

**2014 Rates for Indiana School Corporations**

Plan	Coverage	Minimum Bi-weekly Employee Rate	Maximum Bi-weekly Employer Rate	Bi-weekly Rate	Minimum Monthly Employee Rate	Maximum Monthly Employer Rate	Monthly Rate	Minimum Annual Employee Rate	Maximum Annual Employer Rate	Annual Total Rate
CDHP 1	Single	\$46.94	\$173.28	\$220.22	\$101.70	\$375.44	\$477.14	\$1,220.44	\$4,505.28	\$5,725.72
	Family	\$73.16	\$518.58	\$591.74	\$158.51	\$1,123.59	\$1,282.10	\$1,902.16	\$13,483.08	\$15,385.24
CDHP 1 W/ Non-Tobacco Use Incentive	Single	\$11.94	\$173.28	\$185.22	\$25.87	\$375.44	\$401.31	\$310.44	\$4,505.28	\$4,815.72
	Family	\$38.16	\$518.58	\$556.74	\$82.68	\$1,123.59	\$1,206.27	\$992.16	\$13,483.08	\$14,475.24
CDHP2	Single	\$89.72	\$190.56	\$280.28	\$194.39	\$412.88	\$607.27	\$2,332.72	\$4,954.56	\$7,287.28
	Family	\$193.04	\$553.26	\$746.30	\$418.25	\$1,198.73	\$1,616.98	\$5,019.04	\$14,384.76	\$19,403.80
CDHP 2 W/ Non-Tobacco Use Incentive	Single	\$54.72	\$190.56	\$245.28	\$118.56	\$412.88	\$531.44	\$1,422.72	\$4,954.56	\$6,377.28
	Family	\$158.04	\$553.26	\$711.30	\$342.42	\$1,198.73	\$1,541.15	\$4,109.04	\$14,384.76	\$18,493.80
Traditional PPO	Single	\$213.74	\$216.48	\$430.22	\$463.10	\$469.04	\$932.14	\$5,557.24	\$5,628.48	\$11,185.72
	Family	\$540.32	\$605.10	\$1,145.42	\$1,170.69	\$1,311.05	\$2,481.74	\$14,048.32	\$15,732.60	\$29,780.92
Traditional PPO W/ Non-Tobacco Use Incentive	Single	\$178.74	\$216.48	\$395.22	\$387.27	\$469.04	\$856.31	\$4,647.24	\$5,628.48	\$10,275.72
	Family	\$505.32	\$605.10	\$1,110.42	\$1,094.86	\$1,311.05	\$2,405.91	\$13,138.32	\$15,732.60	\$28,870.92