

**2021 BI-WEEKLY MEDICAL AND DENTAL  
DEDUCTION RATES FOR DEPARTMENT HEADS AND M&P**

Plan	Persons Covered	Premium Cost			M&P	
		Annual	Monthly	COBRA	CAT 1 Hired before 1/1/06	CAT 2 Hired on or after 1/1/06
<b>Simply Blue Copay</b>  Code: CGY	Single	\$8,095.56	\$674.63	\$688.12	\$50.60	\$84.33
	Sponsor Two Person	\$18,679.44	\$1,556.62	\$1,587.75	\$116.75	\$194.58
	Family	\$21,545.40	\$1,795.45	\$1,831.36	\$134.66	\$224.43
	Family No Spouse	\$20,464.56	\$1,705.38	\$1,739.49	\$127.90	\$213.17
<b>Simply Blue PPO Health Savings Account*</b>  Code: CGZ	Single	\$6,357.12	\$529.76	\$540.36	\$26.49	\$66.22
	Sponsor Two Person	\$14,642.40	\$1,220.20	\$1,244.60	\$61.01	\$152.53
	Family	\$16,873.32	\$1,406.11	\$1,434.23	\$70.31	\$175.76
	Family No Spouse	\$16,039.92	\$1,336.66	\$1,363.39	\$66.83	\$167.08
<b>Obamacare AMV** HDHP</b>	Single	\$4,842.24	\$403.52	\$411.59	\$10.00	\$10.00
	Family No Spouse	\$12,217.68	\$1,018.14	\$1,038.50	\$248.11	\$248.11
<b>Dental</b>	Single	\$445.20	\$37.10	\$37.84	\$0.33	\$0.33
	Family	\$954.00	\$79.50	\$81.09	\$0.82	\$0.82

\* County funds \$900 towards the Single Deductible or \$2500 towards the Family Deductible for the Health Savings

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