

HCPSS ANNUAL COSTS

Rate Chart for Active Full-time / Part-Time Employees with a Hire Date on or Before 6/30/2011

	Total Cost 1/1/17 - 12/31/17 (For Information Only)	Employee Cost 1/1/17 - 12/31/17	Employee Cost 1/1/17 - 12/31/17 Per Pay, 20 Periods	Benefit Credits	Benefit Credits Per Pay, 20 Periods
No Medical Coverage Through School System					
No Coverage	\$ -	\$ -	\$ -	\$ 750	\$ 37.50
With Medical Coverage Through The School System					
Aetna Open Choice PPO					
Individual	\$ 7,003	\$ 910	\$ 45.52	\$ 420	\$ 21.00
Parent/Child(ren)	13,642	1,773	88.67	420	21.00
Husband/Wife	15,354	1,996	99.80	420	21.00
Family	21,958	2,855	142.73	420	21.00
Open Access Aetna Select HMO					
Individual	\$ 5,708	\$ 742	\$ 37.10	\$ 420	\$ 21.00
Parent/Child(ren)	11,121	1,446	72.29	420	21.00
Husband/Wife	12,514	1,627	81.34	420	21.00
Family	17,896	2,327	116.33	420	21.00
BlueChoice HMO Open Access					
Individual	\$ 5,961	\$ 775	\$ 38.74	\$ 420	\$ 21.00
Parent/Child	11,642	1,513	75.67	420	21.00
Husband/Wife	13,118	1,705	85.27	420	21.00
Family	18,799	2,444	122.20	420	21.00

HCPSS ANNUAL COSTS

Rate Chart for Active Full-time / Part -time Employees with a Hire Date of 07/01/2011 and After

	Total Cost 1/1/17 - 12/31/17 (For Information Only)	Employee Cost 1/1/17 - 12/31/17	Employee Cost 1/1/17 - 12/31/17 Per Pay, 20 Periods	Benefit Credits	Benefit Credits Per Pay, 20 Periods
No Medical Coverage Through School System					
No Coverage	\$ -	\$ -	\$ -	\$ 750	\$ 37.50
With Medical Coverage Through The School System					
Aetna Open Choice PPO					
Individual	\$ 7,003	\$ 1,050	\$ 52.52	\$ 420	\$ 21.00
Parent/Child(ren)	13,642	2,046	102.31	420	21.00
Husband/Wife	15,354	2,303	115.15	420	21.00
Family	21,958	3,294	164.68	420	21.00
Open Access Aetna Select HMO					
Individual	\$ 5,708	\$ 856	\$ 42.81	\$ 420	\$ 21.00
Parent/Child(ren)	11,121	1,668	83.41	420	21.00
Husband/Wife	12,514	1,877	93.86	420	21.00
Family	17,896	2,684	134.22	420	21.00
BlueChoice HMO Open Access					
Individual	\$ 5,961	\$ 894	\$ 44.70	\$ 420	\$ 21.00
Parent/Child	11,642	1,746	87.31	420	21.00
Husband/Wife	13,118	1,968	98.39	420	21.00
Family	18,799	2,820	140.99	420	21.00

HCPSS Annual Dental Rates 2017

Coverage	<u>Annual Rates</u>	<u>Per Pay, 20 Periods</u>	
Delta Dental — PPO			
Individual	\$ 380	\$ 19.02	
Parent/Child(ren)	614	30.70	
Husband/Wife	876	43.81	
Family	1,181	59.06	
CIGNA DHMO			
Individual	\$ 134	\$ 6.71	
Parent/Child	301	15.04	
Husband/Wife	228	11.40	
Family	423	21.17	

HCPSS Annual Vision Rates 2017

Coverage	<u>Annual Rates</u>	<u>Per Pay, 20 Periods</u>	
VSP Vision			
Individual	\$ 79	\$ 3.96	
Parent/Child(ren)	108	5.39	
Husband/Wife	159	7.93	
Family	201	10.07	