

School District of Grantsburg
 Health Insurance Policies 2023-2024
 Choose from one of the following two policies

	HRA Only Plan			HSA/HRA Plan	
	\$ 1,126.87	\$ 2,549.32	\$ 2,549.32	\$ 1,001.58	\$ 2,265.87
	HRA/Single	HRA EE+1	HRA EE+2 or more	HSA/Single	HSA/Family
Annual					
Total Premium	\$ 13,522.44	\$ 30,591.84	\$ 30,591.84	\$ 12,018.96	\$ 27,190.44
Employer Share	\$ 11,899.75	\$ 26,920.82	\$ 26,920.82	\$ 10,576.68	\$ 23,927.71
Employee's 12%	\$ 1,622.69	\$ 3,671.02	\$ 3,671.02	\$ 1,442.28	\$ 3,262.73
Deductible	\$ 2,500.00	\$ 5,000.00	\$ 7,500.00	\$ 3,000.00	\$ 6,000.00
Max deductible out of pocket for employees	\$ 300.00	\$ 600.00	\$ 900.00	\$ 400.00	\$ 800.00
HSA (contribution to YOUR account/YOUR money)	\$ -	\$ -	\$ -	\$ 1,000.00	\$ 2,000.00
HRA (only if used do you get this)	\$ 2,200.00	\$ 4,400.00	\$ 6,600.00	\$ 1,600.00	\$ 3,200.00
	\$ -	\$ -	\$ -	\$ -	\$ -
Monthly					
Total Premium	\$ 1,126.87	\$ 2,549.32	\$ 2,549.32	\$ 1,001.58	\$ 2,265.87
Employee's 12%	\$ 135.22	\$ 305.92	\$ 305.92	\$ 120.19	\$ 271.89
Employer Share	\$ 991.65	\$ 2,243.40	\$ 2,243.40	\$ 881.39	\$ 1,993.98
	\$ -	\$ -	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -	\$ -	\$ -
Max out of pocket if in network - Premium & Deductible	\$ 1,922.69	\$ 4,271.02	\$ 4,571.02	\$ 1,842.28	\$ 4,062.73