

CHELMSFORD PUBLIC SCHOOL DEPARTMENT INSURANCE RATES FOR 2020 - 2021 EFFECTIVE FOR JULY 1, 2020 COVERAGE

| | <u>Annual (Employee Amount)</u> | | <u>26 Payments</u> | <u>21 Payments</u> |
|--------------------------------------|---|------------------|--------------------|--------------------|
| <u>PPO Blue Care Elect</u> | \$ 11,785.20 | Family | \$453.28 | \$561.20 |
| | \$ 4,551.36 | Single | \$175.05 | \$216.73 |
| <u>HMO Network Blue</u> | \$ 6,360.72 | Family | \$244.64 | \$302.89 |
| | \$ 2,456.76 | Single | \$94.49 | \$116.99 |
| <u>HMO Network Blue Select</u> | \$ 5,724.72 | Family | \$220.18 | \$272.61 |
| | \$ 2,211.00 | Single | \$85.04 | \$105.29 |
| <u>Blue Cross Blue Shield Dental</u> | <u>Low Plan</u> | | | |
| | \$ 1,256.16 | Family | \$48.31 | \$59.82 |
| | \$ 543.48 | Single | \$20.90 | \$25.88 |
| | <u>High Plan</u> | | | |
| <u>MetLife Vision</u> | \$ 132.12 | Individual | \$5.08 | \$6.30 |
| | \$ 247.20 | EE + 1 Dependent | \$9.51 | \$11.78 |
| | \$ 357.60 | Family | \$13.75 | \$17.03 |
| <u>Boston Mutual Basic Life</u> | \$ 12.72 | | \$0.49 | \$0.61 |

Cafeteria Plan Advisors FlexChoice

| | | <u>Admin Fee</u> |
|-------------------------------|-------------------------|------------------|
| Flexible Spending Acct | \$2,750.00 Annual limit | Town will Pay |
| Dependent Care Acct | \$5,000.00 Annual limit | Town will Pay |

****Debit Card will be issued to everyone at no additional cost to employee. Town will pick up the cost.

****Aides, Paraprofessionals and Food Service employees; as well as teachers who elect to be paid 21 times a year, will have their deductions taken 21 times per year.

**** All other employees paid 26 times a year will have their deductions taken 26 times a year

**** All new enrollees will have double deductions taken out for the first month.

This is due to the fact that we pay one month in advance for all benefits.