

Employee costs are in Italics

Licensed Employee* Full Time - Single Policy	Plan	Employee Out-of-Pocket Maximum by Plan	2021 HRA/HSA** Funding by Employer	Annual Out-of-Pocket Exposure for Employee <i>After HRA/HSA**</i>	Total Monthly Premium 7/1/2021	Total Annual Premium	Annual Employer Premium Share	Annual Employee Premium Share	Employee Monthly Premium Share	Total Employee Annual Premium & Out-of-Pocket Exposure
Single	Platinum	\$2,800	\$2,100	\$700	\$889.59	\$10,675.08	\$7,644.67	\$3,030.41	\$252.53	\$3,730.41
Single	Gold	\$3,100	\$2,100	\$1,000	\$868.05	\$10,416.60	\$7,644.67	\$2,771.93	\$230.99	\$3,771.93
Single	Gold CDHP	\$2,500	\$2,100	\$400	\$796.32	\$9,555.84	\$7,644.67	\$1,911.17	\$159.26	\$2,311.17
Single	Silver CDHP	\$4,000	\$2,100	\$1,900	\$754.38	\$9,052.56	\$7,242.05	\$1,810.51	\$150.88	\$3,710.51
*If you are unsure if these costs apply to you, see "What employee segment am I in?" on our website.										
**HSA only available on Silver Plan										
Employer premium contributions for the <u>Platinum and Gold Plans</u> are identical to the employer premium contribution to the <u>Gold CDHP</u> .										
Premiums are set on a fiscal-year basis. These rates reflect changes as of July 1, 2021.										

Licensed Employee* Full Time - Two-Person Policy	Plan	Employee Out-of-Pocket Maximum by Plan	2021 HRA/HSA** Funding by Employer	Annual Out-of-Pocket Exposure for Employee <i>After HRA/HSA**</i>	Total Monthly Premium 7/1/2021	Total Annual Premium	Annual Employer Premium Share	Annual Employee Premium Share	Employee Monthly Premium Share	Total Employee Annual Premium & Out-of-Pocket Exposure
Two Person	Platinum	\$5,600	\$4,200	\$1,400	\$1,779.18	\$21,350.16	\$14,357.18	\$6,992.98	\$582.75	\$8,392.98
Two Person	Gold	\$6,200	\$4,200	\$2,000	\$1,736.09	\$20,833.08	\$14,357.18	\$6,475.90	\$539.66	\$8,475.90
Two Person	Gold CDHP	\$5,000	\$4,200	\$800	\$1,495.54	\$17,946.48	\$14,357.18	\$3,589.30	\$299.11	\$4,389.30
Two Person	Silver CDHP	\$8,000	\$4,200	\$3,800	\$1,508.77	\$18,105.24	\$14,484.19	\$3,621.05	\$301.75	\$7,421.05
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**HSA only available on Silver Plan										
Employer premium contributions for the <u>Platinum and Gold Plans</u> are identical to the employer premium contribution to the <u>Gold CDHP</u> .										
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Licensed Employee* Full Time - Parent/Child(ren) Policy	Plan	Employee Out-of-Pocket Maximum by Plan	2021 HRA/HSA** Funding by Employer	Annual Out-of-Pocket Exposure for Employee <i>After HRA/HSA**</i>	Total Monthly Premium 7/1/2021	Total Annual Premium	Annual Employer Premium Share	Annual Employee Premium Share	Employee Monthly Premium Share	Total Employee Annual Premium & Out-of-Pocket Exposure
Parent/Child(ren)	Platinum	\$5,600	\$4,200	\$1,400	\$1,487.53	\$17,850.36	\$11,819.04	\$6,031.32	\$502.61	\$7,431.32
Parent/Child(ren)	Gold	\$6,200	\$4,200	\$2,000	\$1,452.73	\$17,432.76	\$11,819.04	\$5,613.72	\$467.81	\$7,613.72
Parent/Child(ren)	Gold CDHP	\$5,000	\$4,200	\$800	\$1,231.15	\$14,773.80	\$11,819.04	\$2,954.76	\$246.23	\$3,754.76
Parent/Child(ren)	Silver CDHP	\$8,000	\$4,200	\$3,800	\$1,271.68	\$15,260.16	\$12,208.13	\$3,052.03	\$254.34	\$6,852.03
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Licensed Employee* Full Time - Family Policy	Plan	Employee Out-of-Pocket Maximum by Plan	2021 HRA/HSA** Funding by Employer	Annual Out-of-Pocket Exposure for Employee <i>After HRA/HSA**</i>	Total Monthly Premium 7/1/2021	Total Annual Premium	Annual Employer Premium Share	Annual Employee Premium Share	Employee Monthly Premium Share	Total Employee Annual Premium & Out-of-Pocket Exposure
Family	Platinum	\$5,600	\$4,200	\$1,400	\$2,516.63	\$30,199.56	\$21,175.97	\$9,023.59	\$751.97	\$10,423.59
Family	Gold	\$6,200	\$4,200	\$2,000	\$2,457.21	\$29,486.52	\$21,175.97	\$8,310.55	\$692.55	\$10,310.55
Family	Gold CDHP	\$5,000	\$4,200	\$800	\$2,205.83	\$26,469.96	\$21,175.97	\$5,293.99	\$441.17	\$6,093.99
Family	Silver CDHP	\$8,000	\$4,200	\$3,800	\$2,146.73	\$25,760.76	\$20,608.61	\$5,152.15	\$429.35	\$8,952.15
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Premiums are set on a fiscal-year basis. These rates reflect changes as of July 1, 2021.										