No Stop Loss purchased					
	MONTHLY	MONTHLY*	MONTHLY	ANNUAL	
PLAN	PREMIUMS	BOARD	EMPLOYEE	EMPLOYEE	ANNUAL
UNITED		PAYMENTS	PAYMENTS	PAYMENT	BOARD PAID
High Option HMO					
Employee Only	\$565.00	\$475.00	\$90.00	\$1,080.00	\$5,700.00
Employee +Child(ren)	\$1,030.00	\$760.00	\$270.00	\$3,240.00	\$9,120.00
Employee + Spouse	\$1,100.00	\$780.00	\$320.00	\$3,840.00	\$9,360.00
Employee + Family	\$1,540.00	\$1,080.00	\$460.00	\$5,520.00	\$12,960.00
Low Option HMO					
Employee Only	\$480.00	\$430.00	\$50.00	\$600.00	\$5,160.00
Employee +Child(ren)	\$866.00	\$730.00	\$136.00	\$1,632.00	\$8,760.00
Employee + Spouse	\$941.00	\$763.00	\$178.00	\$2,136.00	\$9,156.00
Employee + Family	\$1,233.00	\$931.00	\$302.00	\$3,624.00	\$11,172.00
CDHP MEDICAL					
Employee Only	\$430.00	\$370.00	\$60.00	\$720.00	\$4,440.00
Employee +Child(ren)	\$786.00	\$630.00	\$156.00	\$1,872.00	\$7,560.00
Employee + Spouse	\$868.00	\$670.00	\$198.00	\$2,376.00	\$8,040.00
Employee + Family	\$1,142.00	\$810.00	\$332.00	\$3,984.00	\$9,720.00
Extra Funding	Monthly	Annual]	TOTAL	EMPLOYEES
Health Savings Acct	\$12,870	\$154,440] \	WAIVED HEALTH	
Waived health-401a \$\$	\$233,900	\$2,806,800			TOTAL

^{*} Employees pay \$50 less per month and the Board pays \$50 more per month for any employee who comple the requirements for our Wellness Rewards program. In 2015 75% of all employees (14,065) received the dis

PLAN ENROLLMENT					
6790					
1812					
1104					
1806					
3996					
1369					
759					
1132					
116					
26					
13					
20					
18943					
2339					
21282					

etes count