

HAZELWOOD SCHOOL DISTRICT
Monthly Premiums for Group Health Plans
2025-2026 Retiree Monthly RATES

ANTHEM BC/BS	Employee only	Add Spouse	Add Children	Add Family
\$2,000 Corridor Plan (Buy-up Plan)	\$1,142.00	\$2,159.00	\$1,827.00	\$2,661.00
\$3,000 Corridor Plan	\$936.00	\$1,766.00	\$1,498.00	\$2,181.00
\$4,000 Corridor Plan (Buy-Down Plan)	\$898.00	\$1,698.00	\$1,438.00	\$2,093.00

DENTAL - BOARD PAYS EMPLOYEE PREMIUM FOR EITHER STANDARD OR ENHANCED PLAN				
DELTA DENTAL OF MO	Employee only	Add Spouse	Add Children	Add Family
Delta Dental Option 1 (Enhanced/High Plan)	\$34.22	\$74.66	\$77.16	\$117.60
Delta Dental Option 2 (Standard/Low Plan)	\$26.80	\$49.42	\$63.26	\$85.86

VISION PLAN - BOARD PAYS EMPLOYEE PREMIUM				
ANTHEM BLUE VIEW VISION	Employee only	Add Spouse	Add Children	Add Family
Vision - (Board Paid Employee only)	\$4.58	\$14.60	\$16.36	\$20.58