The table below shows the monthly employee contributions for the medical, dental, and vision plans. Your portion of the cost(s) will be deducted from your paycheck on a pre-tax basis.

## Medical: Cigna

	COPAY PLAN		HDHP with HSA*	
	University Contributes	Employee	University Contributes	Employee
Employee Only	\$691.82	\$97.76	\$610.83	\$0.00
Employee & Spouse/Partner	\$1,166.30	\$407.24	\$1,042.05	\$174.52
Employee & Child(ren)	\$1,051.39	\$365.32	\$935.70	\$159.68
Family	\$1,560.41	\$640.40	\$1,393.62	\$307.40

## **Voluntary Life Insurance**

MONTHLY RATES PER \$1,000 BASED ON ATTAINED AGE AS OF JAN 1	EMPLOYEE	SPOUSE	CHILD(REN
Under 20	\$0.05	\$0.05	
20-24	\$0.05	\$0.05	
25-29	\$0.06	\$0.06	
30-34			
			\$0.20
			_
			_

## How to calculate your monthly **Voluntary Life rate:**

. . Premium is determined by the employee's age. As you age and change groups your premium will increase.

To determine how much Voluntary Life will cost you per month, take the amount you want to purchase, divide it by 1,000 and multiply by the amount beside your age.

$$\div$$
 1,000 =  $x$  =

For e ample, an emplo ee ho is 47, and ants to purchase \$120,000 for himself and \$70,000 for his spouse ho is age 42:

Employee:  $$120,000 \div 1,000 = 120 \times $0.15$ 

= \$18.00 per month

\$70,000 ÷ 1,000 = 70 x \$0.10 = Spouse\*:

\$7.00 per month

In this e ample the emplo ee ould have \$28.50 taken out of his pa check per month.