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**Certified Monthly Premiums 2020-2021**

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Premiums are based on Fulltime Contracts

<b>Traditional Option 1 / Adv or Summit</b>	<b>Employee / Mo</b>	<b>District/ Mo</b>	<b>Group Rate</b>
Single	\$206.00	\$356.67	\$ 562.67
Emp + One	\$526.00	\$768.94	\$ 1,294.94
Family	\$844.00	\$1,168.16	\$ 2,012.16

<b>Traditional Option 2 / Adv or Summit</b>	<b>Employee / Mo</b>	<b>District/ Mo</b>	<b>Group Rate</b>
Single	\$80.00	\$356.67	\$ 436.67
Emp + One	\$236.06	\$768.94	\$ 1,005.00
Family	\$393.69	\$1,168.16	\$ 1,561.85

<b>Star Health Savings Plan / Adv or Summit</b>	<b>Employee / Mo</b>	<b>District/ Mo</b>	<b>Group Rate</b>
Single	\$53.81	\$356.67	\$ 410.48
Emp + One	\$175.76	\$768.94	\$ 944.70
Family	\$316.71	\$1,168.16	\$ 1,484.87