

EMPLOYEE MONTHLY PREMIUMS 2020

MEDICAL					
EPO-4	Total Premium	Employee Cost		LFRA Cost	
Employee	\$ 616.00	\$ 7.80	1.3%	\$ 608.20	98.7%
Employee Plus Spouse	\$ 1,354.00	\$ 17.20	1.3%	\$ 1,336.80	98.7%
Employee Plus Child(ren)	\$ 1,292.00	\$ 16.40	1.3%	\$ 1,275.60	98.7%
Family	\$ 1,536.00	\$ 19.40	1.3%	\$ 1,516.60	98.7%

PPO-4	Total Premium	Employee Cost		LFRA Cost	
Employee	\$ 679.00	\$ 62.60	9.2%	\$ 616.40	90.8%
Employee Plus Spouse	\$ 1,492.00	\$ 138.80	9.3%	\$ 1,353.20	90.7%
Employee Plus Child(ren)	\$ 1,425.00	\$ 133.00	9.3%	\$ 1,292.00	90.7%
Family	\$ 1,696.00	\$ 158.40	9.3%	\$ 1,537.60	90.7%

PPO-2	Total Premium	Employee Cost		LFRA Cost	
Employee	\$ 895.00	\$ 233.80	26.1%	\$ 661.20	73.9%
Employee Plus Spouse	\$ 1,969.00	\$ 515.60	26.2%	\$ 1,453.40	73.8%
Employee Plus Child(ren)	\$ 1,880.00	\$ 493.00	26.2%	\$ 1,387.00	73.8%
Family	\$ 2,242.00	\$ 590.40	26.3%	\$ 1,651.60	73.7%

HRP*	Total Premium	Employee Cost		LFRA Cost	
Employee	\$ 275.00	\$ -	0.0%	\$ 275.00	100.0%

* HRP is secondary coverage to another primary health plan (i.e. spouse's medical plan) - required of 30+ hour employees eligible for benefits but not electing CEBT coverage (exception: those grandfathered in when LFRA joined CEBT in 2017).

DENTAL					
	Total Premium	Employee Cost		LFRA Cost	
Employee	\$ 36.00	\$ 7.00	19.4%	\$ 29.00	80.6%
Employee Plus Spouse	\$ 75.00	\$ 14.80	19.7%	\$ 60.20	80.3%
Employee Plus Child(ren)	\$ 103.00	\$ 20.20	19.6%	\$ 82.80	80.4%
Family	\$ 139.00	\$ 27.20	19.6%	\$ 111.80	80.4%

VISION					
	Total Premium	Employee Cost		LFRA Cost	
Employee	\$ 10.00	\$ -	0.0%	\$ 10.00	100.0%
Employee Plus Spouse	\$ 14.00	\$ -	0.0%	\$ 14.00	100.0%
Employee Plus Child(ren)	\$ 13.00	\$ -	0.0%	\$ 13.00	100.0%
Family	\$ 24.00	\$ -	0.0%	\$ 24.00	100.0%