



SEA 2018 Monthly Rate Chart

All plans include vision coverage through VSP and
a \$50,000 life insurance policy through The Hartford Insurance
coverage.

Medical Plan	With Delta Dental PPO			With United Concordia Dental HMO		
	Employee only	Employee plus one dependent	Employee + 2 or more dependents	Employee only	Employee plus one dependent	Employee + 2 or more dependents
Kaiser 10/10	No Cost To Employee	\$89.82	\$638.49	No Cost To Employee	\$24.22	\$524.49
UnitedHealthCare Package A Network 1	No Cost To Employee	\$299.82	\$924.49	No Cost To Employee	\$234.22	\$810.49
UnitedHealthCare Package A Network 2	No Cost To Employee	\$768.82	\$1,584.49	No Cost To Employee	\$703.22	\$1,470.49
UnitedHealthCare Package A Network 3	No Cost To Employee	\$1,033.82	\$1,961.49	No Cost To Employee	\$968.22	\$1,847.49
UnitedHealthCare PPO 1 With Acupuncture	\$209.03	\$1,541.82	\$2,660.49	\$178.03	1,476.22	\$2,546.49
UnitedHealthCare Alliance HMO 1	No Cost To Employee	\$386.82	\$1,030.49	No Cost To Employee	\$321.22	\$916.49
SIMNSA HMO <i>There are some eligibility requirements for this plan. Please review criteria before selecting this plan.</i>	All Tiers No Cost To Employee			All Tiers No Cost To Employee		