

**2023 WV United Methodist Conference Health, Dental, and Vision Costs**

**ALL PREMIUMS ARE COLLECTED THROUGH BANK DRAFT THE SECOND WEDNESDAY OF EACH MONTH**

**HealthFlex Health Insurance 2023 Participant Premiums\***

Plan / Tier	2023 Total Monthly Premium	Premium Credit (Amount Paid by Church and Conference)			Participant Monthly Premium	Participant Annual Premium	Retiree Pre 65 Monthly Premium (Retired prior to 7/1/21)	Retiree Pre 65 Monthly Premium (Retired after 7/1/21)
		Premium Credit Funded by Local Church	Premium Credit Funded Through Fair Share	Total Monthly Premium Credit				
<b>B1000</b>								
Participant Only	\$ 1,854.00	\$ 600.00	\$ 802.00	\$ 1,402.00	\$ 452.00	\$ 5,424.00	\$ 572.00	\$ 1,052.00
Participant + 1	\$ 3,523.00	\$ 600.00	\$ 2,025.00	\$ 2,625.00	\$ 898.00	\$ 10,776.00	\$ 1,018.00	\$ 1,498.00
Participant + 2 or more	\$ 4,820.00	\$ 600.00	\$ 2,980.00	\$ 3,580.00	\$ 1,240.00	\$ 14,880.00	\$ 1,360.00	\$ 1,840.00
<b>C2000 w/ HRA</b>								
Participant Only	\$ 1,780.00	\$ 600.00	\$ 802.00	\$ 1,402.00	\$ 378.00	\$ 4,536.00	\$ 498.00	\$ 978.00
Participant + 1	\$ 3,382.00	\$ 600.00	\$ 2,025.00	\$ 2,625.00	\$ 757.00	\$ 9,084.00	\$ 877.00	\$ 1,357.00
Participant + 2 or more	\$ 4,626.00	\$ 600.00	\$ 2,980.00	\$ 3,580.00	\$ 1,046.00	\$ 12,552.00	\$ 1,166.00	\$ 1,646.00
<b>C3000 w/ HRA</b>								
Participant Only	\$ 1,550.00	\$ 600.00	\$ 802.00	\$ 1,402.00	\$ 148.00	\$ 1,776.00	\$ 268.00	\$ 748.00
Participant + 1	\$ 2,943.00	\$ 600.00	\$ 2,025.00	\$ 2,625.00	\$ 318.00	\$ 3,816.00	\$ 438.00	\$ 918.00
Participant + 2 or more	\$ 4,025.00	\$ 600.00	\$ 2,980.00	\$ 3,580.00	\$ 445.00	\$ 5,340.00	\$ 565.00	\$ 1,045.00
<b>H1500 w/ HSA</b>								
Participant Only	\$ 1,733.00	\$ 600.00	\$ 802.00	\$ 1,402.00	\$ 331.00	\$ 3,972.00	\$ 451.00	\$ 931.00
Participant + 1	\$ 3,292.00	\$ 600.00	\$ 2,025.00	\$ 2,625.00	\$ 667.00	\$ 8,004.00	\$ 787.00	\$ 1,267.00
Participant + 2 or more	\$ 4,505.00	\$ 600.00	\$ 2,980.00	\$ 3,580.00	\$ 925.00	\$ 11,100.00	\$ 1,045.00	\$ 1,525.00
<b>H2000 w/ HSA</b>								
Participant Only	\$ 1,570.00	\$ 600.00	\$ 802.00	\$ 1,402.00	\$ 168.00	\$ 2,016.00	\$ 288.00	\$ 768.00
Participant + 1	\$ 2,982.00	\$ 600.00	\$ 2,025.00	\$ 2,625.00	\$ 357.00	\$ 4,284.00	\$ 477.00	\$ 957.00
Participant + 2 or more	\$ 4,083.00	\$ 600.00	\$ 2,980.00	\$ 3,580.00	\$ 503.00	\$ 6,036.00	\$ 623.00	\$ 1,103.00
<b>H3000 w/ HSA</b>								
Participant Only	\$ 1,368.00	\$ 600.00	\$ 802.00	\$ 1,402.00	\$ (34.00)	\$ (408.00)	\$ 86.00	\$ 566.00
Participant + 1	\$ 2,601.00	\$ 600.00	\$ 2,025.00	\$ 2,625.00	\$ (24.00)	\$ (288.00)	\$ 96.00	\$ 576.00
Participant + 2 or more	\$ 3,560.00	\$ 600.00	\$ 2,980.00	\$ 3,580.00	\$ (20.00)	\$ (240.00)	\$ 100.00	\$ 580.00

**2023 WV United Methodist Conference Health, Dental, and Vision Costs**

**HealthFlex Dental Plan Premiums (Participant Responsibility)\*\***

Monthly Cost by Tier	Passive PPO 2000	Dental PPO
Participant Only	\$ 50.00	\$ 41.00
Participant + 1	\$ 100.00	\$ 82.00
Participant + 2 or more	\$ 150.00	\$ 124.00

**HealthFlex Vision Plan Premiums (Participant Responsibility)\*\***

Monthly Cost by Tier	Full Service	Premier
Participant Only	\$ 8.00	\$ 14.00
Participant + 1	\$ 13.00	\$ 23.00
Participant + 2 or more	\$ 20.00	\$ 36.00

A "2023 Participant Premium Calculator" can be found at the following link to get a better picture of the total participant premium and contribution costs:  
<https://www.wvumc.org/wvumc-health-benefits-plan/>

**WV United Methodist Conference 2023 Medicare Supplement**

**Monthly Premium Per Covered Individual**

**\$170**

**BLENDED PREMIUM FOR MEDICARE PRIMARY PARTICIPANT & NON MEDICARE ELIGIBLE SPOUSE**

Clergy where one individual is Medicare eligible and one is not the couple will have a combination of rates or blended premium applicable to their specific age and status. The Primary Participant must be the one retired in order for premium to change.

ACTIVE – Actively appointed at least 75% or employed at least 30 hours a week and not Medicare eligible, including through small employer exception. Also, those retired and not yet Medicare eligible.

\* Retirees not yet 65, will continue to be eligible for coverage through the Conference health insurance plan. Those retiring between January 1, 2004 and July 1, 2021 and not yet 65 will be billed the participant amount per their elections and 20% of the rate normally billed to a charge per participant (\$7,200 annually for 2023). Individuals retiring after July 1, 2021 and being younger than 65, will be billed the participant rate according to their plan elections and the full rate normally billed to a charge per participant (\$7,200 annually for 2023).

\*\* Participant can use excess premium credit to pay dental and vision premiums. **Exam Core is included in health insurance premium and no additional cost to participant.**

**CPP INCAPACITY LEAVE** – (Clergy with conference relationship of incapacity leave) Will be billed the participant amount per their elections and 20% of the rate normally billed to a charge per participant (\$7,200 annually for 2023). This provides a means for a discounted premium for these individuals since they no longer have a church to help defray the cost.