

FULL-TIME RATES

Health Insurance Employee Contributions Rates effective July 1, 2016 – June 30, 2017

Rates apply to full-time employees who work 40+ hours per week

Rates are for health insurance only

Premium PPO <i>(PPO with Anthem BCBS)</i>	Full Monthly Cost <small>(including Stafford and Employee Contributions)</small>	Monthly Cost to Employee	Per Paycheck Cost to Employee
Employee Only	\$622	\$92	\$46
Employee + Child	\$933	\$153	\$76.50
Employee + Children	\$1,120	\$193	\$96.50
Employee + Spouse	\$1,225	\$214	\$107
Employee + Family	\$1692	\$305	\$152.50

Core PPO <i>(PPO with Anthem BCBS)</i>	Full Monthly Cost <small>(including Stafford and Employee Contributions)</small>	Monthly Cost to Employee	Per Paycheck Cost to Employee
Employee Only	\$577	\$29	\$14.50
Employee + Child	\$865	\$58	\$29
Employee + Children	\$1,038	\$75	\$37.50
Employee + Spouse	\$1,211	\$92	\$46.00
Employee + Family	\$1,557	\$127	\$63.50

HDHP w/HSA <i>(HDHP with Anthem BCBS)</i>	Full Monthly Cost <small>(including Stafford and Employee Contributions)</small>	Monthly Cost to Employee	Per Paycheck Cost to Employee
Employee Only	\$539	\$27	\$13.50
Employee + Child	\$809	\$54	\$27
Employee + Children	\$971	\$70	\$35
Employee + Spouse	\$1,132	\$86	\$43
Employee + Family	\$1,456	\$119	\$59.50

FULL-TIME RATES

Dental Insurance Employee Contributions Rates effective July 1, 2016 – June 30, 2017 Rates apply to full-time employees who work 40+ hours per week*

Low Option Dental <i>(HDHP with Anthem BCBS)</i>	Full Monthly Cost <small>(including Stafford and Employee Contributions)</small>	Monthly Cost to Employee	Per Paycheck Cost to Employee
Employee Only	\$26	\$4	\$2
Employee + Child	\$52	\$9	\$4.50
Employee + Children	\$57	\$10	\$5
Employee + Spouse	\$48	\$8	\$4
Family	\$80	\$15	\$7.50

High Option Dental <i>(HDHP with Anthem BCBS)</i>	Full Monthly Cost <small>(including Stafford and Employee Contributions)</small>	Monthly Cost to Employee	Per Paycheck Cost to Employee
Employee Only	\$30	\$5	\$2.50
Employee + Child	\$61	\$11	\$5.50
Employee + Children	\$67	\$12	\$6
Employee + Spouse	\$57	\$10	\$5
Family	\$94	\$17	\$8.50

*Employees who receive the Opt-Out Credit and elect dental coverage must pay the full monthly cost for dental insurance