

Illinois Wesleyan University

2023 Monthly Insurance Premiums

Medical Platinum Plan	Employee Premium	IWU Contribution	Total
Employee Only	\$158.00	\$692.00	\$850.00
Employee + Child(ren)	\$541.00	\$989.00	\$1,530.00
Employee + Spouse	\$604.00	\$1,096.00	\$1,700.00
Family	\$941.00	\$1,694.00	\$2,635.00

Medical Gold Plan	Employee Premium	IWU Contribution	Total
Employee Only	\$63.00	\$722.00	\$785.00
Employee + Child(ren)	\$449.00	\$964.00	\$1,413.00
Employee + Spouse	\$493.00	\$1,077.00	\$1,570.00
Family	\$770.00	\$1,663.00	\$2,433.00

Medical Silver Plan	Employee Premium	IWU Contribution	Total
Employee Only	\$67.00	\$731.00	\$798.00
Employee + Child(ren)	\$407.00	\$1,030.00	\$1,437.00
Employee + Spouse	\$449.00	\$1,148.00	\$1,597.00
Family	\$693.00	\$1,782.00	\$2,475.00

Dental Plan	Employee Premium	IWU Contribution	Total
Employee Only	\$10.00	\$31.00	\$41.00
Employee & Child(ren)	\$26.00	\$71.00	\$97.00
Employee & Spouse	\$26.00	\$71.00	\$97.00
Employee & Family	\$28.00	\$73.00	\$101.00

Vision Plan	Employee Premium
Employee Only	\$7.52
Employee & Child(ren)	\$15.06
Employee & Spouse	\$14.30
Employee & Family	\$22.14