

<b>Medical Insurance Premiums</b>					
<b>Blue Cross Blue Shield S or Cigna Local Plus</b>					
	<b>Employee Cost</b>	<b>Employer Pays</b>	<b>District %</b>	<b>Employer Contribution</b>	<b>Total Annual Benefit</b>
<b>Employee Only</b>	<b>Premium</b>			<b>H.S.A. Contribution</b>	
Premier	\$0	\$651	100.00%		\$7,812.00
Standard	\$0	\$609	100.00%		\$7,308.00
Limited	\$0	\$558	100.00%		\$6,696.00
Local CDHP	\$0	\$473	100.00%	\$165.00	\$7,656.00
<b>Employee Plus Child(ren)</b>	<b>Premium</b>				
Premier	\$429	\$644	60.00%		\$7,725.60
Standard	\$353	\$651	64.84%		\$7,811.92
Limited	\$268	\$651	70.84%		\$7,812.24
Local CDHP	\$312	\$468	60.00%	\$165.00	\$7,596.00
<b>Employee Plus Spouse</b>	<b>Premium</b>				
Premier	\$534	\$801	60.00%		\$9,612.00
Standard	\$500	\$749	60.00%		\$8,992.80
Limited	\$457	\$686	60.00%		\$8,229.60
Local CDHP	\$388	\$582	60.00%	\$165.00	\$8,964.00
<b>Family</b>	<b>Premium</b>				
Premier	\$677	\$1,015	60.00%		\$12,182.40
Standard	\$633	\$950	60.00%		\$11,397.60
Limited	\$580	\$869	60.00%		\$10,432.80
Local CDHP	\$492	\$738	60.00%	\$165.00	\$10,836.00

\*Blue Cross Blue Shield Network P and Cigna Open Access:  
Employee Only and Employee/Child(ren): \$65 Surcharge  
Employee/Spouse and Family: \$130 Surcharge

<b>Dental Insurance</b>			
<b>Delta Dental DPPO or Cigna Prepaid DHMO</b>			
	<b>Employee Cost</b>	<b>Employer Pays</b>	<b>District %</b>
<b>Employee Only</b>	<b>Premium</b>		
Cigna Prepaid DHMO	\$13.84	\$0.00	0.00%
Delta Dental DPPO	\$19.82	\$0.00	0.00%
<b>Employee Plus Child(ren)</b>	<b>Premium</b>		
Cigna Prepaid DHMO	\$28.75	\$0.00	0.00%
Delta Dental DPPO	\$52.70	\$0.00	0.00%
<b>Employee Plus Spouse</b>	<b>Premium</b>		
Cigna Prepaid DHMO	\$24.54	\$0.00	0.00%
Delta Dental DPPO	\$38.98	\$0.00	0.00%
<b>Family</b>	<b>Premium</b>		
Cigna Prepaid DHMO	\$33.74	\$0.00	0.00%
Delta Dental DPPO	\$80.72	\$0.00	0.00%

<b>Vision Insurance</b>			
<b>Davis Vision Basic or Davis Vision Expanded</b>			
	<b>Employee Cost</b>	<b>Employer Pays</b>	<b>District %</b>
<b>Employee Only</b>	<b>Premium</b>		
Davis Vision Basic or Davis Vision Expanded	\$3.07	\$0.00	0.00%
Davis Vision Expanded	\$5.56	\$0.00	0.00%
<b>Employee Plus Child(ren)</b>	<b>Premium</b>		
Davis Vision Basic	\$6.13	\$0.00	0.00%
Davis Vision Expanded	\$11.12	\$0.00	0.00%
<b>Employee Plus Spouse</b>	<b>Premium</b>		
Davis Vision Basic	\$5.82	\$0.00	0.00%
Davis Vision Expanded	\$10.57	\$0.00	0.00%
<b>Family</b>	<b>Premium</b>		
Davis Vision Basic	\$9.01	\$0.00	0.00%
Davis Vision Expanded	\$16.35	\$0.00	0.00%