

Black Hills Special Services Cooperative Insurance Rates

2018-2019 Fiscal Year

| Coverage Type | Plan A Deductible: \$1,500 Single \$2,700 Family Max Out-of Pocket: \$3,500 Single \$5,400 Family | | Plan B Deductible: \$ 3,500 Single \$ 7,000 Family Max Out-of Pocket: \$ 6,550 Single \$13,300 Family | | Plan C Deductible: \$ 5,00 Single \$10,000 Family Max Out-of Pocket: \$ 5,000 Single \$10,000 Family | |
|--------------------------|---|------------|---|------------|--|------------|
| | SINGLE | FAMILY | SINGLE | FAMILY | SINGLE | FAMILY |
| HEALTH | \$589.15 | \$1,470.00 | \$469.15 | \$1,173.00 | \$453.15 | \$1,132.00 |
| LIFE | \$2.85 | \$4.00 | \$2.85 | \$4.00 | \$2.85 | \$4.00 |
| DENTAL | \$37.20 | \$99.02 | \$37.20 | \$99.02 | \$37.20 | \$99.02 |
| TOTAL | \$629.20 | \$1,573.02 | \$512.05 | \$1,280.02 | \$496.05 | \$1,239.02 |
| BHSSC Contribution | \$600.00 | \$600.00 | \$600.00 | \$600.00 | \$600.00 | \$600.00 |
| Monthly Cost to Employee | \$29.20 | \$973.02 | \$0 | \$680.02 | \$0 | \$639.02 |

- Participation in single dental insurance and single life insurance are required.