PARKRIDGE MANAGEMENT

Employee Benefits Weekly Costs Effective July 1, 2014

Humana.

Medical Plans	Employee	Employee & Spouse	Employee & Child(ren)	Family
OPTION 1 HMO OA Copay Opt 74	\$49.26	\$147.79	\$137.94	\$266.02
OPTION 2 HMO OA Copay Opt 53	\$81.57	\$212.41	\$199.33	\$369.42
OPTION 3 Simplicity HMO 11 OA Opt 12	\$56.06	\$161.39	\$150.86	\$287.78



Products	Employee	Employee & Spouse	Employee & Child(ren)	Family
Life Insurance—AD&D \$35,000	\$0			
Dependent Life -Only available if enrolled in basic life	\$1.00			
Dental	\$3.45	\$8.61	\$9.09	\$15.66



Questions Contact us:

Linda M. Moore, Agent

Christina Mendez-Gatewood, Benefit Admin Office: 407-416-6986

benefitsadmin@mypreferredinsurance.com