

Schedule A: Employee Insurance Contributions FY 2016



Gila County Employee Insurance Contributions FY 2016

Effective 07-01-15

Single Coverage

	Monthly Premium without HRA discount	Pay period premium without HRA discount
Medical	59.00	29.50
Vision	2.00	1.00
Ameritas Dental Network	4.00	2.00
TOTAL	65.00	32.50
ANY Dental Network	7.10	3.55

Family Coverage

	Monthly Premium without HRA discount	Pay period premium without HRA discount
Medical	285.00	142.50
Vision	5.00	2.50
Ameritas Dental Network	16.00	8.00
TOTAL	306.00	153.00
ANY Dental Network	23.40	11.70

Health Risk Assessment participation results in a \$20 per month (\$10 per pay period) earned premium reduction.

INFORMATION REGARDING HEALTH SAVINGS ACCOUNTS – H.S.A.'S (WITH HDHP ONLY)

Single Coverage: Gila County will put \$10 per month in an H.S.A account.
 Gila County will match up to an additional \$40 per month
 Total possible contribution from Gila County per year - \$600
 Total new contribution limit into H.S.A. for 2015- \$3,350 (additional carryover allowed)

Family Coverage: Gila County will put \$25 per month into an H.S.A account
 Gila County will match up to an additional \$75 per month
 Total possible contribution from Gila County per year- \$1200
 Total new contribution limit into H.S.A. for 2015 -\$6,650 (additional carryover allowed)