

Tiffany O'shea  
Premium Contribution Summary  
Monthly Pay Cycle  
Medical - 11/01/2022 to 10/31/2023  
Dental - 04/01/2023 to 03/31/2024

Providence Connect 6000 Silver			
	Total	Employer monthly	Employee monthly
	Premium	Contribution	Contribution
Single	\$404.90	\$202.45	\$202.45
Single + Spouse	\$809.80	\$202.45	\$607.35
Family	\$1,153.95	\$202.45	\$951.50
Single + Children	\$749.05	\$202.45	\$546.60

Providence Total Enhanced 500 Platinum			
	Total	Employer monthly	Employee monthly
	Premium	Contribution	Contribution
Single	\$689.85	\$202.45	\$487.40
Single + Spouse	\$1,379.70	\$202.45	\$1,177.25
Family	\$1,966.05	\$202.45	\$1,763.60
Single + Children	\$1,276.20	\$202.45	\$1,073.75

Companion Life Dental Plan PPO \$1500			
	Total	Employer monthly	Employee monthly
	Premium	Contribution	Contribution
Single	\$58.06	\$29.03	\$29.03
Single + Spouse	\$116.16	\$29.03	\$87.13
Family	\$178.01	\$29.03	\$148.98
Single + Children	\$119.85	\$29.03	\$90.82

Some monthly employee premium contributions are not divisible by two, so a .01 rounding is included in employer cost

This page is provided as a guide to employee premium contributions. Confirm rates used with carrier contracted rates

Employee contributions may be taken on a pre-tax basis provided compliance and eligibility criteria are met

Employer pays 50% for employee and 0% for dependents for the medical and dental plan