



total rewards

## 2022 vs. 2023 PREMIUM SHARE RATES

### Medical/RX Insurance

	Employee Cost per Month		Change
	2022	2023	
<b>Aetna Deductible Plan</b>			
Employee Only	\$ 60.06	\$ 61.96	\$ 1.90
Employee & Spouse/Partner	\$ 288.96	\$ 298.14	\$ 9.18
Employee & Child(ren)	\$ 255.40	\$ 263.50	\$ 8.10
Couple & Child(ren)	\$ 398.40	\$ 411.06	\$ 12.66
<b>Aetna High Deductible Health Plan</b>			
Employee Only	\$ 14.92	\$ 15.38	\$ 0.46
Employee & Spouse/Partner	\$ 103.24	\$ 106.52	\$ 3.28
Employee & Child(ren)	\$ 91.22	\$ 94.12	\$ 2.90
Couple & Child(ren)	\$ 142.32	\$ 146.82	\$ 4.50
<b>Kaiser Permanente HMO</b>			
Employee Only	\$ 44.14	\$ 46.80	\$ 2.66
Employee & Spouse/Partner	\$ 213.18	\$ 226.22	\$ 13.04
Employee & Child(ren)	\$ 199.44	\$ 211.62	\$ 12.18
Couple & Child(ren)	\$ 306.78	\$ 325.60	\$ 18.82

## Dental and Vision Insurance

	Employee Cost per Month		
	2022	2023	Change
<b>Delta Dental Legacy &amp; Core</b>			
Employee Only	\$ 1.92	\$ 1.92	\$ -
Employee & Spouse/Partner	\$ 13.96	\$ 16.50	\$ 2.54
Employee & Child(ren)	\$ 11.88	\$ 14.04	\$ 2.16
Couple & Child(ren)	\$ 19.20	\$ 22.70	\$ 3.50
<b>Delta Dental Enhanced</b>			
Employee Only	\$ 24.26	\$ 24.26	\$ -
Employee & Spouse/Partner	\$ 58.64	\$ 61.18	\$ 2.54
Employee & Child(ren)	\$ 49.86	\$ 52.02	\$ 2.16
Couple & Child(ren)	\$ 80.66	\$ 84.16	\$ 3.50
<b>VSP Vision Core</b>			
Employee Only	\$ 1.10	\$ 1.14	\$ 0.04
Employee & Spouse/Partner	\$ 2.12	\$ 3.66	\$ 1.54
Employee & Child(ren)	\$ 2.26	\$ 3.90	\$ 1.64
Couple & Child(ren)	\$ 3.56	\$ 6.16	\$ 2.60
<b>VSP Vision Enhanced</b>			
Employee Only	\$ 5.40	\$ 5.62	\$ 0.22
Employee & Spouse/Partner	\$ 10.76	\$ 12.64	\$ 1.88
Employee & Child(ren)	\$ 11.50	\$ 13.50	\$ 2.00
Couple & Child(ren)	\$ 18.30	\$ 21.48	\$ 3.18