

2025 Xerox Monthly Benefit Cost

MEDICAL MONTHLY CONTRIBUTION RATES*	NETWORK ONLY PLAN	CHOICE LOWER DEDUCTIBLE PLAN	CHOICE HIGHER DEDUCTIBLE PLAN
If your 2024 salary is less than \$59,999			
Employee Only	\$185.00	\$135.00	\$0.00
Employee + Spouse	\$450.00	\$300.00	\$220.00
Employee + Child(ren)	\$370.00	\$250.00	\$185.00
Family	\$640.00	\$425.00	\$315.00
If your 2024 salary is \$60,000 or more			
Employee Only	\$185.00	\$135.00	\$10.00
Employee + Spouse	\$450.00	\$300.00	\$220.00
Employee + Child(ren)	\$370.00	\$250.00	\$185.00
Family	\$640.00	\$425.00	\$315.00

*Rates do not include the tobacco surcharge.

For Xerox employees: These rates are based on your salary as of September 1, 2024, or your date of hire, whichever is later. For XBS employees: These rates are based on your salary as of September 1, 2024, or your date of hire, whichever is later. For XBS Sales employees, an Annual Benefit Base Rate (ABBR) will be used to determine your rates. The ABBR is based on gross wages from September 2023 through August 2024, or base pay as of September 2024, whichever is higher.

DENTAL MONTHLY CONTRIBUTION RATES			
	BASIC DENTAL	ENHANCED DENTAL	DMO
Employee Only	\$15.16	\$20.57	\$8.70
Employee + Spouse	\$31.83	\$43.20	\$18.27
Employee + Child(ren)	\$37.89	\$51.43	\$21.75
Family	\$51.53	\$69.94	\$28.71

VISION MONTHLY CONTRIBUTION RATES		
	BASIC VISION	BUY-UP VISION
Employee Only	\$5.59	\$10.23
Employee + Spouse	\$11.18	\$20.48
Employee + Child(ren)	\$11.74	\$21.51
Family	\$17.33	\$31.74