

Darien Board of Education

2022-2023

Health Insurance Rates

SECRETARIES

Deductible - \$2500/\$5000

Plan HSA/HDHP	Monthly Premium	Annual Premium	Employee Percentage	Employee Annual Share	Employee Rate Per Pay (20 Pays)
Single					
Medical	\$ 1,058.34	\$ 12,700.08	20%	\$ 2,540.02	\$ 127.00
Vision	\$ 6.01	\$ 72.12	20%	\$ 14.42	\$ 0.72
Total Med/Vision	\$ 1,064.35	\$ 12,772.20		\$ 2,554.44	<u>\$ 127.72</u>
Dental	\$ 45.64	\$ 547.68	20%	\$ 109.54	\$ 5.48
Total	\$ 1,109.99	\$ 13,319.88	20%	\$ 2,663.98	<u>\$ 133.20</u>
Employee + 1					
Medical	\$ 2,232.05	\$ 26,784.60	20%	\$ 5,356.92	\$ 267.85
Vision	\$ 12.03	\$ 144.36	20%	\$ 28.87	\$ 1.44
Total Med/Vision	\$ 2,244.08	\$ 26,928.96		\$ 5,385.79	<u>\$ 269.29</u>
Dental	\$ 82.16	\$ 985.92	20%	\$ 197.18	\$ 9.86
Total	\$ 2,326.24	\$ 27,914.88	20%	\$ 5,582.98	<u>\$ 279.15</u>
Family					
Medical	\$ 2,794.02	\$ 33,528.24	20%	\$ 6,705.65	\$ 335.28
Vision	\$ 19.38	\$ 232.56	20%	\$ 46.51	\$ 2.33
Total Med/Vision	\$ 2,813.40	\$ 33,760.80		\$ 6,752.16	<u>\$ 337.61</u>
Dental	\$ 140.44	\$ 1,685.28	20%	\$ 337.06	\$ 16.85
Total	\$ 2,953.84	\$ 35,446.08	20%	\$ 7,089.22	<u>\$ 354.46</u>

Rates stated herein are for 1.0 FTE employees. Pro-rating and eligibility requirements may apply. Please check your bargaining unit agreement.