



Lake Forest Academy Benefit Contributions 2020-2021

Medical - Blue Cross Blue Shield

BlueEdge HSA MPS91605 - \$1,500/\$3,000 Deductible Plan

	Monthly Premiums Per Employee	LFA Monthly Contribution Per Employee	Employee Monthly Contribution	Employee Cost per Payperiod (24)
Employee Only	664.48	624.48	40.00	20.00
Family with 2 Employees	2,013.97	1,893.97	120.00	60.00
Employee & Child(ren)	1,305.02	1,040.02	265.00	132.50
Employee & Spouse	1,373.43	1,053.43	320.00	160.00
Employee & Family	2,013.97	1,448.97	565.00	282.50

BlueEdge HSA MIEEA2010 - \$1,500/\$3,000 Deductible Plan (New)

	Monthly Premiums Per Employee	LFA Monthly Contribution Per Employee	Employee Monthly Contribution	Employee Cost per Payperiod (24)
Employee Only	630.93	630.93	0.00	0.00
Family with 2 Employees	1,912.30	1,892.30	20.00	10.00
Employee & Child(ren)	1,239.14	1,039.14	200.00	100.00
Employee & Spouse	1,304.09	1,044.09	260.00	130.00
Employee & Family	1,912.30	1,447.30	465.00	232.50

BlueEdge HSA MIEEA2030 - \$2,500/\$5,000 Deductible Plan (New)

	Monthly Premiums Per Employee	LFA Monthly Contribution Per Employee	Employee Monthly Contribution	Employee Cost per Payperiod (24)
Employee Only	579.44	579.44	0.00	0.00
Family with 2 Employees	1,756.23	1,736.23	20.00	10.00
Employee & Child(ren)	1,138.00	955.00	183.00	91.50
Employee & Spouse	1,197.66	967.66	230.00	115.00
Employee & Family	1,756.23	1,356.23	400.00	200.00

Dental Insurance - Guardian

	Monthly Premiums Per Employee	LFA Monthly Contribution Per Employee	Employee Monthly Contribution	Employee Cost per Payperiod (24)
Employee Only	50.00	50.00	0.00	0.00
Family	140.00	70.00	70.00	35.00

Vision Insurance - VSP

	Monthly Premiums	Deduction per Payperiod (24)
Employee Only	8.26	4.13
Employee & One	13.22	6.61
Employee & Children	13.50	6.75
Employee & Family	21.76	10.88