

**Desert Southwest Conference
2020 Health Insurance Premiums**

MONTHLY - 2020

	Single (2)					
	PPO B1000 (3)	CDHP C2000	CDHP C3000	HDH H1500	HDH H2000	HDH H3000
Medical	928	881	748	858	786	685
Dental PPO (4)	40	40	40	40	40	40
Vision Exam Core (5)	0	0	0	0	0	0
Total	968	921	788	898	826	725
Paid by Conference	927	927	927	927	927	927
Paid by Participant (1)	41	0	0	0	0	0
Paid by Church	1,298	1,298	1,298	1,298	1,298	1,298
Paid by Participant (1)	41	0	0	0	0	0
Total Billed to Church	1,339	1,298	1,298	1,298	1,298	1,298

MONTHLY - 2019

	Single					
	PPO B1000	CDHP C2000	CDHP C3000	HDH H1500	HDH H2000	HDH H3000
Medical	919	857	740	849	777	678
Dental Passive PPO 1000	35	35	35	35	35	35
Vision Exam Core	0	0	0	0	0	0
Total	954	892	775	884	812	713
Paid by Conference	887	887	887	887	887	887
Paid by Participant	67	5	0	0	0	0
Paid by Church	1,242	1,242	1,242	1,242	1,242	1,242
Paid by Participant	67	5	0	0	0	0
Total Billed to Church	1,309	1,247	1,242	1,242	1,242	1,242

CHANGE

	Single					
	PPO B1000	CDHP C2000	CDHP C3000	HDH H1500	HDH H2000	HDH H3000
Medical	9	24	8	9	9	7
Dental Passive PPO 1000	5	5	5	5	5	5
Vision Exam Core	0	0	0	0	0	0
Total	14	29	13	14	14	12
Paid by Conference	40	40	40	40	40	40
Paid by Participant	(26)	(5)	0	0	0	0
Paid by Church	56	56	56	56	56	56
Paid by Participant	(26)	(5)	0	0	0	0
Total Billed to Church	30	51	56	56	56	56

% CHANGE

	Single					
	PPO B1000	CDHP C2000	CDHP C3000	HDH H1500	HDH H2000	HDH H3000
Medical	0.98%	2.80%	1.08%	1.06%	1.16%	1.03%
Dental Passive PPO 1000	14.29%	14.29%	14.29%	14.29%	14.29%	14.29%
Vision Exam Core	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Total	1.47%	3.25%	1.68%	1.58%	1.72%	1.68%
Paid by Conference	4.51%	4.51%	4.51%	4.51%	4.51%	4.51%
Paid by Participant	-38.81%	-100.00%	0.00%	0.00%	0.00%	0.00%
Paid by Church	4.51%	4.51%	4.51%	4.51%	4.51%	4.51%
Paid by Participant	-38.81%	-100.00%	0.00%	0.00%	0.00%	0.00%
Total Billed to Church	2.29%	4.09%	4.51%	4.51%	4.51%	4.51%

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MONTHLY - 2020

	Participant + 1 (Couple) (2)					
	PPO B1000 (3)	CDHP C2000	CDHP C3000	HDH H1500	HDH H2000	HDH H3000
Medical	1,762	1,674	1,421	1,630	1,493	1,301
Dental PPO (4)	76	76	76	76	76	76
Vision Exam Core (5)	0	0	0	0	0	0
Total	1,838	1,750	1,497	1,706	1,569	1,377
Paid by Conference	1,545	1,545	1,545	1,545	1,545	1,545
Paid by Participant (1)	293	205	0	161	24	0
Paid by Church	1,298	1,298	1,298	1,298	1,298	1,298
Paid by Participant (1)	293	205	0	161	24	0
Total Billed to Church	1,591	1,503	1,298	1,459	1,322	1,298

MONTHLY - 2019

	Participant + 1 (Couple)					
	PPO B1000	CDHP C2000	CDHP C3000	HDH H1500	HDH H2000	HDH H3000
Medical	1,747	1,628	1,409	1,614	1,477	1,289
Dental Passive PPO 1000	69	69	69	69	69	69
Vision Exam Core	0	0	0	0	0	0
Total	1,816	1,697	1,478	1,683	1,546	1,358
Paid by Conference	1,478	1,478	1,478	1,478	1,478	1,478
Paid by Participant	338	219	0	205	68	0
Paid by Church	1,242	1,242	1,242	1,242	1,242	1,242
Paid by Participant	338	219	0	205	68	0
Total Billed to Church	1,580	1,461	1,242	1,447	1,310	1,242

CHANGE

	Participant + 1 (Couple)					
	PPO B1000	CDHP C2000	CDHP C3000	HDH H1500	HDH H2000	HDH H3000
Medical	15	46	12	16	16	12
Dental Passive PPO 1000	7	7	7	7	7	7
Vision Exam Core	0	0	0	0	0	0
Total	22	53	19	23	23	19
Paid by Conference	67	67	67	67	67	67
Paid by Participant	(45)	(14)	0	(44)	(44)	0
Paid by Church	56	56	56	56	56	56
Paid by Participant	(45)	(14)	0	(44)	(44)	0
Total Billed to Church	11	42	56	12	12	56

