## STANDARD MEDICAL COVERAGE EMPLOYEE MONTHLY SHARE – 20%

## (per month over 12 months) Includes the Standard Plan for Dental & Vision Coverage

Healthcare Provider	Plan	Employee Only	<u>Employee +1 Dependent</u>	Employee +2(+) Dependents
Kaiser Permanente	\$30 co-pay	\$170.66	\$341.37	\$482.92
Sutter Health Plus (inc. TruHearing)	\$30 co-pay	\$131.34	\$262.45	\$371.41
Western Health Advantage	\$30 co-pay	\$109.48	\$219.13	\$310.23

## STANDARD VISION & DENTAL COVERAGE

## EMPLOYEE MONTHLY SHARE – 0%

(per month over 12 months)

Healthcare Provider	Plan	Employee Only	Employee +1 Dependent	Employee +2(+) Dependents
VSP Vision	Standard Plan	\$-	\$-	\$-
Delta Dental Premier	Standard Plan	\$-	\$-	\$-