

# July 2017 Rates

	<b>P06548</b> PPO Platinum Level	<b>PD3006</b> PPO Gold Level	<b>PD3014</b> PPO Silver Level	<b>PD3018</b> HSA Silver Level	Dental
Deductible	\$500	\$750	\$1,000	\$4,000	\$50
Coinsurance	80%	80%	80%	100%	80%
Out of Pocket	\$3,000	\$5,000	\$6,500	\$4,000	
Office Visit Co-Pay					
PCP	\$20	\$30	\$40	N/A	
Specialist	\$20	\$50	\$60	N/A	
Prescription				Deductible	
Formulary Generic	\$5	\$5	\$5	Deductible	
Non-Formulary Generic	\$5	\$5	\$15	Deductible	
Formulary Brand	\$25	\$50	\$60	Deductible	
Non-Formulary Brand	\$50	\$100	\$110	Deductible	
Non-Formulary Brand for which there is a Generic available	\$50	\$100	\$110 + the difference	Deductible	
Specialty Drugs	\$50	\$150	70%	Deductible	
Separate Rx Out of Pocket	\$1,000	\$1,000	N/A	N/A	
Vision Coverage	Yes	Yes	Yes	Yes	
Employee Dental Coverage	Yes	Yes	Yes	Yes	

<b>Monthly Employee Costs</b>					
Employee Only Cost (includes Dental)	\$128	\$76	\$0	\$0	\$0
To Add Spouse Only	\$600	\$548	\$472	\$474	\$30
To Add Child(ren)	\$410	\$374	\$326	\$314	\$27
To Add Family (Spouse and Children)	\$840	\$768	\$670	\$668	\$57
To Add Child(ren) Dual Spouse	\$360	\$324	\$276	\$243	

## Rates

Single	\$600	206	\$548	80	\$472	665	\$474	55	\$28	1040
Single + Spouse	\$1,200	24	\$1,096	4	\$944	25	\$948	2	\$58	68
Single + Children	\$1,010	38	\$922	9	\$798	29	\$788	9	\$55	98
Dual spouse to add children	\$960	17	\$872	3	\$748	20	\$738	1	\$0	0
Family	\$1,440	56	\$1,316	14	\$1,142	68	\$1,142	6	\$85	174
Retiree Over 65 Single	\$240	28	\$219	1	\$189	3	\$189	0	\$190	0
Retiree Over 65 Family	\$480	15	\$438	0	\$378	0	\$378	0	\$380	0
Monthly Revenue	\$294,460		\$77,781		\$453,805		\$42,648		\$53,244	
Annual Revenue	\$3,533,520		\$933,372		\$5,445,660		\$511,776		\$638,928	

Expected Costs **\$11,870,308**

**\$11,063,256**

**Total expected revenue all sources**