

HEALTH/DENTAL INSURANCE PREMIUM RATES
Effective for deductions in December 2023

HDHP #1				
Deductible – Single \$2,000 Family \$4,000	ANNUAL PREMIUM	EMPLOYER CONTRI- BUTION	ANNUAL EMPLOYEE COST	PER PAY DEDUCTION
Single, Full-time	\$8,598.21	\$6,228.00	\$ 2,370.21	\$131.68
Single, Half-time	\$8,598.21	\$4,982.00	\$ 3,616.21	\$200.90
Employee & Spouse, Full Time	\$19,747.91	\$11,641.00	\$ 8,106.91	\$450.38
Employee & Spouse Half Time	\$19,747.91	\$9,313.00	\$10,434.91	\$579.72
Employee & Child(ren), Full-time	\$15,535.06	\$7,870.00	\$ 7,665.06	\$425.84
Employee & Child(ren) Half-time	\$15,535.06	\$6,296.00	\$ 9,239.06	\$513.28
Family, Full-time	\$24,515.44	\$16,229.00	\$8,286.44	\$460.36
Family, Half-time	\$24,515.44	\$12,983.00	\$11,532.44	\$640.69
Family, Both Employed Full-time	\$24,515.44	\$16,579.00	\$7,936.44	\$440.91
Family, Both Employed Half-time	\$24,515.44	\$13,263.00	\$ 11,252.44	\$625.14

HDHP #2				
Deductible – Single \$3,000 Family \$6,000	ANNUAL PREMIUM	EMPLOYER CONTRI- BUTION	ANNUAL EMPLOYEE COST	PER PAY DEDUCTION
Single, Full-time	\$7,837.21	\$6,213.00	\$1,624.21	\$ 90.23
Single, Half-time	\$7,837.21	\$4,970.00	\$2,867.21	\$159.29
Employee & Spouse, Full-time	\$17,993.91	\$11,604.00	\$ 6,389.91	\$355.00
Employee & Spouse Half-time	\$17,993.91	\$9,283.00	\$8,710.91	\$483.94
Employee & Child(ren), Full-time	\$14,162.06	\$7,841.00	\$6,321.06	\$351.17
Employee & Child(ren), Half -time	\$14,162.06	\$6,273.00	\$7,889.06	\$438.28
Family, Full-time	\$22,381.44	\$16,185.00	\$6,196.44	\$344.25
Family, Half-time	\$22,381.44	\$12,948.00	\$ 9,433.44	\$524.08
Family, Both Employed Full-time	\$22,381.44	\$16,535.00	\$5,846.44	\$324.80
Family, Both Employed Half-time	\$22,381.44	\$13,228.00	\$9,153.44	\$508.52

HDHP #3				
Deductible – Single \$4,000 Family \$8,000	ANNUAL PREMIUM	EMPLOYER CONTRI- BUTION	ANNUAL EMPLOYEE COST	PER PAY DEDUCTION
Single, Full-time	\$7,634.21	\$6,208.00	\$1,426.21	\$ 79.23
Single, Half-time	\$7,634.21	\$4,966.00	\$2,668.21	\$148.23
Employee & Spouse, Full-time	\$17,529.91	\$11,594.00	\$5,935.91	\$329.77
Employee & Spouse, Half-time	\$17,529.91	\$9,275.00	\$ 8,254.91	\$458.61
Employee & Child(ren), Full-time	\$13,799.06	\$7,834.00	\$5,965.06	\$331.39
Employee & Child(ren), Half-time	\$13,799.06	\$6,267.00	\$7,532.06	\$418.45
Family, Full-time	\$21,899.44	\$16,175.00	\$5,724.44	\$318.02
Family, Half-time	\$21,899.44	\$12,940.00	\$8,959.44	\$497.75
Family, Both Employed Full-time	\$21,899.44	\$16,525.00	\$5,374.44	\$298.58
Family, Both Employed Half-time	\$21,899.44	\$13,220.00	\$8,679.44	\$482.19

HEALTH/DENTAL INSURANCE PREMIUM RATES
Effective for deductions in December 2023

HDHP #4				
Deductible – Single \$5,000 Family \$10,000	ANNUAL PREMIUM	EMPLOYER CONTRI- BUTION	ANNUAL EMPLOYEE COST	PER PAY DEDUCTION
Single, Full-time	\$7,205.21	\$6,199.00	\$1,006.21	\$ 55.90
Single, Half-time	\$7,205.21	\$4,959.00	\$2,246.21	\$124.79
Employee & Spouse, Full-time	\$16,542.91	\$11,574.00	\$4,968.91	\$276.05
Employee & Spouse, Half-time	\$16,542.91	\$9,259.00	\$7,283.91	\$404.66
Employee & Child(ren), Full-time	\$13,028.06	\$7,818.00	\$5,210.06	\$289.45
Employee & Child(ren), Half-time	\$13,028.06	\$6,254.00	\$6,774.06	\$376.34
Family, Full-time	\$20,890.44	\$16,154.00	\$4,736.44	\$263.14
Family, Half-time	\$20,890.44	\$12,923.00	\$7,967.44	\$442.64
Family, Both Employed Full-time	\$20,890.44	\$16,504.00	\$4,386.44	\$243.69
Family, Both Employed Half-time	\$20,890.44	\$13,203.00	\$7,687.44	\$427.08