

Sabin Metal Corporation
Health Plans & Rate Summary Effective Jan 01, 2025

Option 1	<u>Empire Blue Cross Blue Shield EPO Base-Plan</u>	<u>Employee Weekly Amt.</u>	<u>Comments:</u>
	Single	\$40.36	
	Double/Child	\$208.92	
	Double/Spouse	\$232.61	
	Family	\$260.42	

Option 2	<u>Empire BlueCross Blue Shield High Deductible (with HSA)</u>	<u>Employee Weekly Amt.</u>	<u>Comments:</u> <i>HSA & FSA account is available if enrolled in high deductible plan.</i>
	Single	\$0	
	Double/Child	\$127.92	
	Double / Spouse	\$147.92	
	Family	\$152.92	

Note: For Option 2 High Deductible Plan Single coverage, Sabin will no longer contribute weekly into an HSA. Employee can still contribute weekly.

EXCELLUS 2025 DENTAL OPTION 2

	<u>Monthly Premium</u>	<u>Employee Weekly Amt.</u>
Single	\$31.21	\$7.56
Double	\$68.46	\$16.59
Family	\$96.70	\$23.43

Vision Insurance (Blue View Vision)

(Will know by Feb. 2025 if there is change in vision premiums)

	<u>Monthly Premium</u>	<u>Employee Weekly Amt.</u>
Sabin Employee	\$0	\$0
Spouse	\$4.75	\$1.10
Parent Employee & Child	\$4.99	\$1.15
Family	\$9.74	\$2.25

NOTE: For Non-Participants in SMC Group Health Insurance monetary benefit is now **\$2.70/hr.**
(Monetary benefits apply to health insurance non-participants ONLY)