

Employee Contributions

Medical: Base PPO Plan Option	Weekly	Bi-Weekly
Employee	\$60.08	\$120.15
Employee & Spouse	\$184.16	\$368.33
Employee & Child(ren)	\$139.93	\$279.86
Family	\$229.47	\$458.95

Medical: Money Saver Plan Option	Weekly	Bi-Weekly
Employee	\$50.12	\$100.23
Employee & Spouse	\$177.26	\$354.52
Employee & Child(ren)	\$131.83	\$263.67
Family	\$223.51	\$447.02

Dental	Weekly	Bi-Weekly
Employee	\$5.94	\$11.87
Employee & Spouse	\$12.11	\$24.22
Employee & Child(ren)	\$16.63	\$33.27
Family	\$22.83	\$45.66

Vision	Weekly	Bi-Weekly
Employee	\$1.38	\$2.76
Employee & Spouse	\$2.62	\$5.24
Employee & Child(ren)	\$2.76	\$5.51
Family	\$4.05	\$8.10

Accident	Weekly	Bi-Weekly
Employee	\$1.78	\$3.56
Employee & Spouse	\$2.96	\$5.93
Employee & Child(ren)	\$3.39	\$6.78
Family	\$5.34	\$10.68

Hospital Indemnity	Weekly	Bi-Weekly
Employee	\$4.07	\$8.14
Employee & Spouse	\$9.36	\$18.72
Employee & Child(ren)	\$5.62	\$11.23
Family	\$11.23	\$22.46