# RATES 2023 EMPLOYEE CONTRIBUTIONS



Your contributions toward the cost of medical, dental and vision coverage are automatically deducted from your paycheck before taxes.

### **MEDICAL COVERAGE**

Coverage Tier	Monthly Employee Contribution				
	Traditional Plan				
	\$16.00/hour \$33,280/annual	\$20.00/hour \$41,600/annual	\$24.00/hour \$49,920/annual	\$49,920/annual	
Employee Only	\$177.01	\$244.99	\$312.97	\$358.28	
Employee + Spouse/DP	\$372.80	\$508.75	\$644.71	\$735.34	
Employee + Child(ren)	\$318.62	\$440.98	\$563.34	\$644.91	
Family	\$477.58	\$681.51	\$885.45	\$1021.40	
Coverage Tier	Monthly Employee Contribution				
	НДНР				
	\$16.00/hour \$33,280/annual	\$20.00/hour \$41,600/annual	\$24.00/hour \$49,920/annual	\$49,920/annual	
Employee Only	\$147.52	\$207.52	\$257.52	\$257.52	
Employee + Spouse/DP	\$270.09	\$390.09	\$515.09	\$515.09	
Employee + Child(ren)	\$250.60	\$358.60	\$463.60	\$463.60	
Family	\$354.02	\$534.02	\$714.02	\$734.02	
Coverage Tier	Monthly Employee Contribution				
	Savers Plan				
	\$16.00/hour \$33,280/annual	\$20.00/hour \$41,600/annual	\$24.00/hour \$49,920/annual	\$49,920/annual	
Employee Only	\$88.47	\$125.47	\$156.47	\$156.47	
Employee + Spouse/DP	\$169.57	\$247.57	\$328.57	\$328.57	
Employee + Child(ren)	\$156.72	\$227.72	\$295.72	\$295.72	
Family	\$245.87	\$362.87	\$479.87	\$492.87	



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#### **DENTAL COVERAGE**

Coverage Tier	Monthly Employee Contribution
Employee Only	\$17.72
Employee + Spouse/DP	\$35.82
Employee + Child(ren)	\$41.39
Family	\$68.11

### **VOLUNTARY VISION COVERAGE**

Coverage Tier	Monthly Employee Contribution		
Employee Only	\$5.02		
Employee + Spouse/DP	\$10.05		
Employee + Child(ren)	\$10.26		
Family	\$15.28		

**Domestic Partner (DP) Contributions:** Your contributions to cover an DP are the same as those to cover a legal spouse. However, because of Internal Revenue Code (IRC) restrictions, in most cases, the fair market value of your DP's or DP's children's (if they are not federal tax dependents) healthcare coverage will be taxable to you as imputed income. This value is determined by the amount that The Company pays in premium for DP coverage. This amount raises your taxable gross income. Also, the payroll deductions to cover an DP must be taken on an after-tax basis.

### **VOLUNTARY ACCIDENT INSURANCE**

Coverage Tier	Monthly Employee Contribution
Employee Only	\$4.84
Employee + Spouse/DP	\$7.73
Employee + Child(ren)	\$8.79
Family	\$13.82

### **VOLUNTARY HOSPITAL INDEMNITY INSURANCE**

Coverage Tier	Monthly Employee Contribution		
	\$500 Benefit	\$1,000 Benefit	
Employee Only	\$7.86	\$13.06	
Employee +	\$15.98	\$26.59	
Employee +	\$13.26	\$22.62	
Family	\$22.75	\$38.57	

### **VOLUNTARY LIFE**

	Monthly Employee Contribution				
	Employee/Spouse Rates per \$1,000 of coverage				
Age	Rate	Age	Rate	Age	Rate
<34	\$0.057	50-54	\$0.323	70-74	\$2.157
35-39	\$0.067	55-59	\$0.580	75+	\$2.157
40-44	\$0.114	60-64	\$0.941		
45-49	\$0.190	65-69	\$1.425		



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### **VOLUNTARY CRITICAL ILLNESS**

	Monthly Employee Contribution				
10,000 Plan					
Age	Employee Only	Employee + Spouse/DP	Employee + Child(ren)	Family	
18-24	\$2.10	\$3.05	\$2.43	\$3.83	
25-29	\$2.80	\$4.20	\$3.13	\$4.53	
30-34	\$3.60	\$5.40	\$3.93	\$5.73	
35-39	\$4.90	\$7.30	\$5.23	\$7.63	
40-44	\$7.40	\$11.10	\$7.73	\$11.43	
45-49	\$11.50	\$17.25	\$11.83	\$17.58	
50-54	\$16.00	\$24.20	\$16.33	\$24.53	
55-59	\$22.40	\$32.85	\$22.73	\$33.18	
60-64	\$31.30	\$46.60	\$31.63	\$46.93	
65-59	\$46.90	\$65.75	\$47.23	\$66.08	
70-74**	\$29.30	\$42.70	\$29.63	\$43.03	
75-79**	\$43.30	\$57.93	\$43.63	\$58.25	
20,000 Plan				_	
Age	Employee Only	Employee + Spouse/DP	Employee + Child(ren)	Family	
18-24	\$4.20	\$6.10	\$4.85	\$6.75	
25-29	\$5.60	\$8.40	\$6.25	\$9.05	
30-34	\$7.20	\$10.80	\$7.85	\$11.45	
35-39	\$9.80	\$14.60	\$10.45	\$15.25	
40-44	\$14.80	\$22.20	\$15.45	\$22.85	
45-49	\$23.00	\$34.50	\$23.65	\$35.15	
50-54	\$32.00	\$48.40	\$32.65	\$49.05	
55-59	\$44.80	\$65.70	\$45.45	\$66.35	
60-64	\$62.60	\$93.20	\$63.25	\$93.85	
65-59	\$93.80	\$131.50	\$94.45	\$132.15	
70-74**	\$58.60	\$85.40	\$59.25	\$86.05	
75-79**	\$86.60	\$115.85	\$87.25	\$116.50	

\*Deductions for Accident, Hospital Indemnity, Critical Illness and Voluntary Life/AD&D are taken from your paycheck after taxes.

\*\*50% benefits reduction is applied for ages 70+

