

Oak Ridge (UCOR)

All Actives = Medical PPO, HSA CDHP or CDHP

2024 Monthly Rates

UCOR Active Employee	Employee Per Pay Period Cost	Employee Monthly Cost	Company Monthly Cost	Total Monthly Cost
<b>Medical/Rx</b>				
<i>All Actives - UCOR Medical PPO</i>				
Single	47.64	190.56	762.39	952.95
Dual	100.05	400.20	1,600.98	2,001.18
Family	147.70	590.80	2,363.34	2,954.14
<i>All Actives - UCOR HSA CDHP</i>				
Single	40.40	161.60	646.56	808.16
Dual	84.85	339.40	1,357.70	1,697.10
Family	121.22	484.88	1,939.55	2,424.43
<i>All Actives - UCOR CDHP</i>				
Single	25.48	101.92	658.81	760.73
Dual	53.51	214.04	1,383.47	1,597.51
Family	76.45	305.80	1,976.34	2,282.14
<b>Employer HSA Contributions (Annual)</b>				
<i>All Actives - UCOR HSA CDHP</i>				
Single			\$1,000 / year	
Dual			\$2,000 / year	
Family			\$2,000 / year	
<b>Vision</b>				
<i>All Actives - UCOR</i>				
Single	0.60	2.40	9.74	12.14
Dual	0.88	3.52	14.11	17.63
Family	1.57	6.28	25.28	31.56
<b>Dental</b>				
<i>Salaried</i>				
Single	3.73	14.92	22.40	37.32
Dual	7.72	30.88	46.32	77.20
Family	11.73	46.92	70.44	117.36
<b>ATLC</b>				
Single	1.86	7.44	29.88	37.32
Dual	3.86	15.44	61.76	77.20
Family	5.86	23.44	93.92	117.36

**ORRCC Salaried, USW, ATLC Life Rates****Employee Basic Life (Monthly rate per \$1,000) - Employee and Employer Paid**

<b>Total Rate (Monthly)</b>	\$0.280
<b>Employee Cost Share (Rate per \$1,000)</b>	\$0.140
<b>Employer Cost Share (Rate per \$1,000)</b>	\$0.140

**Pre-65 Retiree Basic Life (Monthly rate per \$1,000) - SPLIT 50/50 BETWEEN EE AND ER**

	<b>Employee</b>	<b>Employer</b>	<b>Total</b>
50-54	\$0.051	\$0.051	\$0.102
55-59	\$0.083	\$0.083	\$0.166
60-64	\$0.133	\$0.133	\$0.266

**Retiree Basic Life (Monthly rate per \$1,000 per month) - Employer Paid**

65-69	\$0.420
70-74	\$0.687
75-79	\$1.172
80-84	\$2.039
85-89	\$3.573
90-94	\$6.040
95+	\$9.005

**Employee Supplemental Life (Monthly rate per \$1,000) - Employee Paid**

< 30	\$0.060
30-34	\$0.080
35-39	\$0.092
40-44	\$0.100
45-49	\$0.188
50-54	\$0.300
55-59	\$0.504
60-64	\$0.800
65-69	\$1.272
70-74	\$2.060
75-79	\$3.340
80-84	\$5.412
85-89	\$8.760

**Optional Dependent Life - Spouse (Monthly rate per \$1,000) - Employee Paid**

< 30	\$0.060
30-34	\$0.080
35-39	\$0.108
40-44	\$0.168
45-49	\$0.268

50-54	\$0.420
55-59	\$0.660
60-64	\$1.068
65+	\$1.720
<b>Optional Dependent Life - Child - Rate per month for \$10,000 coverage - Employee Paid</b>	
Per Employee per Month	\$0.96