## **2019 Current Employee Cumulative Premium Rates**

MEDICAL	Employee	Add Spouse	Add Spouse and Child	Add Spouse and Children	Employee and Child	Employee and Children
Aetna HMO	\$897.90	\$2,370.14	\$2,971.74	\$3,332.66	\$1,499.50	\$1,860.42
BlueLincs HMO	\$550.00	\$1,361.90	\$1,659.06	\$1,847.14	\$847.16	\$1,035.24
CommunityCare HMO	\$894.32	\$2,197.00	\$2,652.48	\$2,925.78	\$1,349.80	\$1,623.10
GlobalHealth HMO	\$623.18	\$1,543.06	\$1,898.94	\$2,124.22	\$979.06	\$1,204.34
HealthChoice High/High Alternative	\$594.90	\$1,292.40	\$1,591.64	\$1,800.20	\$894.14	\$1,102.70
HealthChoice Basic/Basic Alternative	\$466.42	\$1,013.80	\$1,254.34	\$1,420.68	\$706.96	\$873.30
HealthChoice HDHP	\$401.78	\$873.60	\$1,081.12	\$1,223.96	\$609.30	\$752.14
TRICARE Supplement	Emp	loyee	Employ	ee + One	Employee + Two or More	
Selman & Company	\$60.50		\$119.50		\$160.50	
DENTAL	Employee	Add Spouse	Add Spouse and Child	Add Spouse and Children	Employee and Child	Employee and Children
Cigna Dental Care Plan (Prepaid)	\$9.44	\$15.62	\$19.82	\$25.08	\$13.64	\$18.90
Delta Dental PPO	\$35.84	\$71.66	\$102.84	\$150.52	\$67.02	\$114.70
Delta Dental PPO – Choice	\$15.68	\$51.24	\$87.06	\$138.20	\$51.50	\$102.64
HealthChoice Dental	\$39.12	\$78.24	\$109.82	\$159.34	\$70.70	\$120.22
MetLife High Classic MAC	\$46.24	\$92.48	\$132.10	\$190.64	\$85.86	\$144.40
MetLife Low Classic MAC	\$26.64	\$53.28	\$76.10	\$109.44	\$49.46	\$82.80
Sun Life Preferred Active PPO	\$30.26	\$60.36	\$82.94	\$121.04	\$52.84	\$90.94
VISION	Employee	Add Spouse	Add Spouse and Child	Add Spouse and Children	Employee and Child	Employee and Children
Primary Vision Care Services (PVCS)	\$9.98	\$18.88	\$27.58	\$30.38	\$18.68	\$21.48
Superior Vision	\$7.62	\$15.20	\$22.38	\$29.94	\$14.80	\$22.36
Vision Care Direct	\$15.90	\$27.16	\$38.42	\$49.90	\$27.16	\$38.64
VSP (Vision Service Plan)	\$8.72	\$14.50	\$20.20	\$26.98	\$14.42	\$21.20

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