

HCOE Insurance Rates | .65 FTE | 2022-2023

12 Month

Oak				
Benefit Choice*	Medical Only	Medical & Dental	Medical & Vision	Medical, Dental & Vision
Employee Only	\$206.95	\$319.95	\$228.95	\$341.95
Employee & Spouse/Partner	\$500.95	\$613.95	\$522.95	\$635.95
Employee & Children	\$387.20	\$500.20	\$409.20	\$522.20
Employee & Family	\$639.20	\$752.20	\$661.20	\$774.20

Spruce				
Benefit Choice*	Medical Only	Medical & Dental	Medical & Vision	Medical, Dental & Vision
Employee Only	\$22.95	\$135.95	\$44.95	\$157.95
Employee & Spouse/Partner	\$134.95	\$247.95	\$156.95	\$269.95
Employee & Children	\$86.20	\$199.20	\$108.20	\$221.20
Employee & Family	\$182.20	\$295.20	\$204.20	\$317.20

Maple				
Benefit Choice*	Medical Only	Medical & Dental	Medical & Vision	Medical, Dental & Vision
Employee Only	\$0.00	\$67.95	\$0.00	\$89.95
Employee & Spouse/Partner	\$0.00	\$111.95	\$20.95	\$133.95
Employee & Children	\$95.20	\$208.20	\$117.20	\$230.20
Employee & Family	\$129.20	\$242.20	\$151.20	\$264.20

Pine				
Benefit Choice*	Medical Only	Medical & Dental	Medical & Vision	Medical, Dental & Vision
Employee Only	\$0.00	\$0.00	\$0.00	\$0.00
Employee & Spouse/Partner	\$0.00	\$0.00	\$0.00	\$0.00
Employee & Children	\$0.00	\$0.00	\$0.00	\$0.00
Employee & Family	\$0.00	\$0.00	\$0.00	\$0.00

11 Month

Oak				
Benefit Choice*	Medical Only	Medical & Dental	Medical & Vision	Medical, Dental & Vision
Employee Only	\$225.76	\$349.04	\$249.76	\$373.04
Employee & Spouse/Partner	\$546.49	\$1,265.40	\$570.49	\$693.76
Employee & Children	\$422.40	\$910.85	\$446.40	\$569.67
Employee & Family	\$697.31	\$1,696.31	\$721.31	\$844.58

Spruce				
Benefit Choice*	Medical Only	Medical & Dental	Medical & Vision	Medical, Dental & Vision
Employee Only	\$25.04	\$148.31	\$49.04	\$172.31
Employee & Spouse/Partner	\$147.22	\$270.49	\$171.22	\$294.49
Employee & Children	\$94.04	\$217.31	\$118.04	\$241.31
Employee & Family	\$198.76	\$322.04	\$222.76	\$346.04

Maple				
Benefit Choice*	Medical Only	Medical & Dental	Medical & Vision	Medical, Dental & Vision
Employee Only	\$0.00	\$74.13	\$0.00	\$98.13
Employee & Spouse/Partner	\$0.00	\$122.13	\$22.85	\$146.13
Employee & Children	\$103.85	\$227.13	\$127.85	\$251.13
Employee & Family	\$140.95	\$264.22	\$164.95	\$288.22

Pine				
Benefit Choice*	Medical Only	Medical & Dental	Medical & Vision	Medical, Dental & Vision
Employee Only	\$0.00	\$0.00	\$0.00	\$0.00
Employee & Spouse/Partner	\$0.00	\$0.00	\$0.00	\$0.00
Employee & Children	\$0.00	\$0.00	\$0.00	\$0.00
Employee & Family	\$0.00	\$0.00	\$0.00	\$0.00

10 Month

Oak				
Benefit Choice*	Medical Only	Medical & Dental	Medical & Vision	Medical, Dental & Vision
Employee Only	\$248.34	\$383.94	\$274.74	\$410.34
Employee & Spouse/Partner	\$601.14	\$736.74	\$627.54	\$763.14
Employee & Children	\$464.64	\$600.24	\$491.04	\$626.64
Employee & Family	\$767.04	\$902.64	\$793.44	\$929.04

Spruce				
Benefit Choice*	Medical Only	Medical & Dental	Medical & Vision	Medical, Dental & Vision
Employee Only	\$27.54	\$163.14	\$53.94	\$189.54
Employee & Spouse/Partner	\$161.94	\$297.54	\$188.34	\$323.94
Employee & Children	\$103.44	\$239.04	\$129.84	\$265.44
Employee & Family	\$218.64	\$354.24	\$245.04	\$380.64

Maple				
Benefit Choice*	Medical Only	Medical & Dental	Medical & Vision	Medical, Dental & Vision
Employee Only	\$0.00	\$81.54	\$0.00	\$107.94
Employee & Spouse/Partner	\$0.00	\$134.34	\$25.14	\$160.74
Employee & Children	\$114.24	\$249.84	\$140.64	\$276.24
Employee & Family	\$155.04	\$290.64	\$181.44	\$317.04

Pine				
Benefit Choice*	Medical Only	Medical & Dental	Medical & Vision	Medical, Dental & Vision
Employee Only	\$0.00	\$0.00	\$0.00	\$0.00
Employee & Spouse/Partner	\$0.00	\$0.00	\$0.00	\$0.00
Employee & Children	\$0.00	\$0.00	\$0.00	\$0.00
Employee & Family	\$0.00	\$0.00	\$0.00	\$0.00

Corrected Rates • May 13, 2022

Plan Information and Benefit Summaries available at ncsmig.org/medical