

## Bates 2025 Monthly Rate Sheet

Aetna (HSA) Plan	Description	Employee	Bates	Total
Full-time Employee 30+ hrs	(1)-You Only	\$40.74	\$763.03	\$803.77
	(2)-You & Child(ren)	\$242.08	\$1,204.67	\$1,446.75
	(3)-You, Spouse & Child(ren)	\$478.35	\$1,932.90	\$2,411.25
	(4)-You & Spouse	\$303.76	\$1,384.12	\$1,687.88

Part-time employee <30 hrs	(1)-You Only	\$141.99	\$661.78	\$803.77
	(2)-You & Child(ren)	\$370.10	\$1,076.65	\$1,446.75
	(3)-You, Spouse & Child(ren)	\$679.69	\$1,731.56	\$2,411.25
	(4)-You & Spouse	\$446.92	\$1,240.96	\$1,687.88

Aetna (ACO) Plan	Description	Employee	Bates	Total
Full-time Employee 30+ hrs	(1)-You Only	\$115.52	\$816.54	\$932.06
	(2)-You & Child(ren)	\$392.74	\$1,284.98	\$1,677.72
	(3)-You, Spouse & Child(ren)	\$712.51	\$2,083.71	\$2,796.22
	(4)-You & Spouse	\$459.61	\$1,497.74	\$1,957.35

Part-time employee <30 hrs	(1)-You Only	\$231.02	\$701.04	\$932.06
	(2)-You & Child(ren)	\$532.57	\$1,145.15	\$1,677.72
	(3)-You, Spouse & Child(ren)	\$888.83	\$1,907.39	\$2,796.22
	(4)-You & Spouse	\$621.33	\$1,336.02	\$1,957.35

Aetna (PPO) Plan	Description	Employee	Bates	Total
Full-time employee 30+ hrs	(1)-You Only	\$133.75	\$818.36	\$952.11
	(2)-You & Child(ren)	\$425.56	\$1,288.26	\$1,713.82
	(3)-You, Spouse & Child(ren)	\$768.44	\$2,087.93	\$2,856.37
	(4)-You & Spouse	\$497.31	\$1,502.16	\$1,999.47

Part-time employee <30 hrs	(1)-You Only	\$244.40	\$707.71	\$952.11
	(2)-You & Child(ren)	\$561.75	\$1,152.07	\$1,713.82
	(3)-You, Spouse & Child(ren)	\$932.60	\$1,923.77	\$2,856.37
	(4)-You & Spouse	\$645.65	\$1,353.82	\$1,999.47

Aetna Dental	Description	Employee	Bates	Total
Full-time employee 30+ hrs	(1)-You Only	\$8.57	\$34.28	\$42.85
	(2)-You & Child(ren)	\$32.94	\$49.40	\$82.34

(3)-You, Spouse & Child(ren)	\$62.73	\$76.66	\$139.39
(4)-You & Spouse	\$34.07	\$51.11	\$85.18

Part-time employee <30 hrs	(1)-You Only	\$12.86	\$29.99	\$42.85
	(2)-You & Child(ren)	\$41.17	\$41.17	\$82.34
	(3)-You, Spouse & Child(ren)	\$76.66	\$62.73	\$139.39
	(4)-You & Spouse	\$42.59	\$42.59	\$85.18

<b>Aetna High Dental</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 & Child(ren)	\$45.37	\$49.40	\$94.77
	(3)-You, Spouse & Child(ren)	\$83.78	\$76.66	\$160.44
	(4)-You & Spouse	\$46.93	\$51.11	\$98.04

Part-time employee <30 hrs	(1)-You Only	\$19.33	\$29.99	\$49.32
	(2)-You & Child(ren)	\$53.60	\$41.17	\$94.77
	(3)-You, Spouse & Child(ren)	\$97.71	\$62.73	\$160.44
	(4)-You & Spouse	\$55.45	\$42.59	\$98.04

<b>Aetna Vision</b>	<b>Description</b>	<b>Employee</b>	<b>Bates</b>	<b>Total</b>
All Employees 30+ hrs	(1)-You Only	\$4.83	\$0.00	\$4.83
	(2)-You & Child(ren)	\$9.65	\$0.00	\$9.65
	(3)-You, Spouse & Child(ren)	\$14.20	\$0.00	\$14.20
	(4)-You & Spouse	\$9.18	\$0.00	\$9.18