



2024 Insurance Benefits Bi-Weekly Deductions



Medical Benefits

HSA 2080

Employee Only: \$32.08
 Employee & Spouse: \$70.71
 Employee & Child(ren): \$70.07
 Family: \$108.70

BluePrint PPO 2120

Employee Only: \$106.54
 Employee & Spouse: \$234.87
 Employee & Child(ren): \$232.71
 Family: \$361.05

BluePrint PPO 2030

Employee Only: \$127.12
 Employee & Spouse: \$280.24
 Employee & Child(ren): \$277.67
 Family: \$430.79



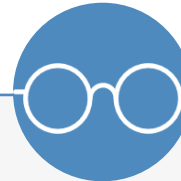
Dental Benefits

Low Plan

Employee Only: \$13.39
 Employee & Spouse: \$31.35
 Employee & Child(ren): \$41.53
 Family: \$55.84

High Plan

Employee Only: \$18.37
 Employee & Spouse: \$42.51
 Employee & Child(ren): \$56.71
 Family: \$75.55



Vision Benefits

Vision

Employee Only: \$3.48
 Employee & Spouse: \$6.27
 Employee & Child(ren): \$5.82
 Family: \$9.99

