



Cancer Care Specified Disease

Classic Plan

Semi-Monthly Per Pay Deductions:

Employee Only:	\$19.37
One Parent + Child(ren):	\$19.83
Employee + Spouse:	\$34.64
Family:	\$35.10

Monthly Per Pay Deductions:

Employee Only:	\$38.74
One Parent + Child(ren):	\$39.65
Employee + Spouse:	\$69.29
Family:	\$70.20

If you are interested in applying for coverage, please contact Relph Benefit Advisors,

1-800-836-0026 ext. 510