



Open Enrollment is May 1 – June 15, 2017

DEADLINE for enrollment changes is June 15, 2017.

Changes are effective July 1, 2017

****AEA and ASD remain in bargaining as to ASD contribution**

	Plan C/B
Deductible Single/Family	\$500/\$1500
20% Co-Insurance	\$2000/\$6000
Primary Care Office Visit –in Network	Subject to deductible/Co-insurance
Massage Therapy In-Network	20 Calendar Year subject to deductible and Co-Insurance
Chiropractic In-Network	20 Calendar Year subject to deductible and Co-Insurance
Prescriptions 30Day	\$17/\$30/\$60
Specialty Scripts	\$100/\$400/\$600
Teladoc	No Charge
BridgeHealth	No Charge
FY 18 Premium	\$1,856
FY 18 ASD Contrib**	\$1,580
Balance Due	\$276
12 mo prem / 10 checks	\$331.20
AEA Use of Reserve **	-\$165.60
Payroll Deduction**	\$165.60
** Assumption**	

OR

	Plan F/B
	\$1500/\$3000
	\$3000/\$6000
	\$25 (first 6 in calendar year)
	20 Calendar Year subject to deductible and Co-Insurance
	20 Calendar Year subject to deductible and Co-Insurance
	\$17/\$30/\$60
	\$100/\$400/\$600
	No Charge
	No Charge
	\$1,680
	\$1,580
	\$100
	\$120.00
	-\$60.00
	\$60.00