

Premium Costs Effective July 1, 2013

Medical Plan FY14	Employee Cost per Month <i>with</i> Wellness Participation	Employee Cost Per Month for New EE's or <i>without</i> Wellness Participation	CCC employer Cost Per Month	Total Premium w/wellness participation
Buy-Up Plan - \$500 Deductible				
Employee	\$60.52	\$ 80.52	\$ 438.24	\$ 498.76
Employee +1	\$564.96	\$ 584.96	\$ 438.24	\$ 1003.20
Employee + Family	\$968.94	\$988.94	\$ 438.24	\$ 1407.18
Base Plan - \$750 Deductible				
Employee	\$ 20.00	\$ 40.00	\$ 438.24	\$ 458.24
Employee +1	\$ 483.52	\$ 503.52	\$ 438.24	\$ 921.76
Employee + Family	\$ 854.72	\$ 874.72	\$ 438.24	\$ 1292.96
HDHP/HSA - \$1,250 Deductible * \$26.20 per month employer contribution to HSA or FSA				
Employee	\$ 0.00	\$ 0.00	\$ 412.04	\$412.04
Employee + 1	\$ 416.82	\$ 436.82	\$ 412.04	\$ 828.86
Employee + Family	\$ 750.56	\$ 770.56	\$ 412.04	\$ 1162.60

Premium Costs Effective July 1, 2013

Delta Dental	Monthly Premium	Employee Cost Per Paycheck
Base Plan - \$1,000 Annual Benefit		
Employee	\$ 33.96	\$ 16.98
Family	\$ 96.84	\$ 48.42

VSP Vision	Employee Premium Cost per Month	Employee per Paycheck
Buy-Up Plan		
Employee	\$6.20	\$3.10
Employee + Family	\$14.20	\$7.10
Base Plan		
Employee	\$0.00	\$0.00
Employee + Family	\$0.99	\$0.50