



**Paraprofessional Unit
Retirees with 25 + years of service
2023 Monthly Rate Chart**

All plans include vision coverage through VSP and
a \$50,000 life insurance policy through The Hartford Insurance

| Medical Plan | With Delta Dental PPO | | | With United Concordia Dental HMO | | |
|--|---|-----------------------------|---------------------------------|---|-----------------------------|---------------------------------|
| | Employee only | Employee plus one dependent | Employee + 2 or more dependents | Employee only | Employee plus one dependent | Employee + 2 or more dependents |
| Kaiser \$0/\$5 | No Cost To Employee | \$ 331.79 | \$ 1,010.26 | No Cost To Employee | \$ 276.17 | \$ 913.07 |
| UnitedHealthcare Package A Network 1 | No Cost To Employee | \$ 422.79 | \$ 1,128.26 | No Cost To Employee | \$ 367.17 | \$ 1,031.07 |
| UnitedHealthcare Package A Network 2 | No Cost To Employee | \$ 646.79 | \$ 1,442.26 | No Cost To Employee | \$ 591.17 | \$ 1,345.07 |
| UnitedHealthcare Alliance HMO \$20/\$30 | No Cost To Employee | \$ 442.79 | \$ 1,150.26 | No Cost To Employee | \$ 387.17 | \$ 1,053.07 |
| UnitedHealthcare Alliance HMO \$1200 HRA | No Cost To Employee | \$ 415.79 | \$ 1,103.26 | No Cost To Employee | \$ 360.17 | \$ 1,006.07 |
| UnitedHealthcare Harmony HMO \$10 | No Cost To Employee | \$ 283.79 | \$ 931.26 | No Cost To Employee | \$ 228.17 | \$ 834.07 |
| UnitedHealthcare PPO1 | \$ 486.70 | \$ 2,182.79 | \$ 3,596.26 | \$ 460.67 | \$ 2,127.17 | \$ 3,499.07 |
| SIMNSA HMO | All Tiers No Cost To Employee <i>There are some eligibility requirements for this plan. Please review criteria before selecting this plan.</i> | | | All Tiers No Cost To Employee <i>There are some eligibility requirements for this plan. Please review criteria before selecting this plan.</i> | | |