

# MONTHLY COSTS

## MEDICAL, DENTAL & VISION

MEDICAL	PPO PLAN			CDHP PLAN		
	Total cost	Employer Cost	Employee Cost	Total cost	Employer Cost	Employee Cost
Employee Only	\$761.24	\$669.89	\$91.35	\$455.78	\$435.78	\$20.00
Employee + Spouse	\$1,750.77	\$1,540.68	\$210.09	\$1,048.29	\$1,028.29	\$20.00
Employee + Child(ren)	\$1,674.68	\$1,473.72	\$200.96	\$1,002.72	\$982.72	\$20.00
Employee + Family	\$2,778.41	\$2,445.00	\$333.41	\$1,663.61	\$1,643.61	\$20.00
<b>DENTAL</b>						
Employee Only	\$45.53	\$40.07	\$5.46	\$45.53	\$45.53	\$0.00
Employee + Spouse	\$104.71	\$92.14	\$12.57	\$104.71	\$104.71	\$0.00
Employee + Child(ren)	\$100.16	\$88.14	\$12.02	\$100.16	\$100.16	\$0.00
Employee + Family	\$166.17	\$146.23	\$19.94	\$166.17	\$166.17	\$0.00
<b>VISION</b>						
Employee Only	\$7.79	\$6.86	\$0.93	\$7.79	\$7.79	\$0.00
Employee + Spouse	\$17.92	\$15.77	\$2.15	\$17.92	\$17.92	\$0.00
Employee + Child(ren)	\$17.14	\$15.08	\$2.06	\$17.14	\$17.14	\$0.00
Employee + Family	\$28.43	\$25.02	\$3.41	\$28.43	\$28.43	\$0.00

## LONG TERM DISABILITY

LONG TERM DISABILITY (EMPLOYEE PAID)		
Core Plan	60% to \$6,300	\$0.295 per \$100 of gross monthly base wages
Buy UP Plan	66.67% to \$10,000	\$0.515 per \$100 of gross monthly base wages

## LIFE AND AD&D

VOLUNTARY LIFE (EMPLOYEE PAID)		
AGE	Employee per \$10,000	Spouse per \$5,000
18-24	\$0.50	\$0.25
25-29	\$0.60	\$0.30
30-34	\$0.80	\$0.40
35-39	\$0.90	\$0.45
40-44	\$1.00	\$0.50
45-49	\$1.50	\$0.75
50-54	\$2.30	\$1.15
55-59	\$4.30	\$2.15
60-64	\$6.60	\$3.30
65-69	\$12.70	\$6.35
70+	\$20.60	\$10.30
Children	\$0.34 per \$2,000	

SUPPLEMENTAL AD&D (EMPLOYEE PAID)	
Employee	\$0.30 per \$10,000
Spouse	\$0.15 per \$5,000
Child	\$0.06 per \$2,000