



COCONINO COUNTY

7/1/09 - 6/30/10

MEDICAL INSURANCE COST TABLE

	Monthly Premium	County Cost	Employee Cost per Month	Employee Cost per Paycheck
Buy-Up Plan				
Employee	\$ 454.08	\$ 428.60	\$ 25.48	\$ 12.74
Dependent	\$ 702.16	\$ 364.52	\$ 337.64	\$ 168.82
Total			\$ 363.12	\$ 181.56
Base Plan				
Employee	\$428.60	\$428.60	0	
Dependent	\$662.76	\$364.52	\$298.24	\$ 149.12
HDHP/HSA				
Employee	\$384.48*	\$428.60**	0	
Dependent	\$581.66	\$364.52	\$217.14	\$ 108.57

*Includes \$4.95 administrative fee for Health Savings Account.

**Assumes the employer will fund \$428.60, including a deposit of \$44.12 per month to the employee HSA or FSA account for a total of \$529.44 annually.

DENTAL INSURANCE COST TABLE

Base Plan	Monthly Premium	County Cost	Employee Cost per Month	Employee Cost per Paycheck
Employee	\$ 32.98	\$ 32.98		
Dependents	\$ 42.58	\$ 1.71	\$ 40.88	\$ 20.44
Buy-Up Plan				
\$2,000 Annual Benefit				
Employee	\$ 36.60	\$ 33.14	\$ 3.46	
Dependents	\$ 47.20	\$ 1.87	\$ 45.34	\$ 22.67

VISION INSURANCE COST TABLE

	Monthly Premium	County Cost	Employee Cost per Month	Employee Cost per Paycheck
Core - Employee Only	\$.80	\$.80		
Employee Buy-up	\$ 7.25	\$.80	\$ 6.45	\$ 3.23
Employee & Family Buy-up	\$ 15.58	\$.80	\$ 14.78	\$ 7.39



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Supplemental Life Rate Table – Employee

Age	Rate per \$10,000 Per Month	Rate per \$10,000 Per Pay Period (24)
Under 30	\$ 0.50	\$ 0.250
30 – 34	\$ 0.70	\$ 0.350
35 – 39	\$ 0.70	\$ 0.350
40 – 44	\$ 0.80	\$ 0.400
45 – 49	\$ 1.20	\$ 0.600
50 – 54	\$ 1.90	\$ 0.950
55 – 59	\$ 3.50	\$ 1.750
60 – 64	\$ 5.40	\$ 2.700
65 – 69	\$ 10.40	\$ 5.200
70 & Over	\$ 16.80	\$ 8.400

Supplemental Life Rate Table – Spouse

Age	Rate per \$10,000 Per Month	Rate per \$10,000 Per Pay Period (24)
Under 30	\$ 0.50	\$ 0.250
30 – 34	\$ 0.70	\$ 0.350
35 – 39	\$ 0.80	\$ 0.400
40 – 44	\$ 0.80	\$ 0.400
45 – 49	\$ 1.30	\$ 0.650
50 – 54	\$ 1.90	\$ 0.950
55 – 59	\$ 3.60	\$ 1.800
60 – 64	\$ 5.50	\$ 2.750
65 – 69	\$ 10.60	\$ 5.300

Supplemental Life Rate Table – Child

Rate per \$10,000 Per Month	Rate per \$10,000 Per Pay Period (24)
\$ 0.70	\$ 0.350