

Medical Plan Options: Biweekly Paycheck Deductions

AETNA SIMPLEPAY HEALTH PLAN				
	WITH SCREENING		NO SCREENING	
	BIWEEKLY RATE		BIWEEKLY RATE	BIWEEKLY SURCHARGE
Employee Only	\$83.35	Employee Only	\$113.35	\$30.00
Employee + Spouse	\$250.06	Employee + Spouse EE OR SP Without Screening	\$280.06	\$30.00
		Employee + Spouse EE AND SP Without Screening	\$310.06	\$60.00
Employee + Child(ren)	\$205.83	Employee + Child(ren)	\$235.83	\$30.00
Employee + Family	\$314.71	Employee + Family EE OR SP Without Screening	\$344.71	\$30.00
		Employee + Family EE AND SP Without Screening	\$374.71	\$60.00
UHC HIGH DEDUCTIBLE HEALTH PLAN				
	WITH SCREENING		NO SCREENING	
	BIWEEKLY RATE		BIWEEKLY RATE	BIWEEKLY SURCHARGE
Employee Only	\$41.72	Employee Only	\$71.72	\$30.00
Employee + Spouse	\$217.40	Employee + Spouse EE OR SP Without Screening	\$247.40	\$30.00
		Employee + Spouse EE AND SP Without Screening	\$277.40	\$60.00
Employee + Child(ren)	\$173.92	Employee + Child(ren)	\$203.92	\$30.00
Employee + Family	\$280.21	Employee + Family EE OR SP Without Screening	\$310.21	\$30.00
		Employee + Family EE AND SP Without Screening	\$340.21	\$60.00
UHC CHOICE PLUS PLAN				
	WITH SCREENING		NO SCREENING	
	BIWEEKLY RATE		BIWEEKLY RATE	BIWEEKLY SURCHARGE
Employee Only	\$114.81	Employee Only	\$144.81	\$30.00
Employee + Spouse	\$344.42	Employee + Spouse EE OR SP Without Screening	\$374.42	\$30.00
		Employee + Spouse EE AND SP Without Screening	\$404.42	\$60.00
Employee + Child(ren)	\$283.50	Employee + Child(ren)	\$313.50	\$30.00
Employee + Family	\$433.46	Employee + Family EE OR SP Without Screening	\$463.46	\$30.00
		Employee + Family EE AND SP Without Screening	\$493.46	\$60.00
UHC HEALTHLY START MEC PLAN				
	WITH SCREENING		NO SCREENING	
	BIWEEKLY RATE		BIWEEKLY RATE	BIWEEKLY SURCHARGE
Employee Only	\$29.00	Employee Only	\$44.00	\$15.00
Employee + Spouse	\$52.08	Employee + Spouse EE OR SP Without Screening	\$67.08	\$15.00
		Employee + Spouse EE AND SP Without Screening	\$82.08	\$30.00
Employee + Child(ren)	\$52.08	Employee + Child(ren)	\$67.08	\$15.00
Employee + Family	\$52.08	Employee + Family EE OR SP Without Screening	\$67.08	\$15.00
		Employee + Family EE AND SP Without Screening	\$82.08	\$30.00