

**Estimated Costs
Health Plan
2017-2018**

Department	Family	Double	Single	Waived	Total per Month	Total per Year
General Fund	104	62	80			
	\$1,368.13	\$995.00	\$497.50			
	\$142,285.52	\$61,690.00	\$39,800.00		\$243,775.52	\$2,925,306.24
CDBG	1	0	2			
	\$1,368.13		\$497.50			
	\$1,368.13		\$995.00	\$0.00	\$2,363.13	\$28,357.56
Water	15	18	18			
	\$1,368.13	\$995.00	\$497.50			
	\$20,521.95	\$17,910.00	\$8,955.00	\$0.00	\$47,386.95	\$568,643.40
WPCD	6	13	12			
	\$1,368.13	\$995.00	\$497.50			
	\$8,208.78	\$12,935.00	\$5,970.00	\$0.00	\$27,113.78	\$325,365.36
Totals	126	93	112			
	\$1,368.13	\$995.00	\$497.50			
	\$172,384.38	\$92,535.00	\$55,720.00	\$0.00	\$320,639.38	\$3,847,672.56

**Employee Estimated Costs
Health Plan
2017-2018**

Department	Family	Double	Single	Waived	Total per Month	Total per Year
General Fund	104	62	80			
	\$342.03	\$248.75	\$124.38			
	\$35,571.38	\$15,422.50	\$9,950.00		\$60,943.88	\$731,326.56
CDBG	1	0	2			
	\$342.03		\$124.38			
	\$342.03		\$248.75	\$0.00	\$590.78	\$7,089.39
Water	15	18	18			
	\$342.03	\$248.75	\$124.38			
	\$5,130.49	\$4,477.50	\$2,238.75	\$0.00	\$11,846.74	\$142,160.85
WPCD	6	13	12			
	\$342.03	\$248.75	\$124.38			
	\$2,052.20	\$3,233.75	\$1,492.50	\$0.00	\$6,778.45	\$81,341.34
Totals	126	93	112			
	\$342.03	\$248.75	\$124.38			
	\$43,096.10	\$23,133.75	\$13,930.00	\$0.00	\$80,159.85	\$961,918.14

**Current Costs
Health Plan
2016-2017**

Department	Family	Double	Single	Waived	Total per Month	Total per Year
General Fund	104	62	80			
	\$1,229.60	\$900.23	\$445.58			
	\$127,878.53	\$55,814.15	\$35,646.66		\$219,339.34	\$2,632,072.03
CDBG	1	0	2			
	\$1,243.75		\$452.27			
	\$1,243.75		\$904.54	\$0.00	\$2,148.30	\$25,779.55
Water	15	18	18			
	\$1,202.87	\$899.59	\$449.79			
	\$18,043.08	\$16,192.60	\$8,096.30	\$0.00	\$42,331.98	\$507,983.81
WPCD	6	13	12			
	\$1,243.75	\$890.82	\$448.56			
	\$7,462.51	\$11,580.69	\$5,382.67	\$0.00	\$24,425.87	\$293,110.46
Totals	126	93	112			
	\$1,227.21	\$898.79	\$446.70			
	\$154,627.87	\$83,587.44	\$50,030.18	\$0.00	\$288,245.49	\$3,458,945.86

**Employee Current Costs
Health Plan
2016-2017**

Department	Family	Double	Single	Waived	Total per Month	Total per Year
General Fund	104	62	80			
	\$307.40	\$225.06	\$111.40			
	\$31,969.63	\$13,953.54	\$8,911.66		\$54,834.83	\$658,018.01
CDBG	1	0	2			
	\$310.94		\$113.07			
	\$310.94		\$226.14	\$0.00	\$537.07	\$6,444.89
Water	15	18	18			
	\$300.72	\$224.90	\$112.45			
	\$4,510.77	\$4,048.15	\$2,024.08	\$0.00	\$10,583.00	\$126,995.95
WPCD	6	13	12			
	\$310.94	\$222.71	\$112.14			
	\$1,865.63	\$2,895.17	\$1,345.67	\$0.00	\$6,106.47	\$73,277.62
Totals	126	93	112			
	\$306.80	\$224.70	\$111.67			
	\$38,656.97	\$20,896.86	\$12,507.54	\$0.00	\$72,061.37	\$864,736.46