



2022 Bi-weekly Contribution Rates

Medical Plan (Non-Tobacco Rates; No Wellness Credit)				
Coverage Tier	\$500 Deductible	\$1,000 Deductible	\$1,850 Deductible	\$2,850 Deductible
Employee only	\$ 117.23	\$ 87.69	\$ 54.00	\$ 47.08
Employee + Spouse	\$ 282.92	\$ 199.85	\$ 131.54	\$ 109.85
Employee + Child(ren)	\$ 235.85	\$ 168.46	\$ 111.69	\$ 94.15
Employee + Family	\$ 413.54	\$ 298.15	\$ 173.54	\$ 150.46

Dental Plan			
Coverage Tier	Basic Plus	Standard	Enhanced
Employee only	\$ 3.23	\$ 5.54	\$ 6.92
Employee + Spouse	\$ 7.38	\$ 12.92	\$ 16.15
Employee + Child(ren)	\$ 7.85	\$ 14.31	\$ 17.54
Employee + Family	\$ 11.08	\$ 22.15	\$ 27.23

Vision Plan		
Coverage Tier	Materials Only	Enhanced
Employee only	\$ 2.85	\$ 5.28
Employee + Spouse	\$ 5.70	\$ 10.55
Employee + Child(ren)	\$ 7.32	\$ 13.08
Employee + Family	\$ 9.46	\$ 17.49