

Osage County
Employee Rate Sheet
Cox Health Plans 1/1/2018

	<u>Total Premium per Month</u>	<u>Employer Contribution</u>	<u>Monthly Employee Cost</u>	<u>Cost Per Pay Period</u> <small>*based on 24 pay periods, with 2 pay periods per year without premium</small>
<u>Partners 80% \$1,500</u>				
EE	\$580.00	\$400.00	\$180.00	\$90.00
EE+SP	\$1,189.00	\$400.00	\$789.00	\$394.50
EE+CH	\$986.00	\$400.00	\$586.00	\$293.00
Family	\$1,682.00	\$400.00	\$1,282.00	\$641.00
<u>Partners 80% \$2500</u>				
EE	\$517.00	\$400.00	\$117.00	\$58.50
EE+SP	\$1,060.00	\$400.00	\$660.00	\$330.00
EE+CH	\$879.00	\$400.00	\$479.00	\$239.50
Family	\$1,499.00	\$400.00	\$1,099.00	\$549.50
<u>Partners 80% \$3,500</u>				
EE	\$473.00	\$400.00	\$73.00	\$36.50
EE+SP	\$968.00	\$400.00	\$568.00	\$284.00
EE+CH	\$803.00	\$400.00	\$403.00	\$201.50
Family	\$1,369.00	\$400.00	\$969.00	\$484.50
<u>Partners 90% \$5,000</u>				
EE	\$457.00	\$400.00	\$57.00	\$28.50
EE+SP	\$936.00	\$400.00	\$536.00	\$268.00
EE+CH	\$777.00	\$400.00	\$377.00	\$188.50
Family	\$1,325.00	\$400.00	\$925.00	\$462.50
<u>HDHP 100% \$5,000</u>				
EE	\$434.00	\$400.00	\$34.00	\$17.00
EE+SP	\$889.00	\$400.00	\$489.00	\$244.50
EE+CH	\$737.00	\$400.00	\$337.00	\$168.50
Family	\$1,257.00	\$400.00	\$857.00	\$428.50
<u>HDHP 80% \$5,000</u>				
EE	\$402.00	\$400.00	\$2.00	\$1.00
EE+SP	\$824.00	\$400.00	\$424.00	\$212.00
EE+CH	\$682.00	\$400.00	\$282.00	\$141.00
Family	\$1,165.00	\$400.00	\$765.00	\$382.50