			Attac	hment 2					
		PA 152 - Pu "Har	blic Employ d Cap" vs "	yee Medi 80-20" Co	cal Benefits omparison	Plan			
				.021					
		Hard C	•	80% / 20%					
<u>Health Plan</u>	2021 <u>Premium</u>	Maximum <u>Twp. Cost</u>	Employee Cost Annualized Per Pay		2021 <u>Premium</u>	80% <u>Twp. Cost</u>	20% Employee Cos Annualized Per Pa		
BCBSM PPO Plar	n Option 4 (Div	0008)							
Family	\$17,402.64	\$19,210.66	\$0.00	\$0.00	\$17,402.64	\$13,922.11	\$3,480.53	\$133.87	
2 Person	\$13,922.04	\$14,730.96	\$0.00	\$0.00	\$13,922.04	\$11,137.63	\$2,784.41	\$107.09	
Single	\$5,800.92	\$7,043.89	\$0.00	\$0.00	\$5,800.92	\$4,640.74	\$1,160.18	\$44.62	
BCBSM HDHP O	1	_							
Family	\$15,696.96	\$19,210.66	\$0.00	\$0.00		\$12,557.57		\$120.75	
2 Person	\$12,557.52	\$14,730.96	\$0.00	\$0.00	\$12,557.52	\$10,046.02	\$2,511.50	\$96.60	
Single	\$5,232.24	\$7,043.89	\$0.00	\$0.00	\$5,232.24	\$4,185.79	\$1,046.45	\$40.25	
				.020		000/ 1/	2001		
	2020	Hard Cap			80% / 20%				
<u>Health Plan</u>	2020 <u>Premium</u>	Maximum <u>Twp. Cost</u>	Employee Annualized	e Cost <u>Per Pay</u>	2020 <u>Premium</u>	80% <u>Twp. Cost</u>	20% Emplo Annualized	yee Cost <u>Per Pay</u>	
BCBSM PPO Cur	rent Plan Optic	<u>on</u>							
Family	\$20,123.88	\$18,596.96	\$1,526.92	\$58.73	\$20,123.88	\$16,099.10	\$4,024.78	\$154.80	
2 Person	\$16,099.20	\$14,260.37	\$1,838.83	\$70.72	\$16,099.20	\$12,879.36	\$3,219.84	\$123.84	
Single	\$6,708.00	\$6,818.87	\$0.00	\$0.00	\$6,708.00	\$5 <i>,</i> 366.40	\$1,341.60	\$51.60	
BCBSM PPO Plan	1								
Family	\$17,091.12	\$18,596.96	\$0.00	\$0.00	\$17,091.12	\$13,672.90		\$131.47	
2 Person	\$13,672.92	\$14,260.37	\$0.00	\$0.00	\$13,672.92	\$10,938.34		\$105.18	
Single	\$5,697.00	\$6,818.87	\$0.00	\$0.00	\$5,697.00	\$4,557.60	\$1,139.40	\$43.82	
BCBSM HDHP O				1		4		4	
Family	\$15,384.36	\$18,596.96	\$0.00	\$0.00	\$15,384.36	\$12,307.49		\$118.34	
2 Person	\$12,307.44	\$14,260.37	\$0.00	\$0.00	\$12,307.44	\$9,845.95		\$94.67	
Single	\$5,128.08	\$6,818.87	\$0.00	\$0.00 019	\$5,128.08	\$4,102.46	\$1,025.62	\$39.45	
		Hard C		.019		<u> </u>	20%		
	2019	Maximum	Employe	o Cost	80% / 20% 2019 80% 20% Employee Cost				
<u>Health Plan</u>	<u>Premium</u>	Twp. Cost	Annualized	Per Pay	Premium	Twp. Cost	Annualized	Per Pay	
BCBSM PPO Cur	1 1		44,000,44	450.40	440 600 70		40.004.44	4450.00	
Family	\$19,620.72	\$18,232.31	\$1,388.41	\$53.40	\$19,620.72	\$15,696.58		\$150.93	
2 Person	\$15,696.48	\$13,980.75	\$1,715.73	\$65.99	\$15,696.48	\$12,557.18		\$120.74	
Single BCBSM PPO Plar	\$6,540.24	\$6,685.17	\$0.00	\$0.00	\$6,540.24	\$5,232.19	\$1,308.05	\$50.31	
Family	\$16,673.76	\$18,232.31	\$0.00	\$0.00	\$16,673.76	\$13,339.01	\$3,334.75	\$128.26	
