

**2022 STANDARD MEDICAL COVERAGE**  
**EMPLOYEE MONTHLY SHARE – 20%**  
(per month over 12 months)  
**Includes the Standard Plan for Dental & Vision Coverage**

| <u>Healthcare Provider</u> | <u>Plan</u> | <u>Employee Only</u> | <u>Employee +1 Dependent</u> | <u>Employee +2(+) Dependents</u> |
|----------------------------|-------------|----------------------|------------------------------|----------------------------------|
| Sutter Health Plus         | \$30 co-pay | \$128.11             | \$256.17                     | \$362.51                         |
| Kaiser Permanente          | \$30 co-pay | \$153.26             | \$306.76                     | \$433.95                         |

**STANDARD VISION & DENTAL COVERAGE**  
**EMPLOYEE MONTHLY SHARE – 0%**  
(per month over 12 months)

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