2021 Rates

Medical plans available in most locations

	Cost per biweekly pay period		
Premier Plan	Tobacco- free	One tobacco user	Two tobacco users
Associate only	\$30.50	\$61.00	-
Associate + spouse/partner	\$154.10	\$184.60	\$215.10
Associate + child(ren)	\$48.80	\$79.30	-
Associate + family	\$180.80	\$211.30	\$241.80

	Cost per biweekly pay period		
Saver Plan	Tobacco- free	One tobacco user	Two tobacco users
Associate only	\$33.90	\$67.80	-
Associate + spouse/partner	\$161.30	\$195.20	\$229.10
Associate + child(ren)	\$53.30	\$87.20	-
Associate + family	\$186.20	\$220.10	\$254.00

Local Plans availa	able in sele	ect locations	

	Cost per biweekly pay period		
Banner, Arizona Mercy, SW Missouri	Tobacco- free	One tobacco user	Two tobacco users
Associate only	\$24.80	\$49.60	-
Associate + spouse/partner	\$137.40	\$162.20	\$187.00
Associate + child(ren)	\$40.70	\$65.50	-
Associate + family	\$161.00	\$185.80	\$210.60

	Cost per biweekly pay period		
Mercy Arkansas, NW Arkansas Memorial Hermann, Texas UnityPoint, Illinois, Iowa Ochsner, Louisiana	Tobacco- free	One tobacco user	Two tobacco users
Associate only	\$48.90	\$97.80	-
Associate + spouse/partner	\$204.20	\$253.10	\$302.00
Associate + child(ren)	\$76.50	\$125.40	_
Associate + family	\$241.40	\$290.30	\$339.20

	Cost per biweekly pay period		
Contribution Plan	Tobacco- free	One tobacco user	Two tobacco users
Associate only	\$86.10	\$172.20	-
Associate + spouse/partner	\$291.30	\$377.40	\$463.50
Associate + child(ren)	\$121.40	\$207.50	-
Associate + family	\$311.90	\$398.00	\$484.10

HMO Plans available in select locations

Geisinger Extra Health Plan, Pennsylvania	Cost per	Cost per biweekly pay		
Geisinger Extra Health Plan, eastern region Pennsylvania	Tobacco- free	One	Тwo	
Geisinger Health Plan, Pennsylvania		tobacco user	tobacco users	
Geisinger Health Plan, eastern region Pennsylvania				
Associate only	\$68.60	\$137.20	-	
Associate + spouse/partner	\$270.80	\$339.40	\$408.00	
Associate + child(ren)	\$112.50	\$181.10	-	
Associate + family	\$332.00	\$400.60	\$469.20	

	Cost per biweekly pay period		
Health Net ExcelCare High Option, California	Tobacco- free	One tobacco user	Two tobacco users
Associate only	\$56.30	\$112.60	-
Associate + spouse/partner	\$237.70	\$294.00	\$350.30
Associate + child(ren)	\$118.90	\$175.20	-
Associate + family	\$278.30	\$334.60	\$390.90

	Cost per biweekly pay period		
Health Net ExcelCare Low Option, California	Tobacco- free	One tobacco user	Two tobacco users
Associate only	\$36.80	\$73.60	-
Associate + spouse/partner	\$161.20	\$198.00	\$234.80
Associate + child(ren)	\$75.60	\$112.40	-
Associate + family	\$192.90	\$229.70	\$266.50

	Cost per biweekly pay period		
Kaiser California High Option North and South	Tobacco- free	One tobacco user	Two tobacco users
Associate only	\$54.70	\$109.40	-
Associate + spouse/partner	\$234.90	\$289.60	\$344.30
Associate + child(ren)	\$92.40	\$147.10	-
Associate + family	\$278.30	\$333.00	\$387.70

	Cost per biweekly pay period		
Kaiser of Colorado Low Option	Tobacco- free	One tobacco user	Two tobacco users
Associate only	\$43.50	\$87.00	-
Associate + spouse/partner	\$156.50	\$200.00	\$243.50
Associate + child(ren)	\$61.40	\$104.90	-
Associate + family	\$180.30	\$223.80	\$267.30

