

# Part-Time Employee Health Plans and Premiums

Plan Features	High Deductible	
	In-Network	Out-of-Network
Network		
Deductible per Calendar Year	\$2,000 single \$4,000 family	\$4,000 single \$8,000 family
Coinsurance	80/20%	60/40%
Total Maximum Out-of-Pocket	\$7,000 single \$14,000 family	Not Applicable
Prescription Drugs (Retail 30-day supply)	Integrated with Medical Deductible	
Bi-Weekly Rates	<b>Non-Tobacco</b> Employee Only: \$35.00 Employee + Child(ren): \$61.50 Employee + Spouse: \$89.00 Employee + Family: \$117.00	<b>Tobacco</b> Employee Only: \$52.50 Employee + Child(ren): \$92.25 Employee + Spouse: \$133.50 Employee + Family: \$175.50

Plan includes access to Teladoc Services and Blue365 Discounts