% CHANGE

	Participant + 1 (Couple)					
	PPO B1000	CDHP C2000	CDHP C3000	HDH H1500	HDH H2000	HDH H3000
Medical	0.86%	2.83%	0.85%	0.99%	1.08%	0.93%
Dental Passive PPO 1000	10.14%	10.14%	10.14%	10.14%	10.14%	10.14%
Vision Exam Core	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Total	1.21%	3.12%	1.29%	1.37%	1.49%	1.40%
Paid by Conference	4.53%	4.53%	4.53%	4.53%	4.53%	4.53%
Paid by Participant	-13.31%	-6.39%	0.00%	-21.46%	0.00%	0.00%
Paid by Church	4.51%	4.51%	4.51%	4.51%	4.51%	4.51%
Paid by Participant	-13.31%	-6.39%	0.00%	-21.46%	0.00%	0.00%
Total Billed to Church	0.70%	2.87%	4.51%	0.83%	0.92%	4.51%

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MONTHLY - 2020

	Participant + 2 or More (Family) (2)					
	PPO B1000 (3)	CDHP C2000	CDHP C3000	HDH H1500	HDH H2000	HDH H3000
Medical	2,412	2,291	1,944	2,231	2,043	1,780
Dental PPO (4)	94	94	94	94	94	94
Vision Exam Core (5)	0	0	0	0	0	0
Total	2,506	2,385	2,038	2,325	2,137	1,874
Paid by Conference	1,853	1,853	1,853	1,853	1,853	1,853
Paid by Participant (1)	653	532	185	472	284	21
Paid by Church	1,298	1,298	1,298	1,298	1,298	1,298
Paid by Participant (1)	653	532	185	472	284	21
Total Billed to Church	1,951	1,830	1,483	1,770	1,582	1,319

MONTHLY - 2019

	Participant + 2 or More (Family)					
	PPO B1000	CDHP C2000	CDHP C3000	HDH H1500	HDH H2000	HDH H3000
Medical	2,209	2,057	1,780	2,040	1,866	1,627
Dental Passive PPO 1000	83	83	83	83	83	83
Vision Exam Core	0	0	0	0	0	0
Total	2,292	2,140	1,863	2,123	1,949	1,710
Paid by Conference	1,773	1,773	1,773	1,773	1,773	1,773
Paid by Participant	519	367	90	350	176	0
Paid by Church	1,242	1,242	1,242	1,242	1,242	1,242
Paid by Participant	519	367	90	350	176	0
Total Billed to Church	1,761	1,609	1,332	1,592	1,418	1,242

CHANGE

	Participant + 2 or More (Family)					
	PPO B1000	CDHP C2000	CDHP C3000	HDH H1500	HDH H2000	HDH H3000
Medical	203	234	164	191	177	153
Dental Passive PPO 1000	11	11	11	11	11	11
Vision Exam Core	0	0	0	0	0	0
Total	214	245	175	202	188	164
Paid by Conference	80	80	80	80	80	80
Paid by Participant	134	165	95	122	108	21
Paid by Church	56	56	56	56	56	56
Paid by Participant	134	165	95	122	108	21
Total Billed to Church	190	221	151	178	164	77

% CHANGE

	Participant + 2 or More (Family)					
	PPO B1000	CDHP C2000	CDHP C3000	HDH H1500	HDH H2000	HDH H3000
Medical	9.19%	11.38%	9.21%	9.36%	9.49%	9.40%
Dental Passive PPO 1000	13.25%	13.25%	13.25%	13.25%	13.25%	13.25%
Vision Exam Core	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Total	9.34%	11.45%	9.39%	9.51%	9.65%	9.59%
Paid by Conference	4.51%	4.51%	4.51%	4.51%	4.51%	4.51%
Paid by Participant	25.82%	44.96%	0.00%	34.86%	0.00%	0.00%
Paid by Church	4.51%	4.51%	4.51%	4.51%	4.51%	4.51%
Paid by Participant	25.82%	44.96%	0.00%	34.86%	0.00%	0.00%
Total Billed to Church	10.79%	13.74%	11.34%	11.18%	11.57%	6.20%

1. Financial assistance is available upon request from the CBOPHB for the lesser of actual premium costs paid by participant or \$1,236 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 for 2020, the default medical plan will be the plan selected for 2019. For those with no plan coverage in 2019, the 2020 default medical plan will be the CDHP C2000 plan.
4. If no selection is made, the default dental plan will be the PPO plan. Rates for the other 2 dental plans are: (1) HMO = \$168.00 per year for single coverage, \$312.00 per year for couple coverage, and \$540.00 per year for family coverage; and (2) passive PPO 2000 = \$588.00 per year for single coverage, \$1,260.00 per year for couple coverage, and \$1,536.00 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.