

**Desert Southwest Conference
2019 Health Insurance Premiums**

ANNUAL - 2019

	Single (2)					
	PPO B1000 (3)	CDHP C2000	CDHP C3000	HDH H1500	HDH H2000	HDH H3000
Medical	11,028	10,284	8,880	10,188	9,324	8,136
Dental Passive PPO 1000 (4)	420	420	420	420	420	420
Vision Exam Core (5)	0	0	0	0	0	0
Total	11,448	10,704	9,300	10,608	9,744	8,556
Paid by Conference	10,644	10,644	10,644	10,644	10,644	10,644
Paid by Participant (1)	804	60	0	0	0	0
Paid by Church	14,904	14,904	14,904	14,904	14,904	14,904
Paid by Participant (1)	804	60	0	0	0	0
Total Billed to Church	15,708	14,964	14,904	14,904	14,904	14,904

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	Single					
	PPO B1000	CDHP C2000	CDHP C3000	HDH H1500	HDH H2000	HDH H3000
Medical	10,872	10,344	8,904	10,260	9,384	8,100
Dental Passive PPO 1000	408	408	408	408	408	408
Vision Exam Core	0	0	0	0	0	0
Total	11,280	10,752	9,312	10,668	9,792	8,508
Paid by Conference	10,488	10,488	10,488	10,488	10,488	10,488
Paid by Participant	792	264	0	0	0	0
Paid by Church	14,676	14,676	14,676	14,676	14,676	14,676
Paid by Participant	792	264	0	180	0	0
Total Billed to Church	15,468	14,940	14,676	14,856	14,676	14,676

CHANGE

	Single					
	PPO B1000	CDHP C2000	CDHP C3000	HDH H1500	HDH H2000	HDH H3000
Medical	156	(60)	(24)	(72)	(60)	36
Dental Passive PPO 1000	12	12	12	12	12	12
Vision Exam Core	0	0	0	0	0	0
Total	168	(48)	(12)	(60)	(48)	48
Paid by Conference	156	156	156	156	156	156
Paid by Participant	12	(204)	0	0	0	0
Paid by Church	228	228	228	228	228	228
Paid by Participant	12	(204)	0	(180)	0	0
Total Billed to Church	240	24	228	48	228	228

% CHANGE

	Single					
	PPO B1000	CDHP C2000	CDHP C3000	HDH H1500	HDH H2000	HDH H3000
Medical	1.43%	-0.58%	-0.27%	-0.70%	-0.64%	0.44%
Dental Passive PPO 1000	2.94%	2.94%	2.94%	2.94%	2.94%	2.94%
Vision Exam Core	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Total	1.49%	-0.45%	-0.13%	-0.56%	-0.49%	0.56%
Paid by Conference	1.49%	1.49%	1.49%	1.49%	1.49%	1.49%
Paid by Participant	1.52%	-77.27%	0.00%	#DIV/0!	0.00%	0.00%
Paid by Church	1.55%	1.55%	1.55%	1.55%	1.55%	1.55%
Paid by Participant	1.52%	-77.27%	0.00%	-100.00%	0.00%	0.00%
Total Billed to Church	1.55%	0.16%	1.55%	0.32%	1.55%	1.55%

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	Participant + 1 (Couple) (2)					
	PPO B1000 (3)	CDHP C2000	CDHP C3000	HDH H1500	HDH H2000	HDH H3000
Medical	20,964	19,536	16,908	19,368	17,724	15,468
Dental Passive PPO 1000 (4)	828	828	828	828	828	828
Vision Exam Core (5)	0	0	0	0	0	0
Total	21,792	20,364	17,736	20,196	18,552	16,296
Paid by Conference	17,736	17,736	17,736	17,736	17,736	17,736
Paid by Participant (1)	4,056	2,628	0	2,460	816	0
Paid by Church	14,904	14,904	14,904	14,904	14,904	14,904
Paid by Participant (1)	4,056	2,628	0	2,460	816	0
Total Billed to Church	18,960	17,532	14,904	17,364	15,720	14,904

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	Participant + 1 (Couple)					
	PPO B1000	CDHP C2000	CDHP C3000	HDH H1500	HDH H2000	HDH H3000
Medical	20,676	19,656	16,944	19,500	17,832	15,408
Dental Passive PPO 1000	816	816	816	816	816	816
Vision Exam Core	0	0	0	0	0	0
Total	21,492	20,472	17,760	20,316	18,648	16,224
Paid by Conference	17,472	17,472	17,472	17,472	17,472	17,472
Paid by Participant	4,020	3,000	288	2,844	1,176	0
Paid by Church	14,676	14,676	14,676	14,676	14,676	14,676
Paid by Participant	4,020	3,000	288	2,844	1,176	0
Total Billed to Church	18,696	17,676	14,964	17,520	15,852	14,676

CHANGE

	Participant + 1 (Couple)					
	PPO B1000	CDHP C2000	CDHP C3000	HDH H1500	HDH H2000	HDH H3000
Medical	288	(120)	(36)	(132)	(108)	60
Dental Passive PPO 1000	12	12	12	12	12	12
Vision Exam Core	0	0	0	0	0	0
Total	300	(108)	(24)	(120)	(96)	72
Paid by Conference	264	264	264	264	264	264
Paid by Participant	36	(372)	(288)	(384)	(360)	0
Paid by Church	228	228	228	228	228	228
Paid by Participant	36	(372)	(288)	(384)	(360)	0
Total Billed to Church	264	(144)	(60)	(156)	(132)	228