	Cost per biweekly pay period		
Health Net Salud Y Mas, California	Tobacco- free	One tobacco user	Two tobacco users
Associate only	\$48.30	\$96.60	-
Associate + spouse/partner	\$220.10	\$268.40	\$316.70
Associate + child(ren)	\$77.30	\$125.60	-
Associate + family	\$258.00	\$306.30	\$354.60

	Cost per biweekly pay period		
Kaiser California Low Option North and South	Tobacco- free	One tobacco user	Two tobacco users
Associate only	\$33.20	\$66.40	-
Associate + spouse/partner	\$121.20	\$154.40	\$187.60
Associate + child(ren)	\$46.70	\$79.90	-
Associate + family	\$138.00	\$171.20	\$204.40

	Cost per biweekly pay period		
Kaiser of Georgia Low Option	Tobacco- free	One tobacco user	Two tobacco users
Associate only	\$41.50	\$83.00	-
Associate + spouse/partner	\$188.70	\$230.20	\$271.70
Associate + child(ren)	\$63.90	\$105.40	-
Associate + family	\$221.30	\$262.80	\$304.30

HMO Plans (cont.)

Kaiser of the Mid-Atlantic Low Option, Maryland	Cost per	Cost per biweekly pay period		
Kaiser of the Mid-Atlantic Low Option, Virginia	Tobacco- free	One tobacco user	Two tobacco users	
Associate only	\$54.70	\$109.40	-	
Associate + spouse/partner	\$191.90	\$246.60	\$301.30	
Associate + child(ren)	\$81.50	\$136.20	-	
Associate + family	\$228.80	\$283.50	\$338.20	

Kaisan at Osanan	Cost per biweekly pay period		
Kaiser of Oregon High Option	Tobacco- free	One tobacco user	Two tobacco users
Associate only	\$62.90	\$125.80	-
Associate + spouse/partner	\$259.20	\$322.10	\$385.00
Associate + child(ren)	\$96.60	\$159.50	-
Associate + family	\$311.60	\$374.50	\$437.40

	Cost per	r biweekly pa	y period
Kaiser of Oregon Low Option	Tobacco- free	One tobacco user	Two tobacco users
Associate only	\$49.00	\$98.00	-
Associate + spouse/partner	\$195.30	\$244.30	\$293.30
Associate + child(ren)	\$71.70	\$120.70	-
Associate + family	\$234.50	\$283.50	\$332.50

	Cost per	biweekly pa	y period
Kaiser of Washington	Tobacco- free	One tobacco user	Two tobacco users
Associate only	\$42.60	\$85.20	-
Associate + spouse/partner	\$171.00	\$213.60	\$256.20
Associate + child(ren)	\$64.10	\$106.70	-
Associate + family	\$205.70	\$248.30	\$290.90

eComm Plans

eComm PPO

	Cost per	Cost per biweekly pay period		
Aetna eComm PPO Plan	Tobacco- free	One tobacco user	Two tobacco users	
Associate only	\$35.90	\$71.80	-	
Associate + spouse/partner	\$156.30	\$192.20	\$228.10	
Associate + child(ren)	\$60.80	\$96.70	-	
Associate + family	\$181.20	\$217.10	\$253.00	

eComm HMO Plans

	Cost per	r biweekly pa	y period
Kaiser of Oregon eComm	Tobacco- free	One tobacco user	Two tobacco users
Associate only	\$32.90	\$65.80	-
Associate + spouse/partner	\$142.10	\$175.00	\$207.90
Associate + child(ren)	\$55.70	\$88.60	-
Associate + family	\$164.80	\$197.70	\$230.60

	Cost per biweekly pay period		
Kaiser California North, South, eComm (Jet only)	Tobacco- free	One tobacco user	Two tobacco users
Associate only	\$32.30	\$64.60	-
Associate + spouse/partner	\$139.00	\$171.30	\$203.60
Associate + child(ren)	\$54.50	\$86.80	-
Associate + family	\$161.10	\$193.40	\$225.70

Hawaii plans

	Cost per	r biweekly pa	y period
HMSA Hawaii	Tobacco- free	One tobacco user	Two tobacco users
Associate only	\$57.40	\$114.80	-
Associate + spouse/partner	\$290.90	\$348.30	\$405.70
Associate + child(ren)	\$140.60	\$198.00	_
Associate + family	\$341.20	\$398.60	\$456.00

