

Lemond C Hunter DMD PC
 Premium Contribution Summary
 Monthly Pay Cycle
 July 1, 2025 to June 30, 2026

Providence Standard Bronze			
	Total	Employer monthly	Employee monthly
	Premium	Contribution	Contribution
Single	\$484.80	\$363.60	\$121.20
Single + Spouse	\$969.60	\$363.60	\$606.00
Family	\$1,381.70	\$363.60	\$1,018.10
Single + Children	\$896.90	\$363.60	\$533.30

Providence Standard Silver			
	Total	Employer monthly	Employee monthly
	Premium	Contribution	Contribution
Single	\$534.75	\$363.60	\$171.15
Single + Spouse	\$1,069.50	\$363.60	\$705.90
Family	\$1,524.05	\$363.60	\$1,160.45
Single + Children	\$989.30	\$363.60	\$625.70

Some monthly employee premium contributions may not be 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 75% for employee and 0% for dependents for the Standard Bronze medical plan