

H/I PREMIUMS PRO-RATED FOR PART TIME EMPLOYEES 2020

35 Hour Base

CDPHP HMO

HOURS WORKED	<u>INDIVIDUAL or MEDICARE</u>		<u>TWO PERSON</u>		<u>FAMILY</u>	
	<u>EMPLOYEE ANNUAL COST</u>	<u>EMPLOYER SHARE</u>	<u>EMPLOYEE ANNUAL COST</u>	<u>EMPLOYER SHARE</u>	<u>EMPLOYEE ANNUAL COST</u>	<u>EMPLOYER SHARE</u>
30+	\$ 1,849.06	\$ 7,396.22	\$4,622.64	\$13,867.92	\$6,009.45	\$18,028.35
29	\$ 3,116.98	\$ 6,128.30	\$7,000.00	\$11,490.56	\$9,100.02	\$14,937.78
28	\$ 3,328.30	\$ 5,916.98	\$7,396.22	\$11,094.34	\$9,615.12	\$14,422.68
27	\$ 3,539.63	\$ 5,705.65	\$7,792.45	\$10,698.11	\$10,130.22	\$13,907.58
26	\$ 3,750.95	\$ 5,494.33	\$8,188.68	\$10,301.88	\$10,645.31	\$13,392.49
25	\$ 3,962.27	\$ 5,283.01	\$8,584.90	\$9,905.66	\$11,160.41	\$12,877.39
24	\$ 4,173.59	\$ 5,071.69	\$8,981.13	\$9,509.43	\$11,675.50	\$12,362.30
23	\$ 4,384.91	\$ 4,860.37	\$9,377.36	\$9,113.20	\$12,190.60	\$11,847.20
22	\$ 4,596.23	\$ 4,649.05	\$9,773.58	\$8,716.98	\$12,705.69	\$11,332.11
21	\$ 4,807.55	\$ 4,437.73	\$10,169.81	\$8,320.75	\$13,220.79	\$10,817.01
20	\$ 5,018.87	\$ 4,226.41	\$10,566.03	\$7,924.53	\$13,735.89	\$10,301.91

CDPHP CENTRAL NY HMO

HOURS WORKED	<u>INDIVIDUAL or MEDICARE</u>		<u>TWO PERSON</u>		<u>FAMILY</u>	
	<u>EMPLOYEE ANNUAL COST</u>	<u>EMPLOYER SHARE</u>	<u>EMPLOYEE ANNUAL COST</u>	<u>EMPLOYER SHARE</u>	<u>EMPLOYEE ANNUAL COST</u>	<u>EMPLOYER SHARE</u>
30+	\$2,227.97	\$8,911.87	\$5,570.04	\$16,710.12	\$7,241.04	\$21,723.12
29	\$3,755.72	\$7,384.12	\$8,434.63	\$13,845.53	\$10,965.00	\$17,999.16
28	\$4,010.34	\$7,129.50	\$8,912.06	\$13,368.10	\$11,585.66	\$17,378.50
27	\$4,264.97	\$6,874.87	\$9,389.50	\$12,890.66	\$12,206.32	\$16,757.84
26	\$4,519.59	\$6,620.25	\$9,866.93	\$12,413.23	\$12,826.99	\$16,137.17
25	\$4,774.22	\$6,365.62	\$10,344.36	\$11,935.80	\$13,447.65	\$15,516.51
24	\$5,028.84	\$6,111.00	\$10,821.79	\$11,458.37	\$14,068.31	\$14,895.85
23	\$5,283.47	\$5,856.37	\$11,299.22	\$10,980.94	\$14,688.97	\$14,275.19
22	\$5,538.09	\$5,601.75	\$11,776.66	\$10,503.50	\$15,309.63	\$13,654.53
21	\$5,792.72	\$5,347.12	\$12,254.09	\$10,026.07	\$15,930.29	\$13,033.87
20	\$6,047.34	\$5,092.50	\$12,731.52	\$9,548.64	\$16,550.95	\$12,413.21

BLUE SHIELD HMO

HOURS WORKED	<u>INDIVIDUAL or MEDICARE</u>		<u>TWO PERSON</u>		<u>FAMILY</u>	
	<u>EMPLOYEE ANNUAL COST</u>	<u>EMPLOYER SHARE</u>	<u>EMPLOYEE ANNUAL COST</u>	<u>EMPLOYER SHARE</u>	<u>EMPLOYEE ANNUAL COST</u>	<u>EMPLOYER SHARE</u>
30+	\$2,861.74	\$7,396.22	\$7,160.64	\$13,867.92	\$10,211.01	\$18,028.35
29	\$4,129.66	\$6,128.30	\$9,538.00	\$11,490.56	\$13,301.58	\$14,937.78
28	\$4,340.98	\$5,916.98	\$9,934.22	\$11,094.34	\$13,816.68	\$14,422.68
27	\$4,552.31	\$5,705.65	\$10,330.45	\$10,698.11	\$14,331.78	\$13,907.58
26	\$4,763.63	\$5,494.33	\$10,726.68	\$10,301.88	\$14,846.87	\$13,392.49
25	\$4,974.95	\$5,283.01	\$11,122.90	\$9,905.66	\$15,361.97	\$12,877.39
24	\$5,186.27	\$5,071.69	\$11,519.13	\$9,509.43	\$15,877.06	\$12,362.30
23	\$5,397.59	\$4,860.37	\$11,915.36	\$9,113.20	\$16,392.16	\$11,847.20
22	\$5,608.91	\$4,649.05	\$12,311.58	\$8,716.98	\$16,907.25	\$11,332.11
21	\$5,820.23	\$4,437.73	\$12,707.81	\$8,320.75	\$17,422.35	\$10,817.01
20	\$6,031.55	\$4,226.41	\$13,104.03	\$7,924.53	\$17,937.45	\$10,301.91