



2018 RATES

CDHP + HSA	Total Monthly Premium	Your Monthly Cost	Your Bi-Weekly Cost	Your Weekly Cost
Employee Only	\$831.48	\$207.87	\$95.94	\$47.97
Employee + Child	\$1,204.83	\$301.21	\$139.02	\$69.51
Employee + Children	\$1,808.18	\$452.05	\$208.64	\$104.32
Employee + Spouse	\$1,902.53	\$475.63	\$219.52	\$109.76
Employee + Family	\$2,614.94	\$653.74	\$301.72	\$150.86

CDHP + HRA	Total Monthly Premium	Your Monthly Cost	Your Bi-Weekly Cost	Your Weekly Cost
Employee Only	\$927.93	\$324.78	\$149.90	\$74.95
Employee + Child	\$1,344.61	\$470.61	\$217.21	\$108.60
Employee + Children	\$2,017.95	\$706.28	\$325.98	\$162.99
Employee + Spouse	\$2,123.24	\$743.13	\$342.98	\$171.49
Employee + Family	\$2,918.29	\$1,021.40	\$471.42	\$235.71

High Deductible Basic	Total Monthly Premium	Your Monthly Cost	Your Bi-Weekly Cost	Your Weekly Cost
Employee Only	\$571.28	\$171.38	\$79.10	\$39.55
Employee + Child	\$827.81	\$248.34	\$114.62	\$57.31
Employee + Children	\$1,242.36	\$372.71	\$172.02	\$86.01
Employee + Spouse	\$1,307.18	\$392.15	\$180.99	\$90.50
Employee + Family	\$1,796.65	\$539.00	\$248.77	\$124.38

TRICARE Supplement	Total Monthly Premium	Your Monthly Cost	Your Bi-Weekly Cost	Your Weekly Cost
Employee Only	\$67.50	\$67.50	\$31.15	\$15.58
Employee + Child	\$132.50	\$132.50	\$61.15	\$30.58
Employee + Children	\$132.50	\$132.50	\$61.15	\$30.58
Employee + Spouse	\$132.50	\$132.50	\$61.15	\$30.58
Employee + Family	\$178.50	\$178.50	\$82.38	\$41.19

Dental Core	Total Monthly Premium	Your Monthly Cost	Your Bi-Weekly Cost	Your Weekly Cost
Employee Only	\$35.62	\$11.75	\$5.43	\$2.71
Employee + Child	\$58.77	\$19.39	\$8.95	\$4.48
Employee + Children	\$78.36	\$25.86	\$11.93	\$5.97
Employee + Spouse	\$71.23	\$23.51	\$10.85	\$5.42
Employee + Family	\$107.56	\$35.49	\$16.38	\$8.19

Dental Buy-Up	Total Monthly Premium	Your Monthly Cost	Your Bi-Weekly Cost	Your Weekly Cost
Employee Only	\$44.96	\$17.08	\$7.89	\$3.94
Employee + Child	\$74.19	\$28.19	\$13.01	\$6.51
Employee + Children	\$98.92	\$37.59	\$17.35	\$8.67
Employee + Spouse	\$89.93	\$34.17	\$15.77	\$7.89
Employee + Family	\$135.79	\$51.60	\$23.82	\$11.91

Vision	Total Monthly Premium	Your Monthly Cost	Your Bi-Weekly Cost	Your Weekly Cost
Employee Only	\$7.03	\$2.32	\$1.07	\$0.54
Employee + Child	\$10.19	\$3.36	\$1.55	\$0.78
Employee + Children	\$15.29	\$5.05	\$2.33	\$1.16
Employee + Spouse	\$16.08	\$5.31	\$2.45	\$1.22
Employee + Family	\$22.11	\$7.30	\$3.37	\$1.68