



Medical, Dental, Vision, Life and AD&D Benefits

Effective January 1, 2023

MVP Option 1	Monthly Premium	Hospital Share 75%	Employee Share 25%	Bi-Weekly Contrib. (24 PP's)	With FSA Contrib. to Cover Deductible (24 PP's)
Individual	\$1,220.31	\$915.23	\$305.08	\$152.54	\$178.58
Family	\$3,157.68	\$2,368.26	\$789.42	\$394.71	\$446.79
\$2,500 Individual / \$5,000 Family Deductible / 75% contribution by ERH for full time – pro-rated for part time					
Out of Network: After deductible met, 40% covered					

MVP Option 2	Monthly Premium	Hospital Share 75%	Employee Share 25%	Bi-Weekly Contrib. (24 PP's)	With FSA Contrib. to Cover Deductible (24 PP's)
Individual	\$749.30	\$561.98	\$187.32	\$93.66	\$145.75
Family	\$2,231.18	\$1,673.38	\$557.80	\$278.90	\$383.06
\$5,000 Individual / \$10,000 Family Deductible / 75% contribution by ERH for full time – pro-rated for part time					
In-Network coverage only					
<i>We offer minimal essential coverage as required by the ACA for all eligible employees.</i>					

Flexible Spending Account (FSA)
Employees may elect to contribute up to \$3,050 in 2023. Employees can roll over up to \$570 of unused 2022 contributions to 2023.

Guardian Voluntary Dental Plans	Base Plan Monthly	Base Plan Bi-Weekly (24 PP's)	Enhanced Plan Monthly	Enhanced Plan Bi-Weekly (24 PP's)
Employee	\$43.98	\$21.99	\$53.82	\$26.91
Emp. & Spouse	\$81.90	\$40.95	\$100.25	\$50.13
Emp. & Child(ren)*	\$100.41	\$50.21	\$109.66	\$54.83
Family*	\$138.32	\$69.16	\$166.99	\$83.50

* include orthodontia benefit

Guardian Voluntary Vision Plan	Monthly	Bi-Weekly (24 PP's)
Employee	\$5.49	\$2.75
Emp. & Spouse	\$9.24	\$4.62
Emp. & Child(ren)	\$9.41	\$4.71
Family*	\$14.90	\$7.45

Guardian Voluntary Life & AD&D Plans
Access Benefits Portal for rates