

Hyland Plan Domestic Partner Premiums | Tier 1: Base Salary Over or Equal to \$45,000

Based on coverage level and participation in Hyland's [wellness incentive program](#), per-pay premiums for HDHP 2 are 40% lower (on average) than the per-pay premiums for HDHP 1.

	26 pay periods			
	Your pre-tax cost per pay	Your post-tax cost per pay	Maximum wellness credits per pay *	Your imputed income per pay
HDHP 1				
Employee	67.75	--	-23.07	--
Employee + DP	67.75	47.06	-30.76	163.33
Employee + DP Child(ren)	67.75	74.24	-38.46	277.69
DP Family	67.75	101.41	-46.15	392.07
HDHP 2				
Employee	39.04	--	-23.07	--
Employee + DP	39.04	25.58	-30.76	161.03
Employee + DP Child(ren)	39.04	38.31	-38.46	273.85
DP Family	39.04	51.03	-46.15	386.68
Dental				
Employee	3.71	--	n/a	--
Employee + DP	3.71	4.82	n/a	17.24
Employee + DP Child(ren)	3.71	5.47	n/a	19.57
DP Family	3.71	10.27	n/a	36.86
Vision				
Employee	1.85	--	n/a	--
Employee + DP	1.85	1.84	n/a	0.82
Employee + DP Child(ren)	1.85	1.84	n/a	0.82
DP Family	1.85	3.69	n/a	1.63

*Savings based on all wellness credits earned, and may fluctuate based on your participation in the wellness program

Domestic Partner coverage tiers: the above tiers may include many family combinations. The domestic partner rates apply if at least one domestic partner child or domestic partner is enrolled in the plan. Family combinations may include *Employee and Domestic Partner* or *Employee and Children plus Domestic Partner* or *Employee and Domestic Partner and Domestic Partner Children* or *Employee and Children plus Domestic*

Partner and Domestic Partner Children. If you need support determining which coverage tier applies to you, please contact the benefits team.



RACETRACK SCRAMBLE! YOU'RE ON YOUR THIRD LAP!

UNSCRAMBLE THIS WORD: LECMPETO, AND FILL OUT [THIS SURVEY](#) WHEN YOU HAVE FINISHED FIVE LAPS!

*Note: You must also complete open enrollment during the first week to be considered for any prizes. *These laps are the same for all rate documents!*