

Health Insurance Rates 2025-2026 School Year

**HPCSUEA (402.1)
Retirees**

88% of DEHIC EPO 20

Plan	EPO 20
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Premiums

Single

Monthly Premium	\$1,343.31
District Share	\$1,182.11
Retiree Share	\$161.20

Single w/Medicare

Monthly Premium	\$510.63
District Share	\$449.35
Retiree Share	\$61.28

Family

Monthly Premium	\$2,995.58
District Share	\$2,636.11
Retiree Share	\$359.47

Family w/Medicare

Monthly Premium	\$1,394.14
District Share	\$1,226.84
Retiree Share	\$167.30