

Medical Insurance



Eligibility: Effective 1st of the month following employment. See www.bankwithchoice.com/mybenefits for full plan summary.

Plan Type	Choice per pay Premium Cost	Employee per pay Premium Cost	In Network Deductible	In Network Out of Pocket Max
HealthPartners 80				
Employee Only	\$258.41	\$42.07	3,200	\$6,000
Employee + Child/Children <i>*denotes employee + children</i>	\$441.24	\$84.05	\$4,800/\$6,400*	\$9,000/\$12,000*
Employee + Spouse/Domestic Partner** <i>**Domestic partner eligibility requires shared residence & jointly responsible for basic living expenses.</i>	\$456.43	\$136.34	\$4,800	\$9,000
Family	\$692.17	\$195.23	\$6,400	\$12,000
HealthPartners 80 Max Liability				
	Single	Employee + Child/Children	Employee + Spouse	Family
Annual Premiums	\$1,009.68	\$2,017.20	\$3,272.16	\$4,685.52
In Network Out of Pocket Max	\$6,000	\$9,000/\$12,000*	\$9,000	\$12,000
Max Employee Liability	\$7,009.68	\$11,017.20/\$14,017.20*	\$12,272.16	\$16,685.52