2 Person	\$13,339.20	\$13,980.75	\$0.00	\$0.00	\$13,339.20	\$10,671.36		\$102.61	
Single	\$5,557.92	\$6,685.17	\$0.00	\$0.00	\$5,557.92	\$4,446.34		\$42.75	
BCBSM HDHP O									
Family	\$15,175.20	\$18,232.31	\$0.00	\$0.00	\$15,175.20	\$12,140.16	\$3,035.04	\$116.73	
2 Person	\$12,140.16	\$13,980.75	\$0.00	\$0.00	\$12,140.16	\$9,712.13	\$2,428.03	\$93.39	
Single	\$5,058.36	\$6,685.17	\$0.00	\$0.00 018	\$5 <i>,</i> 058.36	\$4,046.69	\$1,011.67	\$38.91	
		Hard Cap			80% / 20%				
Health Plan	2018 <u>Premium</u>	Maximum <u>Twp. Cost</u>	Employe Annualized	e Cost <u>Per Pay</u>	2018 <u>Premium</u>	80% <u>Twp. Cost</u>	20% Emplo Annualized	yee Cost <u>Per Pay</u>	
Blue Cross Blue S				<u> uy</u>	<u> </u>	<u>p. 0030</u>	<u></u>	<u> uy</u>	
Family	\$17,373.60	\$17,892.36	\$0.00	\$0.00	\$17,373.60	\$13,898.88	\$3,474.72	\$133.64	
2 Person	\$13,898.88	\$17,892.50	\$0.00 \$178.81	\$0.00 \$6.88	\$17,373.80 \$13,898.88	\$13,898.88		\$155.64 \$106.91	
Single	\$15,898.88	\$15,720.07 \$6,560.52	\$178.81 \$0.00	\$0.88 \$0.00	\$15,898.88 \$5,791.20	\$11,119.10 \$4,632.96		\$106.91 \$44.55	
Siligle	32,791.20	ş0,500.52	\$0.00	ŞU.UU	32,191.20	,94,032.9b	31,138.24	Ş44.55	

			2	017					
	Hard Cap				omparison 80% / 20%				
	2017	Maximum	Employee Cost		2017	80%	20% Emplo	20% Employee Cost	
Health Plan	<u>Premium</u>	Twp. Cost	Annualized	Per Pay	Premium	Twp. Cost	Annualized	Per Pay	
Blue Cross Blue S									
Family	\$19,436.28	\$17,304.02	\$2,132.26	\$82.01	\$19,436.28	\$15,549.02	\$3,887.26	\$149.51	
2 Person	\$15,549.00	\$13,268.93	\$2,280.07	\$87.70	\$15,549.00	\$12,439.20	\$3,109.80	\$119.61	
Single	\$6,478.80	\$6,344.80	\$134.00	\$5.15	\$6,478.80	\$5,183.04	\$1,295.76	\$49.84	
2016									
	Hard Cap				80% / 20%				
	2016 Maximum		Employee Cost		2016				
<u>Health Plan</u>	<u>Premium</u>	Twp. Cost	Annualized	<u>Per Pay</u>	<u>Premium</u>	Twp. Cost	<b>Annualized</b>	Per Pay	
Blue Cross Blue Shield of Michigan (121 members)									
Family	\$15,244.92	\$16,751.23	\$0.00	\$0.00	\$15,244.92	\$12,195.94	\$3,048.98	\$117.27	
2 Person	\$12,195.96	\$12,845.04	\$0.00	\$0.00	\$12,195.96	\$9,756.77	\$2,439.19	\$93.82	
Single	\$5,081.64	\$6,142.11	\$0.00	\$0.00	\$5,081.64	\$4,065.31	\$1,016.33	\$39.09	
2015									
	2015	Hard C 2015 Maximum		Cap Employee Cost		80% / 20% 15 80% 20% Employee		una Cant	
Health Plan	Premium	Twp. Cost	Annualized	Per Pay	2015 Premium	Twp. Cost	20% Emplo Annualized	yee Cost Per Pay	
Blue Care Netwo		-						<u>F</u>	
Family	\$15,565.80	\$16,342.66	\$0.00	\$0.00	\$15,565.80	\$12,452.64	\$3,113.16	\$119.74	
2 Person	\$12,475.44	\$12,531.75	\$0.00	\$0.00		\$9,980.35	\$2,495.09	\$95.96	
Single	\$5,722.56	\$5,992.30	\$0.00	\$0.00		\$4,578.05	\$1,144.51	\$44.02	
