

**MUHS Insurance Deductions - Part-Time Employees
2022-2023
20 to 30 hours per week**

| MEDICAL - KAIROS | | | | | | | |
|-------------------------|-----------------|------------------------|---------------------------------|----------------------|------------------------------------|------------------------------|-----------------------------|
| | Coverage | Monthly Premium | Monthly Combined Premium | District Pays | Bi-Weekly Payroll Deduction | Monthly Employee Cost | Annual Employee Cost |
| Co-Pay | Employee Only | 657.00 | 657.00 | 262.50 | (236.70) | (394.50) | (4,734.00) |
| | Add Spouse | 593.00 | 1,250.00 | 262.50 | (592.50) | (987.50) | (11,850.00) |
| | Add Child(ren) | 460.00 | 1,117.00 | 262.50 | (512.70) | (854.50) | (10,254.00) |
| | Add Family | 960.00 | 1,617.00 | 262.50 | (812.70) | (1,354.50) | (16,254.00) |
| HDHP \$1,500 | Employee Only | 525.00 | 525.00 | 262.50 | (157.50) | (262.50) | (3,150.00) |
| | Add Spouse | 470.00 | 995.00 | 262.50 | (439.50) | (732.50) | (8,790.00) |
| | Add Child(ren) | 366.00 | 891.00 | 262.50 | (377.10) | (628.50) | (7,542.00) |
| | Add Family | 765.00 | 1,290.00 | 262.50 | (616.50) | (1,027.50) | (12,330.00) |
| HDHP \$5,000 | Employee Only | 373.00 | 373.00 | 262.50 | (66.30) | (110.50) | (1,326.00) |
| | Add Spouse | 337.00 | 710.00 | 262.50 | (268.50) | (447.50) | (5,370.00) |
| | Add Child(ren) | 260.00 | 633.00 | 262.50 | (222.30) | (370.50) | (4,446.00) |
| | Add Family | 545.00 | 918.00 | 262.50 | (393.30) | (655.50) | (7,866.00) |

| DENTAL AND VISION | | | | | | | |
|-------------------------------------|-----------------|------------------------|---------------------------------|----------------------|------------------------------------|------------------------------|-----------------------------|
| | Coverage | Monthly Premium | Monthly Combined Premium | District Pays | Bi-Weekly Payroll Deduction | Monthly Employee Cost | Annual Employee Cost |
| Dental | Employee Only | 31.50 | 31.50 | 15.75 | (9.45) | (15.75) | (189.00) |
| | Add Spouse | 36.20 | 67.70 | 15.75 | (31.17) | (51.95) | (623.40) |
| | Add Child(ren) | 50.74 | 82.24 | 15.75 | (39.89) | (66.49) | (797.88) |
| | Add Family | 104.02 | 135.52 | 15.75 | (71.86) | (119.77) | (1,437.24) |
| Basic Vision | Employee Only | 6.08 | 6.08 | 3.04 | (1.82) | (3.04) | (36.48) |
| | Add Spouse | 3.64 | 9.72 | 3.04 | (4.01) | (6.68) | (80.16) |
| | Add Child(ren) | 3.85 | 9.93 | 3.04 | (4.13) | (6.89) | (82.68) |
| | Add Family | 9.92 | 16.00 | 3.04 | (7.78) | (12.96) | (155.52) |
| Vision with Progressive Lens | Employee Only | 7.61 | 7.61 | 3.81 | (2.28) | (3.80) | (45.60) |
| | Add Spouse | 4.56 | 12.17 | 3.81 | (5.02) | (8.36) | (100.32) |
| | Add Child(ren) | 4.81 | 12.42 | 3.81 | (5.17) | (8.61) | (103.32) |
| | Add Family | 12.42 | 20.03 | 3.81 | (9.73) | (16.22) | (194.64) |

Deductions will be taken out from Pay Peirod 4 (Pay Date 8/26/22) through Pay Period 23 (Pay Date 5/19/23)