

2019 -2020 Health Insurance Deductions

Employee Out of Pocket Cost

Semi Monthly - 8th & 23rd Payroll Deductions with Health Screening				
	Employee Only	Employee & Spouse	Employee + Child(ren)	Family
Preferred Care Blue Traditional PPO	\$110.94	\$631.52	\$431.30	\$951.87
	Employee Only	Employee & Spouse	Employee + Child(ren)	Family
Preferred Care Blue QHDHP - \$2700	\$69.30	\$535.72	\$356.33	\$822.77
	Employee Only	Employee & Spouse	Employee + Child(ren)	Family
Blue Select Plus Spira Care EPO - \$1000	\$53.66	\$499.79	\$328.20	\$774.32
	Employee Only	Employee & Spouse	Employee + Child(ren)	Family
Blue Select Plus Spira Care EPO - \$2500	\$35.33	\$457.61	\$295.20	\$717.48
	Employee Only	Employee & Spouse	Employee + Child(ren)	Family
Spira EPO Blue Select Plus QHDHP - \$3000	\$0.00	\$376.35	\$231.60	\$607.95
Semi Monthly - 8th & 23rd payroll deductions without Health Screening				
	Employee Only	Employee & Spouse	Employee + Child(ren)	Family
Preferred Care Blue Traditional PPO	\$126.44	\$647.02	\$446.80	\$967.37
	Employee Only	Employee & Spouse	Employee + Child(ren)	Family
Preferred Care Blue QHDHP - \$2600	\$84.80	\$551.22	\$371.83	\$838.27
	Employee Only	Employee & Spouse	Employee + Child(ren)	Family
Blue Select Plus Spira Care \$1000	\$69.16	\$515.29	\$343.70	\$789.82
	Employee Only	Employee & Spouse	Employee + Child(ren)	Family
Blue Select Plus Spira Care \$2500	\$50.83	\$473.11	\$310.70	\$732.98
	Employee Only	Employee & Spouse	Employee + Child(ren)	Family
Spira EPO Blue Select Plus QHDHP - \$3000	\$15.50	\$391.84	\$247.10	\$623.45