

RATES: HEALTH INSURANCE PROGRAMS							Section 3.4-7
Active Employee Rates (Choice Plus with HSA Plan)							
Effective January 1, 2017							
Please replace Section 3.4-7 of the State of Rhode Island Payroll Manual with the new schedule effective for pay period beginning December 25, 2016, and paid on January 13, 2017.							
							20 Pay Pd Employees
		Annual	Monthly	Biweekly			
Medical Plan							
Individual		\$7,242.60	\$603.55	\$278.56			\$362.13
Family		\$20,304.48	\$1,692.04	\$780.94			\$1,015.22
Dental Plan							
Individual		\$366.60	\$30.55	\$14.10			\$18.33
Family		\$949.44	\$79.12	\$36.52			\$47.47
Vision Plan							
Individual		\$56.88	\$4.74	\$2.19			\$2.84
Family		\$156.96	\$13.08	\$6.04			\$7.85
Medical, Dental, and Vision							
Individual		\$7,666.08	\$638.84	\$294.85			\$383.30
Family		\$21,410.88	\$1,784.24	\$823.50			\$1,070.54

Section 3.4-7 Chart 35
(Choice Plus w/HSA Plan)
Effective January 1, 2017

RATES: HEALTH INSURANCE PROGRAMS							Section 3.4-7
Active Employee Rates (Choice Plus with HSA Plan) - Employee Co-Share (Percent of Premium Based)							
Effective January 1, 2017							
Please replace Section 3.4-7 of the State of Rhode Island Payroll Manual with the new schedule effective for pay period beginning December 25, 2016, and paid on January 13, 2017.							
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%	\$55.71	\$2.82	\$0.44	\$58.97	
\$95,481 and above		25%	\$69.64	\$3.53	\$0.55	\$73.72	
<i>Family</i>							
Less than \$49,670		15%	\$117.14	\$5.48	\$0.91	\$123.53	
\$49,670 to less than \$95,481		20%	\$156.19	\$7.30	\$1.21	\$164.70	
\$95,481 and above		25%	\$195.24	\$9.13	\$1.51	\$205.88	
PART TIME		(Based on Annualized Total Rate)					
<i>Individual</i>							
Less than \$90,000		20%	\$55.71	\$2.82	\$0.44	\$58.97	
\$90,000 and above		35%	\$97.50	\$4.94	\$0.77	\$103.21	
<i>Family</i>							
Less than \$90,000		20%	\$156.19	\$7.30	\$1.21	\$164.70	
\$90,000 and above		35%	\$273.33	\$12.78	\$2.11	\$288.22	

Section 3.4-7 Chart 35
(Choice Plus w/HSA Plan)
Effective January 1, 2017