

## 2019 Monthly Price Sheets - Full Time (30+hours/week)

Medical Plans (PPO)	Employee		Employer	Total
<b>Consumer Choice 1</b>				
Employee only	\$39.00		\$486.00	\$525.00
Employee + spouse	\$108.00		\$996.00	\$1,104.00
Employee + domestic partner	Pre-tax \$39.00	Post-tax \$69.00	\$996.00	\$1,104.00
Employee + child(ren)	\$99.00		\$926.00	\$1,025.00
Employee + family	\$167.00		\$1,436.00	\$1,603.00
Employee + family / domestic partner	Pre-tax \$98.00	Post-tax \$69.00	\$1,436.00	\$1,603.00
<b>Consumer Choice 2</b>				
Employee only	\$0.00		\$486.00	\$486.00
Employee + spouse	\$25.00		\$996.00	\$1,021.00
Employee + domestic partner	Pre-tax \$0.00	Post-tax \$25.00	\$996.00	\$1,021.00
Employee + child(ren)	\$22.00		\$926.00	\$948.00
Employee + family	\$47.00		\$1,436.00	\$1,483.00
Employee + family / domestic partner	Pre-tax \$22.00	Post-tax \$25.00	\$1,436.00	\$1,483.00
Dental Plans	Employee		Employer	Total
<b>Basic Dental Plan</b>				
Employee only	\$5.00		\$20.00	\$25.00
Employee + spouse	\$16.00		\$32.00	\$48.00
Employee + domestic partner	Pre-tax \$5.00	Post-tax \$11.00	\$32.00	\$48.00
Employee + child(ren)	\$19.00		\$40.00	\$59.00
Employee + family	\$29.00		\$54.00	\$83.00
Employee + family / domestic partner	Pre-tax \$18.00	Post-tax \$11.00	\$54.00	\$83.00
<b>Comprehensive Dental Plan</b>				
Employee only	\$19.00		\$20.00	\$39.00
Employee + spouse	\$46.00		\$32.00	\$78.00
Employee + domestic partner	Pre-tax \$19.00	Post-tax \$27.00	\$32.00	\$78.00
Employee + child(ren)	\$53.00		\$40.00	\$93.00
Employee + family	\$79.00		\$54.00	\$133.00
Employee + family / domestic partner	Pre-tax \$52.00	Post-tax \$27.00	\$54.00	\$133.00

<b>VSP Vision Plan</b>	<b>Employee</b>		<b>Employer</b>	<b>Total</b>
Employee only	\$12.18		\$0.00	\$12.18
Employee + spouse	\$19.12		\$0.00	\$19.12
Employee + domestic partner	Pre-tax \$12.18	Post-tax \$6.94	\$0.00	\$19.12
Employee + child(ren)	\$21.04		\$0.00	\$21.04
Employee + family	\$33.95		\$0.00	\$33.95
Employee + family / domestic partner	Pre-tax \$27.01	Post-tax \$6.94	\$0.00	\$33.95
<b>Tax Advantage Accounts</b>	<b>Employee</b>		<b>Employer</b>	<b>Total</b>
Health Savings Account	Minimum: \$5.00/pay period		\$0.00	Individual- \$3,500 Family- \$7,000/year \$1,000 catch-up 55 & over
Health Care Flexible Spending Account Contributions	Minimum: \$5.00/ pay period* Maximum:\$110.42/ pay period*		\$0.00	\$2,650/year
Dependent Day Care Flexible Spending Account Contributions	Minimum: \$5.00/ pay period* Maximum: \$208.34/ pay period*		\$0.00	\$5,000/year
Limited Purpose Health Care Flexible Spending Account Contributions	Minimum: \$5.00/ pay period* Maximum: \$110.42/ pay period*		\$0.00	\$2,650/year
*There are 24 Pay Periods each year.				
<b>Benefit Plan</b>	<b>Employee</b>		<b>Employer</b>	<b>Total</b>
<b>Basic Employee Term Life and AD&amp;D Insurance</b>				
1 x Total Compensation*	\$0.00		Life Insurance: \$0.083/ \$1,000 AD&D Insurance: \$0.014/ \$1,000	\$0.097 per \$1,000
(*Defined as current base salary plus prior year's variable compensation – i.e. Bonus, incentives, etc.)				
<b>Board of Directors: AD&amp;D Insurance</b>				
\$100,000	\$0.00		\$0.014 per \$1,000	\$16.80 per year
<b>Optional Basic Employee Term Life and AD&amp;D Insurance</b>				
1 x Total Compensation*	Life Insurance: \$0.12/ \$1,000	\$0.12/ \$1,000	\$0.00	\$0.135 per \$1,000
	AD&D Insurance: \$0.015/ \$1,000	\$0.015/ \$1,000		
(*Defined as current base salary plus prior year's variable compensation – i.e. Bonus, incentives, etc.)				
<b>Voluntary AD&amp;D Insurance</b>				
Minimum \$25,000 purchased in \$25,000 increments up to 10 x Total Compensation* for maximum of \$750,000	Employee:	\$0.021/ \$1,000	\$0.00	N/A
	Employee + Family:	\$0.032/ \$1,000		
(*Defined as current base salary plus prior year's variable compensation – i.e. Bonus, incentives, etc.)				

