Plan and Coverage Level	Monthly Rate with wellness participation	CCASD monthly Contribution	ER Cost Per Pay Period	EE Cost Per Pay Period W/O Wellness Participatin	EE Cost Per Pay Period w/ Level 1 wellness participation
Rates for 24 Pay Periods					
Buy-up Plan	<u>l</u>				
Employee	\$746.04	\$650.58	\$325.29	\$57.73	\$47.73
EE+1	\$1,464.10	\$650.58	\$325.29	\$416.76	\$406.76
EE+family	\$2,035.60	\$650.58	\$325.29	\$702.51	\$692.51
Base Plan					
Employee	\$670.58	\$650.58	\$325.29	\$20.00	\$10.00
EE+1	\$1,315.70	\$650.58	\$325.29	\$342.56	\$332.56
EE+family	\$1,829.16	\$650.58	\$325.29	\$599.29	\$589.29
<u>HDHP</u>					
Employee	\$589.86	\$589.86	\$294.93	\$10.00	\$0.00
EE+1	\$1,156.94	\$589.86	\$294.93	\$293.54	\$283.54
EE+family	\$1,608.22	\$589.86	\$294.93	\$519.18	\$509.18

HEALTH EQ \$60.72