



University
of Idaho

2020 Employee Contributions – 26 Pays

2020 Employee Contributions (Subsidized) Bi-Weekly Rates	Medical & RX		Dental			Vision
	Standard PPO	High Deductible Health Plan (HDHP)	Standard Dental	Dental Plus	Willamette	Vision Network Plan (VSP)
Full-Time (35-40 hours/week)						
* Employee Only	\$68.45	\$36.82	\$0.00	\$3.72	\$3.88	\$0.00
* Employee + Spouse	\$143.74	\$77.32	\$0.00	\$8.32	\$7.44	\$0.00
* Employee + Child	\$95.83	\$51.55	\$0.00	\$7.43	\$7.39	\$0.00
* Employee + Children	\$145.11	\$78.06	\$0.00	\$14.12	\$14.13	\$0.00
* Employee + Family	\$193.01	\$103.82	\$0.00	\$15.01	\$15.20	\$0.00
Three Quarter Time (25 - 34 hours/week)						
* Employee Only	\$115.08	\$83.45	\$3.11	\$6.83	\$6.99	\$0.00
* Employee + Spouse	\$241.66	\$175.24	\$6.95	\$15.27	\$14.39	\$0.00
* Employee + Child	\$161.11	\$116.83	\$6.22	\$13.65	\$13.61	\$0.00
* Employee + Children	\$243.96	\$176.91	\$11.82	\$25.94	\$25.95	\$0.00
* Employee + Family	\$324.51	\$235.32	\$12.56	\$27.57	\$27.76	\$0.00
Half-Time (20 - 24 hours/week)						
* Employee Only	\$161.71	\$130.08	\$6.22	\$9.94	\$10.10	\$0.00
* Employee + Spouse	\$339.58	\$273.16	\$13.91	\$22.23	\$21.35	\$0.00
* Employee + Child	\$226.39	\$182.11	\$12.44	\$19.87	\$19.83	\$0.00
* Employee + Children	\$342.82	\$275.77	\$23.64	\$37.76	\$37.77	\$0.00
* Employee + Family	\$456.01	\$366.81	\$25.11	\$40.12	\$40.31	\$0.00
*Contributions are not pro-rated at any time						