## 2021 Bi-Weekly Premium

<b>Medical Premiums</b>	Biweekly County	Biweekly Employee	Cost Share Percentage	
			County	Employee
ANTHEM HSA PLAN			'	·
Employee	\$268.55	\$67.14	80%	20%
Employee + 1	\$513.34	\$128.34	80%	20%
Family	\$669.24	\$167.31	80%	20%
KAISER HMO PLAN				
Employee	\$226.37	\$56.59	80%	20%
Employee + 1	\$432.73	\$108.18	80%	20%
Family	\$564.14	\$141.04	80%	20%

<b>Dental Premiums</b>	Biweekly County	Biweekly Employee	Cost Share Percentage	
			County	Employee
AETNA DENTAL HMO PLAN				
Employee	\$6.36	\$2.12	75%	25%
Employee + 1	\$12.42	\$4.14	75%	25%
Family	\$20.37	\$6.79	75%	25%
AETNA DENTAL PPO PLAN				
Employee	\$12.98	\$4.33	75%	25%
Employee + 1	\$26.62	\$8.87	75%	25%
Family	\$34.91	\$11.64	75%	25%

	Cost Share Percentage			
Vision Premiums	Biweekly County	Biweekly Employee	County	Employee
Employee	\$3.62	\$2.62	58%	42%
Employee + 1	\$3.62	\$2.62	58%	42%
Family	\$3.62	\$2.62	58%	42%

## 2021 Bi-Weekly Premium Rates (continued):

Life Insurance	Biweekly County	Biweekly	Cost Share Percentage	
Premiums		Employee	County	Employee
Life B & AD&D (50K)	\$2.36	\$0.79	75%	25%
Life D (10K)	\$1.61	\$0.54	75%	25%

Supplemental Life Insurance Premiums	Benefit Amount	Total Biweekly Premium (100% Employee Paid)
	\$25,000	\$3.75
	\$50,000	\$7.50
	\$75,000	\$11.25
	\$100,000	\$15.00
	\$125,000	\$18.75
	\$150,000	\$22.50
Employee Optional	\$175,000	\$26.25
Supplemental Term Life	\$200,000	\$30.00
	\$225,000	\$33.75
	\$250,000	\$37.50
	\$275,000	\$41.25
	\$300,000	\$45.00