	Cost per	· biweekly pa	y period
Kaiser Hawaii	Tobacco- free	One tobacco user	Two tobacco users
Associate only	\$55.30	\$110.60	—
Associate + spouse/partner	\$272.00	\$327.30	\$382.60
Associate + child(ren)	\$122.10	\$177.40	_
Associate + family	\$317.00	\$372.30	\$427.60

Vision and dental plans

Vision

Cost per biweekly pay period		
Rate		
\$2.76		
\$5.52		
\$5.52		
\$8.26		

Note: If you have an HMO medical plan available, the HMO may offer its own vision coverage, so consider whether those benefits meet your needs before you make your enrollment decision.

Dental

Cost per biweekly pay period				
Coverage	Rate			
Associate only	\$8.30			
Associate + spouse/partner	\$20.00			
Associate + child(ren)	\$19.40			
Associate + family	\$33.90			

Income protections and extra insurance

Optional associate life insurance

Cost per biwe	Cost per biweekly pay period									
Associate's			All eligible	associates			Ma	nagement/tr	uck drivers o	nly
age	\$25,000	\$50,000	\$75,000	\$100,000	\$150,000	\$200,000	\$300,000	\$500,000	\$750,000	\$1,000,000
under 25	\$0.36	\$0.71	\$1.07	\$1.43	\$2.14	\$2.85	\$4.28	\$7.13	\$10.70	\$14.27
	\$0.39	\$0.78	\$1.17	\$1.56	\$2.35	\$3.13	\$4.69	\$7.82	\$11.74	\$15.65
25-29	\$0.39	\$0.78	\$1.17	\$1.56	\$2.35	\$3.13	\$4.69	\$7.82	\$11.74	\$15.65
25-29	\$0.43	\$0.85	\$1.28	\$1.70	\$2.55	\$3.41	\$5.11	\$8.52	\$12.77	\$17.03
20.24	\$0.53	\$1.06	\$1.59	\$2.12	\$3.18	\$4.23	\$6.35	\$10.59	\$15.88	\$21.17
30-34	\$0.60	\$1.20	\$1.80	\$2.39	\$3.59	\$4.79	\$7.18	\$11.97	\$17.95	\$23.93
25. 20	\$0.64	\$1.29	\$1.93	\$2.58	\$3.87	\$5.16	\$7.73	\$12.89	\$19.33	\$25.78
35-39	\$0.72	\$1.45	\$2.17	\$2.90	\$4.35	\$5.80	\$8.70	\$14.50	\$21.75	\$29.00
40 44	\$0.74	\$1.47	\$2.21	\$2.95	\$4.42	\$5.89	\$8.84	\$14.73	\$22.09	\$29.46
40-44	\$0.84	\$1.68	\$2.52	\$3.36	\$5.04	\$6.72	\$10.08	\$16.80	\$25.20	\$33.60
45 40	\$1.14	\$2.28	\$3.42	\$4.56	\$6.84	\$9.11	\$13.67	\$22.78	\$34.18	\$45.57
45-49	\$1.29	\$2.58	\$3.87	\$5.16	\$7.73	\$10.31	\$15.47	\$25.78	\$38.66	\$51.55
50.54	\$1.73	\$3.45	\$5.18	\$6.90	\$10.36	\$13.81	\$20.71	\$34.52	\$51.78	\$69.04
50-54	\$1.98	\$3.96	\$5.94	\$7.92	\$11.88	\$15.83	\$23.75	\$39.58	\$59.38	\$79.17
55 50	\$3.21	\$6.42	\$9.63	\$12.84	\$19.26	\$25.68	\$38.52	\$64.21	\$96.31	\$128.42
55-59	\$3.67	\$7.34	\$11.01	\$14.68	\$22.02	\$29.37	\$44.05	\$73.41	\$110.12	\$146.83
() (1	\$4.78	\$9.55	\$14.33	\$19.10	\$28.65	\$38.20	\$57.30	\$95.51	\$143.26	\$191.01
60-64	\$5.45	\$10.91	\$16.36	\$21.82	\$32.73	\$43.63	\$65.45	\$109.08	\$163.63	\$218.17
(5, (0)	\$8.94	\$17.88	\$26.82	\$35.76	\$53.64	\$71.53	\$107.29	\$178.82	\$268.22	\$357.63
65-69	\$11.93	\$23.87	\$35.80	\$47.73	\$71.60	\$95.46	\$143.19	\$238.65	\$357.98	\$477.30
70.	\$13.90	\$27.80	\$41.70	\$55.60	\$83.40	\$111.20	\$166.80	\$278.01	\$417.01	\$556.01
70+	\$18.54	\$37.08	\$55.61	\$74.15	\$111.23	\$148.30	\$222.45	\$370.75	\$556.13	\$741.50
Tobacco-f	ree user	Tobacco u	ser				Tobacco	-free user	Tobac	co user

