

**ODS (PPO) MEDICAL PLAN 3 with PHARMACY PLAN B**

**Dental Plan 1 w/ Ortho**

	Medical/Rx	Dental	Ortho	Vision	Total Premium	Contracted Faculty		Part-Time Faculty	
						ER Contrib	EE Contrib	ER Contrib	EE Contrib
EE Only	\$418.25	\$52.00	\$0.97	\$13.79	\$485.01	\$422.13	\$62.88	\$422.13	\$62.88
EE + Spouse	\$920.17	\$102.96	\$1.94	\$30.33	\$1,055.40	\$894.90	\$160.50	\$422.13	\$633.27
EE + Child(ren)	\$794.68	\$104.52	\$13.10	\$26.19	\$938.49	\$795.64	\$142.85	\$422.13	\$516.36
Full Family	\$1,296.59	\$159.64	\$14.07	\$42.74	\$1,513.04	\$1,310.68	\$202.36	\$422.13	\$1,090.91

**Dental Plan 3 w/ Ortho**

	Medical/Rx	Dental	Ortho	Vision	Total Premium	Contracted Faculty		Part-Time Faculty	
						ER Contrib	EE Contrib	ER Contrib	EE Contrib
EE Only	\$418.25	\$45.76	\$0.97	\$13.79	\$478.77	\$422.13	\$56.64	\$422.13	\$56.64
EE + Spouse	\$920.17	\$90.61	\$1.94	\$30.33	\$1,043.05	\$894.90	\$148.15	\$422.13	\$620.92
EE + Child(ren)	\$794.68	\$91.98	\$13.10	\$26.19	\$925.95	\$795.64	\$130.31	\$422.13	\$503.82
Full Family	\$1,296.59	\$140.49	\$14.07	\$42.74	\$1,493.89	\$1,310.68	\$183.21	\$422.13	\$1,071.76

**Dental Plan 5 w/ Ortho**

	Medical/Rx	Dental	Ortho	Vision	Total Premium	Contracted Faculty		Part-Time Faculty	
						ER Contrib	EE Contrib	ER Contrib	EE Contrib
EE Only	\$418.25	\$38.48	\$0.97	\$13.79	\$471.49	\$422.13	\$49.36	\$422.13	\$49.36
EE + Spouse	\$920.17	\$76.18	\$1.94	\$30.33	\$1,028.62	\$894.90	\$133.72	\$422.13	\$606.49
EE + Child(ren)	\$794.68	\$77.34	\$13.10	\$26.19	\$911.31	\$795.64	\$115.67	\$422.13	\$489.18
Full Family	\$1,296.59	\$118.12	\$14.07	\$42.74	\$1,471.52	\$1,310.68	\$160.84	\$422.13	\$1,049.39

**ODS (PPO) MEDICAL PLAN 5 with PHARMACY PLAN B**

<b>Dental Plan 1 w/ Ortho</b>						<b>Contracted Faculty</b>		<b>Part-Time Faculty</b>	
	Medical/Rx	Dental	Ortho	Vision	Total Premium	ER Contrib	EE Contrib	ER Contrib	EE Contrib
EE Only	\$382.16	\$52.00	\$0.97	\$13.79	\$448.92	\$422.13	\$26.79	\$422.13	\$26.79
EE + Spouse	\$840.75	\$102.96	\$1.94	\$30.33	\$975.98	\$894.90	\$81.08	\$422.13	\$553.85
EE + Child(ren)	\$726.10	\$104.52	\$13.10	\$26.19	\$869.91	\$795.64	\$74.27	\$422.13	\$447.78
Full Family	\$1,184.69	\$159.64	\$14.07	\$42.74	\$1,401.14	\$1,310.68	\$90.46	\$422.13	\$979.01
<b>Dental Plan 3 w/ Ortho</b>						<b>Contracted Faculty</b>		<b>Part-Time Faculty</b>	
	Medical/Rx	Dental	Ortho	Vision	Total Premium	ER Contrib	EE Contrib	ER Contrib	EE Contrib
EE Only	\$382.16	\$45.76	\$0.97	\$13.79	\$442.68	\$422.13	\$20.55	\$422.13	\$20.55
EE + Spouse	\$840.75	\$90.61	\$1.94	\$30.33	\$963.63	\$894.90	\$68.73	\$422.13	\$541.50
EE + Child(ren)	\$726.10	\$91.98	\$13.10	\$26.19	\$857.37	\$795.64	\$61.73	\$422.13	\$435.24
Full Family	\$1,184.69	\$140.49	\$14.07	\$42.74	\$1,381.99	\$1,310.68	\$71.31	\$422.13	\$959.86
<b>Dental Plan 5 w/ Ortho</b>						<b>Contracted Faculty</b>		<b>Part-Time Faculty</b>	
	Medical/Rx	Dental	Ortho	Vision	Total Premium	ER Contrib	EE Contrib	ER Contrib	EE Contrib
EE Only	\$382.16	\$38.48	\$0.97	\$13.79	\$435.40	\$422.13	\$13.27	\$422.13	\$13.27
EE + Spouse	\$840.75	\$76.18	\$1.94	\$30.33	\$949.20	\$894.90	\$54.30	\$422.13	\$527.07
EE + Child(ren)	\$726.10	\$77.34	\$13.10	\$26.19	\$842.73	\$795.64	\$47.09	\$422.13	\$420.60
Full Family	\$1,184.69	\$118.12	\$14.07	\$42.74	\$1,359.62	\$1,310.68	\$48.94	\$422.13	\$937.49

