

**Darien Board of Education
2023-2024**

**Health Insurance Rates
PARAPROFESSIONALS**

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	20%	\$ 2,715.29	\$ 135.76
Vision	\$ 6.31	\$ 75.72	20%	\$ 15.14	\$ 0.76
Total Med/Vision	\$ 1,137.68	\$ 13,652.16		\$ 2,730.43	<u>\$ 136.52</u>
Dental	\$ 50.20	\$ 602.40	20%	\$ 120.48	\$ 6.02
Total	\$ 1,187.88	\$ 14,254.56	20%	\$ 2,850.91	<u>\$ 142.54</u>
Employee + 1					
Medical	\$ 2,386.06	\$ 28,632.72	20%	\$ 5,726.54	\$ 286.33
Vision	\$ 12.63	\$ 151.56	20%	\$ 30.31	\$ 1.52
Total Med/Vision	\$ 2,398.69	\$ 28,784.28		\$ 5,756.86	<u>\$ 287.85</u>
Dental	\$ 90.38	\$ 1,084.56	20%	\$ 216.91	\$ 10.85
Total	\$ 2,489.07	\$ 29,868.84	20%	\$ 5,973.77	<u>\$ 298.70</u>
Family					
Medical	\$ 2,986.81	\$ 35,841.72	20%	\$ 7,168.34	\$ 358.42
Vision	\$ 20.35	\$ 244.20	20%	\$ 48.84	\$ 2.44
Total Med/Vision	\$ 3,007.16	\$ 36,085.92		\$ 7,217.18	<u>\$ 360.86</u>
Dental	\$ 154.48	\$ 1,853.76	20%	\$ 370.75	\$ 18.54
Total	\$ 3,161.64	\$ 37,939.68	20%	\$ 7,587.94	<u>\$ 379.40</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.