Optional spouse/partner life insurance*

Cost per biweekly p	Cost per biweekly pay period							
Associate's age	\$5,000	\$15,000	\$25,000	\$50,000	\$75,000	\$100,000	\$150,000	\$200,000
under 25	\$0.18	\$0.54	\$0.90	\$1.80	\$2.69	\$3.59	\$5.39	\$7.18
	\$0.21	\$0.62	\$1.04	\$2.07	\$3.11	\$4.14	\$6.21	\$8.28
25-29	\$0.21	\$0.64	\$1.07	\$2.14	\$3.21	\$4.28	\$6.42	\$8.56
23-29	\$0.24	\$0.71	\$1.19	\$2.37	\$3.56	\$4.74	\$7.11	\$9.48
30-34	\$0.29	\$0.86	\$1.43	\$2.85	\$4.28	\$5.71	\$8.56	\$11.41
30-34	\$0.32	\$0.95	\$1.59	\$3.18	\$4.76	\$6.35	\$9.53	\$12.70
35-39	\$0.32	\$0.96	\$1.60	\$3.20	\$4.80	\$6.40	\$9.60	\$12.80
33-37	\$0.35	\$1.06	\$1.77	\$3.54	\$5.32	\$7.09	\$10.63	\$14.18
40-44	\$0.35	\$1.06	\$1.77	\$3.54	\$5.32	\$7.09	\$10.63	\$14.18
	\$0.40	\$1.19	\$1.98	\$3.96	\$5.94	\$7.92	\$11.88	\$15.83
45-49	\$0.53	\$1.59	\$2.66	\$5.32	\$7.97	\$10.63	\$15.95	\$21.26
	\$0.62	\$1.85	\$3.08	\$6.17	\$9.25	\$12.34	\$18.50	\$24.67
50-54	\$0.82	\$2.45	\$4.08	\$8.17	\$12.25	\$16.34	\$24.51	\$32.68
50-34	\$0.95	\$2.84	\$4.74	\$9.48	\$14.22	\$18.96	\$28.44	\$37.93
55-59	\$1.53	\$4.58	\$7.63	\$15.26	\$22.89	\$30.52	\$45.77	\$61.03
55-57	\$1.85	\$5.55	\$9.25	\$18.50	\$27.75	\$37.01	\$55.51	\$74.01
60-64	\$2.34	\$7.03	\$11.71	\$23.43	\$35.14	\$46.86	\$70.28	\$93.71
00-04	\$2.96	\$8.87	\$14.79	\$29.57	\$44.36	\$59.15	\$88.72	\$118.29
65-69	\$4.51	\$13.53	\$22.54	\$45.08	\$67.63	\$90.17	\$135.25	\$180.34
00 07	\$5.92	\$17.76	\$29.60	\$59.19	\$88.79	\$118.38	\$177.57	\$236.76
70+	\$7.31	\$21.94	\$36.57	\$73.14	\$109.71	\$146.28	\$219.41	\$292.55
70 ·	\$9.60	\$28.81	\$48.02	\$96.04	\$144.05	\$192.07	\$288.11	\$384.14
Tobacco-free us	ser 📃 Toba	cco user						

*Spouse/partner life insurance is based on associate's age.

