

## St. Joseph School District

### July 2020-June 2021 Monthly Medical, Dental, Vision, Life Insurance Premiums

#### Medical Plan - Blue Cross & Blue Shield of KC

Coverage Option	Monthly Employee Cost	SJSD Board Contribution	Monthly Total Cost
EPO Employee Only	\$91.74	\$732.80	\$824.54
EPO Employee & Spouse	\$876.64	\$769.47	\$1,646.11
EPO Employee & Child/Children	\$625.19	\$732.83	\$1,358.02
EPO Family	\$1,009.86	\$883.51	\$1,893.37
PPO Employee Only	\$45.07	\$732.80	\$777.87
PPO Employee & Spouse	\$783.48	\$769.47	\$1,552.95
PPO Employee & Child/Children	\$548.31	\$732.83	\$1,281.14
PPO Family	\$902.69	\$883.51	\$1,786.20
H.S.A. Employee Only	\$0.00	\$550.28	\$550.28
H.S.A. Employee & Spouse	\$523.40	\$586.95	\$1,110.35
H.S.A. Employee & Child/Children	\$333.80	\$550.31	\$884.11
H.S.A. Family	\$603.54	\$700.99	\$1,304.53

**\*\* \$182.52 District Contribution to all H.S.A. plan levels**

#### Dental Plan - MetLife

Coverage Option	Monthly Employee Cost	SJSD Board Contribution	Monthly Total Cost
Base Plan Employee Only	\$26.80	-	\$26.80
Base Plan Employee & Spouse	\$51.07	-	\$51.07
Base Plan Employee & Child/Children	\$67.06	-	\$67.06
Base Plan Family	\$101.42	-	\$101.42
Buy-Up Plan Employee Only	\$32.04	-	\$32.04
Buy-Up Plan Employee & Spouse	\$61.04	-	\$61.04
Buy-Up Plan Employee & Child/Children	\$80.13	-	\$80.13
Buy-Up Plan Family	\$121.18	-	\$121.18

### Vision Plan - MetLife

Coverage Tier	Monthly Employee Cost	SJSD Board Contribution	Monthly Total Cost
Employee Only	\$6.59	-	\$6.59
Employee & Spouse	\$13.18	-	\$13.18
Employee & Child/Children	\$14.10	-	\$14.10
Family	\$22.53	-	\$22.53

### Life Insurance Rates - MetLife

Coverage	Monthly Employee Cost	SJSD Board Contribution
Basic Life 50,000	\$0.00	\$5.00
Basic Life plus \$10,000 Supplemental	\$1.60	\$5.00
Basic Life plus \$20,000 Supplemental	\$3.20	\$5.00
Basic Life plus \$30,000 Supplemental	\$4.80	\$5.00
Basic Life plus \$40,000 Supplemental	\$6.40	\$5.00
Basic Life plus \$50,000 Supplemental	\$8.00	\$5.00
Basic Life plus \$60,000 Supplemental	\$9.60	\$5.00
Basic Life plus \$70,000 Supplemental	\$11.20	\$5.00
Basic Life plus \$80,000 Supplemental	\$12.80	\$5.00
Basic Life plus \$90,000 Supplemental	\$14.40	\$5.00
Basic Life plus \$100,000 Supplemental	\$16.00	\$5.00
Basic Life plus \$110,000 Supplemental	\$17.60	\$5.00
Basic Life plus \$120,000 Supplemental	\$19.20	\$5.00
Basic Life plus \$130,000 Supplemental	\$20.80	\$5.00
Basic Life plus \$140,000 Supplemental	\$22.40	\$5.00
Basic Life plus \$150,000 Supplemental	\$24.00	\$5.00

### Dependent Life Rate - MetLife

Monthly Employee Cost	\$3.50
Policy covers spouse for \$10,000 and Children for \$5,000 birth to age 26	