

Catholic Employee Benefit Group
Health/ Dental/ Life /Vision Insurance Open Enrollment

May 1, 2017 – May 31, 2017

	<u>Monthly</u>	<u>Employee</u>	<u>Employer</u>
Employee	\$820.00	\$82.00	\$738.00
Employee + Spouse	\$1,640.00	\$902.00	\$738.00
Employee + Children	\$1,396.00	\$658.00	\$738.00
Employee + Family	\$1,732.00	\$994.00	\$738.00

Individual cost for the employee's part of the monthly premium is 10% of the \$820.00 or \$82.00 per month by payroll deduction. Employees with Spouse, Children, or Family coverage pay full cost of the premium.

NEW INSURANCE rates go into effect July 1, 2017