

Medical/Rx Employee Contributions Plan Year 2020: January 1, 2020 - December 31, 2020

SALARIED (BI-WEEKLY)

Plan	Employee Only	Employee + Spouse	Employee + Child(ren)	Employee + Family
Premium	\$114.16	\$235.66	\$216.32	\$331.15
Preferred	\$43.54	\$97.97	\$89.93	\$137.66
Economy	\$8.64	\$29.93	\$27.45	\$42.06

ATU 788 (WEEKLY)

Plan	Employee Only	Employee + Spouse	Employee + Child(ren)	Employee + Family
Premium	\$60.43	\$117.83	\$108.16	\$165.58
Preferred	\$25.12	\$48.98	\$44.97	\$68.83
Economy	\$7.67	\$14.96	\$13.73	\$21.03

IBEW (WEEKLY)

Plan	Employee Only	Employee + Family
Premium	\$58.75	\$139.63
Preferred	\$23.45	\$60.25
Economy	\$6.00	\$21.01