

2020 BI-WEEKLY MEDICAL AND DENTAL DEDUCTION RATES

Plan	Person(s) Covered	Premium Cost			Sheriff Command & Executive Staff	
		Annual	Monthly	COBRA	CAT 1 Unit members as of 9/23/2016	CAT 2 Joined Unit after 9/23/2016
Core Plan Value 2 pkg. #068 Code: ATC	Single	\$7,859.64	\$654.97	\$668.07	\$110.00	\$49.12
	Sponsor Two Person	\$18,135.24	\$1,511.27	\$1,541.50	\$110.00	\$113.35
	Family	\$20,917.68	\$1,743.14	\$1,778.00	\$110.00	\$130.74
	Family No Spouse	\$19,868.28	\$1,655.69	\$1,688.80	\$110.00	\$124.18
Signature Deduct* with \$500/\$1000 HSA Account Code DAG	Single	\$5,243.28	\$514.32	\$445.68	\$25.00	\$25.00
	Sponsor Two Person	\$12,076.80	\$1,184.66	\$1,026.53	\$50.00	\$50.00
	Family	\$13,916.76	\$1,365.14	\$1,182.92	\$50.00	\$50.00
	Family No Spouse	\$13,229.40	\$1,297.72	\$1,124.50	\$50.00	\$50.00
Obamacare AMV** HDHP	Single	\$3,609.12	\$391.76	\$399.60	\$10.00	\$10.00
	Family No Spouse	\$9,106.08	\$988.48	\$1,008.25	\$248.11	\$248.11
Dental - \$1200 cap	Single	\$472.80	\$39.40	\$40.19	\$4.00	\$4.00
	Family	\$1,014.00	\$84.50	\$86.19	\$8.00	\$8.00

* Signature Deduct is an HDHP that comes with County funded \$500/\$1000 HSA for out-of-pockets expenses

** Obamacare AMV (Affordable Minimum Value) is a \$6,000/\$12,000 HDHP plan offered in compliance with Obamacare employer mandates.