

Hampden-Sydney College
2020 Health Insurance Rates
Plan 7 (High Deductible)
\$3,000/\$6,000 Deductible
No Co-pay

Employees earning from **\$0 to \$28,000 (Class 1)** will contribute 20% and the College will contribute 80% of premium cost.
 Employees earning from **\$28,001 to \$45,500 (Class 2)** will contribute 35% and the College will contribute 65% of premium cost.
 Employees earning from **\$45,501 (Class 3)** or more will contribute 50% and the College will contribute 50% of premium cost.

	ANTHEM MEDICAL			DELTA DENTAL - LOW PLAN			DELTA DENTAL - HIGH PLAN		
	Employee Pays Monthly Rate	College Pays	Total Monthly Medical Premium	Employee Pays Monthly Rate	College Pays	Total Monthly Dental Premium	Employee Pays Monthly Rate	College Pays	Total Monthly Dental Premium
EMPLOYEE 20%									
EE	108.40	433.60	542.00	5.60	22.40	28.00	24.80	23.20	48.00
EE/Child	130.60	522.40	653.00	8.00	32.00	40.00	40.40	33.60	74.00
EE/Spouse	217.20	868.80	1086.00	10.60	42.40	53.00	53.20	44.80	98.00
EE/Family	282.40	1129.60	1412.00	13.60	54.40	68.00	77.20	56.80	134.00
EMPLOYEE 35%									
EE	189.70	352.30	542.00	9.80	18.20	28.00	29.14	18.86	48.00
EE/Child	228.54	424.46	653.00	14.00	26.00	40.00	46.70	27.30	74.00
EE/Spouse	380.10	705.90	1086.00	18.54	34.46	53.00	61.60	36.40	98.00
EE/Family	494.20	917.80	1412.00	23.80	44.20	68.00	87.84	46.16	134.00
EMPLOYEE 50%									
EE	271.00	271.00	542.00	14.00	14.00	28.00	33.50	14.50	48.00
EE/Child	326.50	326.50	653.00	20.00	20.00	40.00	53.00	21.00	74.00
EE/Spouse	543.00	543.00	1086.00	26.50	26.50	53.00	70.00	28.00	98.00
EE/Family	706.00	706.00	1412.00	34.00	34.00	68.00	98.50	35.50	134.00

Employee Contributions (Bi-Weekly Breakdown)

	Employee Pays BiWeekly Rate	Employee Pays BiWeekly Rate	Employee Pays BiWeekly Rate	UniCare Vision Plan Buy-Up Monthly (100% Employee)
EMPLOYEE 20%				
EE	54.20	2.80	12.40	Employee 6.90
EE/Child	65.30	4.00	20.20	Employee & 1 Child 11.12
EE/Spouse	108.60	5.30	26.60	Employee & Spouse 11.61
EE/Family	141.20	6.80	38.60	Employee & Family 17.88
EMPLOYEE 35%				
EE	94.85	4.90	14.57	
EE/Child	114.27	7.00	23.35	
EE/Spouse	190.05	9.27	30.80	
EE/Family	247.10	11.90	43.92	
EMPLOYEE 50%				
EE	135.50	7.00	16.75	
EE/Child	163.25	10.00	26.50	
EE/Spouse	271.50	13.25	35.00	
EE/Family	353.00	17.00	49.25	