

FY2018 MONTHLY PAYROLL SYSTEM MEDICAL AND DENTAL RATES*

Full-time Employee (30 - 40 hours per week)
Employer Medical: \$1072.32 Employer Dental: \$19.34

| | Employee Only | Employee and Spouse | Employee and Child | Employee and Children | Employee, Spouse and Child | Employee, Spouse and Children |
|-----------------|---------------|---------------------|--------------------|-----------------------|----------------------------|-------------------------------|
| PPO | \$51.00 | \$128.00 | \$88.00 | \$119.00 | \$161.00 | \$185.00 |
| Traditional | \$63.00 | \$155.00 | \$110.00 | \$144.00 | \$195.00 | \$218.00 |
| High Deductible | \$41.00 | \$109.00 | \$73.00 | \$99.00 | \$136.00 | \$152.00 |
| Dental | \$9.00 | \$41.24 | \$34.74 | \$53.24 | \$59.00 | \$68.24 |

Part-time Employee (20 - 29.9 hours per week)
Employer Medical: \$868.58 Employer Dental: \$15.48

| | Employee Only | Employee and Spouse | Employee and Child | Employee and Children | Employee, Spouse and Child | Employee, Spouse and Children |
|-----------------|---------------|---------------------|--------------------|-----------------------|----------------------------|-------------------------------|
| PPO | \$254.74 | \$331.74 | \$291.74 | \$322.74 | \$364.74 | \$388.74 |
| Traditional | \$266.74 | \$358.74 | \$313.74 | \$347.74 | \$398.74 | \$421.74 |
| High Deductible | \$244.74 | \$312.74 | \$276.74 | \$302.74 | \$339.74 | \$355.74 |
| Dental | \$12.86 | \$45.10 | \$38.60 | \$57.10 | \$62.86 | \$72.10 |

*Premiums withheld on the first and second paydates of each month. Premiums withheld in advance of coverage.