

**Darien Board of Education
2023-2024**

**Health Insurance Rates
NURSES**

Deductible - \$2500/\$5000

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	21%	\$ 2,851.05	\$ 142.55
Vision	\$ 6.31	\$ 75.72	21%	\$ 15.90	\$ 0.80
Total Med/Vision	\$ 1,137.68	\$ 13,652.16		\$ 2,866.95	<u>\$ 143.35</u>
Dental	\$ 50.20	\$ 602.40	21%	\$ 126.50	\$ 6.33
Total	\$ 1,187.88	\$ 14,254.56	21%	\$ 2,993.46	<u>\$ 149.68</u>
Employee + 1					
Medical	\$ 2,386.06	\$ 28,632.72	21%	\$ 6,012.87	\$ 300.64
Vision	\$ 12.63	\$ 151.56	21%	\$ 31.83	\$ 1.59
Total Med/Vision	\$ 2,398.69	\$ 28,784.28		\$ 6,044.70	<u>\$ 302.23</u>
Dental	\$ 90.38	\$ 1,084.56	21%	\$ 227.76	\$ 11.39
Total	\$ 2,489.07	\$ 29,868.84	21%	\$ 6,272.46	<u>\$ 313.62</u>
Family					
Medical	\$ 2,986.81	\$ 35,841.72	21%	\$ 7,526.76	\$ 376.34
Vision	\$ 20.35	\$ 244.20	21%	\$ 51.28	\$ 2.56
Total Med/Vision	\$ 3,007.16	\$ 36,085.92		\$ 7,578.04	<u>\$ 378.90</u>
Dental	\$ 154.48	\$ 1,853.76	21%	\$ 389.29	\$ 19.46
Total	\$ 3,161.64	\$ 37,939.68	21%	\$ 7,967.33	<u>\$ 398.36</u>

Rates will be updated upon execution of bargaining unit agreement

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