Kirkwood
COMMUNITY COLLEGE

2026-2027 Insurance Rate Information Per Pay Period
Full-Time Hotel Hourly Employees

Wellmark Blue Cross/Blue Shield

	PPO Choice	PPO Core	HMO Core	HDHP with HSA		
Employee Only	$115.70	$92.20	$30.20	$25.55	$41.85	twice monthly added to HSA
Employee + Children	$464.20	$419.70	$302.20	$255.55	$41.85	twice monthly added to HSA
Employee + Spouse	$522.70	$474.20	$347.70	$293.55	$41.85	twice monthly added to HSA
Family	$913.70	$842.20	$652.70	$552.05	$41.85	twice monthly added to HSA

Delta Dental

Employee Only	$6.00
Employee + 1	$27.20
Family	$42.02

VSP Vision

Employee Only	$1.25
Family	$7.75

Premiums are deducted twice per month beginning with the first pay period in June.

In months with 3 pay periods, deduction is taken from the first two checks of the month.