## Medical Plan January 2021 – December 2021 Per Paycheck Rates

Coverage Level	Employee			Employee + 1			Family		
Plan	Employee Contribution	Pace Contribution	Pace Subsidy	Employee Contribution	Employer Contribution	Pace Subsidy	Employee Contribution	Employer Contribution	Pace Subsidy
Consumer Core HDHP/HSA Plan	\$29.46	\$406.42	93%	\$246.23	\$602.50	71%	\$369.36	\$899.95	71%
Network Core Plan	\$113.04	\$486.90	81%	\$370.08	\$760.51	67%	\$553.52	\$1,116.10	67%
Choice PPO Plan	\$147.98	\$486.90	77%	\$459.89	\$760.51	62%	\$687.82	\$1,116.10	62%

