

RATES: HEALTH INSURANCE PROGRAMS							Section 3.4-7	
Active Employee Rates								
Effective January 1, 2014								
Please replace Section 3.4-7 of the State of Rhode Island Payroll Manual with the new schedule effective for pay period beginning December 29, 2013, and paid on January 17, 2014.								
			Annual	Monthly	Biweekly	20 Pay Pd Employees		
Medical Plan								
Individual			\$7,245.24	\$603.77	\$278.66			\$362.26
Family			\$20,311.92	\$1,692.66	\$781.23			\$1,015.60
Dental Plan								
Individual			\$392.76	\$32.73	\$15.11			\$19.64
Family			\$1,099.44	\$91.62	\$42.29			\$54.97
Vision Plan								
Individual			\$58.20	\$4.85	\$2.24			\$2.91
Family			\$160.56	\$13.38	\$6.18			\$8.03
Medical, Dental, and Vision								
Individual			\$7,696.20	\$641.35	\$296.01			\$384.81
Family			\$21,571.92	\$1,797.66	\$829.70			\$1,078.60

RATES: HEALTH INSURANCE PROGRAMS							Section 3.4-7	
Active Employee Rates - Employee Co-Share (Percent of Premium Based)								
Effective January 1, 2014								
Please replace Section 3.4-7 of the State of Rhode Island Payroll Manual with the new schedule effective for pay period beginning December 29, 2013, and paid on January 17, 2014.								
FULL TIME		<u>Percentage</u>	<u>Medical</u>	<u>Dental</u>	<u>Vision</u>	<u>Total</u>		
<i>Individual</i>								
Less than \$95,481		20%	\$55.73	\$3.02	\$0.45	\$59.20		
\$95,481 and above		25%	\$69.67	\$3.78	\$0.56	\$74.01		
<i>Family</i>								
Less than \$47,741		15%	\$117.18	\$6.34	\$0.93	\$124.45		
\$47,741 to less than \$95,481		20%	\$156.25	\$8.46	\$1.24	\$165.95		
\$95,481 and above		25%	\$195.31	\$10.57	\$1.55	\$207.43		
PART TIME		(Based on Annualized Total Rate)						
<i>Individual</i>								
Less than \$90,000		20%	\$55.73	\$3.02	\$0.45	\$59.20		
\$90,000 and above		35%	\$97.53	\$5.29	\$0.78	\$103.60		
<i>Family</i>								
Less than \$90,000		20%	\$156.25	\$8.46	\$1.24	\$165.95		
\$90,000 and above		35%	\$273.43	\$14.80	\$2.16	\$290.39		