

HCOE Insurance Rates | .60 Management FTE | 2024-2025

12 Month

Oak				
Benefit Choice*	Medical Only	Medical & Dental	Medical & Vision	Medical, Dental & Vision
Employee Only	\$329.60	\$442.60	\$352.60	\$465.60
Employee & Spouse/Partner	\$712.60	\$825.60	\$735.60	\$848.60
Employee & Children	\$564.00	\$677.00	\$587.00	\$700.00
Employee & Family	\$891.80	\$1,004.80	\$914.80	\$1,007.80

Spruce				
Benefit Choice*	Medical Only	Medical & Dental	Medical & Vision	Medical, Dental & Vision
Employee Only	\$116.60	\$229.60	\$139.60	\$252.60
Employee & Spouse/Partner	\$299.60	\$412.60	\$322.60	\$435.60
Employee & Children	\$223.00	\$336.00	\$246.00	\$359.00
Employee & Family	\$379.80	\$492.80	\$402.80	\$515.80

Pine				
Benefit Choice*	Medical Only	Medical & Dental	Medical & Vision	Medical, Dental & Vision
Employee Only	\$0.00	\$1.60	\$0.00	\$24.60
Employee & Spouse/Partner	\$0.00	\$0.00	\$0.00	\$0.00
Employee & Children	\$0.00	\$15.00	\$0.00	\$38.00
Employee & Family	\$0.00	\$44.80	\$0.00	\$67.80

Maple				
Benefit Choice*	Medical Only	Medical & Dental	Medical & Vision	Medical, Dental & Vision
Employee Only	\$36.60	\$149.60	\$59.60	\$172.60
Employee & Spouse/Partner	\$145.60	\$258.60	\$168.60	\$281.60
Employee & Children	\$227.00	\$340.00	\$250.00	\$363.00
Employee & Family	\$317.80	\$430.80	\$340.80	\$453.80

11 Month

Oak				
Benefit Choice*	Medical Only	Medical & Dental	Medical & Vision	Medical, Dental & Vision
Employee Only	\$359.56	\$482.84	\$384.65	\$507.93
Employee & Spouse/Partner	\$777.38	\$900.65	\$802.47	\$925.75
Employee & Children	\$615.27	\$738.55	\$640.36	\$763.64
Employee & Family	\$972.87	\$1,096.15	\$997.96	\$1,099.42

Spruce				
Benefit Choice*	Medical Only	Medical & Dental	Medical & Vision	Medical, Dental & Vision
Employee Only	\$127.20	\$250.47	\$152.29	\$275.56
Employee & Spouse/Partner	\$326.84	\$450.11	\$351.93	\$475.20
Employee & Children	\$243.27	\$366.55	\$268.36	\$391.64
Employee & Family	\$414.33	\$537.60	\$439.42	\$562.69

Pine				
Benefit Choice*	Medical Only	Medical & Dental	Medical & Vision	Medical, Dental & Vision
Employee Only	\$0.00	\$1.75	\$0.00	\$26.84
Employee & Spouse/Partner	\$0.00	\$0.00	\$0.00	\$0.00
Employee & Children	\$0.00	\$16.36	\$0.00	\$41.45
Employee & Family	\$0.00	\$48.87	\$0.00	\$73.96

Maple				
Benefit Choice*	Medical Only	Medical & Dental	Medical & Vision	Medical, Dental & Vision
Employee Only	\$39.93	\$163.20	\$65.02	\$188.29
Employee & Spouse/Partner	\$158.84	\$282.11	\$183.93	\$307.20
Employee & Children	\$247.64	\$370.91	\$272.73	\$396.00
Employee & Family	\$346.69	\$469.96	\$371.78	\$495.05

10 Month

Oak				
Benefit Choice*	Medical Only	Medical & Dental	Medical & Vision	Medical, Dental & Vision
Employee Only	\$395.52	\$531.12	\$423.12	\$558.72
Employee & Spouse/Partner	\$855.12	\$990.72	\$882.72	\$1,018.32
Employee & Children	\$676.80	\$812.40	\$704.40	\$840.00
Employee & Family	\$1,070.16	\$1,205.76	\$1,097.76	\$1,209.36

Spruce				
Benefit Choice*	Medical Only	Medical & Dental	Medical & Vision	Medical, Dental & Vision
Employee Only	\$139.92	\$275.52	\$167.52	\$303.12
Employee & Spouse/Partner	\$359.52	\$495.12	\$387.12	\$522.72
Employee & Children	\$267.60	\$403.20	\$295.20	\$430.80
Employee & Family	\$455.76	\$591.36	\$483.36	\$618.96

Pine				
Benefit Choice*	Medical Only	Medical & Dental	Medical & Vision	Medical, Dental & Vision
Employee Only	\$0.00	\$1.92	\$0.00	\$29.52
Employee & Spouse/Partner	\$0.00	\$0.00	\$0.00	\$0.00
Employee & Children	\$0.00	\$18.00	\$0.00	\$45.60
Employee & Family	\$0.00	\$53.76	\$0.00	\$81.36

Maple				
Benefit Choice*	Medical Only	Medical & Dental	Medical & Vision	Medical, Dental & Vision
Employee Only	\$43.92	\$179.52	\$71.52	\$207.12
Employee & Spouse/Partner	\$174.72	\$310.32	\$202.32	\$337.92
Employee & Children	\$272.40	\$408.00	\$300.00	\$435.60
Employee & Family	\$381.36	\$516.96	\$408.96	\$544.56