

Plan / Tier	Participant Monthly	Participant Annual
B1000 w/ P1		
Employee Only	\$255	\$3,060
Employee and One Dependent	\$483	\$5,796
Family	\$662	\$7,944
CDHP/C2000 w/ P2		
Employee Only	\$214	\$2,568
Employee and One Dependent	\$405	\$4,860
Family	\$554	\$6,648
C3000 w/ P2		
Employee Only	\$85	\$1,020
Employee and One Dependent	\$161	\$1,932
Family	\$220	\$2,640
H2000 w/ P3		
Employee Only	\$189	\$2,268
Employee and One Dependent	\$357	\$4,284
Family	\$489	\$5,868
H2500 w/ P4		
Employee Only	\$52	\$624
Employee and One Dependent	\$97	\$1,164
Family	\$133	\$1,596
H5000 w/ P5		
Employee Only	\$0	\$0
Employee and One Dependent	\$0	\$0
Family	\$0	\$0

	Monthly	Annual
*Church's portion of medical	\$ 1,385	\$ 16,620

*100% paid by church

Dental Plan / Tier	Participant Monthly	Participant Annual
Passive PPO 2000		
Participant	\$53	\$636
Participant+1	\$105	\$1,260
Family	\$158	\$1,896
Dental PPO		
Participant	\$43	\$516
Participant+1	\$85	\$1,020
Family	\$128	\$1,536
Dental HMO		
Participant	\$18	\$216
Participant+1	\$32	\$384
Family	\$56	\$672

Vision Plan / Tier	Participant Monthly	Participant Annual
Full Service		
Participant	\$9	\$108
Participant+1	\$14	\$168
Family	\$22	\$264
Premier		
Participant	\$15	\$180
Participant+1	\$25	\$300
Family	\$40	\$480