

2021 PLAN RATES

Other States
AZ, CO, CT, ID, IN,
KS, MA, MD, MN,
NC, NJ, NV, NY,
OH, OK, OR,
PA, UT,
VA

These charts list the amounts that you will pay for benefits coverage beginning January 1, 2021.

Medical Coverage (Pre-Tax; Monthly)

Coverage	Cigna OAP Saver	Cigna OAP Super Saver	Cigna OAP No Deductible
Team Member Only	\$150	\$95	\$155
Team Member + Spouse/ Domestic Partner	\$360	\$275	\$390
Team Member + Child(ren)	\$325	\$245	\$350
Family*	\$805	\$570	\$715

Dental Coverage (Pre-Tax; Monthly)

Coverage	Delta Dental PPO
Team Member Only	\$15
Team Member + Spouse/Domestic Partner	\$60
Team Member + Child(ren)	\$50
Family*	\$105

Vision Coverage (Pre-Tax; Monthly)

Coverage	VSP Base	VSP Premier
Team Member Only	\$6	\$9
Team Member + Spouse/ Domestic Partner	\$15	\$22
Team Member + Child(ren)	\$13	\$20
Family*	\$21	\$30

* Family coverage includes Team Member, Spouse/Domestic Partner, and Child/Children.

Open Enrollment: November 9 – 20, 2020

Need assistance?

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www.mymercurybenefits.com

Benefits Hotline: 877-716-6372 #3

