

Cost for Employees For plan year beginning October 1, 2019

OPTION/DEDUCTIBLE

KE 7: \$500		Ded. From Check	Ded. From Check	Ded. From Check
	Rates	9 Mo. Emp.	10 Mo. Emp.	12 Mo. Emp.
Single	\$ 448.35	\$ 169.28	\$ 40.02	\$ 33.35
Emp/Spouse	\$ 962.74	\$ 855.13	\$ 657.29	\$ 547.74
Emp/Children	\$ 907.41	\$ 781.36	\$ 590.89	\$ 492.41
Family	\$ 1,421.81	\$ 1,467.23	\$ 1,208.17	\$ 1,006.81
OOP Max:	\$ 5,000.00			

KE 10: \$2500		9 Mo. Emp.	10 Mo. Emp.	12 Mo. Emp.
	Rates			
Single	\$ 395.96	\$ 99.43	\$ -	\$ -
Emp/Spouse	\$ 850.10	\$ 704.95	\$ 522.12	\$ 435.10
Emp/Children	\$ 801.24	\$ 639.80	\$ 463.49	\$ 386.24
Family	\$ 1,255.39	\$ 1,245.33	\$ 1,008.47	\$ 840.39
OOP Max:	\$ 5,000.00			

KE 12: \$6350		9 Mo. Emp.	10 Mo. Emp.	12 Mo. Emp.
	Rates			
Single	\$ 321.39	\$ -	\$ -	\$ -
Emp/Spouse	\$ 689.79	\$ 491.20	\$ 329.75	\$ 274.79
Emp/Children	\$ 650.17	\$ 438.37	\$ 282.20	\$ 235.17
Family	\$ 1,018.55	\$ 929.55	\$ 724.26	\$ 603.55
OOP Max:	\$ 6,350.00			

9 month employee Fringe benefit: \$321.39
10 & 12 month employee Fringe benefit: \$415.00

Deductions are taken the prior month for benefits.
 Example: October coverage would be paid for with September check deductions