

JANUS YOUTH PROGRAMS, INC.

COST OF COVERAGE BY EMPLOYEE, AGENCY AND COBRA (PYE 2024)

Fully Benefitted -Benefit Eligible Position	Pro-Rated Benefit - Eligible Position	HSA Contribution				COBRA			
Regularly scheduled for 30+ hours per week.	Regularly scheduled for 20-29 hours per week.	Janus will contribute \$100 per month towards the employee"s high deductible plan				Employee pays entire premium - No longer in an eligible position			

Employee Only	Employee + SP/DP	Employee + Child(ren)	Employee + Family	Employee Only	Employee + SP/DP	Employee + Child(ren)	Employee + Family
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KAISER TRADITIONAL HMO						WILLAMETTE DENTAL					
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Fully Benefitted	Pays	\$30.00	\$707.10	\$571.68	\$1,384.22	Fully Benefitted	Pays	\$0.00	\$36.50	\$41.10	\$77.34
	Agency Pays	\$647.12	\$647.13	\$647.13	\$647.13		Agency Pays	\$34.85	\$34.85	\$34.85	\$34.86
	Total Premium	\$677.12	\$1,354.23	\$1,218.81	\$2,031.35		Total Premium	\$34.85	\$71.35	\$75.95	\$112.20
Pro-Rated	Pays	\$338.56	\$1,015.66	\$880.24	\$1,692.78	Pro-Rated	Pays	\$17.42	\$53.92	\$58.52	\$94.78
	Agency Pays	\$338.56	\$338.57	\$338.57	\$338.57		Agency Pays	\$17.43	\$17.43	\$17.43	\$17.42
	Total Premium	\$677.12	\$1,354.23	\$1,218.81	\$2,031.35		Total Premium	\$34.85	\$71.35	\$75.95	\$112.20
COBRA	Total Premium	\$677.12	\$1,354.23	\$1,218.81	\$2,031.35	COBRA	Total Premium	\$34.85	\$71.35	\$75.95	\$112.20
	COBRA (2%)	<u>\$13.54</u>	<u>\$27.08</u>	<u>\$24.38</u>	<u>\$40.63</u>		COBRA (2%)	<u>\$0.70</u>	<u>\$1.43</u>	<u>\$1.52</u>	<u>\$2.24</u>
	COBRA	\$690.66	\$1,381.31	\$1,243.19	\$2,071.98		COBRA	\$35.55	\$72.78	\$77.47	\$114.44

KAISER HDHP HSA PLAN (no pro-rated option)						MODA (ODS) DENTAL - PPO					
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Fully Benefitted	Pays	\$10.00	\$497.52	\$400.02	\$985.04	Fully Benefitted	Pays	\$13.28	\$61.34	\$65.26	\$118.24
	Agency Pays	\$477.52	\$477.52	\$477.52	\$477.52		Agency Pays	\$35.76	\$35.77	\$35.77	\$35.76
	Total Premium	\$487.52	\$975.04	\$877.54	\$1,462.56		Total Premium	\$49.04	\$97.11	\$101.03	\$154.00
HSA Employer Contribution	Employee Pays	\$0.00	\$0.00	\$0.00	\$0.00	Pro-Rated	Pays	\$31.61	\$79.68	\$83.60	\$136.58
	Agency Pays	<u>\$100.00</u>	<u>\$100.00</u>	<u>\$100.00</u>	<u>\$100.00</u>		Agency Pays	\$17.43	\$17.43	\$17.43	\$17.42
	CONTRIBUTIO	\$100.00	\$100.00	\$100.00	\$100.00		Total Premium	\$49.04	\$97.11	\$101.03	\$154.00
COBRA	Total Premium	\$487.52	\$975.04	\$877.54	\$1,462.56	COBRA	Total Premium	\$49.04	\$97.11	\$101.03	\$154.00
	COBRA (2%)	<u>\$9.75</u>	<u>\$19.50</u>	<u>\$17.55</u>	<u>\$29.25</u>		COBRA (2%)	<u>\$0.98</u>	<u>\$1.94</u>	<u>\$2.02</u>	<u>\$3.08</u>
	COBRA	\$497.27	\$994.54	\$895.09	\$1,491.81		COBRA	\$50.02	\$99.05	\$103.05	\$157.08

KAISER ADDED CHOICE						The Standard Vision Plan					
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Fully Benefitted	Pays	\$202.52	\$1,052.18	\$882.24	\$1,901.82	Fully Benefitted	Pays	\$7.76	\$15.48	\$13.88	\$21.60
	Agency Pays	\$647.13	\$647.12	\$647.13	\$647.13		Agency Pays	\$0.00	\$0.00	\$0.00	\$0.00
	Total Premium	\$849.65	\$1,699.30	\$1,529.37	\$2,548.95		Total Premium	\$7.76	\$15.48	\$13.88	\$21.60

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Regularly scheduled for 30+ hours per week.		Regularly scheduled for 20-29 hours per week.			Janus will contribute \$100 per month towards the employee"s high deductible plan		Employee pays entire premium - No longer in an eligible position				
		Employee Only	Employee + SP/DP	Employee + Child(ren)	Employee + Family			Employee Only	Employee + SP/DP	Employee + Child(ren)	Employee + Family
Pro-Rated	Employee Pays	\$511.09	\$1,360.74	\$1,190.81	\$2,210.39	Pro-Rated	Employee Pays	\$7.76	\$15.48	\$13.88	\$21.60
	Agency Pays	\$338.56	\$338.56	\$338.56	\$338.56		Agency Pays	\$0.00	\$0.00	\$0.00	\$0.00
	Total Premium	\$849.65	\$1,699.30	\$1,529.37	\$2,548.95		Total Premium	\$7.76	\$15.48	\$13.88	\$21.60
COBRA	Total Premium	\$849.65	\$1,699.30	\$1,529.37	\$2,548.95	COBRA	Total Premium	\$7.76	\$15.48	\$13.88	\$21.60
	COBRA (2%)	\$16.99	\$33.99	\$30.59	\$50.98		COBRA (2%)	\$0.16	\$0.31	\$0.28	\$0.43
	COBRA	\$866.64	\$1,733.29	\$1,559.96	\$2,599.93		COBRA	\$7.92	\$15.79	\$14.16	\$22.03