

**2017/2018 Full-Time Board-Approved Kirkwood Employees & Full-Time Salaried/Exempt Hotel Employees  
Flexible Benefit/Insurance Premiums for July 1, 2017 - June 30, 2018**

<b>Flexible Benefit Per Pay Period -</b>	<b>\$ 182.50</b>	<b>For those participating in PPO Premier</b>	<b>\$</b>	<b>4,380.00</b>
<b>Flexible Benefit Per Pay Period -</b>	<b>\$ 210.00</b>	<b>For those participating in PPO Choice</b>	<b>\$</b>	<b>5,040.00</b>
<b>Flexible Benefit Per Pay Period -</b>	<b>\$ 260.50</b>	<b>For those participating in HMO Essential</b>	<b>\$</b>	<b>6,252.00</b>

Premiums are deducted twice per month, beginning June 5, 2017. In months with 3 pay periods, deduction taken first two checks of the month.

Flex benefit dollars are provided twice monthly, the first two checks in months with 3 pay periods.

Medical	Dental	Vision	HMO Essential		PPO Choice		PPO Premier	
			Premium deducted from your pay per pay period	Difference between flex benefit/pay period added & premium deduction	Premium deducted from your pay per pay period	Difference between flex benefit/pay period added & premium deduction	Premium deducted from your pay per pay period	Difference between flex benefit/pay period added & premium deduction
Single	Single	Single	\$ -	\$ 260.50	\$ -	\$ 210.00	-	\$ 182.50
Single	Single	Family	5.50	255.00	5.50	204.50	5.50	177.00
Single	Single+1	Single	20.00	240.50	20.00	190.00	20.00	162.50
Single	Single+1	Family	25.50	235.00	25.50	184.50	25.50	157.00
Single	Family	Single	35.00	225.50	35.00	175.00	35.00	147.50
Single	Family	Family	40.50	220.00	40.50	169.50	40.50	142.00
Employee+Spouse	Single	Single	233.00	27.50	286.50	(76.50)	314.00	(131.50)
Employee+Spouse	Single	Family	238.50	22.00	292.00	(82.00)	319.50	(137.00)
Employee+Spouse	Single+1	Single	253.00	7.50	306.50	(96.50)	334.00	(151.50)
Employee+Spouse	Single+1	Family	258.50	2.00	312.00	(102.00)	339.50	(157.00)
Employee+Spouse	Family	Single	268.00	(7.50)	321.50	(111.50)	349.00	(166.50)
Employee+Spouse	Family	Family	273.50	(13.00)	327.00	(117.00)	354.50	(172.00)
Employee+Child(ren)	Single	Single	201.00	59.50	247.00	(37.00)	270.50	(88.00)
Employee+Child(ren)	Single	Family	206.50	54.00	252.50	(42.50)	276.00	(93.50)
Employee+Child(ren)	Single+1	Single	221.00	39.50	267.00	(57.00)	290.50	(108.00)
Employee+Child(ren)	Single+1	Family	226.50	34.00	272.50	(62.50)	296.00	(113.50)
Employee+Child(ren)	Family	Single	236.00	24.50	282.00	(72.00)	305.50	(123.00)
Employee+Child(ren)	Family	Family	241.50	19.00	287.50	(77.50)	311.00	(128.50)
Family	Single	Single	461.00	(200.50)	565.50	(355.50)	621.00	(438.50)
Family	Single	Family	466.50	(206.00)	571.00	(361.00)	626.50	(444.00)
Family	Single+1	Single	481.00	(220.50)	585.50	(375.50)	641.00	(458.50)
Family	Single+1	Family	486.50	(226.00)	591.00	(381.00)	646.50	(464.00)
Family	Family	Single	496.00	(235.50)	600.50	(390.50)	656.00	(473.50)
Family	Family	Family	501.50	(241.00)	606.00	(396.00)	661.50	(479.00)

Update: 4/21/2017

