

**Darien Board of Education  
2024-2025**

**Health Insurance Rates  
MAINTENANCE**

Deductible \$2,500/\$5,000

Plan HSA/HDHP	Monthly Premium	Annual Premium	Employee Percentage	Employee Annual Share	Employee Rate Per Pay (20 Pays)
<b>Single</b>					
<b>Medical</b>	\$ 1,289.20	\$ 15,470.40	21%	\$ 3,248.78	\$ 162.44
	\$ -				\$ -
<b>Total Medical</b>	\$ 1,289.20	\$ 15,470.40		\$ 3,248.78	<u>\$ 162.44</u>
<b>Dental</b>	\$ 50.20	\$ 602.40	21%	\$ 126.50	\$ 6.33
<b>Total</b>	\$ 1,339.40	\$ 16,072.80	21%	\$ 3,375.29	<u>\$ 168.77</u>
<b>Employee + 1</b>					
<b>Medical</b>	\$ 2,718.92	\$ 32,627.04	21%	\$ 6,851.68	\$ 342.58
	\$ -				\$ -
<b>Total Medical</b>	\$ 2,718.92	\$ 32,627.04		\$ 6,851.68	<u>\$ 342.58</u>
<b>Dental</b>	\$ 90.38	\$ 1,084.56	21%	\$ 227.76	\$ 11.39
<b>Total</b>	\$ 2,809.30	\$ 33,711.60	21%	\$ 7,079.44	<u>\$ 353.97</u>
<b>Family</b>					
<b>Medical</b>	\$ 3,403.47	\$ 40,841.64	21%	\$ 8,576.74	\$ 428.84
	\$ -				\$ -
<b>Total Medical</b>	\$ 3,403.47	\$ 40,841.64		\$ 8,576.74	<u>\$ 428.84</u>
<b>Dental</b>	\$ 154.48	\$ 1,853.76	21%	\$ 389.29	\$ 19.46
<b>Total</b>	\$ 3,557.95	\$ 42,695.40	21%	\$ 8,966.03	<u>\$ 448.30</u>

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