



## 2022 Employee Pre-Tax Benefit Bi-Weekly Rates

### Pre-Tax Plans –

By enrolling in a pre-tax plan, you are committing to enrollment for the entire Plan year (January-December). You can only enroll, make changes, or cancel these coverage's during your original eligibility, annual Open Enrollment, or within 31 days of a Qualifying Life Event.

### Medical (FT employee only) – Aetna (medical), Navitus (prescriptions)

*These plans are full medical including RX (covers well visits, illness, and chronic conditions)*

*\*2022 Value – Employee only coverage bi-weekly rates will be tiered based on the employee's hourly rate of pay as of their hire date or 1/1/2022 (the latter of).*

	Basic Plan*		Savers Plan	Enhanced Plan
Employee Only	Hourly rate of pay Under \$8.00	\$41.80	\$124.38	\$98.35
	Hourly rate of pay \$8.00 - \$8.49	\$46.12		
	Hourly rate of pay \$8.50 - \$8.99	\$49.01		
	Hourly rate of pay \$9.00 - \$9.49	\$51.89		
	Hourly rate of pay \$9.50 - \$9.99	\$54.77		
	Hourly rate of pay \$10.00 - \$10.49	\$57.66		
	Hourly rate of pay \$10.50 - \$10.99	\$60.54		
	Hourly rate of pay \$11.00 - \$11.49	\$63.42		
	All salaried or hourly employees with a rate of pay \$11.50 or greater	\$66.30		
Employee + Child(ren)	\$154.89		\$231.46	\$205.43
Employee + Spouse/Partner	\$182.47		\$304.61	\$241.49
Employee + Family	\$273.71		\$441.09	\$361.69

### Dental Plan Insured by Cigna (FT and PT employees)

	DHMO Plan	Basic Plan	Enhanced Plan
Employee Only	\$3.66	\$7.27	\$9.84
Employee + Child(ren)	\$9.12	\$18.12	\$24.51
Employee + Spouse/Partner	\$6.89	\$13.71	\$18.54
Employee + Family	\$14.26	\$28.27	\$38.23

### Vision Plans Insured by EyeMed (FT and PT employees)

	Basic Plan	Enhanced Plan
Employee Only	\$3.27	\$5.53
Employee + Child(ren)	\$5.82	\$9.86
Employee + Spouse/Partner	\$5.71	\$9.66
Employee + Family	\$9.68	\$16.39



## 2022 Employee Post-Tax Benefit Bi-Weekly Rates

### Post-Tax Plans –

Enrollment in a post-tax plan allows you freedom to cancel your election at any time during the Plan Year. However, you can only enroll during your original eligibility, annual Open Enrollment, or within 31 days of a Qualifying Life Event.

### Limited Medical Plan Insured by Reliance Standard (FT and PT employees)

*This plan is a limited medical plan which means it does not cover chronic conditions and has limited coverage for illness*

	Value Plan
Employee Only	\$44.31
Employee + Child(ren)	\$78.00
Employee + Spouse/Partner	\$78.46
Employee + Family	\$123.23

**Additional Life Insurance options through Met Life (FT and PT employees for Supp Life, only FT employees are eligible for Spouse and Child Life) \*calculate your bi-weekly rate = (rate x coverage amount / \$1,000 x 12 / 26)**

Age Band	Supp Life Rate		Spouse Life Rate per \$1,000 in coverage	Child Life Rate per \$1,000 in coverage
	FT Employee	PT Employee		
6months – 26 years				\$0.308*
0-29	\$0.038*	\$0.023*	\$0.091*	
30-34	\$0.053*	\$0.038*	\$0.110*	
35-39	\$0.077*	\$0.062*	\$0.146*	
40-44	\$0.106*	\$0.091*	\$0.202*	
45-49	\$0.152*	\$0.137*	\$0.316*	
50-54	\$0.225*	\$0.210*	\$0.503*	
55-59	\$0.351*	\$0.336*	\$0.788*	
60-64	\$0.503*	\$0.488*	\$1.406*	
65-69	\$0.815*	\$0.800*	\$2.488*	
70-74	\$1.477*	\$1.462*	\$4.445*	
75 and over	\$2.262*	\$2.247*	\$8.487*	

### Voluntary Accident Insurance (CHUBB), Identity Theft Protection (ID Watchdog), Pre-Paid Legal (Hyatt Legal)

	Accident Insurance	Identity Theft Plus	Identity Theft Platinum	Pre-Paid Legal
Employee Only	\$6.04	\$3.51	\$5.08	\$7.62
Employee + Child(ren)	\$9.30	\$4.69	\$6.26	
Employee + Spouse/Partner	\$8.44	\$5.47	\$8.22	
Employee + Family	\$13.52	\$6.26	\$9.00	

### Voluntary Critical Illness (CHUBB)

Attained Age	EE \$5,000 Benefit	EE \$10,000 Benefit	SP \$5,000 Benefit	CH \$5,000 Benefit
0-26				\$0..72
<30	\$1.38	\$2.75	\$1.38	
31-40	\$2.58	\$5.14	\$2.58	
41-50	\$5.01	\$10.01	\$5.01	
51-60	\$9.15	\$18.28	\$9.15	
61-70	\$15.60	\$31.20	\$15.60	

**Voluntary Short Term Disability (FT & PT employees) & Long Term Disability (FT employees only) options through The Hartford and Voluntary Term Life Insurance with Long Term Care Rider through Chubb (FT & PT employees):**

- Rates vary by Age, Elimination Period, Duration, and State. Please login to your LCG360 account to view your specific costs or call the Enrollment Center at 1-877-767-5241.