

## 10th and Monthly Rates

Plan	Tier	Monthly	Tenthly
UHC Network 1	Single	\$692.00	\$830.40
	Two-Party	\$1,365.00	\$1,638.00
	Family	\$1,917.00	\$2,300.40
UHC Network 2	Single	\$935.00	\$1,122.00
	Two-Party	\$1,851.00	\$2,221.20
	Family	\$2,600.00	\$3,120.00
UHC PPO	Single	\$939.00	\$1,126.80
	Two-Party	\$1,830.00	\$2,196.00
	Family	\$2,558.00	\$3,069.60
Alliance	Single	\$708.00	\$849.60
	Two-Party	\$1,337.00	\$1,604.40
	Family	\$1,862.00	\$2,234.40
Kaiser	Single	\$632.00	\$758.40
	Two-Party	\$1,247.00	\$1,496.40
	Family	\$1,758.00	\$2,109.60
UHC Journey-Harmony	Single	\$598.00	\$717.60
	Two-Party	\$1,178.00	\$1,413.60
	Family	\$1,638.00	\$1,965.60
Delta PPO	Supercomposite	\$78.00	\$93.60
DeltaCare USA	Supercomposite	\$35.60	\$42.72
Western Dental	Supercomposite	\$30.04	\$36.05
VSP	Supercomposite	\$8.00	\$9.60

## Job Share Splits- Medical

Split	UHC HMO Network 1 - Single		UHC HMO Network 1 - Two-Party		UHC HMO Network 1 - Family	
	Single	Employee	Employer	Two-Party	Employee	Employer
20	\$830.40	\$664.32	\$166.08	\$1,638.00	\$1,310.40	\$327.60
30	\$830.40	\$581.28	\$249.12	\$1,638.00	\$1,146.60	\$491.40
40	\$830.40	\$498.24	\$332.16	\$1,638.00	\$982.80	\$655.20
50	\$830.40	\$415.20	\$415.20	\$1,638.00	\$819.00	\$819.00
60	\$830.40	\$332.16	\$498.24	\$1,638.00	\$655.20	\$982.80
70	\$830.40	\$249.12	\$581.28	\$1,638.00	\$491.40	\$1,146.60
80	\$830.40	\$166.08	\$664.32	\$1,638.00	\$327.60	\$1,310.40
90	\$830.40	\$83.04	\$747.36	\$1,638.00	\$163.80	\$1,474.20
Split	UHC HMO Network 2 - Single		UHC HMO Network 2 - Two-Party		UHC HMO Network 2 - Family	
	Single	Employee	Employer	Two-Party	Employee	Employer
20	\$1,122.00	\$897.60	\$224.40	\$2,221.20	\$1,776.96	\$444.24
30	\$1,122.00	\$785.40	\$336.60	\$2,221.20	\$1,554.84	\$666.36
40	\$1,122.00	\$673.20	\$448.80	\$2,221.20	\$1,332.72	\$888.48
50	\$1,122.00	\$561.00	\$561.00	\$2,221.20	\$1,110.60	\$1,110.60
60	\$1,122.00	\$448.80	\$673.20	\$2,221.20	\$888.48	\$1,332.72
70	\$1,122.00	\$336.60	\$785.40	\$2,221.20	\$666.36	\$1,554.84
80	\$1,122.00	\$224.40	\$897.60	\$2,221.20	\$444.24	\$1,776.96
90	\$1,122.00	\$112.20	\$1,009.80	\$2,221.20	\$222.12	\$1,999.08
Split	UHC PPO - Single		UHC PPO - Two-Party		UHC PPO - Family	
	Single	Employee	Employer	Two-Party	Employee	Employer
20	\$1,126.80	\$901.44	\$225.36	\$2,196.00	\$1,756.80	\$439.20
30	\$1,126.80	\$788.76	\$338.04	\$2,196.00	\$1,537.20	\$658.80
40	\$1,126.80	\$676.08	\$450.72	\$2,196.00	\$1,317.60	\$878.40
50	\$1,126.80	\$563.40	\$563.40	\$2,196.00	\$1,098.00	\$1,098.00
60	\$1,126.80	\$450.72	\$676.08	\$2,196.00	\$878.40	\$1,317.60
70	\$1,126.80	\$338.04	\$788.76	\$2,196.00	\$658.80	\$1,537.20
80	\$1,126.80	\$225.36	\$901.44	\$2,196.00	\$439.20	\$1,756.80
90	\$1,126.80	\$112.68	\$1,014.12	\$2,196.00	\$219.60	\$1,976.40

