

NORTH KANSAS CITY SCHOOLS MONTHLY BENEFITS COST

BENEFIT PLAN YEAR JULY 1, 2021 THROUGH JUNE 30, 2022

Aetna: A1 EPO Copay (\$\$\$) (Contracted through 7/1/2021)	Total Monthly Cost	District Monthly Benefit	Employee Monthly Cost w/Wellness	Employee Monthly Cost w/o Wellness
Employee	\$771.18	\$705.00	\$66.18	\$96.18
Employee + Spouse	\$1,584.48	\$705.00	\$879.48	\$909.48
Employee + Child(ren)	\$1,349.22	\$705.00	\$644.22	\$674.22
Family	\$1,690.50	\$705.00	\$985.50	\$1,015.50
Family Split Premium	\$1,690.50	\$1,410.00	\$140.26	\$170.26

Aetna: A2 High Deductible (\$) (Contracted through 7/1/2021)	Total Monthly Cost	District Monthly Benefit*	Employee Monthly Cost w/Wellness	Employee Monthly Cost w/o Wellness	District HSA Monthly Contribution
Employee	\$652.44	\$652.44	\$0.00	\$30.00	\$52.56
Employee + Spouse	\$1,340.52	\$652.44	\$688.08	\$718.08	\$52.56
Employee + Child(ren)	\$1,141.50	\$652.44	\$489.06	\$519.06	\$52.56
Family	\$1,430.22	\$652.44	\$777.78	\$807.78	\$52.56
Family Split Premium	\$1,430.22	\$1,304.88	\$62.68	\$92.68	\$105.12

Aetna: A3 EPO Primary Care 100 (\$\$) (Contracted through 7/1/2021)	Total Monthly Cost	District Monthly Benefit	Employee Monthly Cost w/Wellness	Employee Monthly Cost w/o Wellness
Employee	\$712.22	\$705.00	\$7.22	\$37.22
Employee + Spouse	\$1,463.34	\$705.00	\$758.34	\$788.34
Employee + Child(ren)	\$1,246.06	\$705.00	\$541.06	\$571.06
Family	\$1,561.28	\$705.00	\$856.28	\$886.28
Family Split Premium	\$1,561.28	\$1,410.00	\$75.64	\$105.64