## **2025 FULL-TIME FACULTY & LIBRARIANS INSURANCE RATES**

				Individ	ual Rates			Family Rates					
Health Insurance		HealthMate Coast to Coast Standard Plan (No Deductible)		HealthMate PPO		HealthMate Coast to Coast Deductible Plan		HealthMate Coast to Coast Standard Plan (No Deductible)		HealthMate PPO		HealthMate Coast to Coast Deductible Plan	
Total Monthly Premium		\$1,124.87		\$1,234.01		\$1,008.54		\$2,773.07		\$3,043.48		\$2,487.16	
Salary Band	Premium Share %	RISD Pays	You Pay	RISD Pays	You Pay	RISD Pays	You Pay	RISD Pays	You Pay	RISD Pays	You Pay	RISD Pays	You Pay
Up to \$59,999	15%	\$955.88	\$168.68	\$1,048.61	\$185.05	\$857.03	\$151.24	\$2,356.45	\$415.84	\$2,586.25	\$456.40	\$2,113.51	\$372.97
\$60,000 - \$69,999	20%	\$899.65	\$224.91	\$986.93	\$246.73	\$806.61	\$201.65	\$2,217.84	\$554.46	\$2,434.11	\$608.53	\$1,989.18	\$497.30
\$70,000 - \$79,999	23%	\$865.92	\$258.65	\$949.92	\$283.74	\$776.36	\$231.90	\$2,134.67	\$637.63	\$2,342.84	\$699.81	\$1,914.59	\$571.89
\$80,000 - \$89,999	29%	\$798.44	\$326.12	\$875.90	\$357.76	\$715.87	\$292.40	\$1,968.33	\$803.97	\$2,160.28	\$882.37	\$1,765.40	\$721.08
\$90,000 - \$99,999	34%	\$742.21	\$382.35	\$814.22	\$419.45	\$665.46	\$342.81	\$1,829.72	\$942.58	\$2,008.14	\$1,034.50	\$1,641.08	\$845.40
\$100,000 - \$109,999	42%	\$652.25	\$472.32	\$715.52	\$518.14	\$584.79	\$423.47	\$1,607.93	\$1,164.37	\$1,764.73	\$1,277.91	\$1,442.16	\$1,044.32
\$110,000 - \$119,999	44%	\$629.76	\$494.81	\$690.85	\$542.81	\$564.63	\$443.64	\$1,552.49	\$1,219.81	\$1,703.88	\$1,338.76	\$1,392.43	\$1,094.05
\$120,000 +	48%	\$584.77	\$539.79	\$641.51	\$592.16	\$524.30	\$483.97	\$1,441.59	\$1,330.70	\$1,582.17	\$1,460.47	\$1,292.97	\$1,193.51

Dental Insurance	Total Monthly Premium	RISD Pays	You Pay	
Individual	\$24.96	\$24.96	\$0.00	
Family	\$84.45	\$24.96	\$59.49	