



Employee Contributions

Pre-tax OR Post-tax contributions? Contributions will automatically be taken on a pre-tax basis (unless otherwise specified), unless otherwise elected in writing and submitted to Payroll. If your contributions are made on a pre-tax basis, the IRS does not permit mid-plan year election changes unless they are due to qualified change of status events such as marriage, divorce, birth/adoption, etc. However, if you elect your contributions to be made on a post-tax basis, you may drop (not add) coverage for yourself and your dependents without a qualified change in status event during the Plan Year by notifying Payroll in writing. Subsequent re-enrollment in the plan under this circumstance is only permitted at open enrollment.

EMPLOYEE CONTRIBUTIONS FOR MEDICAL BENEFITS

BENEFIT PLAN	PER MONTH
Medical/RX— HDHP/HSA	
Employee Only	\$97.00
Employee / Spouse	\$521.00
Employee / Employee	\$194.00
Employee / Child(ren)	\$384.00
Employee / Family	\$784.00
Employee / Employee / Family	\$481.00
BENEFIT PLAN	PER MONTH
Medical RX— Healthy Measures PPO	
Employee Only	\$277.00
Employee / Spouse	\$901.00
Employee / Employee	\$554.00
Employee / Child(ren)	\$720.00
Employee / Family	\$1,319.00
Employee / Employee / Family	\$997.00

EMPLOYEE CONTRIBUTIONS FOR VOLUNTARY SHORT-TERM DISABILITY

BENEFIT PLAN	RATE (per \$10 of weekly coverage)
Short Term Disability - UHC (post-tax deduction)	
Age 0-25	\$0.647
25-29	\$0.681
30-34	\$0.607
35-39	\$0.487
40-44	\$0.524
45-49	\$0.452
50-54	\$0.547
55-59	\$0.623
60-64	\$0.723
65+	\$0.825

EMPLOYEE CONTRIBUTIONS FOR DENTAL AND VISION BENEFITS

BENEFIT PLAN	PER MONTH
Dental - UMR - Base Plan	
Employee Only	\$5.00
Employee / Spouse	\$39.00
Employee / Employee	\$8.00
Employee / Child(ren)	\$35.00
Employee / Family	\$67.00
Employee / Employee / Family	\$36.00
BENEFIT PLAN	PER MONTH
Dental - UMR - Buy-Up Plan	
Employee Only	\$5.00
Employee / Spouse	\$39.00
Employee / Employee	\$8.00
Employee / Child(ren)	\$45.00
Employee / Family	\$77.00
Employee / Employee / Family	\$46.00

BENEFIT PLAN	PER MONTH
Vision - UHC	
Employee Only	\$6.63
Employee + 1 (Spouse or Child)	\$13.26
Employee / Children	\$13.38
Family	\$21.37
BENEFIT PLAN	PER MONTH
Life & AD&D - UHC	
Employee Only	\$0.00