


Employee Contribution rates for 2020

<b>Monthly Rates</b>		<b>2020</b>	<b>2020</b>	<b>2020</b>
<b>Aetna (HSA) Plan</b>	<b>Description</b>	<b>Employee</b>	<b>Bates</b>	<b>Total</b>
Full-time Employee 30+ hrs	(1)-You Only	36.05	597.28	633.33
	(2)-You & Spouse	268.83	1,061.15	1,329.98
	(3)-You & Child(ren)	214.24	925.74	1,139.98
	(4)-You, Spouse & Child(ren)	423.33	1,476.64	1,899.97
Part-time employee <30 hrs	(1)-You Only	125.66	507.67	633.33
	(2)-You & Spouse	395.52	934.46	1,329.98
	(3)-You & Child(ren)	327.54	812.44	1,139.98
	(4)-You, Spouse & Child(ren)	601.52	1,298.45	1,899.97
<b>Monthly Rates</b>		<b>2020</b>	<b>2020</b>	<b>2020</b>
<b>Aetna (ACO) Plan</b>	<b>Description</b>	<b>Employee</b>	<b>Bates</b>	<b>Total</b>
Full-time Employee 30+ hrs	(1)-You Only	100.30	634.13	734.43
	(2)-You & Spouse	399.07	1,143.24	1,542.31
	(3)-You & Child(ren)	341.01	980.96	1,321.97
	(4)-You, Spouse & Child(ren)	618.67	1,584.63	2,203.30
Part-time employee <30 hrs	(1)-You Only	200.59	533.84	734.43
	(2)-You & Spouse	539.49	1,002.82	1,542.31
	(3)-You & Child(ren)	462.42	859.55	1,321.97
	(4)-You, Spouse & Child(ren)	771.75	1,431.55	2,203.30
<b>Aetna (PPO) Plan</b>		<b>2020</b>	<b>2020</b>	<b>2020</b>
<b>Description</b>	<b>Employee</b>	<b>Bates</b>	<b>Total</b>	
Full-time employee 30+ hrs	(1)-You Only	116.13	634.10	750.23
	(2)-You & Spouse	431.81	1,143.69	1,575.50
	(3)-You & Child(ren)	369.51	980.91	1,350.42
	(4)-You, Spouse & Child(ren)	667.23	1,583.47	2,250.70
Part-time employee <30 hrs	(1)-You Only	212.21	538.02	750.23
	(2)-You & Spouse	560.60	1,014.90	1,575.50
	(3)-You & Child(ren)	487.76	862.66	1,350.42
	(4)-You, Spouse & Child(ren)	809.76	1,440.94	2,250.70
<b>Aetna Standard Dental</b>		<b>2020</b>	<b>2020</b>	<b>2020</b>
<b>Description</b>	<b>Employee</b>	<b>Bates</b>	<b>Total</b>	
Full-time employee 30+ hrs	(1)-You Only	8.57	34.28	42.85
	(2)-You & Spouse	34.07	51.11	85.18
	(3)-You & Child(ren)	32.94	49.40	82.34
	(4)-You, Spouse & Child(ren)	62.73	76.66	139.39
	(5)-You & Domestic Partner	34.07	51.11	85.18
	(6)-You, Partner & Child(ren)	62.73	76.66	139.39
Part-time employee <30 hrs	(1)-You Only	12.86	29.99	42.85
	(2)-You & Spouse	42.59	42.59	85.18
	(3)-You & Child(ren)	41.17	41.17	82.34
	(4)-You, Spouse & Child(ren)	76.66	62.73	139.39
	(5)-You & Domestic Partner	42.59	42.59	85.18
	(6)-You, Partner & Child(ren)	76.66	62.73	139.39
<b>Aetna Premium Dental</b>		<b>2020</b>	<b>2020</b>	<b>2020</b>
<b>Description</b>	<b>Employee</b>	<b>Bates</b>	<b>Total</b>	
Full-time employee 30+ hrs	(1)-You Only	15.04	34.28	49.32
	(2)-You & Spouse	46.93	51.11	98.04
	(3)-You & Child(ren)	45.37	49.40	94.77
	(4)-You, Spouse & Child(ren)	83.78	76.66	160.44
	(5)-You & Domestic Partner	46.93	51.11	98.04
	(6)-You, Partner & Child(ren)	83.78	76.66	160.44
Part-time employee <30 hrs	(1)-You Only	19.33	29.99	49.32
	(2)-You & Spouse	55.45	42.59	98.04
	(3)-You & Child(ren)	53.60	41.17	94.77
	(4)-You, Spouse & Child(ren)	97.71	62.73	160.44
	(5)-You & Domestic Partner	55.45	42.59	98.04
	(6)-You, Partner & Child(ren)	97.71	62.73	160.44

Employee Contribution rates for 2020



<b>Aetna Vision</b>	<b>Description</b>	<b>2020 Employee/Total</b>
All Employees	(1)-You Only	5.03
30+ hrs	(2)-You & Spouse	9.56
	(3)-You & Child(ren)	10.05
	(4)-You, Spouse & Child(ren)	14.79
	(5)-You & Domestic Partner	9.56
	(6)-You, Partner & Child(ren)	14.79