



## 2024 Benefits Rate Sheet

Per Pay Period Deduction

<b>Health Insurance</b>		<b>Participant</b>	
<b>Standard</b>	Employee Only		\$74.58
	EE+1		\$210
	Family		\$270
<b>Premium</b>	Employee Only		\$110
	EE+1		\$296
	Family		\$386
<b>PPO</b>	Employee Only		\$165
	EE+1		\$444
	Family		\$579
<b>HSA</b>	Employee Only		\$119
	EE+1		\$336
	Family		\$432
<b>Dental Insurance</b>		<b>Vision Insurance</b>	
Employee Only	\$ 7.56	Employee Only	\$ 5.47
EE+Spouse	\$25.57	EE+Spouse	\$ 9.20
EE+Children	\$37.70	EE+Children	\$ 9.38
Family	\$54.82	Family	\$14.85

### Voluntary Life, Short Term Disability, & Long Term Disability Insurance

Employee deductions are based on age and amount of coverage selected. Rates are available in Human Resources

**Met Law** - \$11.25 per pay period

### Cancer, Critical Illness, and Specified Health Event Insurance

Employee deductions are based on age and amount of coverage selected. Rates are available in Human Resources.

**GET WELL. STAY WELL. BOTHWELL.**