

2019-20 CAPITAL HEALTH PLAN (10 MONTH RATES)

| COMPANY | COVERAGE TYPE | 10 MONTH DEDUCTION | EMPLOYEE PORTION | BOARD PORTION |
|----------------------------|--------------------|--------------------|------------------|---------------|
| Capital Health Plan | Single | \$790.04 | \$158.01 | \$632.03 |
| | 2 person | \$1,580.09 | \$632.04 | \$948.05 |
| | family | \$2,133.12 | \$853.25 | \$1,279.87 |
| | family/2 employees | \$2,133.12 | \$316.02 | \$1,817.10 |
| | overage dependent | \$869.05 | \$869.05 | \$0.00 |
| CHP- MVP | Single | \$589.87 | \$30.00 | \$559.87 |
| | 2 person | \$1,179.74 | \$231.69 | \$948.05 |
| | family | \$1,592.65 | \$312.78 | \$1,279.87 |
| | family/2 employees | \$1,592.65 | \$60.00 | \$1,532.65 |
| | overage dependent | \$648.86 | \$648.86 | \$0.00 |