

**Darien Board of Education
2023-2024
Health Insurance Rates
ADMINISTRATORS**

DEDUCTIBLE - \$2,500/\$5,000

Plan HSA/HDHP	Monthly Premium	Annual Premium	Employee Percentage	Employee Annual Share	Employee Rate Per Pay (20 Pays)
Single					
Medical	\$ 1,131.37	\$ 13,576.44	22%	\$ 2,986.82	\$ 149.34
Vision	\$ 6.31	\$ 75.72	22%	\$ 16.66	\$ 0.83
Total Med/Vision	\$ 1,137.68	\$ 13,652.16		\$ 3,003.48	<u>\$ 150.17</u>
Dental	\$ 52.97	\$ 635.64	22%	\$ 139.84	\$ 6.99
Total	\$ 1,190.65	\$ 14,287.80	22%	\$ 3,143.32	<u>\$ 157.16</u>
Employee + 1					
Medical	\$ 2,386.06	\$ 28,632.72	22%	\$ 6,299.20	\$ 314.96
Vision	\$ 12.63	\$ 151.56	22%	\$ 33.34	\$ 1.67
Total Med/Vision	\$ 2,398.69	\$ 28,784.28		\$ 6,332.54	<u>\$ 316.63</u>
Dental	\$ 95.35	\$ 1,144.20	22%	\$ 251.72	\$ 12.59
Total	\$ 2,494.04	\$ 29,928.48	22%	\$ 6,584.27	<u>\$ 329.22</u>
Family					
Medical	\$ 2,986.81	\$ 35,841.72	22%	\$ 7,885.18	\$ 394.26
Vision	\$ 20.35	\$ 244.20	22%	\$ 53.72	\$ 2.69
Total Med/Vision	\$ 3,007.16	\$ 36,085.92		\$ 7,938.90	<u>\$ 396.95</u>
Dental	\$ 162.92	\$ 1,955.04	22%	\$ 430.11	\$ 21.51
Total	\$ 3,170.08	\$ 38,040.96	22%	\$ 8,369.01	<u>\$ 418.46</u>

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