

**WEAKLEY COUNTY LOCAL EDUCATION
HEALTH INSURANCE RATES
EFFECTIVE JANUARY 1, 2015**

PLAN	PLAN TYPE	TOTAL PREMIUM	COUNTY SHARE	EMPLOYEE SHARE
CIGNA - WEST PARTNERSHIP PPO	EMPLOYEE ONLY	\$ 540.71	\$ 432.57	\$ 108.14
	EMPLOYEE+CHILD(REN)	892.18	608.30	283.88
	EMPLOYEE+SPOUSE	1,054.39	689.41	364.98
	FAMILY	1,405.85	865.14	540.71
STANDARD PPO	EMPLOYEE ONLY	\$ 565.71	\$ 452.57	\$ 113.14
	EMPLOYEE+CHILD(REN)	917.18	628.30	288.88
	EMPLOYEE+SPOUSE	1,104.39	721.91	382.48
	FAMILY	1,455.85	897.64	558.21
LIMITED PPO	EMPLOYEE ONLY	\$ 346.06	\$ 276.85	\$ 69.21
	EMPLOYEE+CHILD(REN)	571.00	389.32	181.68
	EMPLOYEE+SPOUSE	674.81	441.22	233.59
	FAMILY	899.75	553.69	346.06
BLUE CROSS BLUE SHIELD - WEST				
PARTNERSHIP PPO	EMPLOYEE ONLY	\$ 560.71	\$ 448.57	\$ 112.14
	EMPLOYEE+CHILD(REN)	932.18	634.30	297.88
	EMPLOYEE+SPOUSE	1,094.39	715.41	378.98
	FAMILY	1,445.85	891.14	554.71
STANDARD PPO	EMPLOYEE ONLY	\$ 585.71	\$ 468.57	\$ 117.14
	EMPLOYEE+CHILD(REN)	957.18	654.30	302.88
	EMPLOYEE+SPOUSE	1,144.39	747.91	396.48
	FAMILY	1,495.85	923.64	572.21
LIMITED PPO	EMPLOYEE ONLY	\$ 366.06	\$ 292.85	\$ 73.21
	EMPLOYEE+CHILD(REN)	611.00	415.32	195.68
	EMPLOYEE+SPOUSE	714.81	467.22	247.59
	FAMILY	939.75	579.69	360.06

WEAKLEY COUNTY PAYS 80% OF THE TOTAL PREMIUM OF THE EMPLOYEE ONLY COST PLUS 50% OF THE ADDITIONAL COST FOR DEPENDENTS. WEAKLEY COUNTY IS PREMIUM LEVEL 1.

DENTAL INSURANCE RATES			
1/1/2015			
<u>ASSURANT PRE-PAID</u>		<u>DELTA DENTAL PPO</u>	
EMPLOYEE ONLY	\$10.13	EMPLOYEE ONLY	\$21.51
EMPLOYEE + CHILD(REN)	\$21.03	EMPLOYEE + CHILD(REN)	\$49.46
EMPLOYEE + SPOUSE	\$17.95	EMPLOYEE + SPOUSE	\$40.69
FAMILY	\$24.68	FAMILY	\$79.62
VISION INSURANCE RATES			
1/1/2015			
<u>BASIC</u>		<u>EXPANDED</u>	
EMPLOYEE ONLY	\$3.35	EMPLOYEE ONLY	\$5.86
EMPLOYEE + CHILD(REN)	\$6.69	EMPLOYEE + CHILD(REN)	\$11.72
EMPLOYEE + SPOUSE	\$6.35	EMPLOYEE + SPOUSE	\$11.14
FAMILY	\$9.83	FAMILY	\$17.23