

# El Paso County Health Benefits

Employee Rate Sheet  
1/1/2023 thru 12/31/2023



## Traditional Consumer Driven Health Plan

Employee Bi-Weekly Contribution

	*County Contribution	No Discount Deduction	Tobacco Free (2%)	Wellness (4%)	Both Discounts Applied (6%)
Employee Only	\$388.82	\$6.00	\$5.89	\$5.77	\$5.65
Employee & Spouse	\$549.92	\$201.21	\$197.19	\$193.17	\$189.14
Employee & Child(ren)	\$512.10	\$141.17	\$138.35	\$135.52	\$132.70
Employee & Family	\$714.87	\$329.68	\$323.08	\$316.49	\$309.90

## Traditional Core Plan

Employee Bi-Weekly Contribution

	*County Contribution	No Discount Deduction	Tobacco Free (2%)	Wellness (4%)	Both Discounts Applied (6%)
Employee Only	\$397.97	\$40.04	\$39.24	\$38.44	\$37.64
Employee & Spouse	\$580.05	\$313.56	\$307.80	\$301.02	\$294.74
Employee & Child(ren)	\$539.20	\$242.31	\$237.46	\$232.62	\$227.77
Employee & Family	\$759.64	\$496.62	\$486.68	\$476.76	\$466.82