

**OE3 Health Plan Cost Information
Effective January 2013 PP2**

Plan A	Employee Only	Employee + 1	Employee + 2 or More
County Contribution	374.69	706.67	969.90
Employee	6.81	56.33	60.60
Total	381.50	763.00	1,030.50

Kaiser	Employee Only	Employee + 1	Employee + 2 or More
County Contribution	358.00	716.00	945.00
Employee			
Total	358.00	716.00	945.00

NOTE: OE3 pays these premium amounts over 24, rather than 26, pay periods. The first two (2) pay periods of the month are charged; if there are three (3) pay periods in the month, the third pay period is not charged. If you have any questions, please call Payroll at 621-5482 or your Union Representative.