

BENEFITS

Medical \$500 PPO	
Costs are per pay period*	
Employee	\$ 73.21
Employee + Spouse	\$ 234.27
Employee + Child(ren)	\$ 204.99
Employee + Family	\$ 382.16

Medical \$1500 PPO	
Costs are per pay period*	
Employee	\$ 68.17
Employee + Spouse	\$ 223.69
Employee + Child(ren)	\$ 195.41
Employee + Family	\$ 366.48

Medical \$6350 HDHP	
Costs are per pay period*	
Employee	\$ 51.87
Employee + Spouse	\$ 189.46
Employee + Child(ren)	\$ 164.44
Employee + Family	\$ 315.79

Dental	
Costs are per pay period*	
Employee	\$ 9.00
Employee + Spouse	\$ 17.99
Employee + Child(ren)	\$ 18.83
Employee + Family	\$ 28.73

Vision	
Costs are per pay period*	
Employee	\$ 1.54
Employee + Spouse	\$ 2.93
Employee + Child(ren)	\$ 3.08
Employee + Family	\$ 4.53

*Amounts above are the weekly contribution deducted per paycheck 4x per month. A month with 5 weeks will not have a benefits deduction reflected.

**Amounts above reflect the employee (your) portion. NextGen's 50% of premium has already been taken into account.