## 2015-16 Medical Employee Cost Share

<table>
<thead>
<tr>
<th>Plan Choices</th>
<th>Medical Plan Information</th>
<th>Prescription Plan</th>
<th>Employee Cost</th>
<th>12-Month Employee</th>
<th>10 Month Employee</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>PPO 4 RX-A</strong></td>
<td>Co-Insurance: 90%</td>
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<tr>
<td></td>
<td>Co-Pay: $20</td>
<td>Deductible: $100</td>
<td>Retail: (30-day Supply): $5 Generic; $22 Brand</td>
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<td></td>
<td>Mail Order (90-Day Supply): $10 Generic $44 Brand</td>
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<td>Annual Cost</td>
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<td>Employee Only</td>
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<tr>
<td>Employee + Spouse</td>
<td>$ 2,436.00</td>
<td>$ 203.00</td>
<td>$ 243.60</td>
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<td>$ 2,220.00</td>
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<td>$ 3,732.00</td>
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<td><strong>Wellness RX-C</strong></td>
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<td>Co-Pay: $20 / $40</td>
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<td>Retail: (30-day Supply): $5 Generic; $22 Brand</td>
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<tr>
<td>Employee + Spouse</td>
<td>$ 1,308.00</td>
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<td>Employee + Family</td>
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<td>PPO HDHP-1</td>
<td>$1,300</td>
<td>80% after deductible is met (See Summary Plan Document)</td>
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<td>CVT- Wellness</td>
<td>$20/$40 (90/10 -- $500 deduct)</td>
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2015-16 Dental and Vision: No Employee Cost