**ODS (PPO) MEDICAL PLAN 8 with PHARMACY PLAN C**

**Dental Plan 1 w/ Ortho**

	Medical/Rx	Dental	Ortho	Vision	Total Premium	Contracted Faculty		Part-Time Faculty	
						ER Contrib	EE Contrib	ER Contrib	EE Contrib
EE Only	\$298.45	\$52.00	\$0.97	\$13.79	\$365.21	\$422.13	\$0.00	\$422.13	\$0.00
EE + Spouse	\$656.59	\$102.96	\$1.94	\$30.33	\$791.82	\$894.90	\$0.00	\$422.13	\$369.69
EE + Child(ren)	\$567.06	\$104.52	\$13.10	\$26.19	\$710.87	\$795.64	\$0.00	\$422.13	\$288.74
Full Family	\$925.20	\$159.64	\$14.07	\$42.74	\$1,141.65	\$1,310.68	\$0.00	\$422.13	\$719.52

**Dental Plan 3 w/ Ortho**

	Medical/Rx	Dental	Ortho	Vision	Total Premium	Contracted Faculty		Part-Time Faculty	
						ER Contrib	EE Contrib	ER Contrib	EE Contrib
EE Only	\$298.45	\$45.76	\$0.97	\$13.79	\$358.97	\$422.13	\$0.00	\$422.13	\$0.00
EE + Spouse	\$656.59	\$90.61	\$1.94	\$30.33	\$779.47	\$894.90	\$0.00	\$422.13	\$357.34
EE + Child(ren)	\$567.06	\$91.98	\$13.10	\$26.19	\$698.33	\$795.64	\$0.00	\$422.13	\$276.20
Full Family	\$925.20	\$140.49	\$14.07	\$42.74	\$1,122.50	\$1,310.68	\$0.00	\$422.13	\$700.37

**Dental Plan 5 w/ Ortho**

	Medical/Rx	Dental	Ortho	Vision	Total Premium	Contracted Faculty		Part-Time Faculty	
						ER Contrib	EE Contrib	ER Contrib	EE Contrib
EE Only	\$298.45	\$38.48	\$0.97	\$13.79	\$351.69	\$422.13	\$0.00	\$422.13	\$0.00
EE + Spouse	\$656.59	\$76.18	\$1.94	\$30.33	\$765.04	\$894.90	\$0.00	\$422.13	\$342.91
EE + Child(ren)	\$567.06	\$77.34	\$13.10	\$26.19	\$683.69	\$795.64	\$0.00	\$422.13	\$261.56
Full Family	\$925.20	\$118.12	\$14.07	\$42.74	\$1,100.13	\$1,310.68	\$0.00	\$422.13	\$678.00

**PROVIDENCE (HMO) MEDICAL PLAN 1 with PHARMACY PLAN 1**

**Dental Plan 1 w/ Ortho**

	Medical/Rx	Dental	Ortho	Vision	Total Premium	Contracted Faculty		Part-Time Faculty	
						ER Contrib	EE Contrib	ER Contrib	EE Contrib
EE Only	\$400.12	\$52.00	\$0.97	\$13.79	\$466.88	\$422.13	\$44.75	\$422.13	\$44.75
EE + Spouse	\$880.24	\$102.96	\$1.94	\$30.33	\$1,015.47	\$894.90	\$120.57	\$422.13	\$593.34
EE + Child(ren)	\$760.21	\$104.52	\$13.10	\$26.19	\$904.02	\$795.64	\$108.38	\$422.13	\$481.89
Full Family	\$1,240.34	\$159.64	\$14.07	\$42.74	\$1,456.79	\$1,310.68	\$146.11	\$422.13	\$1,034.66

**Dental Plan 3 w/ Ortho**

	Medical/Rx	Dental	Ortho	Vision	Total Premium	Contracted Faculty		Part-Time Faculty	
						ER Contrib	EE Contrib	ER Contrib	EE Contrib
EE Only	\$400.12	\$45.76	\$0.97	\$13.79	\$460.64	\$422.13	\$38.51	\$422.13	\$38.51
EE + Spouse	\$880.24	\$90.61	\$1.94	\$30.33	\$1,003.12	\$894.90	\$108.22	\$422.13	\$580.99
EE + Child(ren)	\$760.21	\$91.98	\$13.10	\$26.19	\$891.48	\$795.64	\$95.84	\$422.13	\$469.35
Full Family	\$1,240.34	\$140.49	\$14.07	\$42.74	\$1,437.64	\$1,310.68	\$126.96	\$422.13	\$1,015.51

**Dental Plan 5 w/ Ortho**

	Medical/Rx	Dental	Ortho	Vision	Total Premium	Contracted Faculty		Part-Time Faculty	
						ER Contrib	EE Contrib	ER Contrib	EE Contrib
EE Only	\$400.12	\$38.48	\$0.97	\$13.79	\$453.36	\$422.13	\$31.23	\$422.13	\$31.23
EE + Spouse	\$880.24	\$76.18	\$1.94	\$30.33	\$988.69	\$894.90	\$93.79	\$422.13	\$566.56
EE + Child(ren)	\$760.21	\$77.34	\$13.10	\$26.19	\$876.84	\$795.64	\$81.20	\$422.13	\$454.71
Full Family	\$1,240.34	\$118.12	\$14.07	\$42.74	\$1,415.27	\$1,310.68	\$104.59	\$422.13	\$993.14