

HEALTH/DENTAL INSURANCE PREMIUMS

2016

DEDUCTIONS FROM PAYROLL CHECK EFFECTIVE 12/15/2015

HEALTH

Position	Coverage	Amount per Pay Period	Amount per Month	Annual Amount	Percentage Increase	Monthly Increase	Annual Increase
EMPLOYEE SHARE							
Employee	Single	\$43.57	\$87.14	\$1,045.68	12.58%	\$9.74	\$116.88
Employee	Couple	\$83.99	\$167.98	\$2,015.76	12.44%	\$18.58	\$222.96
Employee	Employee/Child	\$60.44	\$120.88	\$1,450.56	4.93%	\$5.68	\$68.16
Employee	Employee/Children	\$82.55	\$165.10	\$1,981.20	8.55%	\$13.00	\$156.00
Employee	Family	\$109.68	\$219.36	\$2,632.32	4.28%	\$9.00	\$108.00
EMPLOYER SHARE							
Employer	Single	\$284.99	\$569.98	\$6,839.76	-8.36%	-\$51.98	-\$623.76
Employer	Couple	\$549.43	\$1,098.86	\$13,186.32	11.10%	\$109.80	\$1,317.60
Employer	Employee/Child	\$395.37	\$790.74	\$9,488.88	29.80%	\$181.52	\$2,178.24
Employer	Employee/Children	\$540.02	\$1,080.04	\$12,960.48	13.56%	\$129.00	\$1,548.00
Employer	Family	\$717.54	\$1,435.08	\$17,220.96	3.82%	\$52.76	\$633.12

DENTAL - Blue Cross PPO Option

Position	Coverage	Amount per Pay Period	Amount per Month	Annual Amount	Percentage Increase	Monthly Increase	Annual Increase
EMPLOYEE SHARE							
Employee	Single	\$4.35	\$8.70	\$104.40	1.16%	\$0.10	\$1.20
Employee	Couple	\$8.68	\$17.36	\$208.32	4.58%	\$0.76	\$9.12
Employee	Employee/Child	\$13.38	\$26.76	\$321.12	109.06%	\$13.96	\$167.52
Employee	Employee/Children	\$13.38	\$26.76	\$321.12	58.34%	\$9.86	\$118.32
Employee	Family	\$19.75	\$39.50	\$474.00	85.10%	\$18.16	\$217.92
EMPLOYER SHARE							
Employer	Single	\$19.15	\$38.30	\$459.60	-33.11%	-\$18.96	-\$227.52
Employer	Couple	\$38.23	\$76.46	\$917.52	-22.56%	-\$22.28	-\$267.36
Employer	Employee/Child	\$58.94	\$117.88	\$1,414.56	48.09%	\$38.28	\$459.36
Employer	Employee/Children	\$58.94	\$117.88	\$1,414.56	7.81%	\$8.54	\$102.48
Employer	Family	\$87.01	\$174.02	\$2,088.24	9.82%	\$15.56	\$186.72

Total

Position	Coverage	Amount per Pay Period	Amount per Month	Annual Amount	Percentage Increase	Monthly Increase	Annual Increase
EMPLOYEE/EMPLOYER SHARE							
	Single	\$352.06	\$704.12	\$8,449.44	-7.98%	-\$61.10	-\$733.20
	Couple	\$680.33	\$1,360.66	\$16,327.92	8.52%	\$106.86	\$1,282.32
	Employee/Child	\$528.13	\$1,056.26	\$12,675.12	29.31%	\$239.44	\$2,873.28
	Employee/Children	\$694.89	\$1,389.78	\$16,677.36	13.05%	\$160.40	\$1,924.80
	Family	\$933.98	\$1,867.96	\$22,415.52	5.39%	\$95.48	\$1,145.76

DENTAL - Dental Blue Connect-Willamette Option

Position	Coverage	Amount per Pay Period	Amount per Month	Annual Amount	Percentage Increase	Monthly Increase	Annual Increase
EMPLOYEE SHARE							
Employee	Single	\$2.60	\$5.20	\$62.40	-39.53%	-\$3.40	-\$40.80
Employee	Couple	\$5.19	\$10.38	\$124.56	-37.47%	-\$6.22	-\$74.64
Employee	Employee/Child	\$8.01	\$16.02	\$192.24	25.16%	\$3.22	\$38.64
Employee	Employee/Children	\$8.01	\$16.02	\$192.24	-5.21%	-\$0.88	-\$10.56
Employee	Family	\$11.82	\$23.64	\$283.68	10.78%	\$2.30	\$27.60
EMPLOYER SHARE							
Employer	Single	\$16.68	\$33.36	\$400.32	-41.74%	-\$23.90	-\$286.80
Employer	Couple	\$33.27	\$66.54	\$798.48	-32.61%	-\$32.20	-\$386.40
Employer	Employee/Child	\$51.30	\$102.60	\$1,231.20	28.89%	\$23.00	\$276.00
Employer	Employee/Children	\$51.30	\$102.60	\$1,231.20	-6.16%	-\$6.74	-\$80.88
Employer	Family	\$75.75	\$151.50	\$1,818.00	-4.39%	-\$6.96	-\$83.52