

2023-24 Health Insurance Premium Costs (80-20)
 Non-Contracted Employees (School -Year)

** School-year Non-contracted employees pay their share of the annual cost over 21 ppds.
 (Sept. 7, 2023 - June 13, 2024)**

** The district share of all plans is based on 80% of the cost of the VEHI Gold CDHP plans. **

Plan	Annual Cost	Annual District Share 80% Gold CDHP	District Share/ppd. (21 ppds.)	Annual Employee Cost	Employee Share/ppd (21 ppds.)
VEHI Platinum					
Single	12,477.72	9,066.53	431.74	3,411.19	162.44
Parent/Child	20,864.64	14,017.25	667.49	6,847.39	326.07
Two-Person	24,955.68	17,027.42	810.83	7,928.26	377.54
Family	35,299.44	25,114.46	1,195.93	10,184.98	485.00
VEHI Gold					
Single	12,192.12	9,066.53	431.74	3,125.59	148.84
Parent/Child	20,404.20	14,017.25	667.49	6,386.95	304.14
Two-Person	24,384.24	17,027.42	810.83	7,356.82	350.32
Family	34,512.60	25,114.46	1,195.93	9,398.14	447.53
VEHI Gold CDHP					
Single	11,333.16	9,066.53	431.74	2,266.63	107.93
Parent/Child	17,521.56	14,017.25	667.49	3,504.31	166.87
Two-Person	21,284.28	17,027.42	810.83	4,256.86	202.71
Family	31,393.08	25,114.46	1,195.93	6,278.62	298.98
VEHI Silver CDHP					
Single	10,428.12	9,066.53	431.74	1,361.59	64.84
Parent/Child	17,579.16	14,017.25	667.49	3,561.91	169.61
Two-Person	20,856.60	17,027.42	810.83	3,829.18	182.34
Family	29,675.40	25,114.46	1,195.93	4,560.94	217.19

