Health Insurance Rates

2025

PPO (Anthem)

Family			Employee		
Board	**Employee**	**Total**	**Board**	**Employee**	**Total**
$1,932.00	$483.00	**$2,415.00**	$749.60	$187.40	**$937.00**
$966.00	$241.50		$374.80	$93.70	

TRUECOST (Custom Design Benefits)

Family			Employee		
Board	**Employee**	**Total**	**Board**	**Employee**	**Total**
$1,804.00	$451.00	**$2,255.00**	$700.80	$175.20	**$876.00**
$902.00	$225.50		$350.40	$87.60	

HDHP (Anthem)

Family			Employee		
Board	**Employee**	**Total**	**Board**	**Employee**	**Total**
$1,699.20	$424.80	**$2,124.00**	$660.80	$165.20	**$826.00**
$849.60	$212.40		$330.40	$82.60	

*Black text indicates monthly rates; red text indicates per pay cost

Dental Insurance Rates (Delta Dental)

2025

Standard Plan

Family			Employee		
Board	**Employee**	**Total**	**Board**	**Employee**	**Total**
$83.20	$20.80	**$104.00**	$32.00	$8.00	**$40.00**
$41.60	$10.40		$16.00	$4.00	

Vision Insurance Rates (VSP)

2025

Choice Plan

Family			Employee		
Board	**Employee**	**Total**	**Board**	**Employee**	**Total**
$12.46	$3.12	**$15.58**	$4.53	$1.13	**$5.66**
$6.23	$1.56		$2.26	$0.57	