

### Non-Licensed Employees

Non-Licensed Employee* Full Time - Single Policy - Premium Split Determined Locally (See cell A2 to change to your local amount)	Plan	Employee Out-of-Pocket Maximum by Plan	2021 HRA Funding by Employer	2021 HSA** Funding by Employer	Annual Out-of-Pocket Exposure for Employee After HRA/HSA**	Total Monthly Premium	Total Annual Premium	Annual Employer Premium Share	Annual Employee Premium Share	Employee Cost Per 20 Paychecks	Total Employee Annual Exposure Premium & Out-of- Pocket Share
Single	Platinum	\$2,800	\$2,200	NA	\$600	\$889.59	\$10,675.08	\$7,644.67	\$3,030.41	\$151.52	\$3,630.41
Single	Gold	\$3,100	\$2,200	NA	\$900	\$868.05	\$10,416.60	\$7,644.67	\$2,771.93	\$138.60	\$3,671.93
Single	Gold CDHP	\$2,500	\$2,200	NA	\$300	\$796.32	\$9,555.84	\$7,644.67	\$1,911.17	\$95.56	\$2,211.17
Single	Silver CDHP	\$4,000	\$2,200	\$2,200	\$1,800	\$754.38	\$9,052.56	\$7,242.05	\$1,810.51	\$90.53	\$3,610.51
<b>**HSA only available on Silver Plan</b>											
<i>Employer premium contributions for the Platinum and Gold Plans are identical to the employer premium contribution to the Gold CDHP.</i>											

Non-Licensed Employee* Full Time - Two-Person Policy - Premium Split Determined Locally (See cell A2 to change to your local amount)	Plan	Employee Out-of-Pocket Maximum by Plan	2021 HRA Funding by Employer	2021 HSA** Funding by Employer	Annual Out-of-Pocket Exposure for Employee After HRA/HSA**	Total Monthly Premium	Total Annual Premium	Annual Employer Premium Share	Annual Employee Premium Share	Employee Cost Per 20 Paychecks	Total Employee Annual Exposure Premium & Out-of- Pocket Share
Two Person	Platinum	\$5,600	\$4,400	NA	\$1,200	\$1,779.18	\$21,350.16	\$14,357.18	\$6,992.98	\$349.65	\$8,192.98
Two Person	Gold	\$6,200	\$4,400	NA	\$1,800	\$1,736.09	\$20,833.08	\$14,357.18	\$6,475.90	\$323.79	\$8,275.90
Two Person	Gold CDHP	\$5,000	\$4,400	NA	\$600	\$1,495.54	\$17,946.48	\$14,357.18	\$3,589.30	\$179.46	\$4,189.30
Two Person	Silver CDHP	\$8,000	\$4,400	\$4,400	\$3,600	\$1,508.77	\$18,105.24	\$14,484.19	\$3,621.05	\$181.05	\$7,221.05
<b>**HSA only available on Silver Plan</b>											
<i>Employer premium contributions for the Platinum and Gold Plans are identical to the employer premium contribution to the Gold CDHP.</i>											

Non-Licensed Employee* Full Time - Parent/Child(ren) Policy - Premium Split Determined Locally (See cell A2 to change to your local amount)	Plan	Employee Out-of-Pocket Maximum by Plan	2021 HRA Funding by Employer	2021 HSA** Funding by Employer	Annual Out-of-Pocket Exposure for Employee After HRA/HSA**	Total Monthly Premium	Total Annual Premium	Annual Employer Premium Share	Annual Employee Premium Share	Employee Cost Per 20 Paychecks	Total Employee Annual Exposure Premium & Out-of- Pocket Share
Parent/Child(ren)	Platinum	\$5,600	\$4,400	NA	\$1,200	\$1,487.53	\$17,850.36	\$11,819.04	\$6,031.32	\$301.57	\$7,231.32
Parent/Child(ren)	Gold	\$6,200	\$4,400	NA	\$1,800	\$1,452.73	\$17,432.76	\$11,819.04	\$5,613.72	\$280.69	\$7,413.72
Parent/Child(ren)	Gold CDHP	\$5,000	\$4,400	NA	\$600	\$1,231.15	\$14,773.80	\$11,819.04	\$2,954.76	\$147.74	\$3,554.76
Parent/Child(ren)	Silver CDHP	\$8,000	\$4,400	\$4,400	\$3,600	\$1,271.68	\$15,260.16	\$12,208.13	\$3,052.03	\$152.60	\$6,652.03
<b>**HSA only available on Silver Plan</b>											
<i>Employer premium contributions for the Platinum and Gold Plans are identical to the employer premium contribution to the Gold CDHP.</i>											

Non-Licensed Employee* Full Time - Family Policy - Premium Split Determined Locally (See cell A2 to change to your local amount)	Plan	Employee Out-of-Pocket Maximum by Plan	2021 HRA Funding by Employer	2021 HSA** Funding by Employer	Annual Out-of-Pocket Exposure for Employee After HRA/HSA**	Total Monthly Premium	Total Annual Premium	Annual Employer Premium Share	Annual Employee Premium Share	Employee Cost Per 20 Paychecks	Total Employee Annual Exposure Premium & Out-of- Pocket Share
Family	Platinum	\$5,600	\$4,400	NA	\$1,200	\$2,516.63	\$30,199.56	\$21,175.97	\$9,023.59	\$451.18	\$10,223.59
Family	Gold	\$6,200	\$4,400	NA	\$1,800	\$2,457.21	\$29,486.52	\$21,175.97	\$8,310.55	\$415.53	\$10,110.55
Family	Gold CDHP	\$5,000	\$4,400	NA	\$600	\$2,205.83	\$26,469.96	\$21,175.97	\$5,293.99	\$264.70	\$5,893.99
Family	Silver CDHP	\$8,000	\$4,400	\$4,400	\$3,600	\$2,146.73	\$25,760.76	\$20,608.61	\$5,152.15	\$257.61	\$8,752.15
<b>**HSA only available on Silver Plan</b>											
<i>Employer premium contributions for the Platinum and Gold Plans are identical to the employer premium contribution to the Gold CDHP.</i>											