% CHANGE

	Participant + 1 (Couple)					
	PPO B1000	CDHP C2000	CDHP C3000	HDH H1500	HDH H2000	HDH H3000
Medical	1.39%	-0.61%	-0.21%	-0.68%	-0.61%	0.39%
Dental Passive PPO 1000	1.47%	1.47%	1.47%	1.47%	1.47%	1.47%
Vision Exam Core	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Total	1.40%	-0.53%	-0.14%	-0.59%	-0.51%	0.44%
Paid by Conference	1.51%	1.51%	1.51%	1.51%	1.51%	1.51%
Paid by Participant	0.90%	-12.40%	0.00%	-13.50%	0.00%	0.00%
Paid by Church	1.55%	1.55%	1.55%	1.55%	1.55%	1.55%
Paid by Participant	0.90%	-12.40%	0.00%	-13.50%	0.00%	0.00%
Total Billed to Church	1.41%	-0.81%	-0.40%	-0.89%	-0.83%	1.55%

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	Participant + 2 or More (Family) (2)					
	PPO B1000 (3)	CDHP C2000	CDHP C3000	HDH H1500	HDH H2000	HDH H3000
Medical	26,508	24,684	21,360	24,480	22,392	19,524
Dental Passive PPO 1000 (4)	996	996	996	996	996	996
Vision Exam Core (5)	0	0	0	0	0	0
Total	27,504	25,680	22,356	25,476	23,388	20,520
Paid by Conference	21,276	21,276	21,276	21,276	21,276	21,276
Paid by Participant (1)	6,228	4,404	1,080	4,200	2,112	0
Paid by Church	14,904	14,904	14,904	14,904	14,904	14,904
Paid by Participant (1)	6,228	4,404	1,080	4,200	2,112	0
Total Billed to Church	21,132	19,308	15,984	19,104	17,016	14,904

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	Participant + 2 or More (Family)					
	PPO B1000	CDHP C2000	CDHP C3000	HDH H1500	HDH H2000	HDH H3000
Medical	26,136	24,828	21,408	24,648	22,524	19,452
Dental Passive PPO 1000	984	984	984	984	984	984
Vision Exam Core	0	0	0	0	0	0
Total	27,120	25,812	22,392	25,632	23,508	20,436
Paid by Conference	20,964	20,964	20,964	20,964	20,964	20,964
Paid by Participant	6,156	4,848	1,428	4,668	2,544	0
Paid by Church	14,676	14,676	14,676	14,676	14,676	14,676
Paid by Participant	6,156	4,848	1,428	4,668	2,544	(528)
Total Billed to Church	20,832	19,524	16,104	19,344	17,220	14,148

CHANGE

	Participant + 2 or More (Family)					
	PPO B1000	CDHP C2000	CDHP C3000	HDH H1500	HDH H2000	HDH H3000
Medical	372	(144)	(48)	(168)	(132)	72
Dental Passive PPO 1000	12	12	12	12	12	12
Vision Exam Core	0	0	0	0	0	0
Total	384	(132)	(36)	(156)	(120)	84
Paid by Conference	312	312	312	312	312	312
Paid by Participant	72	(444)	(348)	(468)	(432)	0
Paid by Church	228	228	228	228	228	228
Paid by Participant	72	(444)	(348)	(468)	(432)	528
Total Billed to Church	300	(216)	(120)	(240)	(204)	756

% CHANGE

	Participant + 2 or More (Family)					
	PPO B1000	CDHP C2000	CDHP C3000	HDH H1500	HDH H2000	HDH H3000
Medical	1.42%	-0.58%	-0.22%	-0.68%	-0.59%	0.37%
Dental Passive PPO 1000	1.22%	1.22%	1.22%	1.22%	1.22%	1.22%
Vision Exam Core	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Total	1.42%	-0.51%	-0.16%	-0.61%	-0.51%	0.41%
Paid by Conference	1.49%	1.49%	1.49%	1.49%	1.49%	1.49%
Paid by Participant	1.17%	-9.16%	0.00%	-10.03%	0.00%	0.00%
Paid by Church	1.55%	1.55%	1.55%	1.55%	1.55%	1.55%
Paid by Participant	1.17%	-9.16%	0.00%	-10.03%	0.00%	0.00%
Total Billed to Church	1.44%	-1.11%	-0.75%	-1.24%	-1.18%	5.34%

1. Financial assistance is available upon request from the CBOPHB for the lesser of actual premium costs paid by participant or \$1,183 per year. Churches can also choose to pay some or all of these premium costs on behalf of the participant.
2. In cases of clergy couples or other situations where both spouses are plan participants, in order to not provide an incentive for these married participants to choose separate single coverage plans, employee participants in such cases will pay 1 times the single participant premium responsibility for single coverage, 2 times the single participant premium responsibility for couple coverage, or 3 times the single participant premium responsibility for family coverage.
- 3. If no active selection is made, the default medical plan in 2019 will be the CDHP C2000 plan. Rates for the other plans are shown in adjoining columns.**
4. If no selection is made, the default dental plan will be the passive PPO 1000 plan. Rates for the other 2 dental plans are: (1) PPO = \$468.00 per year for single coverage, \$888.00 per year for couple coverage, and \$1,092.00 per year for family coverage; and (2) passive PPO 2000 = \$576.00 per year for single coverage, \$1,236.00 per year for couple coverage, and \$1,500.00 per year for family coverage.
5. If no selection is made, the default vision plan will be the exam core plan. Rates for the full service plan are \$71.52 per year for single coverage, \$115.20 per year for couple coverage, and \$181.92 per year for family coverage. Rates for the premier plan are \$172.56 per year for single coverage, \$279.84 per year for couple coverage, and \$444.24 per year for family coverage.