

Medical Plan Premiums

PRE-TAX PAYROLL DEDUCTIONS	BEST BUY HSA HMO MASSACHUSETTS (PREVIOUSLY HMO WITH HSA PLAN)		HMO MASSACHUSETTS (PREVIOUSLY HMO 20B PLAN)		PPO ACCESS AMERICA (PREVIOUSLY PPO \$1,000 DEDUCTIBLE PLAN)	
	BI-WEEKLY	MONTHLY	BI-WEEKLY	MONTHLY	BI-WEEKLY	MONTHLY
EMPLOYEEES SALARY BAND 1: < \$50,000						
Individual	\$31.94	\$69.21	\$125.12	\$271.09	\$80.15	\$173.67
Employee + Child(ren)	\$83.83	\$181.63	\$313.62	\$679.51	\$203.56	\$441.05
Family	\$90.74	\$196.61	\$339.48	\$735.55	\$220.35	\$477.42
EMPLOYEEES SALARY BAND 2: \$50,000–\$74,999						
Individual	\$34.60	\$74.97	\$129.03	\$279.56	\$83.80	\$181.56
Employee + Child(ren)	\$90.28	\$195.60	\$323.12	\$700.10	\$212.41	\$460.22
Family	\$97.72	\$211.73	\$349.77	\$757.84	\$229.93	\$498.18
EMPLOYEEES SALARY BAND 3: \$75,000–\$99,999						
Individual	\$37.26	\$80.74	\$132.94	\$288.03	\$87.44	\$189.45
Employee + Child(ren)	\$96.73	\$209.57	\$332.62	\$720.69	\$221.26	\$479.40
Family	\$104.70	\$226.86	\$360.06	\$780.13	\$239.51	\$518.94
EMPLOYEEES SALARY BAND 4: \$100,000–\$149,999						
Individual	\$39.93	\$86.51	\$136.85	\$296.50	\$91.08	\$197.35
Employee + Child(ren)	\$103.17	\$223.54	\$342.13	\$741.28	\$230.11	\$498.57
Family	\$111.68	\$241.98	\$370.35	\$802.41	\$249.09	\$539.69
EMPLOYEEES SALARY BAND 5: \$150,000+						
Individual	\$42.59	\$92.27	\$140.76	\$304.97	\$94.73	\$205.24
Employee + Child(ren)	\$109.62	\$237.51	\$351.63	\$761.87	\$238.96	\$517.75
Family	\$118.66	\$257.10	\$380.63	\$824.70	\$258.67	\$560.45

