

HCOE Insurance Rates | .67 FTE | 2022-2023

12 Month

Oak				
Benefit Choice*	Medical Only	Medical & Dental	Medical & Vision	Medical, Dental & Vision
Employee Only	\$187.41	\$300.41	\$209.41	\$322.41
Employee & Spouse/Partner	\$464.61	\$577.61	\$486.61	\$599.61
Employee & Children	\$357.36	\$470.36	\$379.36	\$492.36
Employee & Family	\$594.96	\$707.96	\$616.96	\$729.96

Spruce				
Benefit Choice*	Medical Only	Medical & Dental	Medical & Vision	Medical, Dental & Vision
Employee Only	\$3.41	\$116.41	\$25.41	\$138.41
Employee & Spouse/Partner	\$98.61	\$211.61	\$120.61	\$233.61
Employee & Children	\$56.36	\$169.36	\$78.36	\$191.36
Employee & Family	\$137.96	\$250.96	\$159.96	\$272.96

Maple				
Benefit Choice*	Medical Only	Medical & Dental	Medical & Vision	Medical, Dental & Vision
Employee Only	\$0.00	\$48.41	\$0.00	\$70.41
Employee & Spouse/Partner	\$0.00	\$75.61	\$0.00	\$97.61
Employee & Children	\$65.36	\$178.36	\$87.36	\$200.36
Employee & Family	\$84.96	\$197.96	\$106.96	\$219.96

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	\$204.45	\$327.72	\$228.45	\$351.72
Employee & Spouse/Partner	\$506.85	\$1,244.08	\$530.85	\$654.12
Employee & Children	\$389.85	\$889.54	\$413.85	\$537.12
Employee & Family	\$649.05	\$1,674.99	\$673.05	\$796.32

Spruce				
Benefit Choice*	Medical Only	Medical & Dental	Medical & Vision	Medical, Dental & Vision
Employee Only	\$3.72	\$126.99	\$27.72	\$150.99
Employee & Spouse/Partner	\$107.57	\$230.85	\$131.57	\$254.85
Employee & Children	\$61.48	\$184.76	\$85.48	\$208.76
Employee & Family	\$150.50	\$273.77	\$174.50	\$297.77

Maple				
Benefit Choice*	Medical Only	Medical & Dental	Medical & Vision	Medical, Dental & Vision
Employee Only	\$0.00	\$52.81	\$0.00	\$76.81
Employee & Spouse/Partner	\$0.00	\$82.48	\$0.00	\$106.48
Employee & Children	\$71.30	\$194.57	\$95.30	\$218.57
Employee & Family	\$92.68	\$215.96	\$116.68	\$239.96

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	\$224.89	\$360.49	\$251.29	\$386.89
Employee & Spouse/Partner	\$557.53	\$693.13	\$583.93	\$719.53
Employee & Children	\$428.83	\$564.43	\$455.23	\$590.83
Employee & Family	\$713.95	\$849.55	\$740.35	\$875.95

Spruce				
Benefit Choice*	Medical Only	Medical & Dental	Medical & Vision	Medical, Dental & Vision
Employee Only	\$4.09	\$139.69	\$30.49	\$166.09
Employee & Spouse/Partner	\$118.33	\$253.93	\$144.73	\$280.33
Employee & Children	\$67.63	\$203.23	\$94.03	\$229.63
Employee & Family	\$165.55	\$301.15	\$191.95	\$327.55

Maple				
Benefit Choice*	Medical Only	Medical & Dental	Medical & Vision	Medical, Dental & Vision
Employee Only	\$0.00	\$58.09	\$0.00	\$84.49
Employee & Spouse/Partner	\$0.00	\$90.73	\$0.00	\$117.13
Employee & Children	\$78.43	\$214.03	\$104.83	\$240.43
Employee & Family	\$101.95	\$237.55	\$128.35	\$263.95

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