

HCOE Insurance Rates | .68 FTE | 2022-2023

12 Month

Oak				
Benefit Choice*	Medical Only	Medical & Dental	Medical & Vision	Medical, Dental & Vision
Employee Only	\$177.64	\$290.64	\$199.64	\$312.64
Employee & Spouse/Partner	\$446.44	\$559.44	\$468.44	\$581.44
Employee & Children	\$342.44	\$455.44	\$364.44	\$477.44
Employee & Family	\$572.84	\$685.84	\$594.84	\$707.84

Spruce				
Benefit Choice*	Medical Only	Medical & Dental	Medical & Vision	Medical, Dental & Vision
Employee Only	\$0.00	\$106.64	\$15.64	\$128.64
Employee & Spouse/Partner	\$80.44	\$193.44	\$102.44	\$215.44
Employee & Children	\$41.44	\$154.44	\$63.44	\$176.44
Employee & Family	\$115.84	\$228.84	\$137.84	\$250.84

Maple				
Benefit Choice*	Medical Only	Medical & Dental	Medical & Vision	Medical, Dental & Vision
Employee Only	\$0.00	\$38.64	\$0.00	\$60.64
Employee & Spouse/Partner	\$0.00	\$57.44	\$0.00	\$79.44
Employee & Children	\$50.44	\$163.44	\$72.44	\$185.44
Employee & Family	\$62.84	\$175.84	\$84.84	\$197.84

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	\$193.79	\$317.06	\$217.79	\$341.06
Employee & Spouse/Partner	\$487.03	\$1,233.43	\$511.03	\$634.30
Employee & Children	\$373.57	\$878.88	\$397.57	\$520.84
Employee & Family	\$624.92	\$1,664.33	\$648.92	\$772.19

Spruce				
Benefit Choice*	Medical Only	Medical & Dental	Medical & Vision	Medical, Dental & Vision
Employee Only	\$0.00	\$116.33	\$17.06	\$140.33
Employee & Spouse/Partner	\$87.75	\$211.03	\$111.75	\$235.03
Employee & Children	\$45.21	\$168.48	\$69.21	\$192.48
Employee & Family	\$126.37	\$249.64	\$150.37	\$273.64

Maple				
Benefit Choice*	Medical Only	Medical & Dental	Medical & Vision	Medical, Dental & Vision
Employee Only	\$0.00	\$42.15	\$0.00	\$66.15
Employee & Spouse/Partner	\$0.00	\$62.66	\$0.00	\$86.66
Employee & Children	\$55.03	\$178.30	\$66.40	\$202.30
Employee & Family	\$68.55	\$191.83	\$92.55	\$215.83

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	\$213.17	\$348.77	\$239.57	\$375.17
Employee & Spouse/Partner	\$535.73	\$671.33	\$562.13	\$697.73
Employee & Children	\$410.93	\$546.53	\$437.33	\$572.93
Employee & Family	\$687.41	\$823.01	\$713.81	\$849.41

Spruce				
Benefit Choice*	Medical Only	Medical & Dental	Medical & Vision	Medical, Dental & Vision
Employee Only	\$0.00	\$127.97	\$18.77	\$154.37
Employee & Spouse/Partner	\$96.53	\$232.13	\$122.93	\$258.53
Employee & Children	\$49.73	\$185.33	\$76.13	\$211.73
Employee & Family	\$139.01	\$274.61	\$165.41	\$301.01

Maple				
Benefit Choice*	Medical Only	Medical & Dental	Medical & Vision	Medical, Dental & Vision
Employee Only	\$0.00	\$46.37	\$0.00	\$72.77
Employee & Spouse/Partner	\$0.00	\$68.93	\$0.00	\$95.33
Employee & Children	\$60.53	\$196.13	\$86.93	\$222.53
Employee & Family	\$75.41	\$211.01	\$101.81	\$237.41

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