

FAIRMONT AND SOUTHERN PLAINS PEIP HEALTH INSURANCE RATES

	Jan-Dec 2022		Jan-Dec 2023		Jan-Dec 2023	
	PEIP Advantage HSA		Coop Medica Choice HSA OPEN Network		Coop Medica Choice HSA MAYO ONLY Network	
Plan Name:	Monthly Premium	Annual Premium	Monthly Premium	Annual Premium	Monthly Premium	Annual Premium
Single	\$ 625.85	\$ 7,510.20	\$ 765.19	\$ 9,182.28	\$ 742.23	\$ 8,906.76
Family	\$ 1,661.19	\$ 19,934.28	\$ 2,031.04	\$ 24,372.48	\$ 1,970.10	\$ 23,641.20
<u>PEIP ADVANTAGE Value PLAN (veba only)</u>						
Single	\$ 892.09	\$ 10,705.08	Not being offered		Not being offered	
Family	\$ 2,372.19	\$ 28,466.28				
**HSA Compatible plans can still be Veba Option						