

**2025 Medical and Dental Plans  
Monthly Premium**

		Single	Plus One	Family	% Change over prior year
<b>CDHP PLANS</b>					
CDHP 20		1093	1967	3060	3.99
CDHP 15		1223	2201	3424	4.00
<b>PPO PLANS</b>					
PPO 80		1247	2245	3492	4.02
PPO 90		1469	2644	4113	11.04
PPO 100		1636	2945	4581	14.01
<b>MSP PLANS *</b>					
PPO MS 80		998	1796	2794	3.96
PPO MS 90		1174	2113	3287	10.97
PPO MS 100		1308	2354	3662	14.00
<b>EAP</b>		4	4	4	
<b>DENTAL</b>					
Delta Dental Basic		39	70	109	2.74
Delta Dental Comprehensive		54	97	151	3.62
Delta Dental Premium		73	131	204	2.51

\* MSP Plans:for those over age 65 and employer has 19 or fewer employees

If your institution is eligible and you have employee or spouse of employee age 65 or over, Please contact Elaine Gilligan [hr-finasst@diowestmo.org](mailto:hr-finasst@diowestmo.org) It could be a great savings on insurance premiums!