Optional dependent life insurance - child(ren)

Cost per biweekly pay period				
Coverage	Rate			
\$5,000 per dependent	\$0.33			
\$10,000 per dependent	\$0.66			
\$20,000 per dependent	\$1.32			

Cost per biweekly pay period	d*					
Associate only						
Associate's age	\$5,000	\$10,000	\$15,000	\$20,000		
under 25	\$0.40	\$0.80	\$1.18	\$1.58		
Juger 22	\$0.58	\$1.16	\$1.74	\$2.32		
25-29	\$0.40	\$0.80	\$1.18	\$1.58		
23-29	\$0.58	\$1.16	\$1.74	\$2.32		
30-34	\$0.40	\$0.80	\$1.18	\$1.58		
30-34	\$0.58	\$1.16	\$1.74	\$2.32		
35-39	\$0.52	\$1.02	\$1.54	\$2.04		
55-39	\$0.68	\$1.34	\$2.02	\$2.68		
40-44	\$0.80	\$1.58	\$2.36	\$3.14		
40-44	\$1.06	\$2.14	\$3.20	\$4.26		
45-49	\$1.26	\$2.50	\$3.74	\$5.00		
45-49	\$1.72	\$3.42	\$5.14	\$6.84		
50-54	\$2.08	\$4.16	\$6.24	\$8.32		
50-54	\$2.82	\$5.64	\$8.46	\$11.26		
	\$2.76	\$5.50	\$8.24	\$11.00		
55–59	\$3.72	\$7.44	\$11.16	\$14.86		
60-64	\$3.52	\$7.02	\$10.54	\$14.04		
50-64	\$4.80	\$9.60	\$14.40	\$19.20		
65-69	\$4.18	\$8.36	\$12.54	\$16.72		
80-60	\$5.74	\$11.46	\$17.18	\$22.90		
70.	\$5.56	\$11.14	\$16.70	\$22.26		
70+	\$7.60	\$15.20	\$22.78	\$30.38		

Associate + spouse/partne	er			
Associate's age	\$5,000	\$10,000	\$15,000	\$20,000
	\$0.86	\$1.72	\$2.56	\$3.42
	\$1.04	\$2.08	\$3.12	\$4.16
under 25	\$1.06	\$2.14	\$3.20	\$4.26
	\$1.26	\$2.50	\$3.74	\$5.00
	\$0.86	\$1.72	\$2.56	\$3.42
	\$1.04	\$2.08	\$3.12	\$4.16
25–29	\$1.06	\$2.14	\$3.20	\$4.26
	\$1.26	\$2.50	\$3.74	\$5.00
	\$0.86	\$1.72	\$2.56	\$3.42
	\$1.04	\$2.08	\$3.12	\$4.16
30-34	\$1.06	\$2.14	\$3.20	\$4.26
	\$1.26	\$2.50	\$3.74	\$5.00
	\$1.12	\$2.22	\$3.34	\$4.44
	\$1.28	\$2.54	\$3.82	\$5.08
35-39	\$1.32	\$2.64	\$3.96	\$5.26
	\$1.48	\$2.96	\$4.44	\$5.92
	\$1.74	\$3.46	\$5.20	\$6.94
	\$2.02	\$4.02	\$6.04	\$8.04
40-44	\$2.06	\$4.12	\$6.16	\$8.22
	\$2.34	\$4.66	\$7.00	\$9.34
	\$2.76	\$5.50	\$8.24	\$11.00
	\$3.22	\$6.42	\$9.64	\$12.84
15-49	\$3.34	\$6.66	\$9.98	\$13.30
	\$3.80	\$7.58	\$11.36	\$15.14
	\$4.64	\$9.28	\$13.92	\$18.56
	\$5.38	\$10.76	\$16.14	\$21.52
50-54	\$5.56	\$11.14	\$16.70	\$22.26
	\$6.30	\$12.60	\$18.90	\$25.20
	\$6.22	\$12.42	\$18.64	\$23.20
	\$7.18	\$14.36	\$21.54	\$28.72
55-59	\$7.44	\$14.86	\$22.30	\$29.74
	\$8.40	\$16.80	\$25.20	\$33.60
	\$7.94	\$15.88	\$23.82	\$31.76
	\$9.24	\$18.46	\$27.70	\$36.94
60-64	\$9.58	\$19.16	\$28.74	\$38.32
	\$10.88	\$21.74	\$32.62	\$43.48
	\$9.44	\$18.88	\$28.32	\$37.76
	\$11.00	\$21.98	\$32.96	\$43.94
55-69	\$11.40	\$22.80	\$34.20	\$45.60
	\$12.96	\$25.90	\$38.84	\$51.80
	\$12.58	\$25.16	\$37.74	\$50.32
	\$12.38	\$29.22	\$43.84	\$58.44
70+	\$14.62	\$30.34	\$45.50	\$58.44
	\$17.20	\$30.34	\$45.50	\$68.78
	ş17.20°			ş00.70

