



**Effective January 01, 2020 through December 31, 2020**

<b>Medical Plan Tier</b>	<b>Semi-Monthly Rates</b>
<b>Silver PPO Plan</b>	
Employee	\$144.75
Employee + Spouse	\$360.39
Employee + Child(ren)	\$334.65
Family	\$540.59
<b>Copper PPO Plan</b>	
Employee	\$126.54
Employee + Spouse	\$310.66
Employee + Child(ren)	\$282.82
Family	\$466.00
<b>CDHP with Optional HSA Plan</b>	
Employee	\$53.55
Employee + Spouse	\$265.33
Employee + Child(ren)	\$246.38
Family	\$398.00
<b>Vision Plan Semi-Monthly Rates</b>	
Employee	\$2.12
Employee + Spouse	\$3.32
Employee + Child(ren)	\$3.38
Family	\$5.34