

2022- 23 RETIREE INSURANCE RATES

EPO PLAN						HSP (HDHP) PLAN						
	Annual Cost of Insurance	70% Contribution	District Contribution	District/ASRS Contribution	Retiree Annual Premium	Retiree Monthly Premium	Annual Cost of Insurance	70% Contribution	District Contribution	District/ASRS Contribution	Retiree Annual Premium	Retiree Monthly Premium
Retiree Only												
Medical	\$14,025.72	\$9,116.10	\$900.00	\$900.00	\$4,009.62	\$334.14	\$13,023.00	\$9,116.10	\$900.00	\$900.00	\$3,006.90	\$250.58
Dental/Vision	\$584.04	\$408.83	\$0.00	\$0.00	\$175.21	\$14.60	\$584.04	\$408.83	\$0.00	\$0.00	\$175.21	\$14.60
Life	\$48.00	\$33.60	\$0.00	\$0.00	\$14.40	\$1.20	\$48.00	\$33.60	\$0.00	\$0.00	\$14.40	\$1.20
Combined	\$14,657.76	\$9,558.53	\$900.00	\$900.00	\$4,199.23	\$349.94	\$13,655.04	\$9,558.53	\$900.00	\$900.00	\$3,196.51	\$266.38
Retiree + Spouse												
Medical	\$27,547.08	\$9,116.10	\$1,560.00	\$1,560.00	\$16,870.98	\$1,405.92	\$25,522.68	\$9,116.10	\$1,560.00	\$1,560.00	\$14,846.58	\$1,237.22
Dental/Vision	\$1,148.52	\$408.83	\$0.00	\$0.00	\$739.69	\$61.64	\$1,148.52	\$408.83	\$0.00	\$0.00	\$739.69	\$61.64
Life	\$48.00	\$33.60	\$0.00	\$0.00	\$14.40	\$1.20	\$48.00	\$33.60	\$0.00	\$0.00	\$14.40	\$1.20
Combined	\$28,743.60	\$9,558.53	\$1,560.00	\$1,560.00	\$17,625.07	\$1,468.76	\$26,719.20	\$9,558.53	\$1,560.00	\$1,560.00	\$15,600.67	\$1,300.06
Retiree + 1 Child												
Medical	\$21,949.32	\$9,116.10	\$1,560.00	\$1,560.00	\$11,273.22	\$939.44	\$20,395.08	\$9,116.10	\$1,560.00	\$1,560.00	\$9,718.98	\$809.92
Dental/Vision	\$849.12	\$408.83	\$0.00	\$0.00	\$440.29	\$36.69	\$849.12	\$408.83	\$0.00	\$0.00	\$440.29	\$36.69
Life	\$48.00	\$33.60	\$0.00	\$0.00	\$14.40	\$1.20	\$48.00	\$33.60	\$0.00	\$0.00	\$14.40	\$1.20
Combined	\$22,846.44	\$9,558.53	\$1,560.00	\$1,560.00	\$11,727.91	\$977.33	\$21,292.20	\$9,558.53	\$1,560.00	\$1,560.00	\$10,173.67	\$847.81