

HEALTH, DENTAL AND VISION INSURANCE RATES APTA

2024-25

CDPHP (EPO--Model Plan) RATES				
	<u>TOTAL</u>	<u>EMPLOYERS SHARE-80%</u>	<u>EMPLOYEES SHARE-20%</u>	<u>21 PAYROLL DEDUCTIONS</u>
IND.	\$ 13,671.96	\$ 10,937.57	\$ 2,734.39	\$ 130.21
2 PERSON	\$ 27,107.52	\$ 21,686.02	\$ 5,421.50	\$ 258.17
FAMILY	\$ 36,320.52	\$ 29,056.42	\$ 7,264.10	\$ 345.91

BS PPO (812) RATES				
	<u>TOTAL</u>	<u>EMPLOYERS BASE PLAN SHARE</u>	<u>EMPLOYEES SHARE</u>	<u>21 PAYROLL DEDUCTIONS</u>
IND.	\$ 13,719.00	\$ 10,937.57	\$ 2,781.43	\$ 132.45
2 PERSON	\$ 34,913.52	\$ 21,686.02	\$ 13,227.50	\$ 629.88
FAMILY	\$ 36,524.16	\$ 29,056.42	\$ 7,467.74	\$ 355.61

DELTA DENTAL				
	<u>TOTAL</u>	<u>EMPLOYERS SHARE UP TO \$355</u>	<u>EMPLOYEES SHARE</u>	<u>21 PAYROLL DEDUCTIONS</u>
IND.	\$ 312.84	\$ 295.00	\$ 17.84	\$ 0.85
FAMILY	\$ 950.16	\$ 177.50	\$ 772.66	\$ 36.79

DAVIS VISION				
	<u>TOTAL</u>	<u>EMPLOYERS SHARE UP TO \$355</u>	<u>EMPLOYEES SHARE</u>	<u>21 PAYROLL DEDUCTIONS</u>
IND.	\$ 60.00	\$ 60.00	\$ -	\$ -
FAMILY	\$ 300.48	\$ 177.50	\$ 122.98	\$ 5.86

FAMILY DENTAL & INDIVIDUAL VISION				
	<u>TOTAL</u>	<u>EMPLOYERS SHARE UP TO \$355</u>	<u>EMPLOYEES SHARE</u>	<u>21 PAYROLL DEDUCTIONS</u>
IND.	\$ 60.00	\$ 60.00	\$ -	\$ -
FAMILY	\$ 950.16	\$ 295.00	\$ 655.16	\$ 31.20

FAMILY VISION & INDIVIDUAL DENTAL				
	<u>TOTAL</u>	<u>EMPLOYERS SHARE UP TO \$355</u>	<u>EMPLOYEES SHARE</u>	<u>21 PAYROLL DEDUCTIONS</u>
IND.	\$ 312.84	\$ 177.50	\$ 135.34	\$ 6.44
FAMILY	\$ 300.48	\$ 177.50	\$ 122.98	\$ 5.86

Dependents to 26

Contact Kimberly Nugent - Ext 7221