

Option 1

Williamson County Medical, Dental and Vision Plan Rates

2012 Rates go into effect on November 1, 2011

Monthly County and Employee/Retiree Rates

	2011 Current <u>Williamson</u> <u>County</u> Contribution Rate	2011 Current <u>Employee</u> Rate	2012 Proposed <u>Williamson</u> <u>County</u> Contribution Rate	2012 Proposed <u>Employee</u> Rate	Amount of Increase to <u>Employee</u> Rate	2012 Proposed <u>Employee</u> <u>Non</u> <u>Tobacco</u> Rate	Amount of Increase to <u>Employee</u> Rate
Core PPO Plan							
Employee	\$586.10	\$69.00	\$700.00	\$165.90	\$96.90	\$75.90	\$6.90
Employee + Spouse	\$586.10	\$189.00	\$700.00	\$387.90	\$198.90	\$207.90	\$18.90
Employee + Child(ren)	\$586.10	\$160.00	\$700.00	\$266.00	\$106.00	\$176.00	\$16.00
Employee + Family	\$586.10	\$260.00	\$700.00	\$466.00	\$206.00	\$286.00	\$26.00
Deductible PPO Plan							
Employee	\$586.10	\$5.00	\$700.00	\$95.50	\$90.50	\$5.50	\$0.50
Employee + Spouse	\$586.10	\$65.00	\$700.00	\$251.50	\$186.50	\$71.50	\$6.50
Employee + Child(ren)	\$586.10	\$55.00	\$700.00	\$150.50	\$95.50	\$60.50	\$5.50
Employee + Family	\$586.10	\$107.00	\$700.00	\$297.70	\$190.70	\$117.70	\$10.70
EPO Plan							
Employee	\$586.10	\$176.00	\$700.00	\$283.60	\$107.60	\$193.60	\$17.60
Employee + Spouse	\$586.10	\$392.00	\$700.00	\$611.20	\$219.20	\$431.20	\$39.20
Employee + Child(ren)	\$586.10	\$329.00	\$700.00	\$451.90	\$122.90	\$361.90	\$32.90
Employee + Family	\$586.10	\$502.00	\$700.00	\$732.20	\$230.20	\$552.20	\$50.20
Dental Low Plan							
Employee	\$0.00	\$29.00	\$0.00	\$32.00	\$3.00	\$32.00	\$3.00
Employee + Spouse	\$0.00	\$54.00	\$0.00	\$59.00	\$5.00	\$59.00	\$5.00
Employee + Child(ren)	\$0.00	\$60.00	\$0.00	\$66.00	\$6.00	\$66.00	\$6.00
Employee + Family	\$0.00	\$66.00	\$0.00	\$73.00	\$7.00	\$73.00	\$7.00
Dental High Plan							
Employee	\$0.00	\$40.00	\$0.00	\$44.00	\$4.00	\$44.00	\$4.00
Employee + Spouse	\$0.00	\$74.00	\$0.00	\$82.00	\$8.00	\$82.00	\$8.00
Employee + Child(ren)	\$0.00	\$82.00	\$0.00	\$90.00	\$8.00	\$90.00	\$8.00
Employee + Family	\$0.00	\$91.00	\$0.00	\$100.00	\$9.00	\$100.00	\$9.00
Vision							
Employee	\$0.00	\$13.50	\$0.00	\$14.00	\$0.50	\$14.00	\$0.50
Employee + Spouse	\$0.00	\$27.00	\$0.00	\$28.00	\$1.00	\$28.00	\$1.00
Employee + Child(ren)	\$0.00	\$24.75	\$0.00	\$26.00	\$1.25	\$26.00	\$1.25
Employee + Family	\$0.00	\$36.00	\$0.00	\$38.00	\$2.00	\$38.00	\$2.00

Semi-Monthly Pay Period Employee Rates

	2011 Current <u>Employee</u> PP Rates	2012 Proposed <u>Employee</u> PP Rates	Amount of Increase Per Pay Period	2012 Proposed <u>Employee</u> PP Rates Non Tobacco	Amount of Increase Per Pay Period
Core PPO Plan					
Employee	\$34.50	\$82.95	\$48.45	\$37.95	\$3.45
Employee + Spouse	\$94.50	\$193.95	\$99.45	\$103.95	\$9.45
Employee + Child(ren)	\$80.00	\$133.00	\$53.00	\$88.00	\$8.00
Employee + Family	\$130.00	\$233.00	\$103.00	\$143.00	\$13.00
Deductible PPO Plan					
Employee	\$2.50	\$47.75	\$45.25	\$2.75	\$0.25
Employee + Spouse	\$32.50	\$125.75	\$93.25	\$35.75	\$3.25
Employee + Child(ren)	\$27.50	\$75.25	\$47.75	\$30.25	\$2.75
Employee + Family	\$53.50	\$148.85	\$95.35	\$58.85	\$5.35
EPO Plan					
Employee	\$88.00	\$141.80	\$53.80	\$96.80	\$8.80
Employee + Spouse	\$196.00	\$305.60	\$109.60	\$215.60	\$19.60
Employee + Child(ren)	\$164.50	\$225.95	\$61.45	\$180.95	\$16.45
Employee + Family	\$251.00	\$366.10	\$115.10	\$276.10	\$25.10
Dental Low Plan					
Employee	\$14.50	\$16.00	\$1.50	\$16.00	\$1.50
Employee + Spouse	\$27.00	\$29.50	\$2.50	\$29.50	\$2.50
Employee + Child(ren)	\$30.00	\$33.00	\$3.00	\$33.00	\$3.00
Employee + Family	\$33.00	\$36.50	\$3.50	\$36.50	\$3.50
Dental High Plan					
Employee	\$20.00	\$22.00	\$2.00	\$22.00	\$2.00
Employee + Spouse	\$37.00	\$41.00	\$4.00	\$41.00	\$4.00
Employee + Child(ren)	\$41.00	\$45.00	\$4.00	\$45.00	\$4.00
Employee + Family	\$45.50	\$50.00	\$4.50	\$50.00	\$4.50
Vision					
Employee	\$6.75	\$7.00	\$0.25	\$7.00	\$0.25
Employee + Spouse	\$13.50	\$14.00	\$0.50	\$14.00	\$0.50
Employee + Child(ren)	\$12.38	\$13.00	\$0.62	\$13.00	\$0.62
Employee + Family	\$18.00	\$19.00	\$1.00	\$19.00	\$1.00