



Diocese of Rockford
Health Insurance Office
555 Colman Center Drive
P.O. Box 7044
Rockford, IL 61125

(815) 399-4300
FAX: (815) 997-5225

CATHOLIC DIOCESE OF ROCKFORD INSURANCE COVERAGE RATES

Effective July 1, 2018

Single Coverage	\$	941.00
Priest's Coverage		1170.00
Dependent Coverage		753.00
Dependent Coverage (both family members are employees)		108.00
Retired Coverage		394.00
Retired Dependent Coverage		300.00
Women Religious Coverage		922.00
Retired Women Religious Coverage		364.00

After leaving the employment of the Diocese, terminated employees have the option of extending coverage for up to three months. The extended coverage rates are listed below:

EXTENDED COVERAGE RATES

Single Coverage	\$	941.00
Dependent Coverage		753.00
Women Religious Coverage		922.00