

Accurate Auto
 Premium contribution Summary
 Semi-Monthly Payroll (26 pay periods annually)
 December 1, 2024 through November 30, 2025

Providence Standard Silver				
	Total	Employer monthly	Employee monthly	Employee Semi-Monthly
	Premium	Contribution	Contribution	Contribution
Single	\$482.65	\$482.65	\$0.00	\$0.00
Single + Spouse	\$965.30	\$482.65	\$482.65	\$241.32
Family	\$1,375.55	\$482.65	\$892.90	\$446.45
Single + Children	\$892.90	\$482.65	\$410.25	\$205.12

Providence Total Enhanced 500				
	Total	Employer monthly	Employee monthly	Employee Semi Monthly
	Premium	Contribution	Contribution	Contribution
Single	\$749.45	\$482.65	\$266.80	\$133.40
Single + Spouse	\$1,498.90	\$482.65	\$1,016.25	\$508.12
Family	\$2,135.95	\$482.65	\$1,653.30	\$826.65
Single + Children	\$1,386.50	\$482.65	\$903.85	\$482.92

Providence HSA 3500				
	Total	Employer monthly	Employee monthly	Employee bi-weekly
	Premium	Contribution	Contribution	Contribution
Single	\$484.35	\$482.65	\$1.70	\$0.85
Single + Spouse	\$968.70	\$482.65	\$486.05	\$243.02
Family	\$1,380.40	\$482.65	\$897.75	\$448.87
Single + Children	\$896.05	\$482.65	\$413.40	\$206.70

Providence Advantage Access \$2000 Dental				
	Total	Employer monthly	Employee monthly	Employee bi-weekly
	Premium	Contribution	Contribution	Contribution
Single	\$52.56	\$52.56	\$0.00	\$0.00
Single + Spouse	\$106.06	\$52.56	\$53.50	\$26.75
Family	\$180.39	\$52.56	\$127.83	\$63.91
Single + Children	\$121.93	\$52.56	\$69.37	\$34.68

Employer contributes 100% for Employee Only, and 0% for Dependents on the Providence Standard Silver and dental plan
 Dependents can be added with premium contributions
 Employee contributions may be taken on a pre-tax basis provided, compliance and eligibility criteria are met
 Contributions and Rates are subject to confirmation with current employer contract
 Contact your Employer, Plan Administrator, or Agent, if you have questions about premium contributions