

HCOE Insurance Rates | .71 FTE | 2022-2023

12 Month

Oak				
Benefit Choice*	Medical Only	Medical & Dental	Medical & Vision	Medical, Dental & Vision
Employee Only	\$148.33	\$261.33	\$170.33	\$283.33
Employee & Spouse/Partner	\$391.93	\$504.93	\$413.93	\$526.93
Employee & Children	\$297.68	\$410.68	\$319.68	\$432.68
Employee & Family	\$506.48	\$619.48	\$528.48	\$641.48

Spruce				
Benefit Choice*	Medical Only	Medical & Dental	Medical & Vision	Medical, Dental & Vision
Employee Only	\$0.00	\$77.33	\$0.00	\$99.33
Employee & Spouse/Partner	\$25.93	\$138.93	\$47.93	\$160.93
Employee & Children	\$0.00	\$109.68	\$18.68	\$131.68
Employee & Family	\$49.48	\$162.48	\$71.48	\$184.48

Maple				
Benefit Choice*	Medical Only	Medical & Dental	Medical & Vision	Medical, Dental & Vision
Employee Only	\$0.00	\$9.33	\$0.00	\$31.33
Employee & Spouse/Partner	\$0.00	\$2.93	\$0.00	\$24.93
Employee & Children	\$5.68	\$118.68	\$27.68	\$140.68
Employee & Family	\$0.00	\$109.48	\$18.48	\$131.48

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	\$135.97	\$285.09	\$185.81	\$309.09
Employee & Spouse/Partner	\$359.27	\$1,201.45	\$451.56	\$574.83
Employee & Children	\$272.87	\$846.91	\$348.74	\$472.01
Employee & Family	\$552.52	\$1,632.36	\$576.52	\$699.80

Spruce				
Benefit Choice*	Medical Only	Medical & Dental	Medical & Vision	Medical, Dental & Vision
Employee Only	\$0.00	\$84.36	\$0.00	\$108.36
Employee & Spouse/Partner	\$28.29	\$151.56	\$52.29	\$175.56
Employee & Children	\$0.00	\$119.65	\$20.38	\$143.65
Employee & Family	\$53.98	\$177.25	\$77.98	\$201.25

Maple				
Benefit Choice*	Medical Only	Medical & Dental	Medical & Vision	Medical, Dental & Vision
Employee Only	\$0.00	\$10.18	\$0.00	\$34.18
Employee & Spouse/Partner	\$0.00	\$3.20	\$0.00	\$27.20
Employee & Children	\$6.20	\$129.47	\$30.20	\$153.47
Employee & Family	\$0.00	\$119.43	\$20.16	\$143.43

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	\$178.00	\$313.60	\$204.40	\$340.00
Employee & Spouse/Partner	\$470.32	\$605.92	\$496.72	\$632.32
Employee & Children	\$357.22	\$492.82	\$383.62	\$519.22
Employee & Family	\$607.78	\$743.38	\$634.18	\$769.78

Spruce				
Benefit Choice*	Medical Only	Medical & Dental	Medical & Vision	Medical, Dental & Vision
Employee Only	\$0.00	\$92.80	\$0.00	\$119.20
Employee & Spouse/Partner	\$31.12	\$166.72	\$57.52	\$193.12
Employee & Children	\$0.00	\$131.62	\$22.42	\$158.02
Employee & Family	\$59.38	\$194.98	\$85.78	\$221.38

Maple				
Benefit Choice*	Medical Only	Medical & Dental	Medical & Vision	Medical, Dental & Vision
Employee Only	\$0.00	\$11.20	\$0.00	\$37.60
Employee & Spouse/Partner	\$0.00	\$3.52	\$0.00	\$29.92
Employee & Children	\$6.82	\$142.42	\$33.22	\$168.82
Employee & Family	\$0.00	\$131.38	\$22.18	\$157.78

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