

**CHELMSFORD PUBLIC SCHOOL DEPARTMENT
INSURANCE RATES FOR 2021 - 2022
EFFECTIVE FOR JULY 1, 2021 COVERAGE**

	<u>Annual (Employee Amount)</u>		<u>26 Payments</u>	<u>21 Payments</u>
<u>PPO Blue Care Elect</u>	\$ 11,257.56	Family	\$432.98	\$536.08
	\$ 4,347.60	Single	\$167.21	\$207.03
<u>HMO Network Blue</u>	\$ 6,075.96	Family	\$233.69	\$289.34
	\$ 2,346.72	Single	\$90.26	\$111.75
<u>HMO Network Blue Select</u>	\$ 5,468.40	Family	\$210.32	\$260.40
	\$ 2,112.00	Single	\$81.23	\$100.57
<u>Blue Cross Blue Shield Dental</u>	<u>Low Plan</u>			
	\$ 1,240.80	Family	\$47.72	\$59.09
	\$ 536.88	Single	\$20.65	\$25.57
	<u>High Plan</u>			
	\$ 1,718.28	Family	\$66.09	\$81.83
	\$ 753.12	Single	\$28.97	\$35.87
<u>Blue 20/20 Vision</u>	\$ 95.76	Individual	\$3.68	\$4.56
	\$ 162.96	EE + 1 Spouse	\$6.27	\$7.76
	\$ 167.64	EE + 1 or more Dependents	\$6.45	\$7.99
	\$ 263.40	Family	\$10.13	\$12.55
<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.