

## 2023 Benefit Rate Sheet

Medical\*, Dental, Vision Premiums

Premiums are shown on a per paycheck basis, pretaxed, taken out 24 pay periods (the first and second check of each month).

#### **Kaiser HDHP**

EE Only	EE+Spouse	EE+Child(ren)	EE+Family
\$14.53	\$29.79	\$29.06	\$41.99

#### Kaiser DHMO

EE Only	EE+Spouse	EE+Child(ren)	EE+Family
\$34.35	\$70. <del>4</del> 2	\$68.69	\$99.27

## Cigna HDHP

EE Only	EE+Spouse	EE+Child(ren)	EE+Family
\$36.33	\$74.47	72.65	104.97

## Cigna PPO

EE Only	EE+Spouse	EE+Child(ren)	EE+Family
\$85.88	\$176.03	\$171.73	\$248.16

## **Delta Dental EPO**

EE Only EE+1 EE+Family \$3.57 \$6.41 \$10.89

#### **Delta Dental PPO + Premier**

EE Only EE+1 EE+Family \$5.96 \$11.21 \$19.56

## **Unum Vision—Powered by Eyemed**

EE Only EE+1 EE+Family \$1.84 \$3.30 \$5.14

Regional Transportation District 1660 Blake Street, Denver CO 80202

## **Optional Life/AD&D Premiums**

Employee & Spouse Monthly rate per \$10,000

	<u>Employee</u>	<u>Spouse</u>
<29	\$0.70	\$0.70
30-34	\$0.80	\$0.80
35-39	\$1.20	\$1.20
40-44	\$1.60	\$1.60
45-49	\$2.90	\$2.90
50-5 <del>4</del>	\$4.40	\$4.40
55-59	\$6.50	\$6.50
60-64	\$9.00	\$9.00
65-69	\$13.60	\$13.60
70 +	\$25.80	\$25.80

Benefit Reduction Schedule – providing you are still employed, your benefits will reduce to 65% at age 70 and 45% at age 75.

Employee and Spouse premiums are calculated separately.

Spouse premiums are calculated based on the employee's age.

## Child Life/AD&D Coverage

\$250 Child –birth to six months \$10,000 Child—Child six months to age 26

## Child Life/AD&D Premium

Flat rate = \$1.80

Covers all dependent children regardless of the number of children.

### Basic Life/AD&D

One and ½ times annual salary on 1/1 up to a maximum of \$250,000. RTD pays 100%

## **Travel & Accident Insurance**

\$50,000 RTD pays 100%

# **Short and Long Term Disability** RTD pays 100%

For 2023 RTD will contribute seed money to the HSA for eligible enrollees.

- \$750 for Individual HDHP election
- \$1,500 for Family HDHP election

The annual HSA contribution is based on the coverage level in force on the first day of the month that the contribution is made (amount is pro-rated for new hires). A minimum employee contribution of \$10 per paycheck is required to receive the RTD contribution.

<sup>\*</sup>If you choose to **Opt Out** of medical coverage, and provide proof of current coverage that is not sponsored by RTD you will receive a \$75 opt-out credit on the 1st and 2nd paycheck each month.