



2024 RIO GRANDE COUNTY HEALTH INSURANCE PREMIUMS

Health Option B1000

	Employee		County Cost		Total Ins Cost	
Single	0	0.00%	1068.70	100.00%	1068.70	100.00%
Couple (Employee +1)	441.35	22.00%	1564.85	78.00%	2006.20	100.00%
Family (Employee +2)	579.61	23.50%	1886.91	76.50%	2466.53	100.00%

EMPLOYEES WHO HAVE SPOUSES ALSO WORKING FOR THE COUNTY WILL PAY THE FOLLOWING COSTS

	Employees EACH		County Cost EACH		Total Ins Cost
Couple	0.00	0.00%	1003.10	100.00%	2006.20
Family	123.32	10.00%	1109.94	90.00%	2466.53

2024 NEW BENEFIT RATES			
	Single	Couple	Family
Medical B1000	\$ 1,043.00	\$ 1,955.00	\$ 2,400.00
Dental	\$ 20.00	\$ 39.85	\$ 51.78
Vision	\$ 5.70	\$ 11.35	\$ 14.75
Total	\$ 1,068.70	\$ 2,006.20	\$ 2,466.53

2024 ANNUAL EMPLOYEE BENEFITS PAID BY COUNTY			
	Single	Couple	Family
Health	\$ 12,824.40	\$ 18,778.20	\$ 22,642.92



2024 RIO GRANDE COUNTY HEALTH INSURANCE PREMIUMS

Health Option B2000

	Employee		County Cost		Total Ins Cost	
Single	0	0.00%	948.68	100.00%	948.68	100.00%
Couple (Employee +1)	392.07	22.00%	1390.13	78.00%	1782.20	100.00%
Family (Employee +2)	515.23	23.50%	1677.30	76.50%	2192.53	100.00%

EMPLOYEES WHO HAVE SPOUSES ALSO WORKING FOR THE COUNTY WILL PAY THE FOLLOWING COSTS

	Employees EACH		County Cost EACH		Total Ins Cost
Couple	0.00	0.00%	891.10	100.00%	1782.20
Family	109.62	10.00%	986.64	90.00%	2192.53

2024 NEW BENEFIT RATES			
	Single	Couple	Family
Medical B2000	\$ 923.00	\$ 1,731.00	\$ 2,126.00
Dental	\$ 19.98	\$ 39.85	\$ 51.78
Vision	\$ 5.70	\$ 11.35	\$ 14.75
Total	\$ 948.68	\$ 1,782.20	\$ 2,192.53

2024 ANNUAL EMPLOYEE BENEFITS PAID BY COUNTY			
	Single	Couple	Family
Health	\$ 11,384.16	\$ 16,681.56	\$ 20,127.60