

**BLUE CROSS & BLUE SHIELD OF TN  
COUNTY GENERAL/HIGHWAY FUNDS  
PAYROLL DEDUCTIONS SCHEDULE**

**EFFECTIVE AUGUST 1, 2016**

<u>HEALTH INSURANCE</u>		<u>BASIC-88230-0001</u>		<u>2-DED.MONTHLY</u>	
<b>TYPE</b>	<b>TOTAL COST</b>	<b>COUNTY COST 80%</b>	<b>EMP'S COST 20%</b>	<b>DED. AMT.</b>	<b>W/SPOUSE SURCHARGE (BI-WEEKLY)</b>
INDIVIDUAL	686.50	549.20	137.30	68.65	
2-PERSON	1400.68	1120.56	280.12	140.06	190.06
FAMILY	1723.18	1378.56	344.62	172.31	222.31

<u>DENTAL INSURANCE</u>		<u>ENHANCED 93120-0002</u>		<u>2-DED. MONTHLY</u>	
		<b>65%</b>	<b>35%</b>		
INDIVIDUAL	29.16	18.96	10.20	5.10	
2-PERSON	61.34	39.88	21.46	10.73	
FAMILY	80.54	52.36	28.18	14.09	

**BASIC DENTAL IS NO LONGER OFFERED TO EMPLOYEES**

<u>DENTAL INSURANCE</u>		<u>BASIC 93120-0001</u>		<u>2-DED.MONTHLY</u>	
INDIVIDUAL	12.38	10.60	1.78	0.89	
2-PERSON	25.44	21.76	3.68	1.84	
FAMILY	37.58	32.18	5.40	2.70	

**RETIREE'S INSURANCE**

<b>TYPE</b>	<b>TOTAL COST</b>	<b>COUNTY COST 75%</b>	<b>EMP'S COST 25%</b>	<b>W/SPOUSE SURCHARGE (MONTHLY)</b>
INDIVIDUAL	686.50	514.88	171.62	
2-PERSON	1400.68	514.88	885.80	985.80
FAMILY	1723.18	514.88	1208.30	1308.30

<u>COBRA COST</u>	<u>OPT. 1 Health</u>	<u>OPT. 2 Health</u>	<u>ENH. DENTAL</u>	<u>BASIC DENTAL</u>
<b><u>COBRA RATES EFFECTIVE SEPTEMBER 1, 2016</u></b>				
INDIVIDUAL	700.23	470.70	29.75	12.63
2-PERSON	1428.70	962.73	62.57	25.95
FAMILY	1757.65	1179.72	82.15	38.34