BCBSM (0 members currently)				+	<i>+•/</i> · <i>_</i> ••	+ ./	+-/	+	
Family	\$34,142.88	\$16,342.66	\$17,800.22	\$684.62	\$34,142.88	\$27,314.30	\$6,828.58	\$262.64	
2 Person	\$27,314.40	\$12,531.75	\$14,782.65	\$568.56		\$21,851.52	\$5,462.88	, \$210.11	
Single	\$11,380.92	\$5,992.30	\$5,388.62	\$207.25	. ,	\$9,104.74	\$2,276.18	\$87.55	
-			2	014					
	Hard Cap				80% / 20%				
	2014		Employee		2014	80%	20% Emplo	-	
<u>Health Plan</u>	<u>Premium</u>	Twp. Cost	<u>Annualized</u>	Per Pay	<u>Premium</u>	Twp. Cost	<u>Annualized</u>	Per Pay	
Blue Care Netwo	<u>ork</u>								
Family	\$16,370.76	\$15,975.23	\$395.53	\$15.21	\$16,370.76	\$13,096.61	\$3,274.15	\$125.93	
2 Person	\$13,120.68	\$11,715.17		\$54.06		\$10,496.54		\$100.93	
Single	\$6,018.72	\$5,857.58	\$161.14	\$6.20	\$6,018.72	\$4,814.98	\$1,203.74	\$46.30	
2013									
	Hard Cap 2013 Employee Cost			80% / 20% 2013 80% 20% Employee Cost					
Hoolth Blan	2013 Premium	Two Cost			2013 Promium	80% Twp. Cost	-	-	
<u>Health Plan</u> Plue Care Notwo		<u>Twp. Cost</u>	<u>Annualized</u>	Per Pay	<u>Premium</u>	<u>Twp. Cost</u>	<u>Annualized</u>	<u>Per Pay</u>	
<u>Blue Care Netwo</u> Family		\$1E E2E 00	¢1 252 00	652.00	¢16 077 00	612 F01 C0	60 07F 10	¢120.02	
Family 2 Borcon	\$16,877.00	\$15,525.00 \$11,385.00		\$52.00 \$82.35		\$13,501.60 \$10,820.80		\$129.82 \$104.05	
2 Person Single	\$13,526.00 \$6,205.00	\$11,385.00 \$5,692.50	\$2,141.00 \$512.50	\$82.35 \$19.71	\$13,526.00 \$6,205.00	\$10,820.80 \$4,964.00	\$2,705.20 \$1,241.00	\$104.05 \$47.73	
Siligie		- <del>3</del> 5,092.50		- 319.71	v,205.0U	ə+,504.0U	71,241.0U	7+/./3	

2012									
	Hard Cap				omparison 80% / 20%				
	2012		Employee Cost		2012	80%	20% Employee Cost		
Health Plan	<u>Premium</u>	<u>Twp. Cost</u>	<u>Annualized</u>	<u>Per Pay</u>	<u>Premium</u>	<u>Twp. Cost</u>	<u>Annualized</u>	Per Pay	
Blue Care Network									
Family	\$15,937.00	\$15,000.00	\$937.00	\$36.04	\$15,937.00	\$12,750.00	\$3,187.00	\$122.59	
2 Person	\$12,773.00	\$11,000.00	\$1,773.00	\$68.19	\$12,773.00	\$10,218.00	\$2 <i>,</i> 555.00	\$98.25	
Employee & Chil	\$12,773.00	\$11,000.00	\$1,773.00	\$68.19	\$12,773.00	\$10,218.00	\$2 <i>,</i> 555.00	\$98.25	
Single	\$5,859.00	\$5,500.00	\$359.00	\$13.81	\$5 <i>,</i> 859.00	\$4,687.00	\$1,172.00	\$45.07	
Priority Health									
Family	\$21,318.00	\$15,000.00	\$6,318.00	\$243.00	\$21,318.00	\$17,054.00	\$4,264.00	\$163.98	
Single	\$7,586.00	\$5,500.00	\$2,086.00	\$80.23	\$7,586.00	\$6,069.00	\$1,517.00	\$58.35	
2 Person	\$16,978.00	\$11,000.00	\$5 <i>,</i> 978.00	\$229.92	\$16,978.00	\$13,582.00	\$3,396.00	\$130.60	
Family Other	\$20,635.00	\$15,000.00	\$5,635.00	\$216.73	\$20,635.00	\$16,508.00	\$4,127.00	\$158.73	