

Capital Area Community Action Agency, Inc.

Employee Benefits Rate

Plan Year 12/1/21 - 11/30/22

	A	B	C	D	E	F	G	H
1	NOTE: Year-round employee rates are 26 pay periods; Head Start employees with no summer pay option are 22 pay periods.							
2							HEAD START	
3	CAPITAL HEALTH PLAN (CHP) PREMIUM SELECTION PLAN				26 Biweekly Pay Periods		22 Biweekly Pay Periods	
4	Contract Type	Monthly Rate	Less: Employer Monthly Portion (85%)	Employee Monthly Portion	Employee Biweekly Portion		Head Start Center Staff	
5	Employee Only	\$ 669.80	\$ 569.33	\$ 100.47	\$ 46.37		\$ 54.80	
6	Employee + Spouse	\$ 1,339.60	\$ 569.33	\$ 770.27	\$ 355.51		\$ 420.15	
7	Employee + Dependents	\$ 1,138.67	\$ 569.33	\$ 569.34	\$ 262.77		\$ 310.55	
8	Employee + Family	\$ 2,009.40	\$ 569.33	\$ 1,440.07	\$ 664.65		\$ 785.49	
9								
10	GUARDIAN DENTAL	(No Change)						
11		Monthly Premium		Bi-weekly Premium 26 pp			22 Pay Periods	
12	Contract Type	Option 1	Option 2	Option 1	Option 2		Option 1	Option 2
13	Employee Only	\$ 23.45	\$ 36.52	\$ 10.82	\$ 16.86		\$ 12.79	\$ 19.92
14	Employee + Spouse	\$ 47.54	\$ 74.01	\$ 21.94	\$ 34.16		\$ 25.93	\$ 40.37
15	Employee + Dependents	\$ 52.68	\$ 82.02	\$ 24.31	\$ 37.86		\$ 28.73	\$ 44.73
16	Employee + Family	\$ 71.43	\$ 111.20	\$ 32.97	\$ 51.33		\$ 38.96	\$ 60.65
17								
18	ADVANTICA VISION	(No Change)						
19	Contract Type	Monthly Premium	Bi-weekly Premium 26 pp				22 Pay Periods	
20	Employee Only	\$ 6.66	\$ 3.07				\$ 3.63	
21	Employee + Spouse	\$ 13.33	\$ 6.15				\$ 7.27	
22	Employee + Dependents	\$ 14.14	\$ 6.53				\$ 7.71	
23	Employee + Family	\$ 22.26	\$ 10.27				\$ 12.14	