



## Active Employee Biweekly Health and Dental Premiums

*Effective July 1, 2018 – June 30, 2019*

	Copay Plans				Coinsurance Plans					
	Kaiser		Cigna OAP-IN		Cigna OAP-IN		Cigna OAP		Delta Dental	
	Biweekly		Biweekly		Biweekly		Biweekly		Biweekly	
	Employee Contribution	County Contribution	Employee Contribution	County Contribution	Employee Contribution	County Contribution	Employee Contribution	County Contribution	Employee Contribution	County Contribution
<b>Full-time (30-40 hr/week)</b>										
Single	\$ 51.07	\$ 204.26	\$ 69.19	\$ 276.77	\$ 62.90	\$ 251.62	\$ 205.04	\$ 251.62	\$ 3.40	\$ 13.59
Employee + Spouse or Adult Dependent	\$ 134.42	\$ 403.26	\$ 177.31	\$ 531.92	\$ 161.19	\$ 483.59	\$ 452.59	\$ 483.59	\$ 8.49	\$ 25.46
Employee + Child(ren)	\$ 118.42	\$ 355.27	\$ 151.36	\$ 454.07	\$ 137.61	\$ 412.82	\$ 409.14	\$ 412.82	\$ 9.24	\$ 27.73
Family	\$ 194.82	\$ 584.45	\$ 259.48	\$ 778.42	\$ 235.89	\$ 707.66	\$ 662.30	\$ 707.66	\$ 12.95	\$ 38.84
<b>Part-time (20-29 hrs/week)</b>										
Single	\$ 127.66	\$ 127.67	\$ 172.98	\$ 172.98	\$ 157.26	\$ 157.26	\$ 299.40	\$ 157.26	\$ 8.49	\$ 8.50
Employee + Spouse or Adult Dependent	\$ 268.84	\$ 268.84	\$ 354.62	\$ 354.62	\$ 322.39	\$ 322.39	\$ 613.79	\$ 322.39	\$ 16.97	\$ 16.98
Employee + Child(ren)	\$ 236.84	\$ 236.85	\$ 302.72	\$ 302.72	\$ 275.22	\$ 275.22	\$ 546.75	\$ 275.22	\$ 18.48	\$ 18.49
Family	\$ 389.63	\$ 389.64	\$ 518.95	\$ 518.95	\$ 471.78	\$ 471.78	\$ 898.19	\$ 471.78	\$ 25.89	\$ 25.90
<b>Part-time (10-19 hrs/week)</b>										
Single	\$ 178.73	\$ 76.60	\$ 242.17	\$ 103.79	\$ 220.16	\$ 94.36	\$ 362.30	\$ 94.36	\$ 11.89	\$ 5.10
Employee + Spouse or Adult Dependent	\$ 376.38	\$ 161.30	\$ 496.46	\$ 212.77	\$ 451.35	\$ 193.43	\$ 742.75	\$ 193.43	\$ 23.76	\$ 10.19
Employee + Child(ren)	\$ 331.58	\$ 142.11	\$ 423.80	\$ 181.63	\$ 385.30	\$ 165.13	\$ 656.83	\$ 165.13	\$ 25.88	\$ 11.09
Family	\$ 545.49	\$ 233.78	\$ 726.53	\$ 311.37	\$ 660.49	\$ 283.07	\$ 1,086.90	\$ 283.07	\$ 36.25	\$ 15.54