# Job Share Splits- Medical

		UHC Alliance - Single		UHC Alliance - Two-Party		UHC Alliance - Family			
Split	Single	Employee	Employer	Two-Party	Employee	Employer	Family	Employee	Employer
20	\$849.60	\$679.68	\$169.92	\$1,604.40	\$1,283.52	\$320.88	\$2,234.40	\$1,787.52	\$446.88
30	\$849.60	\$594.72	\$254.88	\$1,604.40	\$1,123.08	\$481.32	\$2,234.40	\$1,564.08	\$670.32
40	\$849.60	\$509.76	\$339.84	\$1,604.40	\$962.64	\$641.76	\$2,234.40	\$1,340.64	\$893.76
50	\$849.60	\$424.80	\$424.80	\$1,604.40	\$802.20	\$802.20	\$2,234.40	\$1,117.20	\$1,117.20
60	\$849.60	\$339.84	\$509.76	\$1,604.40	\$641.76	\$962.64	\$2,234.40	\$893.76	\$1,340.64
70	\$849.60	\$254.88	\$594.72	\$1,604.40	\$481.32	\$1,123.08	\$2,234.40	\$670.32	\$1,564.08
80	\$849.60	\$169.92	\$679.68	\$1,604.40	\$320.88	\$1,283.52	\$2,234.40	\$446.88	\$1,787.52
90	\$849.60	\$84.96	\$764.64	\$1,604.40	\$160.44	\$1,443.96	\$2,234.40	\$223.44	\$2,010.96
		Kaiser - Single		Kaiser - Two-Party		Kaiser - Family			
Split	Single	Employee	Employer	Two-Party	Employee	Employer	Family	Employee	Employer
20	\$758.40	\$606.72	\$151.68	\$1,496.40	\$1,197.12	\$299.28	\$2,109.60	\$1,687.68	\$421.92
30	\$758.40	\$530.88	\$227.52	\$1,496.40	\$1,047.48	\$448.92	\$2,109.60	\$1,476.72	\$632.88
40	\$758.40	\$455.04	\$303.36	\$1,496.40	\$897.84	\$598.56	\$2,109.60	\$1,265.76	\$843.84
50	\$758.40	\$379.20	\$379.20	\$1,496.40	\$748.20	\$748.20	\$2,109.60	\$1,054.80	\$1,054.80
60	\$758.40	\$303.36	\$455.04	\$1,496.40	\$598.56	\$897.84	\$2,109.60	\$843.84	\$1,265.76
70	\$758.40	\$227.52	\$530.88	\$1,496.40	\$448.92	\$1,047.48	\$2,109.60	\$632.88	\$1,476.72
80	\$758.40	\$151.68	\$606.72	\$1,496.40	\$299.28	\$1,197.12	\$2,109.60	\$421.92	\$1,687.68
90	\$758.40	\$75.84	\$682.56	\$1,496.40	\$149.64	\$1,346.76	\$2,109.60	\$210.96	\$1,898.64
		UHC Journey-Harmony - Single		UHC Journey-Harmony - Two-Party		UHC Journey-Harmony - Family			
Split	Single	Employee	Employer	Two-Party	Employee	Employer	Family	Employee	Employer
20	\$717.60	\$574.08	\$143.52	\$1,413.60	\$1,130.88	\$282.72	\$1,965.60	\$1,572.48	\$393.12
30	\$717.60	\$502.32	\$215.28	\$1,413.60	\$989.52	\$424.08	\$1,965.60	\$1,375.92	\$589.68
40	\$717.60	\$430.56	\$287.04	\$1,413.60	\$848.16	\$565.44	\$1,965.60	\$1,179.36	\$786.24
50	\$717.60	\$358.80	\$358.80	\$1,413.60	\$706.80	\$706.80	\$1,965.60	\$982.80	\$982.80
60	\$717.60	\$287.04	\$430.56	\$1,413.60	\$565.44	\$848.16	\$1,965.60	\$786.24	\$1,179.36
70	\$717.60	\$215.28	\$502.32	\$1,413.60	\$424.08	\$989.52	\$1,965.60	\$589.68	\$1,375.92
80	\$717.60	\$143.52	\$574.08	\$1,413.60	\$282.72	\$1,130.88	\$1,965.60	\$393.12	\$1,572.48
90	\$717.60	\$71.76	\$645.84	\$1,413.60	\$141.36	\$1,272.24	\$1,965.60	\$196.56	\$1,769.04

*Job Share - Benefit Rates - Plan Year 2020\_FINAL Job Shr Splt - Dent and Vision*

Split	Delta Dental PPO		DeltaCare USA		Western Dental	
	Rate	Employee Employer	Rate	Employee Employer	Rate	Employee Employer
20	\$93.60	\$74.88 \$18.72	\$42.72	\$34.18 \$8.54	\$36.05	\$28.84 \$7.21
30	\$93.60	\$65.52 \$28.08	\$42.72	\$29.90 \$12.82	\$36.05	\$25.23 \$10.82
40	\$93.60	\$56.16 \$37.44	\$42.72	\$25.63 \$17.09	\$36.05	\$21.63 \$14.42
50	\$93.60	\$46.80 \$46.80	\$42.72	\$21.36 \$21.36	\$36.05	\$18.02 \$18.03
60	\$93.60	\$37.44 \$56.16	\$42.72	\$17.09 \$25.63	\$36.05	\$14.42 \$21.63
70	\$93.60	\$28.08 \$65.52	\$42.72	\$12.82 \$29.90	\$36.05	\$10.81 \$25.24
80	\$93.60	\$18.72 \$74.88	\$42.72	\$8.54 \$34.18	\$36.05	\$7.21 \$28.84
90	\$93.60	\$9.36 \$84.24	\$42.72	\$4.27 \$38.45	\$36.05	\$3.60 \$32.45
<b>VSP</b>						
20	\$9.60	\$7.68 \$1.92				
30	\$9.60	\$6.72 \$2.88				
40	\$9.60	\$5.76 \$3.84				
50	\$9.60	\$4.80 \$4.80				
60	\$9.60	\$3.84 \$5.76				
70	\$9.60	\$2.88 \$6.72				
80	\$9.60	\$1.92 \$7.68				
90	\$9.60	\$0.96 \$8.64				