

2017 PART-TIME FOOD SERVICE FLEXPLAN RATES

January 1, 2017 - December 31, 2017

BENEFIT	COVERAGE LEVEL	EMPLOYEE ONLY	EMDLOVEE & FAMILY
			EMPLOYEE & FAMILY
Delta Dental	DeltaCare USA Plan DHMO Standard	\$7.91	\$20.14
	DeltaCare USA Plan DHMO High	\$13.31	\$33.98
	Delta Dental PPO Standard	\$17.24	\$52.90
	Delta Dental PPO High	\$40.63	\$121.48
UnitedHealthcare Dental	UHC Solstice Access+ Standard DHMO	\$8.33	\$21.20
	UHC Solstice Access+ High DHMO	\$10.86	\$27.70
	UHC PPO Standard	\$18.51	\$55.68
	UHC PPO High	\$37.92	\$113.36
Davis Vision	_	\$5.06	\$12.21
UHC Vision	_	\$5.30	\$13.26
Hospital Indemnity Coverage	\$50 Per Day	\$2.48	\$6.20
	\$100 Per Day	\$4.96	\$12.40
	\$150 Per Day	\$7.44	\$18.60
ID Watchdog Identity Theft Protection	_	\$7.95	\$13.95
Short-Term Disability	Standard Upgrade	\$5.99	N/A
	Standard High	\$2.54	N/A
	Standard High Upgrade	\$9.34	N/A
Life Insurance	\$10,000	\$3.00	N/A
	\$20,000	\$6.00	N/A
	\$30,000	\$9.00	N/A
	\$40,000	\$12.00	N/A
	\$50,000	\$15.00	N/A
	\$60,000	\$18.00	N/A
	\$70,000	\$21.00	N/A
	\$80,000	\$24.00	N/A
	\$90,000	\$27.00	N/A
	\$100,000	\$30.00	N/A
ARAG* Legal	_	N/A	\$14.76
ARAG [®] Senior Advocate™	_	N/A	\$7.76
MetLaw Hyatt Legal Plan	_	N/A	\$15.95
MetLaw Senior Plan	_	N/A	\$6.35