BENEFIT RATES: January 1, 2024 to December 31, 2024

			Annual Rates *	Cost to Member/ Employee	% of Rate to Member/ Employee	Cost to House	% of Rate to House
	Medical						
1a	Community Blue PPO #1	single two person family	\$8,367 \$19,405 \$25,103	\$1,673 \$3,881 \$5,021	20% 20% 20%	\$6,694 \$15,524 \$20,082	80% 80% 80%
1b	Community Blue PPO #2	single two person family	\$7,652 \$17,248 \$22,957	\$765 \$1,725 \$2,296	10% 10% 10%	\$6,887 \$15,523 \$20,661	90% 90% 90%
1c	Simply Blue - Health Savings Account (H.S.A.)	single two person family	\$5,410 \$12,986 \$16,230	\$271 \$649 \$812	5% 5% 5%	\$6,140 \$14,337 \$17,419	113% 110% 107%
	House contribution to Member/Employee H.S.A.	single two person family	\$1,000 \$2,000 \$2,000	\$0 \$0 \$0	0% 0% 0%		
	Dental						
2a	Delta Dental - Comprehensive	single two person family	\$625 \$1,181 \$2,084	\$125 \$236 \$417	20% 20% 20%	\$500 \$945 \$1,667	80% 80% 80%
2b	Delta Dental - Modified	single two person family	\$303 \$560 \$1,021	\$61 \$112 \$204	20% 20% 20%	\$242 \$448 \$817	80% 80% 80%

			Annual Rates *	Cost to Member/ Employee	% of Rate to Member/ Employee	Cost to House	% of Rate to House
	Vision						
3	VSP Vision administered through BCBSM	single two-person family	\$97 \$233 \$291	\$19 \$47 \$58	20% 20% 20%	\$78 \$186 \$233	80% 80% 80%
	Life Insurance						
4	Minnesota Life Insurance - 2 times pay		variable	\$0	0%	variable	100%
	Long Term Disability Insurance						
5	LTD (Employees Only)		variable	\$0	0%	variable	100%
	401(k)						
6	401(k) - administered by VOYA		variable (salary based)	\$0	0%	variable	100%
	Dependent Life Insurance						
7	Minnesota Life Insurance (Members and Employees)		variable (level based)	Employee Members	100% 100%	Employee Members	0% 0%

^{*} House is self funded for medical, dental and vision plans and the rates are illustrated.

Reimbursement for opting out of items 1 through 5 is \$2,990. There is no reimbursement for opting out of individual items.