

FY 25 Health, Dental and Vision Insurance Rates

Health

PLAN NAME	GROUP	WEEKLY (48 weekly deductions)	BI WEEKLY (24 deductions)	21 PAY*	42 PAY*	39 PAY* LTS (10 month coverage)	EMPLOYEE MONTHLY COST
BCBS - Blue Care Elect Rate Saver	Individual	\$179.00	\$358.00	\$409.14	\$204.57	\$183.59	\$716.00
	Family	\$424.00	\$848.00	\$969.14	\$484.57	\$434.87	\$1,696.00
BCBS - Blue Care Elect Benchmark	Individual	\$160.50	\$321.00	\$366.86	\$183.43	\$164.62	\$642.00
	Family	\$381.00	\$762.00	\$870.86	\$435.43	\$390.77	\$1,524.00
BCBS - Network Blue Rate Saver	Individual	\$123.00	\$246.00	\$281.14	\$140.57	\$126.15	\$492.00
	Family	\$327.75	\$655.50	\$749.14	\$374.57	\$336.15	\$1,311.00
BCBS - Network Blue Benchmark	Individual	\$113.50	\$227.00	\$259.43	\$129.71	\$116.41	\$454.00
	Family	\$302.00	\$604.00	\$690.29	\$345.14	\$309.74	\$1,208.00
HARVARD PILGRIM - HMO Rate Saver	Individual	\$133.25	\$266.50	\$304.57	\$152.29	\$136.67	\$533.00
	Family	\$354.50	\$709.00	\$810.29	\$405.14	\$363.59	\$1,418.00
HARVARD PILGRIM - HMO Benchmark	Individual	\$125.75	\$251.50	\$287.43	\$143.71	\$128.97	\$503.00
	Family	\$334.25	\$668.50	\$764.00	\$382.00	\$342.82	\$1,337.00
RETIREES							
BCBS-Medex	Individual Only						\$195.00
BCBS-PPO Blue FreedomRx	Individual Only						\$171.00

Dental

Available to active employees only

PLAN NAME	GROUP	WEEKLY (48 weekly deductions)	BI WEEKLY	21 PAY*	42 PAY*	39 PAY* LTS (10 month coverage)	EMPLOYEE MONTHLY COST
Delta Dental Premier	Individual	\$9.75	\$19.50	\$22.29	\$11.14	\$10.00	\$39.00
Delta Dental Premier	Family	\$24.25	\$48.50	\$55.43	\$27.71	\$24.87	\$97.00

Vision

Available to active employees only

PLAN NAME	GROUP	WEEKLY (48 weekly deductions)	BI WEEKLY	21 PAY*	42 PAY*	39 PAY* LTS (10 month coverage)	EMPLOYEE MONTHLY COST
EyeMed Vision Care	Individual	\$1.84	\$3.67	\$4.19	\$2.10	\$1.88	\$7.34
EyeMed Vision Care	Individual plus Spouse	\$3.49	\$6.98	\$7.98	\$3.99	\$3.58	\$13.96
EyeMed Vision Care	Individual plus Children	\$3.67	\$7.35	\$8.39	\$4.20	\$3.77	\$14.69
EyeMed Vision Care	Family	\$5.40	\$10.80	\$12.34	\$6.17	\$5.54	\$21.60

The Pay Cycles noted with an * apply to the following:

*21 - Teachers

*42 - Paraprofessionals, Food Service, and Tutors

*39 - LTS 10 Month coverage only