

2019 Monthly Rates

Medical Plans

Anthem and UHC

	\$900 DEDUCTIBLE PLAN	\$1,500 DEDUCTIBLE PLAN	\$2,850 DEDUCTIBLE PLAN	\$4,500 DEDUCTIBLE PLAN	\$6,550 DEDUCTIBLE PLAN
Employee Only	\$234.46	\$190.30	\$138.47	\$111.17	\$86.25
Employee + Spouse	\$603.60	\$490.37	\$370.19	\$304.96	\$249.37
Employee + Children	\$460.56	\$374.21	\$282.22	\$233.09	\$189.82
Employee + Family	\$702.47	\$570.84	\$431.03	\$355.80	\$289.87

Scott & White Health Plan (only available in the Dallas/Fort Worth, Waco and Austin, Texas areas)

	\$900 DEDUCTIBLE PLAN	\$1,500 DEDUCTIBLE PLAN	\$2,850 DEDUCTIBLE PLAN	\$4,500 DEDUCTIBLE PLAN	\$6,550 DEDUCTIBLE PLAN
Employee Only	\$211.01	\$171.27	\$124.62	\$100.05	\$77.63
Employee + Spouse	\$543.24	\$441.33	\$333.17	\$274.46	\$224.43
Employee + Children	\$414.50	\$336.79	\$254.00	\$209.78	\$170.84
Employee + Family	\$632.22	\$513.76	\$387.93	\$320.22	\$260.88

Kaiser (where available)

	\$900 DEDUCTIBLE PLAN	\$1,500 DEDUCTIBLE PLAN	\$2,850 DEDUCTIBLE PLAN	\$4,500 DEDUCTIBLE PLAN	\$6,550 DEDUCTIBLE PLAN
Employee Only	\$189.91	\$154.14	\$112.16	\$90.05	\$69.87
Employee + Spouse	\$488.92	\$397.20	\$299.85	\$247.01	\$201.99
Employee + Children	\$373.05	\$303.11	\$228.60	\$188.80	\$153.76
Employee + Family	\$569.00	\$462.38	\$349.14	\$288.20	\$234.79

365 HUB

Best-in-class tools and services to manage your health year-round

\$4.27

ADDITIONAL MONTHLY CHARGES* (IF APPLICABLE)

Spouse Surcharge

\$150 per employee and/or spouse

Tobacco Surcharge

\$150 per employee and/or spouse

* Added to your medical deduction.

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Critical Illness Plan

AGE	EMPLOYEE COVERAGE LEVEL: \$10,000 (NON-TOBACCO USER)	EMPLOYEE COVERAGE LEVEL: \$10,000 (TOBACCO USER)	SPOUSE COVERAGE LEVEL: \$5,000 (NON-TOBACCO USER)	SPOUSE COVERAGE LEVEL: \$5,000 (TOBACCO USER)
18-29	\$5.33	\$7.10	\$3.43	\$4.31
30-39	\$8.05	\$12.01	\$4.78	\$6.77
40-49	\$14.70	\$22.60	\$8.11	\$12.06
50-59	\$27.58	\$44.12	\$14.55	\$22.82
60+	\$51.93	\$80.85	\$26.73	\$41.18

Accident Insurance Plan

COVERAGE LEVEL	RATES
Employee	\$10.35
Employee + Spouse	\$16.42
Employee + Child(ren)	\$21.44
Family	\$27.51

Dental Plan

COVERAGE LEVEL	BASIC PLAN	ENHANCED PLAN	DENTAL HMO
Employee	\$22.04	\$36.81	\$20.71
Employee + Spouse	\$44.09	\$73.61	\$34.48
Employee + Child(ren)	\$48.49	\$80.96	\$40.49
Family	\$72.74	\$121.45	\$60.52

Hospital Indemnity Plan

COVERAGE LEVEL	RATES
Employee	\$11.19
Employee + Spouse	\$22.01
Employee + Child(ren)	\$15.70
Family	\$26.52

Vision Plan

COVERAGE LEVEL	STANDARD PLAN	ENHANCED PLAN
Employee	\$4.94	\$11.28
Employee + Spouse	\$9.14	\$20.84
Employee + Child(ren)	\$9.38	\$21.39
Family	\$14.44	\$32.95

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Voluntary Term Life (VTL)

AGE	EMPLOYEE AND SPOUSE RATE/ \$1,000/ MONTH
< 24-29	\$0.065
30-39	\$0.095
40-44	\$0.150
45-49	\$0.245
50-54	\$0.440
55-59	\$0.530
60-64	\$1.060
65-69	\$1.700
70-74	\$3.670
75>	\$11.330

Disability

AGE	STD UNITS OF \$10 OF WEEKLY BENEFIT	LTD UNITS OF \$100 OF MONTHLY EARNINGS
< 24	\$0.238	\$0.224
25-29	\$0.255	\$0.224
30-34	\$0.247	\$0.224
35-39	\$0.230	\$0.224
40-49	\$0.281	\$0.532
50-54	\$0.349	\$0.742
55-59	\$0.468	\$0.742
60-64	\$0.578	\$0.742
65>	\$0.612	\$0.742

Child VTL

COVERAGE	RATES
\$5,000	\$0.50
\$10,000	\$1.00
\$15,000	\$1.50
\$20,000	\$2.00

Voluntary AD&D

COVERAGE LEVEL	RATES
Employee	\$0.025 per \$1,000
Family	\$0.035 per \$1,000

How can I calculate my disability rate?

Example: Mary is 52 years old and earns an annual salary of \$48,000.

STD CALCULATION EXAMPLE	LTD CALCULATION EXAMPLE
<p>WEEKLY BENEFIT (UNITS OF \$10 OF WEEKLY BENEFIT)</p> <p>The monthly premium is calculated based on the weekly benefit, age and rate:</p> <ul style="list-style-type: none"> Weekly earnings: $\\$48,000/52 \text{ weeks} = \\$923.08/\text{week}$ Benefit is 50% of weekly earnings: $\\$923.08/2 = \\$461.54/\text{weekly benefit}$ Weekly benefit/\$10 (unit rate) = 46.15 units 46.15 units x \$0.349 (age rate) = \$16.11 premium per month 	<p>MONTHLY EARNINGS (UNITS OF \$100 OF MONTHLY EARNINGS)</p> <p>The monthly premium is calculated based on the monthly earnings, age and rate:</p> <ul style="list-style-type: none"> Monthly earnings: $\\$48,000/12 \text{ months} = \\$4,000/\text{month}$ $\\$4,000/\\$100 \text{ (unit rate)} = 40 \text{ units}$ $40 \text{ units} \times \\$0.742 \text{ (age rate)} = \\$29.68 \text{ monthly premium}$ Rollins pays 50% of the monthly premium: $\\$29.68 \div 2 = \\$14.84 \text{ employee premium per month}$