



**STATE OF RHODE ISLAND
AND
PROVIDENCE PLANTATIONS**



**2018 CALENDAR PLAN YEAR 7/1/18-12/31/18
BIWEEKLY HEALTH CO-SHARES
(CHOICE PLUS WITH HSA PLAN) RITA (Troopers)**

<u>Annualized Total Rate</u>	<u>Percentage</u>	<u>Medical</u>	<u>Dental</u>	<u>Vision</u>	<u>Total 07/01/18</u>
<i>Individual :</i>					
Less than \$98,852	20%	\$57.57	\$2.83	\$0.44	\$60.84
\$98,852 and above	25%	\$71.97	\$3.54	\$0.55	\$76.06
<i>Family :</i>					
Less than \$51,423	15%	\$121.05	\$5.51	\$0.91	\$127.47
\$51,423 to less than \$98,852	20%	\$161.40	\$7.34	\$1.21	\$169.95
\$98,852 and above	25%	\$201.76	\$9.18	\$1.51	\$212.45