Cost per biweekly pay perio	Cost per biweekly pay period*					
Associate + dependent chi	ld(ren)					
Associate's age	\$5,000	\$10,000	\$15,000	\$20,000		
	\$0.58	\$1.16	\$1.74	\$2.32		
under 25	\$0.76	\$1.54	\$2.30	\$3.06		
25-29	\$0.58	\$1.16	\$1.74	\$2.32		
23-29	\$0.76	\$1.54	\$2.30	\$3.06		
30-34	\$0.58	\$1.16	\$1.74	\$2.32		
30-34	\$0.76	\$1.54	\$2.30	\$3.06		
35-39	\$0.70	\$1.40	\$2.08	\$2.78		
32-39	\$0.86	\$1.72	\$2.56	\$3.42		
40 44	\$0.98	\$1.94	\$2.92	\$3.88		
40-44	\$1.26	\$2.50	\$3.74	\$5.00		
	\$1.44	\$2.86	\$4.30	\$5.74		
45–49	\$1.90	\$3.80	\$5.68	\$7.58		
50.54	\$2.26	\$4.54	\$6.80	\$9.06		
50-54	\$3.00	\$6.00	\$9.00	\$12.00		
	\$2.94	\$5.86	\$8.80	\$11.74		
55–59	\$3.90	\$7.80	\$11.70	\$15.60		
<i>(</i>) <i>(</i> 1	\$3.70	\$7.40	\$11.08	\$14.78		
60-64	\$5.00	\$9.98	\$14.96	\$19.94		
(F_ (0	\$4.36	\$8.74	\$13.10	\$17.46		
65–69	\$5.92	\$11.82	\$17.74	\$23.64		
70.	\$5.76	\$11.50	\$17.24	\$23.00		
70+	\$7.78	\$15.56	\$23.34	\$31.12		
Tobacco-free user	Tobacco user	1		1		

Associate + family				
Associate's age	\$5,000	\$10,000	\$15,000	\$20,000
	\$1.04	\$2.08	\$3.12	\$4.16
	\$1.24	\$2.46	\$3.68	\$4.90
under 25	\$1.26	\$2.50	\$3.74	\$5.00
	\$1.44	\$2.86	\$4.30	\$5.74
	\$1.04	\$2.08	\$3.12	\$4.16
	\$1.24	\$2.46	\$3.68	\$4.90
25–29	\$1.26	\$2.50	\$3.74	\$5.00
	\$1.44	\$2.86	\$4.30	\$5.74
	\$1.04	\$2.08	\$3.12	\$4.16
	\$1.24	\$2.46	\$3.68	\$4.90
30-34	\$1.26	\$2.50	\$3.74	\$5.00
	\$1.44	\$2.86	\$4.30	\$5.74
	\$1.30	\$2.60	\$3.88	\$5.18
	\$1.46	\$2.92	\$4.36	\$5.82
35–39	\$1.50	\$3.00	\$4.50	\$6.00
	\$1.66	\$3.34	\$5.00	\$6.66
	\$1.92	\$3.84	\$5.76	\$7.66
40-44	\$2.20	\$4.40	\$6.58	\$8.78
	\$2.24	\$4.48	\$6.72	\$8.96
	\$2.52	\$5.04	\$7.56	\$10.06
	\$2.94	\$5.86	\$8.80	\$11.74
45-49	\$3.40	\$6.80	\$10.18	\$13.58
	\$3.52	\$7.02	\$10.54	\$14.04
	\$3.98	\$7.94	\$11.92	\$15.88
	\$4.84	\$9.66	\$14.48	\$19.30
	\$5.56	\$11.14	\$16.70	\$22.26
50-54	\$5.76	\$11.50	\$17.24	\$23.00
	\$6.50	\$12.98	\$19.46	\$25.94
	\$6.40	\$12.80	\$19.18	\$25.58
	\$7.36	\$14.74	\$22.10	\$29.46
55-59	\$7.62	\$15.24	\$22.86	\$30.46
	\$8.60	\$17.18	\$25.76	\$34.34
	\$8.14	\$16.26	\$24.38	\$32.50
	\$9.42	\$18.84	\$28.26	\$37.66
60–64	\$9.76	\$19.54	\$29.30	\$39.06
	\$11.06	\$22.12	\$33.16	\$44.22
	\$9.64	\$19.26	\$28.88	\$38.50
	\$11.18	\$22.34	\$33.52	\$44.68
65-69	\$11.60	\$23.18	\$34.76	\$46.34
	\$13.14	\$26.26	\$39.40	\$52.54
	\$12.76	\$25.54	\$38.30	\$51.06
	\$14.80	\$29.60	\$44.38	\$59.18
70+	\$15.36	\$30.70	\$46.04	\$61.40
	\$17.38	\$34.76	\$52.14	\$69.52
				907.52

