

The Diocese of Kansas

Insurance Rates 2024 Per Month

	Single	Plus One	Family
Health Insurance			
PPO 90	\$ 1,189.00	\$ 2,140.00	\$ 3,329.00
PPO 80	\$ 1,087.00	\$ 1,957.00	\$ 3,044.00
PPO 70	\$ 969.00	\$ 1,744.00	\$ 2,713.00
CDHP	\$ 931.00	\$ 1,676.00	\$ 2,607.00
PPO 90 Medicare As Secondary Payer	\$ 953.00	\$ 1,715.00	\$ 2,668.00
PPO 80 Medicare As Secondary Payer	\$ 868.00	\$ 1,562.00	\$ 2,430.00
PPO 70 Medicare As Secondary Payer	\$ 784.00	\$ 1,411.00	\$ 2,195.00
Dental Insurance			
Delta Basic	\$ 42.00	\$ 76.00	\$ 118.00
Delta Comprehensive	\$ 61.00	\$ 110.00	\$ 171.00
Delta Premium	\$ 82.00	\$ 148.00	\$ 230.00