Village of Romeoville 1/1/2027
Part-Time Employee Rates

Medical Plan HMO Blue Advantage

Monthly Premium Rates	Total Cost	Village Cost	Employee Cost
Employee Only	$1,088.00	$0.00	$1,088.00
Employee + Spouse	$2,222.00	$0.00	$2,222.00
Employee + Child(ren)	$1,913.00	$0.00	$1,913.00
Family	$3,065.00	$0.00	$3,065.00

Medical Plan PPO 300 w/BCO

Monthly Premium Rates	Total Cost	Village Cost	Employee Cost
Employee Only	$1,310.00	$0.00	$1,310.00
Employee + Spouse	$2,712.00	$0.00	$2,712.00
Employee + Child(ren)	$2,330.00	$0.00	$2,330.00
Family	$3,716.00	$0.00	$3,716.00

Medical Plan PPO 300

Monthly Premium Rates	Total Cost	Village Cost	Employee Cost
Employee Only	$1,380.00	$0.00	$1,380.00
Employee + Spouse	$2,857.00	$0.00	$2,857.00
Employee + Child(ren)	$2,453.00	$0.00	$2,453.00
Family	$3,914.00	$0.00	$3,914.00

Medical Plan PPO 750

Monthly Premium Rates	Total Cost	Village Cost	Employee Cost
Employee Only	$1,141.00	$0.00	$1,141.00
Employee + Spouse	$2,327.00	$0.00	$2,327.00
Employee + Child(ren)	$2,012.00	$0.00	$2,012.00
Family	$3,196.00	$0.00	$3,196.00

Medical Plan PPO HDHP 3500

Monthly Premium Rates	Total Cost	Village Cost	Employee Cost
Employee Only	$1,058.00	$0.00	$1,058.00
Employee + Spouse	$2,164.00	$0.00	$2,164.00
Employee + Child(ren)	$1,867.00	$0.00	$1,867.00
Family	$2,972.00	$0.00	$2,972.00

Medical Plan PPO HDHP 4000

Monthly Premium Rates	Total Cost	Village Cost	Employee Cost
Employee Only	$995.00	$0.00	$995.00
Employee + Spouse	$2,034.00	$0.00	$2,034.00
Employee + Child(ren)	$1,759.00	$0.00	$1,759.00
Family	$2,798.00	$0.00	$2,798.00

Rates effective January 1, 2027 – December 31, 2027