



## 2020 EMPLOYEE CONTRIBUTION CHART

### CIGNA MEDICAL RATES

#### POINT OF SERVICE

|                       | Monthly Rate | Bi-Weekly Rate |
|-----------------------|--------------|----------------|
| Employee              | \$ 115.40    | \$ 53.26       |
| Employee and Spouse   | \$ 226.57    | \$ 104.57      |
| Employee and Children | \$ 197.99    | \$ 91.38       |
| Employee and Family   | \$ 336.47    | \$ 155.29      |

#### OPEN ACCESS PLUS

|                       |           |           |
|-----------------------|-----------|-----------|
| Employee              | \$ 147.67 | \$ 68.16  |
| Employee and Spouse   | \$ 376.89 | \$ 173.95 |
| Employee and Children | \$ 331.71 | \$ 153.10 |
| Employee and Family   | \$ 564.22 | \$ 260.41 |

### DELTA DENTAL RATES

#### DENTAL CARE USA HMO

|                       | Monthly Rate | Bi-Weekly Rate |
|-----------------------|--------------|----------------|
| Employee              | \$ 6.39      | \$ 2.95        |
| Employee and Spouse   | \$ 13.69     | \$ 6.32        |
| Employee and Children | \$ 13.69     | \$ 6.32        |
| Employee and Family   | \$ 19.18     | \$ 8.85        |

#### DENTAL PPO PLUS PREMIER

|                       |          |          |
|-----------------------|----------|----------|
| Employee              | \$ 14.29 | \$ 6.60  |
| Employee and Spouse   | \$ 33.34 | \$ 15.39 |
| Employee and Children | \$ 33.35 | \$ 15.39 |
| Employee and Family   | \$ 46.68 | \$ 21.54 |