

BLUE CROSS / BLUE SHIELD OF KANSAS

2018-2019

PREMIUMS	TOTAL PREMIUM	DISTRICT PAYS	EMPLOYEE PAYS
\$1000 DEDUCTIBLE			
Employee	\$436.67	\$382.09	\$54.58
Employee / Spouse	\$937.54	\$382.09	\$555.45
Employee / Children	\$918.32	\$382.09	\$536.23
Family	\$1,419.19	\$382.09	\$1,037.10
\$1500 DEDUCTIBLE			
Employee	\$422.26	\$382.09	\$40.17
Employee / Spouse	\$906.54	\$382.09	\$524.45
Employee / Children	\$888.19	\$382.09	\$506.10
Family	\$1,372.47	\$382.09	\$990.38
\$2500 DEDUCTIBLE			
Employee	\$382.09	\$382.09	\$0.00
Employee / Spouse	\$820.51	\$382.09	\$438.42
Employee / Children	\$803.48	\$382.09	\$421.39
Family	\$1,241.90	\$382.09	\$859.81
HDHP \$5000 DEDUCTIBLE			
Employee	\$338.42	\$382.09	\$0.00
Employee / Spouse	\$726.62	\$382.09	\$344.53
Employee / Children	\$712.21	\$382.09	\$330.12
Family	\$1,099.98	\$382.09	\$717.89

Plus \$43.67 into an HSA