

**Bi-Weekly Benefit Plan Premiums
Effective June 30, 2014**

Plan Options	County Share 2014-15	Employee's Share 2014-15
Medical Plans		
Select Plan		
Employee only	\$325.51	\$81.38
Employee + 1 dependent	\$651.02	\$162.76
Employee + Family	\$911.40	\$227.89
Premier Plan		
Employee only	\$325.51	\$115.54
Employee + 1 dependent	\$651.02	\$231.08
Employee + Family	\$911.40	\$323.54
Kaiser Permanente		
Employee only	\$236.74	\$59.19
Employee + 1 dependent	\$473.50	\$118.37
Employee + Family	\$669.99	\$167.50
Dental Plans		
Delta Dental with Orthodontia		
Employee only	\$23.39	\$0
Employee + 1 dependent	\$23.39	\$22.21
Employee + Family	\$23.39	\$53.14
Pacific Union Dental		
Employee only	\$10.79	\$0
Employee + 1 dependent	\$10.79	\$9.72
Employee + Family	\$10.79	\$18.30
Vision Plan		
Vision Service Plan		
Employee only	\$2.72	\$0
Employee + 1 dependent	\$2.72	\$2.72
Employee + Family	\$2.72	\$7.04

The new rates will be reflected on your July 3, 2014 paycheck.