

**SCHOOLS INSURANCE GROUP  
HEALTH PLAN RATES  
July 1, 2023 through June 30, 2024**

**RETIREES OVER AGE 65**

<b>PLAN NAME</b>	<b>COVERAGE LEVEL</b>	<b>MONTHLY RATE</b>
Kaiser – w/chiro #600559D	Retiree Only	\$226.00
	Retiree + Spouse (> 65 with Med)	\$452.00
	Retiree + Spouse (< 65)	\$1,347.00
	Retiree + Children	\$809.00
	Retiree + SP (<65) + Children	\$1,739.00
Delta Dental Plan Composite Rate	Retiree Plus	\$99.00 – RTPA
		\$125.75 – CLASS/RAPA
VSP (Vision Plan) Composite Rate	Retiree Plus	\$22.70

\*\*All participants over the age of 65 must enroll in Medicare Parts A & B.

\*\*All Kaiser participants over the age of 65 must enroll in Sr. Advantage.

\*\*Rate sheet does not reflect district paid benefit cap if applicable\*\*