

Health Insurance

FY 2010-2011

Revised 6/7/10

	<u>Per Pay Period</u>			<u>Monthly</u>		
	Plan Cost	County	<i>Employee</i>	Plan Cost	County	<i>Employee</i>
Single	\$235.15	\$199.88	\$35.27	\$470.29	\$399.75	\$70.54
2-Person	\$446.29	\$379.35	\$66.94	\$892.58	\$758.69	\$133.89
Family	\$709.24	\$602.86	\$106.38	\$1,418.48	\$1,205.71	\$212.77

The County will pay 85% of a single, 2-person or family plan. 20.3% increase and includes administration.

Dental Insurance

	Plan Cost	County	<i>Employee</i>	Plan Cost	County	<i>Employee</i>
Single	\$14.18	\$14.18	\$0.00	\$28.36	\$28.36	\$0.00
2-Person	\$28.39	\$14.18	14.22/14.21	\$56.79	\$28.36	\$28.43
Family	\$45.53	\$14.18	\$31.35	\$91.06	\$28.36	\$62.70

**The County will pay 100% of the employee dental policy only.