

**Progressive Services Corp.  
Health Plan  
Premium Contributions**

**2024 Providence Standard Gold**

	<b>Total</b>	<b>Employer monthly</b>	<b>Employee monthly</b>
	<b>Premium</b>	<b>Contribution</b>	<b>Contribution</b>
Employee Only	\$804.25	\$804.25	\$0.00
Employee/Spouse	\$1,608.50	\$804.25	\$804.25
Employee/Family	\$2,292.10	\$804.25	\$1,487.85
Employee/Child(ren)	\$1,487.85	\$804.25	\$683.60

Employer pays 100% of employee only premium and 0% dependent premium.

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

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

This page is provided as a guide to employee premium contributions. Please confirm rates used with carrier contracted rates first payroll cycle that follows any rate change.