

**UNIVERSITY OF HARTFORD**

**Aetna Medical Insurance**

<b>Pay, if annualized;</b>	<b>Less than \$50,000</b>					
<b>Plan Options:</b>	<b>High Deductible-based Plan</b>		<b>Deductible-based Plan</b>		<b>Point of Service Plan</b>	
<b>Covered Participants and Per Pay Pre-tax Deduction</b>	<b>University Contribution</b>	<b>Employee Contribution</b>	<b>University Contribution</b>	<b>Employee Contribution</b>	<b>University Contribution</b>	<b>Employee Contribution</b>
<b>Employee Only</b>						
Full Year Faculty and Staff (24 Pays)*	\$446.24	\$22.61	\$510.64	\$47.51	\$446.24	\$265.35
Academic Year Faculty and Staff (20 Pays)**	\$535.49	\$27.13	\$612.76	\$57.01	\$535.49	\$318.41
<b>Employee + Spouse</b>						
Full Year Faculty and Staff (24 Pays)*	\$864.81	\$43.81	\$989.65	\$92.05	\$864.81	\$514.23
Academic Year Faculty and Staff (20 Pays)**	\$1,037.77	\$52.57	\$1,187.58	\$110.46	\$1,037.77	\$617.07
<b>Employee + Child(ren)</b>						
Full Year Faculty and Staff (24 Pays)*	\$761.73	\$38.59	\$871.70	\$81.07	\$761.73	\$452.93
Academic Year Faculty and Staff (20 Pays)**	\$914.08	\$46.31	\$1,046.04	\$97.28	\$914.08	\$543.52
<b>Employee + Spouse + Child(ren)</b>						
Full Year Faculty and Staff (24 Pays)*	\$1,272.24	\$64.44	\$1,455.89	\$135.41	\$1,272.24	\$756.48
Academic Year Faculty and Staff (20 Pays)**	\$1,526.69	\$77.33	\$1,747.06	\$162.49	\$1,526.68	\$907.77

<b>Pay, if annualized;</b>	<b>\$50,000 or More</b>					
<b>Plan Options:</b>	<b>High Deductible-based Plan</b>		<b>Deductible-based Plan</b>		<b>Point of Service Plan</b>	
<b>Covered Participants and Per Pay Pre-tax Deduction</b>	<b>University Contribution</b>	<b>Employee Contribution</b>	<b>University Contribution</b>	<b>Employee Contribution</b>	<b>University Contribution</b>	<b>Employee Contribution</b>
<b>Employee Only</b>						
Full Year Faculty and Staff (24 Pays)*	\$401.04	\$67.82	\$463.16	\$94.99	\$401.04	\$310.55
Academic Year Faculty and Staff (20 Pays)**	\$481.24	\$81.38	\$555.79	\$113.98	\$481.24	\$372.66
<b>Employee + Spouse</b>						
Full Year Faculty and Staff (24 Pays)*	\$777.20	\$131.42	\$897.61	\$184.09	\$777.20	\$601.84
Academic Year Faculty and Staff (20 Pays)**	\$932.64	\$157.70	\$1,077.13	\$220.91	\$932.64	\$722.20
<b>Employee + Child(ren)</b>						
Full Year Faculty and Staff (24 Pays)*	\$684.57	\$115.75	\$790.62	\$162.15	\$684.57	\$530.09
Academic Year Faculty and Staff (20 Pays)**	\$821.48	\$138.90	\$948.74	\$194.58	\$821.48	\$636.11
<b>Employee + Spouse + Child(ren)</b>						
Full Year Faculty and Staff (24 Pays)*	\$1,143.36	\$193.33	\$1,320.47	\$270.82	\$1,143.36	\$885.36
Academic Year Faculty and Staff (20 Pays)**	\$1,372.03	\$231.99	\$1,584.56	\$324.98	\$1,372.03	\$1,062.43

\* 24 payroll deductions taken for full-year employees( semi-monthly and bi-weekly)

\*\* Calculated on 20 payroll deductions

<b>Aetna Freedom of Choice Dental Insurance</b>				
	<b>Employee Only</b>	<b>Employee + Spouse</b>	<b>Employee + Child(ren)</b>	<b>Employee + Spouse + Child(ren)</b>
Full Year Faculty and Staff (24 Pays)*	\$17.29	\$30.48	\$42.83	\$49.34
Academic Year Faculty and Staff (20 Pays)**	\$20.75	\$36.57	\$51.40	\$59.20

<b>United Healthcare Vision Insurance</b>				
	<b>Employee Only</b>	<b>Employee + Spouse</b>	<b>Employee + Child(ren)</b>	<b>Employee + Spouse + Child(ren)</b>
Full Year Faculty and Staff (24 Pays)*	\$2.42	\$4.58	\$5.37	\$7.55
Academic Year Faculty and Staff (20 Pays)**	\$2.90	\$5.49	\$6.44	\$9.06

<b>Standard Supplemental Life Insurance</b>	
<b>Benefit Amount</b>	<b>Monthly Cost per \$1,000 of Coverage</b>
1x, 2x, 3x or 4x Base/Contracted Annualized Salary	\$0.290

*Guaranteed Issue Amount is \$250,000, with a maximum benefit of \$500,000. Age reduction rules apply.*

<b>Standard Spousal Life Insurance</b>		
<b>Benefit Amount</b>	<b>Per Pay Premium (20 Pays)</b>	<b>Per Pay Premium (24 Pays)</b>
\$10,000	\$1.63	\$1.36
\$20,000	\$3.25	\$2.71
\$30,000	\$4.88	\$4.07
\$40,000	\$6.50	\$5.42
\$50,000	\$8.13	\$6.78
\$60,000	\$9.76	\$8.13
\$70,000	\$11.38	\$9.49
\$80,000	\$13.01	\$10.84
\$90,000	\$14.63	\$12.20
\$100,000	\$16.26	\$13.55

*Guaranteed Issue Amount is \$30,000.*

<b>Standard Dependent Child(ren) Life Insurance</b>		
<b>Benefit Amount</b>	<b>Per Pay Premium (20 Pays)</b>	<b>Per Pay Premium (24 Pays)</b>
\$5,000	\$0.207	\$0.17
\$10,000	\$0.414	\$0.35
\$15,000	\$0.621	\$0.52
\$20,000	\$0.828	\$0.69
\$25,000	\$1.04	\$0.86

<b>Cigna Personal Accident Insurance</b>				
<b>Benefit Amount</b>	<b>Per Pay Premium (Employee Only Coverage - 20 Pays)</b>	<b>Per Pay Premium (Family Coverage - 20 Pays)</b>	<b>Per Pay Premium (Employee Only Coverage - 24 Pays)</b>	<b>Per Pay Premium (Family Coverage - 24 Pays)</b>
\$10,000	\$0.18	\$0.34	\$0.15	\$0.29
\$50,000	\$0.90	\$1.71	\$0.75	\$1.43
\$100,000	\$1.80	\$3.42	\$1.50	\$2.85
\$150,000	\$2.70	\$5.13	\$2.25	\$4.28
\$200,000	\$3.60	\$6.84	\$3.00	\$5.70
\$300,000	\$5.40	\$10.26	\$4.50	\$8.55

All Life Insurance elections are deducted from the applicable semi-monthly and bi-weekly pay. Academic Year employees will have deductions calculated on 20 pays

\* 24 payroll deductions taken for full-year employees( semi-monthly and bi-weekly)

\*\* Calculated on 20 payroll deductions