



2020		Employed		
Group	Coverage	Premium	3-24 mths Employee Monthly Cost	25+ mths Employee Monthly Cost
Health 3500	Single	596.10	319.85	43.60
	Single Plus Dep	1033.40	757.15	480.90
	Family	1583.50	1307.25	1031.00
Health 5000	Single	552.50	276.25	0.00
	Single Plus Dep	957.50	681.25	405.00
	Family	1467.00	1190.75	914.50
Dental	Single	36.92	18.46	
	EE + Spouse	81.72	63.26	
	EE + Children	93.40	74.94	
	Family	126.20	107.74	
Vision	Single	8.24	4.12	
	Family	18.95	14.83	