

HEALTH INSURANCE RATES

2017-2018 RATES

	ACTIVE CARE 1HD	ACTIVE CARE 2	SELECT PLAN	FIRSTCARE
EMPLOYEE ONLY	351/76	714/439	514/239	515/239.82
EMPLOYEE & SPOUSE	991/716	1694/1419	1264/989	1288/1012.60
EMPLOYEE & CHILDREN	671/396	1062/787	834/559	816/541.07
EMPLOYEE & FAMILY	1316/1041	2004/1729	1589/1314	1299/1023.52

The first amount is the amount the district pays for insurance

The second amount is the amount the employee pays for insurance

Deductibles: Individual/Family

ACT HD 2500/5000 AC2 1000/3000 SELECT 1200/3600 FIRST CARE 750/2250