

DONA ANA COUNTY
BI-WEEKLY INSURANCE PREMIUMS
JULY 1, 2021 - JUNE 30, 2022

Total	Grandfathered (Hired Before 7/1/15)		Tier 1 (Less than \$30,000) (Hired After 7/1/15)		Tier 2 (\$30,000 to \$49,999) (Hired After 7/1/15)		Tier 3 (\$50,000 and over) (Hired After 7/1/15)		
	EE	ER	20% EE	80% ER	25% EE	75% ER	30% EE	70% ER	
EMPLOYEE									
Administrative Fee	\$0.60	\$0.60	\$0.00	\$0.60	\$0.60	\$0.00	\$0.60	\$0.00	
PPO Medical	\$447.75	\$0.00	\$447.75	\$89.55	\$358.20	\$111.94	\$335.81	\$134.33	\$313.42
HDHP Medical	\$380.59	\$0.00	\$380.59	\$76.12	\$304.47	\$95.15	\$285.44	\$114.18	\$266.41
Dental	\$12.89	\$0.00	\$12.89	\$2.58	\$10.31	\$3.22	\$9.67	\$3.87	\$9.02
Vision	\$2.13	\$0.00	\$2.13	\$0.43	\$1.70	\$0.53	\$1.60	\$0.64	\$1.49
Basic Life	\$1.50	\$0.00	\$1.50	\$0.00	\$1.50	\$0.00	\$1.50	\$0.00	\$1.50
Disability (EE only)	\$6.13	\$0.00	\$6.13	\$0.00	\$6.13	\$0.00	\$6.13	\$0.00	\$6.13

EMPLOYEE PLUS SPOUSE									
Administrative Fee	\$0.60	\$0.60	\$0.00	\$0.60	\$0.00	\$0.60	\$0.00	\$0.60	\$0.00
PPO Medical	\$1,005.44	\$251.36	\$754.08	\$201.09	\$804.35	\$251.36	\$754.08	\$301.63	\$703.81
HDHP Medical	\$854.62	\$213.66	\$640.96	\$170.92	\$683.70	\$213.66	\$640.96	\$256.39	\$598.23
Dental	\$25.01	\$6.25	\$18.76	\$5.00	\$20.01	\$6.25	\$18.76	\$7.50	\$17.51
Vision	\$4.26	\$1.07	\$3.19	\$0.85	\$3.41	\$1.07	\$3.19	\$1.28	\$2.98
Basic Life	\$1.50	\$0.00	\$1.50	\$0.00	\$1.50	\$0.00	\$1.50	\$0.00	\$1.50
Disability (EE only)	\$6.13	\$0.00	\$6.13	\$0.00	\$6.13	\$0.00	\$6.13	\$0.00	\$6.13

EMPLOYEE PLUS CHILD(REN)									
Administrative Fee	\$0.60	\$0.60	\$0.00	\$0.60	\$0.00	\$0.60	\$0.00	\$0.60	\$0.00
PPO Medical	\$626.18	\$156.55	\$469.63	\$125.24	\$500.94	\$156.55	\$469.63	\$187.85	\$438.33
HDHP Medical	\$532.25	\$133.06	\$399.19	\$106.45	\$425.80	\$133.06	\$399.19	\$159.68	\$372.57
Dental	\$29.32	\$7.33	\$21.99	\$5.86	\$23.46	\$7.33	\$21.99	\$8.80	\$20.52
Vision	\$4.55	\$1.14	\$3.41	\$0.91	\$3.64	\$1.14	\$3.41	\$1.37	\$3.18
Basic Life	\$1.50	\$0.00	\$1.50	\$0.00	\$1.50	\$0.00	\$1.50	\$0.00	\$1.50
Disability (EE only)	\$6.13	\$0.00	\$6.13	\$0.00	\$6.13	\$0.00	\$6.13	\$0.00	\$6.13

EMPLOYEE PLUS FAMILY									
Administrative Fee	\$0.60	\$0.60	\$0.00	\$0.60	\$0.00	\$0.60	\$0.00	\$0.60	\$0.00
PPO Medical	\$1,317.73	\$329.43	\$988.30	\$263.55	\$1,054.18	\$329.43	\$988.30	\$395.32	\$922.41
HDHP Medical	\$1,120.07	\$280.02	\$840.05	\$224.01	\$896.06	\$280.02	\$840.05	\$336.02	\$784.05
Dental	\$44.96	\$11.24	\$33.72	\$8.99	\$35.97	\$11.24	\$33.72	\$13.49	\$31.47
Vision	\$7.28	\$1.82	\$5.46	\$1.46	\$5.82	\$1.82	\$5.46	\$2.18	\$5.10
Basic Life	\$1.50	\$0.00	\$1.50	\$0.00	\$1.50	\$0.00	\$1.50	\$0.00	\$1.50
Disability (EE only)	\$6.13	\$0.00	\$6.13	\$0.00	\$6.13	\$0.00	\$6.13	\$0.00	\$6.13

RATE WHEN ELECTING DEPENDENT LIFE									
Basic Life	\$1.50	\$0.38	\$1.12	\$0.38	\$1.12	\$0.38	\$1.12	\$0.38	\$1.12
Dependent Life	\$1.29	\$0.32	\$0.97	\$0.32	\$0.97	\$0.32	\$0.97	\$0.32	\$0.97