



	Consumer Choice Medical Plan with Vision			
	Basic Vision		Enhanced Vision	
	Weekly Premium w/o Wellness Incentive	Weekly Premium with Wellness Incentive	Weekly Premium w/o Wellness Incentive	Weekly Premium with Wellness Incentive
Employee only	\$16.80	\$8.72	\$17.87	\$9.79
Employee + Spouse	\$36.04	\$27.96	\$38.32	\$30.24
Employee + Child(ren)	\$28.50	\$20.42	\$30.30	\$22.22
Employee + Spouse + Child(ren)	\$51.12	\$43.04	\$54.36	\$46.28



	Delta Dental	
	Basic Dental	Enhanced Dental
	Weekly Premium	Weekly Premium
Employee only	\$1.73	\$4.12
Employee + Spouse	\$3.47	\$8.24
Employee + Child(ren)	\$3.55	\$8.44
Employee + Spouse + Child(ren)	\$5.29	\$12.56