

**COUNTY OF LOS ALAMOS**  
**DRAFT GROUP INSURANCE PREMIUMS**  
**2021**

**DEDUCTIBLES OF \$350 FOR INDIVIDUAL AND \$700 FOR FAMILY**

**MEDICAL INSURANCE - BLUE CROSS/BLUE SHIELD NEW MEXICO - BLUE PPO 35**

Office visit co-pay/Specialist Co-pay                      \$35/\$50  
Prescription drug co-pay    \$15/\$35/\$55  
Deductibles - Individual/Family                                      \$350/\$700

	<b>Total Premium</b>		<b>Full-Time Employee</b>		<b>3/4-Time Employee</b>		<b>1/2-Time Employee</b>	
			Per Pay Period		Per Pay Period		Per Pay Period	
	Per Month	Per Pay Period	County 80%	Participant 20%	County 60%	Participant 40%	County 40%	Participant 60%
Employee only	\$705.60	\$352.80	\$282.24	<b>\$70.56</b>	\$211.68	<b>\$141.12</b>	\$141.12	<b>\$211.68</b>
Employee + one	\$1,340.56	\$670.28	\$536.22	<b>\$134.06</b>	\$402.17	<b>\$268.11</b>	\$268.11	<b>\$402.17</b>
Employee + two or more	\$2,046.14	\$1,023.07	\$818.46	<b>\$204.61</b>	\$613.84	<b>\$409.23</b>	\$409.23	<b>\$613.84</b>

**MEDICAL INSURANCE - BLUE CROSS BLUE SHIELD of NEW MEXICO - BLUE PPO 45**

Office visit co-pay/Specialist Co-pay                      \$45/\$60  
Prescription drug co-pay    \$15/\$35/\$55  
Deductibles - Individual/Family                                      \$350/\$700

	<b>Total Premium</b>		<b>Full-Time Employee</b>		<b>3/4-Time Employee</b>		<b>1/2-Time Employee</b>	
			Per Pay Period		Per Pay Period		Per Pay Period	
	Per Month	Per Pay Period	County 80%	Participant 20%	County 60%	Participant 40%	County 40%	Participant 60%
Employee only	\$612.44	\$306.22	\$244.98	<b>\$61.24</b>	\$183.73	<b>\$122.49</b>	\$122.49	<b>\$183.73</b>
Employee + one	\$1,163.67	\$581.84	\$465.47	<b>\$116.37</b>	\$349.10	<b>\$232.73</b>	\$232.73	<b>\$349.10</b>
Employee + two or more	\$1,176.10	\$588.05	\$470.44	<b>\$117.61</b>	\$352.83	<b>\$235.22</b>	\$235.22	<b>\$352.83</b>