Uintah School District

Medical Insurance Rates

PEHP Preferred - FY 2024

Wellness Participant - 11.44% of Summit Premium

District to Fund all plans based on amount to fund the Summit Silver Plan and the Wellness % of the employee

										of the employee										
			*Core HSA					**Copper HSA						Silver						
Full Time Equivalency		Single		C	Couple		Family		Single		Couple		Family		Single		Couple		Family	
40 Hour Employee	Employee Portion	\$	-	\$	-	\$	-	\$	49	\$	103	\$	154	\$	120	\$	263	\$	387	
8 Hours Day	District Portion	\$	550	\$	1,186	\$	1,743	\$	594	\$	1,282	\$	1,880	\$	594	\$	1,282	\$	1,880	
1.0 FTE	Total Premium	\$	550	\$	1,186	\$	1,743	\$	643	\$	1,385	\$	2,034	\$	714	\$	1,545	\$	2,267	
35 Hour Employee	Employee Portion	\$	30	\$_	64	\$ _	98	\$	123	\$	263	\$	389	\$	194	\$	423	\$	622	
7 Hours Day	District Portion	\$	520	\$	1,122	\$	1,645	\$	520	\$	1,122	\$	1,645	\$	520	\$	1,122	\$	1,645	
.8750 FTE	Total Premium	\$	550	\$	1,186	\$	1,743	\$	643	\$	1,385	\$	2,034	\$	714	\$	1,545	\$	2,267	
	HSA Contribution***		\$1,240		\$2,856		\$2,460													
	New Employee Premium		\$0		\$0		\$0													
								-												
30 Hour Employee	Employee Portion	\$	104	\$_	224	\$_	333	\$	197	\$	423	\$	624	\$	268	\$	583	\$	857	
6 Hours Day	District Portion	\$	446	\$	962	\$	1,410	\$	446	\$	962	\$	1,410	\$	446	\$	962	\$	1,410	
.75 FTE	Total Premium	\$	550	\$	1,186	\$	1,743	\$	643	\$	1,385	\$	2,034	\$	714	\$	1,545	\$	2,267	
	HSA Contribution***		\$376		\$984		\$0													
	New Employee Premium		\$0		\$0		\$24													
								•												
Employes's below must have been grandfathered by policy prior to October 15, 2005.																				
25 Hour Employee	Employee Portion	\$	179	\$	385	\$	568	\$	272	\$	584	\$	859	\$	343	\$	744	\$	1,092	
5 Hours Day	District Portion	\$	371	\$	801	\$	1,175	\$	371	\$	801	\$	1,175	\$	371	\$	801	\$	1,175	
.625 FTE	Total Premium	\$	550	\$	1,186	\$	1,743	\$	643	\$	1,385	\$	2,034	\$	714	\$	1,545	\$	2,267	

*Core Plan HSA Contribution - Single	\$1,600
*Core Plan HSA Contribution - Couple/Family	\$3,600
**Copper Plan HSA Contribution - Single	\$800
**Copper Plan HSA Contribution - Couple/Family	\$1,800

***Core Plan - In a attempt to offer a health insurance coveage option with little to no out of pocket premiums, administration and associations have agreed to reduce the HSA contributions on the "Core" health insurance plans and reduce the premiums by the same amount for 30- and 35-hour contract employees.