

## 7/5ths Premium Rates for January - May 2021

	Monthly Deduction Amounts	Biweekly Deduction Amounts
<b>Consumer Choice HSA</b>		
Employee Only	\$ 114.60	\$ 57.30
Employee + Spouse	\$ 283.42	\$ 141.71
Employee + Child(ren)	\$ 242.93	\$ 121.46
Family	\$ 396.45	\$ 198.23
<b>Comprehensive Care</b>		
Employee Only	\$ 263.14	\$ 131.57
Employee + Spouse	\$ 595.36	\$ 297.68
Employee + Child(ren)	\$ 510.30	\$ 255.15
Family	\$ 845.52	\$ 422.76
<b>BlueChoice HMO</b>		
Employee Only	\$ 312.17	\$ 156.09
Employee + Spouse	\$ 698.32	\$ 349.16
Employee + Child(ren)	\$ 598.56	\$ 299.28
Family	\$ 992.88	\$ 496.44
<b>Kaiser HMO</b>		
Employee Only	\$ 238.92	\$ 119.46
Employee + Spouse	\$ 534.74	\$ 267.37
Employee + Child(ren)	\$ 458.36	\$ 229.18
Family	\$ 763.95	\$ 381.98
<b>Tobacco Surcharge</b>		
Tobacco Surcharge - 1	\$ 140.00	\$ 70.00
Tobacco Surcharge - 2	\$ 280.00	\$ 140.00
Tobacco Surcharge - 3	\$ 420.00	\$ 210.00
Tobacco Surcharge - 4	\$ 560.00	\$ 280.00
Tobacco Surcharge - 5	\$ 700.00	\$ 350.00
Tobacco Surcharge - 6	\$ 840.00	\$ 420.00
Tobacco Surcharge - 7	\$ 980.00	\$ 490.00
Tobacco Surcharge - 8	\$ 1,120.00	\$ 560.00
<b>Working Spouse Surcharge</b>		
	\$ 140.00	\$ 70.00
<b>Delta Dental Base Plan</b>		
Employee Only	\$ 44.77	\$ 22.39
Employee + Spouse	\$ 89.54	\$ 44.77
Employee + Child(ren)	\$ 85.04	\$ 42.52
Family	\$ 143.25	\$ 71.62
<b>Delta Dental High Plan</b>		
Employee Only	\$ 55.33	\$ 27.66
Employee + Spouse	\$ 110.60	\$ 55.30
Employee + Child(ren)	\$ 105.11	\$ 52.56
Family	\$ 177.04	\$ 88.52
<b>EyeMed Vision</b>		
Employee Only	\$ 9.66	\$ 4.83
Employee + Spouse	\$ 21.73	\$ 10.86
Employee + Child(ren)	\$ 18.37	\$ 9.18
Family	\$ 28.48	\$ 14.24
<b>Accident Plan</b>		
Employee Only	\$ 9.98	\$ 4.99
Employee + Spouse	\$ 16.63	\$ 8.32
Employee + Child(ren)	\$ 19.52	\$ 9.76
Family	\$ 26.17	\$ 13.08
<b>Hospital Indemnity</b>		
Employee Only	\$ 13.76	\$ 6.88
Employee + Spouse	\$ 28.00	\$ 14.00
Employee + Child(ren)	\$ 20.58	\$ 10.40
Family	\$ 35.04	\$ 17.52
<b>Identity Protection</b>		
Individual	\$ 12.53	\$ 6.27
Family	\$ 23.73	\$ 11.87
<b>Child Life Insurance</b>		
Child Life \$5,000	\$ 0.70	\$ 0.35
Child Life \$10,000	\$ 1.40	\$ 0.70
Child Life \$15,000	\$ 2.10	\$ 1.05
<b>Legal Plan</b>		
	\$ 23.74	\$ 11.87