

<b>Health Plans – Premiums Per Month</b>		
<b>PLANS</b>		
<b>CARRIERS - BLUECROSS BLUESHIELD of ARIZONA and UNITEDHEALTHCARE each offer both plans.</b>		
<b>TRIPLE CHOICE PLAN</b>		<b>HIGH DEDUCTIBLE HEALTH PLAN with HEALTH SAVINGS ACCOUNT</b>
\$675.45 - EMPLOYEE ONLY		\$422.38 - EMPLOYEE ONLY
\$1,432.60 - EMPLOYEE + SPOUSE		\$896.23 - EMPLOYEE + SPOUSE
\$959.44 - EMPLOYEE + 1 CHILD		\$599.08 - EMPLOYEE + 1 CHILD
\$1,679.96 - FAMILY		\$1,048.06 - FAMILY

<b>Dental Plans – Premiums Per Month</b>		
<b>PLANS</b>		
<b>PPO – DELTA DENTAL</b>		<b>DHMO – CIGNA DENTAL CARE ACCESS*</b>
\$36.66 - EMPLOYEE		\$8.69 - EMPLOYEE
\$77.14 - EMPLOYEE + SPOUSE		\$17.38 - EMPLOYEE + SPOUSE
\$61.69 - EMPLOYEE + 1 CHILD		\$16.92 - EMPLOYEE + 1 CHILD
\$120.63 - EMPLOYEE + FAMILY		\$26.05 - EMPLOYEE + FAMILY
		*Coverage not available in AK, ID, ME, MT, NH, NM, ND, PR, SD, VT, USVI, WV, and WY.

<b>Vision Plan – Premiums Per Month</b>	
<b>COVERAGE - AVESIS ADVANTAGE PROGRAM</b>	
<input type="checkbox"/>	\$3.79 - EMPLOYEE
<input type="checkbox"/>	\$12.61 - EMPLOYEE + SPOUSE
<input type="checkbox"/>	\$12.48 - EMPLOYEE + 1 CHILD
<input type="checkbox"/>	\$15.71 - EMPLOYEE + FAMILY