOYEE SHARE</b>	<b>DEFINITION</b>
<b>01</b>	\$628.92	\$503.14	\$125.78	One Person
<b>1A</b>	\$1,257.83	\$1,006.26	\$251.57	Two Person
<b>1B</b>	\$1,729.52	\$1,383.62	\$345.90	Family

**2025 STATE OF VERMONT MONTHLY RETIREE PREMIUMS**

CLASS CODE	RETIRED EMPLOYEES NOT MEDICARE ELIGIBLE DEPENDENTS WITH EGWP	TotalChoice		SelectCare POS	
		State Share	Retiree Share	State Share	Retiree Share
01	Retiree Only	\$1,302.54	\$325.63	\$1,090.14	\$272.53
1A	Retiree and 1 Dependent	\$2,605.08	\$651.27	\$2,180.24	\$545.06
1B	Retiree and 2 or More Dependents	\$3,581.97	\$895.49	\$2,997.84	\$749.46
1C	Retiree and 1 Dependent Medicare Eligible	\$1,765.97	\$441.49	\$1,465.30	\$366.32
1D	Retiree and 2 or More Dependents 1 Medicare Eligible	\$2,347.16	\$586.79	\$1,951.71	\$487.93

CLASS CODE	RETIRED EMPLOYEES NOT MEDICARE ELIGIBLE DEPENDENT(S) NOT ON EGWP	TotalChoice		SelectCare POS	
		State Share	Retiree Share	State Share	Retiree Share
1E	Retiree and 1 Dependent Medicare Eligible & Declines EGWP	\$1,481.68	\$370.42	\$1,189.77	\$297.44
1F	Retiree and 2 or More Dependents 1 Medicare Eligible & Declines EGWP	\$2,045.97	\$511.49	\$1,662.05	\$415.51
1G	Retiree and 2 or More Dependents Dependents are Medicare Eligible & Dependents Decline EGWP	\$1,580.27	\$395.07	\$1,196.33	\$299.08
1H	Retiree Not Medicare Eligible 2 Dependents Medicare Eligible	\$2,229.40	\$557.34	\$1,840.45	\$460.11

CLASS CODE	RETIRED EMPLOYEES MEDICARE ELIGIBLE WITH EGWP	TotalChoice		SelectCare POS	
		State Share	Retiree Share	State Share	Retiree Share
03	Retiree Only	\$463.42	\$115.86	\$375.17	\$93.79
3A	Retiree and 1 Dependent Both Medicare Eligible	\$926.86	\$231.71	\$750.31	\$187.58
3B	Retiree Medicare Eligible & 1 Dependent Not Medicare Eligible	\$1,765.97	\$441.49	\$1,465.30	\$366.32

CLASS CODE	RETIRED EMPLOYEES MEDICARE ELIGIBLE WITH EGWP	TotalChoice		SelectCare POS	
		State Share	Retiree Share	State Share	Retiree Share
3C	Retiree Medicare Eligible & 2 or More Dependents Not Medicare Eligible	\$2,347.16	\$586.79	\$1,951.71	\$487.93
3D	Retiree Medicare Eligible & 2 or More Dependents 1 Medicare Eligible	\$1,508.04	\$377.01	\$1,236.74	\$309.19
3F	Retiree and 1 Dependent Both Medicare Eligible 1 Declines EGWP	\$666.86	\$166.71	\$495.62	\$123.91
3J	Retiree Medicare Eligible & 2 or More Dependents 1 Medicare Eligible 1 Declines EGWP	\$1,231.28	\$307.82	\$967.88	\$241.97
3L	Retiree Medicare Eligible & 2 or More Dependents Both Medicare Eligible	\$1,349.77	\$337.44	\$1,092.70	\$273.18
3M	Retiree and 1 Dependent Both Medicare Eligible Retiree Declines EGWP	\$680.50	\$170.13	\$506.55	\$126.64
3N	Retiree Medicare Eligible & 2 Dependents Med. Eligible & 1 Declines EGWP	\$1,132.69	\$283.17	\$961.32	\$240.33

CLASS CODE	RETIRED EMPLOYEES ELIGIBLE for MEDICARE WITHOUT EGWP	TotalChoice		SelectCare POS	
		State Share	Retiree Share	State Share	Retiree Share
3E	Retiree Only	\$217.08	\$54.27	\$131.38	\$32.85
3G	Retiree and & 1 Dependent Both Medicare Eligible	\$434.16	\$108.54	\$262.78	\$65.69
3H	Retiree Medicare Eligible & 1 Dependent Not Medicare Eligible	\$1,481.68	\$370.42	\$1,189.77	\$297.44
3I	Retiree Medicare Eligible & 2 or More Dependents Not Medicare Eligible	\$2,045.97	\$511.49	\$1,662.05	\$415.51
3K	Retiree Medicare Eligible & 2 or More Dependents 1 Medicare Eligible	\$998.45	\$249.61	\$735.02	\$183.75