Health Insurance/Anthem PPO Plan

	Plan Option 1 \$750/\$1,500 Deductible \$2,500/\$5,000 Out of Pocket Employee Monthly Contributions		Plan Option 2 \$1,500/\$3,000 Deductible \$3,250/\$6,500 Out of Pocket Employee Monthly Contributions		
Salary Range	Single	Family	Single	Family	
\$1 - \$27,335	\$90.38	\$241.98	\$71.90	\$193.97	
\$27,336 - \$49,398	\$97.59	\$261.41	\$79.11	\$213.40	
\$49,399 - \$71,470	\$111.95	\$300.16	\$93.47	\$252.15	
\$71,471 - \$93,635	\$126.36	\$339.02	\$107.88	\$291.01	
93,636 +	\$140.72	\$377.77	\$ 122.24	\$329.76	

Dental Insurance/Aetna Plan

High PPO Plan		Medium PPO Plan			Low PPO Plan	
Employee Monthly Contributions		Employee Monthly Contributions			Employee Monthly Contributions	
Single	Family	Single	Family	· _	Single	Family
\$16.05	\$46.21	\$12.97	\$37.40		\$7.26	\$24.02