

## 2017/2018 Medical Premiums

<b>NEW AzMt HDHP</b>	Monthly Premium	Town Pays (Monthly)	Employee Pays (Monthly)	HSA/457 Contribution	Annual Town Cost	Annual Employee Cost
Employee Only	\$444.09	\$444.09	\$0.00	\$2,600.00	\$7,929.08	\$0.00
Emp + Child(ren)	\$799.27	\$710.48	\$88.79	\$4,420.00	\$12,945.76	\$1,065.48
Emp + Spouse	\$868.42	\$762.34	\$106.08	\$4,420.00	\$13,568.08	\$1,272.96
Emp + Family	\$1,179.55	\$995.69	\$183.86	\$4,420.00	\$16,368.28	\$2,206.32

<b>NEW AzMt PPO</b>	Monthly Premium	Town Pays (Monthly)	Employee Pays (Monthly)	HSA/457 Contribution	Annual Town Cost	Annual Employee Cost
Employee Only	\$478.41	\$478.41	\$0.00	\$0.00	\$5,740.92	\$0.00
Emp + Child(ren)	\$875.74	\$776.41	\$99.33	\$0.00	\$9,316.92	\$1,191.96
Emp + Spouse	\$951.06	\$832.90	\$118.16	\$0.00	\$9,994.80	\$1,417.92
Emp + Family	\$1,289.89	\$1,087.02	\$202.87	\$0.00	\$13,044.24	\$2,434.44

<b>NEW AzMt PPO Buy Up</b>	Monthly Premium	Town Pays (Monthly)	Employee Pays (Monthly)	HSA/457 Contribution	Annual Town Cost	Annual Employee Cost
Employee Only	\$489.09	\$489.09	\$0.00	\$0.00	\$5,869.08	\$0.00
Emp + Child(ren)	\$896.12	\$794.36	\$101.76	\$0.00	\$9,532.32	\$1,221.12
Emp + Spouse	\$973.58	\$852.46	\$121.12	\$0.00	\$10,229.52	\$1,453.44
Emp + Family	\$1,322.08	\$1,113.83	\$208.25	\$0.00	\$13,365.96	\$2,499.00

<b>NEW AzMt EPO</b>	Monthly Premium	Town Pays (Monthly)	Employee Pays (Monthly)	HSA/457 Contribution	Annual Town Cost	Annual Employee Cost
Employee Only	\$501.02	\$501.02	\$0.00	\$0.00	\$6,012.24	\$0.00
Emp + Child(ren)	\$918.95	\$814.47	\$104.48	\$0.00	\$9,773.64	\$1,253.76
Emp + Spouse	\$998.81	\$874.36	\$124.45	\$0.00	\$10,492.32	\$1,493.40
Emp + Family	\$1,358.10	\$1,143.83	\$214.27	\$0.00	\$13,725.96	\$2,571.24

## NEW (HDHP ONLY) Health Savings Account (HSA), 457 Contributions & Wellness Incer

Health Savings Account (HSA) <b>HDHP PLAN PARTICIPANTS ONLY</b>	Annual Town HSA Contribution	Town Per Pay Period HSA Contribution (26 Annually)	Annual Town 457 Contribution	Town Per Pay Period 457 Contribution (26 Annually)	Wellness Incentive	IRS HSA Annual Max (Calendar Year 2017)
Employee Only	\$1,300	\$50	\$1,200	\$46.16	\$100	\$3,350
Emp + Dependent(s)	\$2,600	\$100	\$1,720	\$66.16	\$100	\$6,750

## NEW 2017/2018 Dental Premiums

<b>NEW AzMT Delta Dental PPO</b>	Monthly Premium	Town Pays (Monthly)	Employee Pays (Monthly)	Employee Pays (Pay Period)	Annual Town Cost	Annual Employee Cost
Employee Only	\$35.51	\$38.01	\$0.00	\$0.00	\$456.12	\$0.00
Emp + Child(ren)	\$76.42	\$66.18	\$10.24	\$5.12	\$794.16	\$61.44
Emp + Spouse	\$68.28	\$60.09	\$8.19	\$4.10	\$721.08	\$49.14
Emp + Family	\$112.64	\$93.36	\$19.28	\$9.64	\$1,120.32	\$115.68

<b>NEW AzMT Delta Dental PPO Buy-Up</b>	Monthly Premium	Town Pays (Monthly)	Employee Pays (Monthly)	Employee Pays (Pay Period)	Annual Town Cost	Annual Employee Cost
Employee Only	\$36.77	\$36.77	\$0.00	\$0.00	\$441.24	\$0.00
Emp + Child(ren)	\$83.15	\$71.56	\$11.59	\$5.80	\$858.72	\$69.54
Emp + Spouse	\$70.82	\$62.31	\$8.51	\$4.26	\$747.72	\$51.06
Emp + Family	\$122.71	\$101.23	\$21.48	\$10.74	\$1,214.76	\$128.88

## NEW 2017/2018 VSP Vision Premiums

VSP Voluntary Vision Plan	Employee Pays (Monthly)	Employee (Per Paycheck)
Employee Only	\$6.21	\$3.11
Employee +1 Dependent	\$13.27	\$6.64
Employee + Child(ren)	\$11.75	\$5.88
Employee + Family	\$18.72	\$9.36

HD Plan

				<b>Employer</b>	
Employee only	E	5,592.00		100%	\$5,592.00
Employee + Spouse/D Partner	ES	11,172.00	5,580.00	75%	\$9,777.00
Employee + Children	EC	9,264.00	3,672.00	75%	\$8,346.00
Employee + Family	EF	14,136.00	8,544.00	75%	\$12,000.00

CoPay Plan

				<b>Employer</b>	
Employee only	E	8,484.00		100%	\$8,484.00
Employee + Spouse/D Partner	ES	16,944.00	8,460.00	75%	\$14,829.00
Employee + Children	EC	14,064.00	5,580.00	75%	\$12,669.00
Employee + Family	EF	21,420.00	12,936.00	75%	\$18,186.00

<b>Employee</b>	<b>Total Premium</b>		Monthly ER	Monthly EE
0%	\$0.00	\$5,592.00	\$466.00	\$0.00
25%	\$1,395.00	\$11,172.00	\$814.75	\$116.25
25%	\$918.00	\$9,264.00	\$695.50	\$76.50
25%	\$2,136.00	\$14,136.00	\$1,000.00	\$178.00

<b>Employee</b>	<b>Total Premium</b>		Monthly ER	Monthly EE
0%	\$0.00	\$8,484.00	\$707.00	\$0.00
25%	\$2,115.00	\$16,944.00	\$1,235.75	\$176.25
25%	\$1,395.00	\$14,064.00	\$1,055.75	\$116.25
25%	\$3,234.00	\$21,420.00	\$1,515.50	\$269.50