Accidental death and dismemberment insurance (AD&D)

Cost per biweekly pay period										
All eligible associates						Managen	nent only			
Coverage	\$25,000	\$50,000	\$75,000	\$100,000	\$150,000	\$200,000	\$300k	\$500k	\$750k	\$1M
Associate only	\$0.16	\$0.32	\$0.48	\$0.64	\$0.97	\$1.29	\$1.93	\$3.22	\$4.83	\$6.44
Associate + family	\$0.31	\$0.62	\$0.93	\$1.24	\$1.86	\$2.49	\$3.73	\$6.21	\$9.32	\$12.43

Accident insurance

Cost per biweekly pay period				
Coverage	Rate			
Associate only	\$0.68			
Associate + spouse/partner	\$1.28			
Associate + child(ren)	\$1.34			
Associate + family	\$1.80			

Short-term disability enhanced insurance

Cost per biweekly pay period*						
Age	Rate	DC only rate	MA only rate	NY only rate	WA only rate	
under 25	\$0.35	\$0.15	\$0.03	\$0.39	\$0.11	
25-29	\$0.35	\$0.15	\$0.03	\$0.51	\$0.11	
30-34	\$0.35	\$0.15	\$0.03	\$0.55	\$0.11	
35-39	\$0.35	\$0.15	\$0.03	\$0.61	\$0.11	
40-44	\$0.37	\$0.16	\$0.03	\$0.51	\$0.12	
45-49	\$0.44	\$0.19	\$0.04	\$0.52	\$0.14	
50-54	\$0.55	\$0.24	\$0.05	\$0.75	\$0.18	
55–59	\$0.64	\$0.28	\$0.06	\$0.86	\$0.20	
60-64	\$0.76	\$0.33	\$0.07	\$1.25	\$0.24	
65-69	\$0.94	\$0.41	\$0.08	\$1.80	\$0.30	
70+	\$1.21	\$0.53	\$0.11	\$1.81	\$0.39	

*Disability costs are based on your age and earnings. To find your cost, divide your pretax earnings by 100 and multiply by the rate above.

Long-term and long-term enhanced disability insurance

Cost per biweekly pay p	period*	
Age	Long-term disability rate	Long-term disability enhanced rate
under 25	\$0.05	\$0.08
25-29	\$0.09	\$0.14
30-34	\$0.13	\$0.21
35-39	\$0.25	\$0.37
40-44	\$0.37	\$0.57
45-49	\$0.56	\$0.85
50-54	\$0.80	\$1.17
55-59	\$0.95	\$1.37
60-64	\$1.02	\$1.54
65-69	\$0.91	\$1.40
70+	\$0.89	\$1.36

Truck driver long-term disability insurance

Cost per biweekly pay period*		
Plan duration option	Driver LTD**	Driver LTD Enhanced**
Five-year duration coverage	\$1.73	\$2.59
Full-duration coverage	\$2.34	\$3.52

*Disability costs are based on your age and earnings. To find your cost, divide your pretax earnings by 100 and multiply by the rate above. **Truck driver LTD coverage premiums are based on earnings and the type of truck driver LTD coverage.

