2015
EMPLOYEE GROUP INSURANCE CONTRIBUTION RATES

PPO HIGH PLAN	2014 MONTHLY PREMIUM	2015 MONTHLY PREMIUM	17.50% MGMT, CWA, AFSCME & FOP 2015 MONTHLY CONTRIBUTION	$ CHANGE	% CHANGE
Employee Only	663.81	632.60	0.00		0%
Employee and Child	1,262.90	1,203.85	99.97	$ (4.87)	-4.65%
Employee and Spouse	1,395.84	1,330.38	122.11	$ (6.00)	-4.68%
Family	2,020.65	1,925.64	226.28	$ (11.18)	-4.71%
HMO HIGH PLAN					
Employee Only	602.01	623.42	0.00	$ -	0%
Employee and Child	1,143.81	1,184.50	98.19	$ 3.37	3.55%
Employee and Spouse	1,264.22	1,309.18	120.01	$ 4.12	3.55%
Family	1,830.07	1,895.19	222.56	$ 7.65	3.56%
HIGH DEDUCTIBLE HEALTH PLAN					
Employee Only	480.15	570.23	0.00	$ -	0%
Employee and Child	912.28	1,083.43	0.00	$ -	0%
Employee and Spouse	1,008.30	1,197.48	0.00	$ -	0%
Family	1,459.62	1,733.51	0.00	$ -	0%
DENTAL PLAN					
Employee Only	38.27	41.03	0.00	$ -	0%
Employee and Child	79.05	84.76	7.65	$ 0.51	7.18%
Employee and Spouse	80.55	86.37	7.93	$ 0.53	7.22%
Family	121.33	130.10	15.59	$ 1.05	7.20%
VISION PLAN					
Employee Only	N/A	2.50	0.00	N/A	N/A
Family (E-S/E-C/FAM)	N/A	5.75	0.57	N/A	N/A

DEPENDENT LIFE INSURANCE RATES

5,000 Spouse/2,000 each child	$1.35 per month
10,000 Spouse/2,000 each child	$2.38 per month

SUPPLEMENTAL LIFE RATES

AGE DURING YEAR OF COVERAGE	PER $1,000 OF COVERAGE
18 TO 29 YEARS OF AGE	0.06
30 TO 34 YEARS OF AGE	0.08
35 TO 39 YEARS OF AGE	0.11
40 TO 44 YEARS OF AGE	0.18
45 TO 49 YEARS OF AGE	0.29
50 TO 54 YEARS OF AGE	0.49
55 TO 59 YEARS OF AGE	0.79
60 TO 64 YEARS OF AGE	1.24

Note: There is no payroll deduction on the 3rd biweekly payroll during any month.

Update: 10/7/2014

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