**Group Universal Life Insurance Plan (GUL)**

Employee & Spouse	<b>Age</b>	<b>Rate per \$1,000</b>	\$0.00	N/A
	Under 30	\$0.030		
	30-34	\$0.036		
	35-39	\$0.040		
	40-44	\$0.060		
	45-49	\$0.084		
	50-54	\$0.132		
	55-59	\$0.215		
	60-64	\$0.335		
	65-69	\$0.544		
	70-74	\$1.327		
75+	\$2.015			
Life Insurance – Child(ren) (\$0.10 per \$1,000)	<b>Amount</b>	<b>Rate</b>	\$0.00	N/A
	\$5,000	\$0.50		
	\$10,000	\$1.00		
	\$15,000	\$1.50		
	\$20,000	\$2.00		
	\$25,000	\$2.50		
<b>Business Travel Accident Insurance (BTA) (Three Year Pre-Paid Policy 2019-2021)</b>				
<b>Employees</b> 3x Total Compensation*	\$0.00	\$6.16/employee	N/A	
(*Defined as current base salary plus prior year's variable compensation – i.e. Bonus, incentives, etc.) Premium determined by number of employees / directors on 08/01/2018				
<b>Board of Directors</b> \$100,000	\$0.00	\$6.16/director	N/A	
<b>Long-term Disability- Class 1</b> <b>(For employees participating in a defined benefit pension plan)</b>				
66-2/3% of Total Compensation* up to \$20,000/month maximum	\$0.00	\$0.19 per \$100	N/A	
(*Defined as current base salary plus prior year's variable compensation – i.e. Bonus, incentives, etc.)				
<b>Long-term Disability- Class 2</b> <b>(For employees <u>not</u> participating in a defined benefit pension plan)</b>				
66-2/3% of Total Compensation* up to \$20,000/month maximum	\$0.00	\$0.23 per \$100	N/A	
(*Defined as current base salary plus prior year's variable compensation – i.e. Bonus, incentives, etc.)				

**[This information is deemed to be accurate. In the event that this information is in conflict with the vendor contract or the policy, the contract or policy language will prevail. The employers intend to provide these programs on an ongoing basis; however, they reserve the right to amend or terminate any program at any time.]**

## Basic Life and AD&D Insurance Monthly Premium Calculation

Premium calculation is based on total compensation – current base pay plus prior year’s variable compensation (includes bonus, incentives, etc.)

Take current base salary and apply projected 2019 salary increase

Determine the variable compensation paid in 2018, and

Add results together and round up to the next \$1,000, if not already an even \$1,000

Divide the result by \$1,000, and then multiply by combined life/AD&D premium rate (\$0.097)

<b>EXAMPLE:</b>	Total Compensation	=	\$31,436.00	
	Round to next \$1,000	=	\$32,000.00	
	Divide by \$1,000	=	\$32.00	
	Multiply by \$0.097	=	<b>\$3.10</b>	<b>Monthly Premium</b>

## Long-Term Disability Insurance Monthly Premium Calculation

Premium calculation is based on total compensation – current base pay plus prior year’s variable compensation (includes bonus, incentives, etc.)

Take current base salary and apply projected 2019 salary increase

Determine the variable compensation to be paid in 2018, and

Add results together

Divide the result by \$100, and then multiply by premium rate

Class 1: \$0.19/\$100 of earnings (Employees in the 9th District Final Average Pay Retirement Plan, AgriBank District Retirement Plan, 11th District Retirement Plan, or Northwest, FCS Retirement Plan)

Class 2: \$0.23/\$100 of earnings (Employees converted from the 9th District Account Balance plan to the Defined Contribution/401(k) plan, employees of FCS of America, Western, Northwest, FCS not participating in a defined benefit pension plan or all employees hired in 2007 and later)

<b>EXAMPLE:</b>	Total Compensation	=	\$51,436.00	
	Divide by 12	=	\$4,286.33	
	Divide by \$100	=	\$42.86	
	Multiply by \$0.19	=	<b>\$8.143</b>	<b>Monthly Premium</b>