
**BI-WEEKLY HEALTH, DENTAL & VISION
INSURANCE PREMIUMS 2022**

	City Pays	Employee Cost
Health Insurance		
Plan A \$0 Deductible		
Single	\$329.40	\$88.75
Family	\$795.87	\$213.51
Plan B \$1000 Deductible		
Single	\$329.40	\$36.60
Family	\$795.87	\$88.43
Dental		
Plan A \$50 Deductible w/ Prosthodontic & Orthodontics		
Single	\$6.71	\$7.55
Family	\$17.33	\$19.79
Plan B \$50 Deductible w/o Prosthodontic & Orthodontics		
Single	\$6.71	\$0.75
Family	\$17.33	\$1.92
Vision (VSP)		
Single	\$0.00	\$2.63
Family	\$0.00	\$6.81

OPEN ENROLLMENT CHANGES ARE DUE TO HR BY NOVEMBER 12, 2021

**If you would like a change form, contact HR directly at 970-522-9700
or pick up a change form from City Hall
(Receptionist's Desk or outside HR Offices)**

Life Insurance (City provides this amount of coverage for employee)

\$20,000 employee

2,000 spouse (up to age 65)

1,000 dependent child under age 26

Supplemental Life insurance can be purchased at employee's expense.