



EDSD 2023 Health Plan Rates	Anthem BCBS CDHP 15/HSA			Anthem BCBS CDHP 20/HSA			Anthem BCBS BlueCard PPO 90		
	Employee Only	EE + 1	Family	Employee Only	EE + 1	Family	Employee Only	EE + 1	Family
<b>Monthly Premium</b>	<b>\$976.00</b>	<b>\$1,757.00</b>	<b>\$2,733.00</b>	<b>\$842.00</b>	<b>\$1,516.00</b>	<b>\$2,358.00</b>	<b>\$1,172.00</b>	<b>\$2,110.00</b>	<b>\$3,282.00</b>
<b>HSA ER Contibution</b>									
Annual	\$850.00	\$850.00	\$850.00	\$2,458.00	\$2,458.00	\$2,458.00			
Monthly	\$70.83	\$70.83	\$70.83	\$204.83	\$204.83	\$204.83			
<b>Total Monthly Cost (Prem + HSA)</b>	<b>\$1,046.83</b>	<b>\$1,827.83</b>	<b>\$2,803.83</b>	<b>\$1,046.83</b>	<b>\$1,720.83</b>	<b>\$2,562.83</b>	<b>\$1,172.00</b>	<b>\$2,110.00</b>	<b>\$3,282.00</b>
<b>Employer Share per Month</b>	<b>\$997.43</b>	<b>\$1,311.96</b>	<b>\$1,671.08</b>	<b>\$997.43</b>	<b>\$1,311.96</b>	<b>\$1,671.08</b>	<b>\$997.43</b>	<b>\$1,311.96</b>	<b>\$1,671.08</b>
<i>NOTE: Basic Dental is also ER paid</i>									
<b>Employee Share Per Month</b>	<b>\$49.40</b>	<b>\$515.87</b>	<b>\$1,132.75</b>	<b>\$49.40</b>	<b>\$408.87</b>	<b>\$891.75</b>	<b>\$174.57</b>	<b>\$798.04</b>	<b>\$1,610.92</b>
<b>Increase from 2022</b>									
Employer Increase \$	\$40.98	\$205.51	\$414.63	\$40.98	\$205.51	\$414.63	\$40.98	\$205.51	\$414.63
Employer Increase %	4.28%	18.57%	33.00%	4.28%	18.57%	33.00%	4.28%	18.57%	33.00%
Employee Increase \$	\$2.35	-\$134.18	-\$308.30	\$2.35	-\$134.18	-\$309.30	\$1.02	-\$129.51	-\$296.63
Employee Increase %	4.99%	-20.64%	-21.39%	4.99%	-24.71%	-25.75%	0.59%	-13.96%	-15.55%

EDSD 2023 Health Plan Rates	Anthem BCBS BlueCard MSP PPO 90 Available for over 65 year old employees of churches with fewer			Kaiser EPO High			Kaiser EPO 80		
	Employee Only	EE + 1	Family	Employee Only	EE + 1	Family	Employee Only	EE + 1	Family
<b>Monthly Premium</b>	<b>\$938.00</b>	<b>\$1,688.00</b>	<b>\$2,626.00</b>	<b>\$1,210.00</b>	<b>\$2,178.00</b>	<b>\$3,388.00</b>	<b>\$1,036.00</b>	<b>\$1,865.00</b>	<b>\$2,901.00</b>
<b>HSA ER Contibution</b>									
Annual									
Monthly									
<b>Total Monthly Cost (Prem + HSA)</b>	<b>\$938.00</b>	<b>\$1,688.00</b>	<b>\$2,626.00</b>	<b>\$1,210.00</b>	<b>\$2,178.00</b>	<b>\$3,388.00</b>	<b>\$1,036.00</b>	<b>\$1,865.00</b>	<b>\$2,901.00</b>
<b>Employer Share per Month</b>	<b>\$938.00</b>	<b>\$1,311.96</b>	<b>\$1,671.08</b>	<b>\$997.43</b>	<b>\$1,311.96</b>	<b>\$1,671.08</b>	<b>\$997.43</b>	<b>\$1,311.96</b>	<b>\$1,671.08</b>
<i>NOTE: Basic Dental is also ER paid</i>									
<b>Employee Share Per Month</b>	<b>\$0.00</b>	<b>\$376.04</b>	<b>\$954.92</b>	<b>\$212.57</b>	<b>\$866.04</b>	<b>\$1,716.92</b>	<b>\$38.57</b>	<b>\$553.04</b>	<b>\$1,229.92</b>
<b>Increase from 2022</b>									
Employer Increase \$	\$33.00	\$256.96	\$466.08	\$40.98	\$205.51	\$414.63	\$40.98	\$205.51	\$414.63
Employer Increase %	3.65%	24.36%	38.68%	4.28%	18.57%	33.00%	4.28%	18.57%	33.00%
Employee Increase \$	\$0.00	-\$197.96	-\$374.08	\$2.02	-\$128.51	-\$294.63	-\$3.98	-\$138.51	-\$310.63
Employee Increase %	n/a	-34.49%	-28.15%	0.96%	-12.92%	-14.65%	-9.36%	-20.03%	-20.16%

## Dental Benefits

Cigna Dental									
	Dental & Orthodontia PPO Plan			Basic Dental PPO Plan			Preventive Dental PPO Plan		
	Single	Emp + One	Family	Single	Emp + One	Family	Single	Emp + One	Family
Monthly Premium	87	157	244	65	117	182	50	90	140
Employer Share per Month	\$65.00	\$65.00	\$65.00	\$65.00	\$65.00	\$65.00	\$50.00	\$65.00	\$65.00
Employee Share Per Month	\$22.00	\$92.00	\$179.00	\$0.00	\$52.00	\$117.00	\$0.00	\$25.00	\$75.00
No Change in Rates from 2022									

EAP As Stand Alone	4	4	4
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\* For employees without health