

2023 Health, Dental, Vision and Accident Plan Premiums

(Effective January 1, 2023)



Non-High Deductible Health Plans	Single (monthly)	Single (biweekly)	Family (monthly)	Family (biweekly)
IYC Plan with Dental	\$104.00	\$52.00	\$257.00	\$128.50
IYC Plan without Dental	\$100.00	\$50.00	\$248.00	\$124.00
Access with Dental	\$245.00	\$122.50	\$608.00	\$304.00
Access without Dental	\$241.00	\$120.50	\$599.00	\$299.50
Access with Dental (required to work out of state)	\$158.00	\$79.00	\$396.00	\$198.00
Access without Dental (required to work out of state)	\$154.00	\$77.00	\$387.00	\$193.50

High Deductible Health Plans	Single (monthly)	Single (biweekly)	Family (monthly)	Family (biweekly)
HDHP Plan with Dental	\$39.00	\$19.50	\$96.00	\$48.00
HDHP Plan without Dental	\$35.00	\$17.50	\$87.00	\$43.50
HDHP Access with Dental	\$180.00	\$90.00	\$447.00	\$223.50
HDHP Access without Dental	\$176.00	\$88.00	\$438.00	\$219.00
HDHP Access with Dental (required to work out of state)	\$93.00	\$46.50	\$235.00	\$117.50
HDHP Access without Dental (required to work out of state)	\$89.00	\$44.50	\$226.00	\$113.00

2023 Premiums	Employee (monthly)	Employee (biweekly)	Employee + Spouse (monthly)	Employee + Spouse (biweekly)	Employee + Child(ren) (monthly)	Employee + Child(ren) (biweekly)	Family (monthly)	Family (biweekly)
Delta Dental PPO – Select Plan	\$9.76	\$4.88	\$19.52	\$9.76	\$13.16	\$6.58	\$23.40	\$11.70
Delta Dental PPO – Select Plus Plan	\$20.98	\$10.49	\$41.96	\$20.98	\$38.96	\$19.48	\$64.28	\$32.14
Delta Dental – Preventive (no health)	\$34.72	\$17.36	n/a	n/a	n/a	n/a	\$86.80	\$43.40
DeltaVision	\$5.72	\$2.86	\$11.42	\$5.71	\$12.88	\$6.44	\$20.58	\$10.29
Accident Plan	\$4.38	\$2.19	\$6.26	\$3.13	\$8.44	\$4.22	\$12.32	\$6.16