		Employee			Monthly	Employee Plus Spouse			Monthly	Employee Plus Child/Children			Monthly	Family			Monthly
		Bi-Weekly	Monthly	Annual	COBRA	Bi-Weekly	Monthly	Annual	COBRA	Bi-Weekly	Monthly	Annual	COBRA	Bi-Weekly	Monthly	Annual	COBRA
Open Access Plus HSA	Employee	$ 31.13	$ 67.44	$ 809.28		$ 107.38	$ 232.65	$ 2,791.80		$ 83.52	$ 180.95	$ 2,171.40		$ 179.10	$ 388.04	$ 4,656.48	
	Employer		$ 831.70	$ 9,980.40			$ 1,790.40	$ 21,484.80			$ 1,392.55	$ 16,710.60			$ 2,115.46	$ 25,385.52	
Deductible:	Total		$ 899.14	$ 10,789.68	$ 917.12		$ 2,023.05	$ 24,276.60	$ 2,063.51		$ 1,573.50	$ 18,882.00	$ 1,604.97		$ 2,503.50	$ 30,042.00	$2,553.57
$2,250/$4,500																	
Open Access Plus	Employee	$ 56.46	$ 122.33	$ 1,467.96		$ 167.69	$ 363.32	$ 4,359.84		$ 130.42	$ 282.58	$ 3,390.96		$ 256.38	$ 555.50	$ 6,666.00	
	Employer		$ 856.30	$ 10,275.60			$ 1,838.61	$ 22,063.32									