

HelloFresh
2025 Bi-Weekly Employee Contributions

Coverages Available	Bi-Weekly Employee
Medical: Traditional Co-Pay Plan \$1,000	
Employee Only	\$50.46
Emp. + Spouse	\$148.02
Emp. + Children	\$121.11
Emp. + Family	\$252.31
Medical: HDHP Plan \$3,300	
Employee Only	\$0.00
Emp. + Spouse	\$0.00
Emp. + Children	\$0.00
Emp. + Family	\$0.00
Dental Plan	
Employee Only	\$1.91
Emp. + Spouse	\$7.42
Emp. + Children	\$8.82
Emp. + Family	\$17.26
Vision Plan	
Employee Only	\$0.58
Emp. + Spouse	\$1.59
Emp. + Children	\$1.47
Emp. + Family	\$2.57

Bi-Weekly Employee Contributions		
	Employee Voluntary Life	Spouse Voluntary Life
Age	Rate per \$10,000	Rate per \$5,000
15-24	\$0.166	\$0.083
25-29	\$0.189	\$0.095
30-34	\$0.254	\$0.127
35-39	\$0.378	\$0.189
40-44	\$0.577	\$0.288
45-49	\$0.895	\$0.448
50-54	\$1.320	\$0.660
55-59	\$1.883	\$0.942
60-64	\$2.418	\$1.209
65-69	\$3.443	\$1.722
70-74	\$6.512	\$3.256
75 or older	\$20.132	\$10.066
	Employee AD&D	Spouse AD&D
	\$0.0700	\$0.0400
Child Voluntary Life		
Age	Rate Per \$2,000	
Up to Age 19	\$0.166	
Buy-Up Long-Term Disability		
LTD Rate per \$100 of covered payroll		
Bi-Weekly Rate	\$0.0485	
Annual Salary	(Your Annual Salary)/12 months=	Your Monthly Earnings Maximum \$16,668
Monthly Earnings	(Your Monthly Earnings) /\$100=	Your Rate per \$100 of covered payroll
Benefit Rates	(Your Rate per \$100 of covered payroll) x \$.0485=	Your bi-weekly deduction

Bi-Weekly Employee Contributions		
Specified Disease	Employee	Spouse
Age	Rate per \$10,000	Rate per \$5,000
under 25	\$0.780	\$0.390
25 - 29	\$0.920	\$0.460
30 - 34	\$1.150	\$0.580
35 - 39	\$1.480	\$0.740
40 - 44	\$1.980	\$0.990
45 - 49	\$2.770	\$1.380
50 - 54	\$3.880	\$1.940
55 - 59	\$5.350	\$2.680
60 - 64	\$7.710	\$3.850
65 - 69	\$11.030	\$5.520
70 - 74	\$16.250	\$8.120
75 - 79	\$22.020	\$11.010
80 - 84	\$28.150	\$14.080
85+	\$40.340	\$20.170
Accident Insurance		
	Low	High
Employee Only	\$3.18	\$4.10
Emp. + Spouse	\$5.79	\$7.42
Emp. + Children	\$7.13	\$9.28
Emp. + Family	\$9.74	\$12.59
Hospital Indemnity Insurance		
	Low	High
Employee Only	\$3.29	\$6.01
Emp. + Spouse	\$6.52	\$11.91
Emp. + Children	\$4.46	\$8.13
Emp. + Family	\$7.69	\$14.04