

Health Premiums
Effective: July 1, 2017
15% Employee Cost Sharing

Plan Name	Coverage Type	Employee Pays per Month	Biweekly Payroll Deduction	City Pays	Total Cost Monthly
Highmark Delaware First State Basic	Employee Only	\$ 109.92	\$ 54.96	\$ 622.92	\$ 732.84
	Employee & Child(ren)	\$ 166.88	\$ 83.44	\$ 945.70	\$ 1,112.58
	Employee & Spouse	\$ 227.00	\$ 113.50	\$ 1,286.32	\$ 1,513.32
	Family	\$ 283.66	\$ 141.83	\$ 1,607.38	\$ 1,891.04
Highmark Delaware Comprehensive PPO	Employee Only	\$ 125.44	\$ 62.72	\$ 710.82	\$ 836.26
	Employee & Child(ren)	\$ 193.10	\$ 96.55	\$ 1,094.25	\$ 1,287.34
	Employee & Spouse	\$ 259.86	\$ 129.93	\$ 1,472.57	\$ 1,732.42
	Family	\$ 324.76	\$ 162.38	\$ 1,840.33	\$ 2,165.08
Aetna HMO	Employee Only	\$ 114.74	\$ 57.37	\$ 650.20	\$ 764.94
	Employee & Child(ren)	\$ 175.30	\$ 87.65	\$ 993.46	\$ 1,168.76
	Employee & Spouse	\$ 241.46	\$ 120.73	\$ 1,368.36	\$ 1,609.82
	Family	\$ 301.20	\$ 150.60	\$ 1,706.82	\$ 2,008.02
Aetna CDH Gold	Employee Only	\$ 113.74	\$ 56.88	\$ 644.61	\$ 758.36
	Employee & Child(ren)	\$ 173.58	\$ 86.79	\$ 983.65	\$ 1,157.24
	Employee & Spouse	\$ 235.44	\$ 117.72	\$ 1,334.12	\$ 1,569.54
	Family	\$ 298.98	\$ 149.49	\$ 1,694.26	\$ 1,993.24