



# EMPLOYEE SEMI-MONTHLY CONTRIBUTIONS

<b>Aetna Medical - Rates</b>				<b>EMPLOYEE RESPONSIBILITY</b>
<b>PREMIUM PLAN</b>	<b>TOTAL MONTHLY PREMIUM</b>	<b>EMPLOYER MONTHLY SHARE</b>	<b>EMPLOYEE MONTHLY SHARE</b>	<b>EMPLOYEE SEMI-MONTHLY SHARE</b>
Employee	\$1,068.00	\$951.00	\$117.00	\$58.50
Employee + Child	\$1,614.00	\$1,239.00	\$375.00	\$187.50
Employee + Spouse	\$2,174.00	\$1,429.00	\$745.00	\$372.50
Employee + 2 Children	\$2,151.00	\$1,530.00	\$621.00	\$310.50
Employee + Family	\$3,016.00	\$2,092.00	\$924.00	\$462.00
<b>Married Employee Family Both spouses work for Hanover</b>	<b>\$3,016.00</b>	<b>\$2,298.00</b>	<b>\$718.00</b>	<b>\$359.00</b>
<b>STANDARD PLAN</b>				
Employee	\$704.00	\$660.00	\$44.00	\$22.00
Employee + Child	\$1,061.00	\$902.00	\$159.00	\$79.50
Employee + Spouse	\$1,428.00	\$1,086.00	\$342.00	\$171.00
Employee + 2 Children	\$1,413.00	\$1,107.00	\$306.00	\$153.00
Employee + Family	\$1,982.00	\$1,515.00	\$467.00	\$233.50
<b>Married Employee Family Both spouses work for Hanover</b>	<b>\$1,982.00</b>	<b>\$1,721.00</b>	<b>\$261.00</b>	<b>\$130.50</b>
<b>Consumer Driven Health Plan w/H.S.A.</b>				
Employee	\$603.00	\$577.00	\$26.00	\$13.00
Employee + Child	\$912.00	\$789.00	\$123.00	\$61.50
Employee + Spouse	\$1,225.00	\$921.00	\$304.00	\$152.00
Employee + 2 Children	\$1,212.00	\$959.00	\$253.00	\$126.50
Employee + Family	\$1,701.00	\$1,325.00	\$376.00	\$188.00
<b>Married Employee Family Both spouses work for Hanover</b>	<b>\$1,701.00</b>	<b>\$1,531.00</b>	<b>\$170.00</b>	<b>\$85.00</b>
<b>VSP Vision - Rates</b>				
	<b>TOTAL MONTHLY PREMIUM</b>	<b>EMPLOYER MONTHLY SHARE</b>	<b>EMPLOYEE MONTHLY SHARE</b>	<b>EMPLOYEE SEMI-MONTHLY SHARE</b>
Employee	\$4.60	\$0.00	\$4.60	\$2.30
Employee + 1 Child	\$9.20	\$0.00	\$9.20	\$4.60
Employee + Spouse	\$9.20	\$0.00	\$9.20	\$4.60
Employee + 2 Children	\$9.30	\$0.00	\$9.30	\$4.65
Employee + Family	\$14.82	\$0.00	\$14.82	\$7.41
<b>Aetna Dental - Rates</b>				
<b>Aetna Low Option</b>	<b>TOTAL MONTHLY PREMIUM</b>	<b>EMPLOYER MONTHLY SHARE</b>	<b>EMPLOYEE MONTHLY SHARE</b>	<b>EMPLOYEE SEMI-MONTHLY SHARE</b>
Employee	\$25.72	\$0.00	\$25.72	\$12.86
Employee + 1 Child	\$57.86	\$0.00	\$57.86	\$28.93
Employee + Spouse	\$51.44	\$0.00	\$51.44	\$25.72
Employee + 2 or More Children	\$57.86	\$0.00	\$57.86	\$28.93
Employee + Family	\$83.58	\$0.00	\$83.58	\$41.79
<b>Aetna High Option</b>				
Employee	\$36.74	\$0.00	\$36.74	\$18.37
Employee + 1 Child	\$82.66	\$0.00	\$82.66	\$41.33
Employee + Spouse	\$73.47	\$0.00	\$73.47	\$36.74
Employee + 2 or More Children	\$82.66	\$0.00	\$82.66	\$41.33
Employee + Family	\$119.39	\$0.00	\$119.39	\$59.70