

Town of Pantego - Benefits

FY 2015-2016

Plan	Copay	Individual Deductible <i>(2 x Family)</i>	Individual Out of Pocket <i>(2 x Family)</i>	Monthly Premium
P85-20-25 <i>HRA Eligible</i>	\$30.00	\$200.00	\$2,500.00	Employee: \$461.30 Spouse/Domestic Partner: \$474.52 Child(ren): \$350.20 Family: \$921.44
P75-0-30 <i>HRA Eligible</i>	N/A	\$0.00	\$3,000.00	Employee: \$406.52 Spouse/Domestic Partner: \$418.16 Child(ren): \$308.60 Family: \$812.00
P85-50-20 <i>HRA Eligible</i>	N/A	\$500.00	\$2,000.00	Employee: \$384.36 Spouse/Domestic Partner: \$395.36 Child(ren): \$291.76 Family: \$767.72
P85-50-30 <i>HRA Eligible</i>	N/A	\$500.00	\$3,000.00	Employee: \$358.86 Spouse/Domestic Partner: \$369.16 Child(ren): \$272.42 Family: \$716.82
P85-75-30 <i>HRA Eligible</i>	N/A	\$750.00	\$3,000.00	Employee: \$339.82 Spouse/Domestic Partner: \$349.52 Child(ren): \$257.96 Family: \$678.74
P85-100-30 <i>HRA Eligible</i>	N/A	\$1,000.00	\$3,000.00	Employee: \$327.74 Spouse/Domestic Partner: \$337.12 Child(ren): \$248.80 Family: \$654.64
P85-150-40* <i>HSA Eligible</i>	N/A	\$1,500.00 <i>(IRS: High Deductible Health Plan)</i>	\$4,000.00 <i>(IRS: High Deductible Health Plan)</i>	Employee: \$293.08 Spouse/Domestic Partner: \$301.50 Child(ren): \$222.50 Family: \$585.44
P85-250-30* <i>HSA Eligible</i>	N/A	\$2,500.00 <i>(IRS: High Deductible Health Plan)</i>	\$3,000.00 <i>(IRS: High Deductible Health Plan)</i>	Employee: \$263.84 Spouse/Domestic Partner: \$271.40 Child(ren): \$200.30 Family: \$527.04

Dental	Individual Deductible	Benefit Percentage	
\$1,500.00 <i>Preventive, Basic & Major Dental maximum (yearly)</i>	Preventive - \$0 Basic - \$50 Major - \$50	Preventive - 100% Basic - 80% Major - 50%	Employee: \$32.16 Spouse/Domestic Partner: \$43.46 Child(ren): \$37.00 Family: \$64.36

Vision	Maximum Benefit	
	Annual Eye Exam - \$85 Frames (annually) - \$85 Lens (Annually) - \$70 to \$190 Contact Lenses - \$175	Employee: \$12.50 Family: \$25.00