City of Smyrna 2015 - 2016 Medical Contribution Schedule

BCBS - Renewal with no plan design changes - Same Contribution %

	January 2015 - December 2015						Proposed January 2016 - December 2016						
HMO with Wellness - Non-Smoker	Monthly Premiums	Monthly EE contribution	Bi-Weekly EE contribution	Monthly COS Contribution	EEs	Pd by COS	Monthly Premiums	Monthly EE contribution	Bi-Weekly EE contribution	Bi-Weekly EE Change	Monthly COS Contribution	EEs	Pd by COS
Employee	$558.77	$61.46	$28.37	$497.31	98	89%	$622.45	$68.47	$31.60	$3.23	$553.98	98	89%
Employee + One	$1,005.75	$175.78	$81.13	$829.97	67	83%	$1,120.37	$195.81	$90.38	$9.25	$924.56	67	83%
Family	$1,564.50	$261.09	$120.50	$1,303.41	106	83%	$1,742.80	$290.85	$134.24	$13.73	$1,451.95	106	83%
												271	
HMO with Wellness - Smoker													
Employee	$558.77	$111.46	$51.45	$447.31	10	80%	$622.45	$118.47	$54.68	$3.23	$503.98	10	81%
Employee + One	$1,005.75	$225.78	$104.21	$779.97	6	78%	$1,120.37	$245.81	$113.45	$9.25	$874.56	6	78%
Family	$1,564.50	$311.09	$143.58	$1,253.41	8	80%	$1,742.80	$340.85	$157.31	$13.73	$1,401.95	8	80%
												24	
HMO w/out Wellness - Non-Smoker													
Employee	$558.77	$166.46	$76.83	$392.31	16	70%	$622.45	$173.47	$80.06	$3.23	$448.98	16	72%
Employee + One	$1,005.75	$315.78	$145.75	$689.97	7	69%	$1,120.37	$335.81	$154.99	$9.25	$784.56	7	70%
Family	$1,564.50	$421.09	$194.35	$1,143.41	10	73%	$1,742.80	$450.85	$208.08	$13.73	$1,291.95	10	74%
												33	
HMO w/out Wellness - Smoker													
Employee	$558.77	$216.46	$99.91	$342.31	2	61%	$622.45	$223.47	$103.14	$3.23	$398.98	2	64%
Employee + One	$1,005.75	$365.78	$168.82	$639.97	5	64%	$1,120.37	$385.81	$178.07	$9.25	$734.56	5	66%
Family	$1,564.50	$471.09	$217.43	$1,093.41	5	70%	$1,742.80	$500.85	$231.16	$13.73	$1,241.95	5	71%
												12	
PPO Non-Smoker with Wellness													
Employee	$771.01	$146.19	$67.47	$624.82	4	81%	$858.88	$162.85	$75.16	$7.69	$696.03	4	81%
Employee + One	$1,387.78	$372.76	$172.04	$1,015.02	4	73%	$1,545.94	$415.24	$191.65	$19.61	$1,130.70	4	73%
Family	$2,189.21	$588.01	$271.39	$1,601.20	2	73%	$2,438.71	$655.03	$302.32	$30.93	$1,783.68	2	73%
												10	
PPO Smoker with Wellness													
Employee	$771.01	$190.52	$87.93	$580.49	0	75%	$858.88	$212.85	$98.24	$10.31	$646.03	0	75%
Employee + One	$1,387.78	$408.30	$188.44	$979.48	0	71%	$1,545.94	$465.24	$214.73	$26.28	$1,080.70	0	70%
Family	$2,189.21	$615.20	$283.94	$1,574.01	0	72%	$2,438.71	$705.03	$325.40	$41.46	$1,733.68	0	71%
												0	
PPO w/out Wellness - Non-Smoker													
Employee	$771.01	$251.19	$113.31	$519.82	2	67%	$858.88	$267.85	$123.62	$10.31	$591.03	2	69%
Employee + One	$1,387.78	$512.76	$229.98	$875.02	0	63%	$1,545.94	$555.24	$256.27	$26.28	$990.70	0	64%
Family	$2,189.21	$748.01	$334.71	$1,441.20	0	66%	$2,438.71	$815.03	$376.17	$41.46	$1,623.68	0	67%
												2	
PPO w/out Wellness - Smoker													
Employee	$771.01	$288.73	$133.26	$482.28	0	63%	$858.88	$317.85	$146.70	$13.44	$541.03	0	63%
Employee + One	$1,387.78	$562.76	$253.06	$825.02	0	59%	$1,545.94	$605.24	$279.34	$26.28	$940.70	0	61%
Family	$2,189.21	$798.01	$357.78	$1,391.20	0	64%	$2,438.71	$865.03	$399.24	$41.46	$1,573.68	0	65%

THE MCLENNAN AGENCY