

**CHELMSFORD PUBLIC SCHOOL DEPARTMENT  
INSURANCE RATES FOR 2022 - 2023  
EFFECTIVE FOR JULY 1, 2022 COVERAGE**

	<u>Annual (Employee Amount)</u>		<u>26 Payments</u>	<u>21 Payments</u>
<b><u>PPO Blue Care Elect</u></b>	\$ 12,710.76	Family	\$488.88	\$605.28
	\$ 4,908.84	Single	\$188.81	\$233.76
<b><u>HMO Network Blue</u></b>	\$ 6,860.28	Family	\$263.86	\$326.68
	\$ 2,649.72	Single	\$101.92	\$126.18
<b><u>HMO Network Blue Select</u></b>	\$ 6,174.36	Family	\$237.48	\$294.02
	\$ 2,384.76	Single	\$91.73	\$113.56
<b><u>Blue Cross Blue Shield Dental</u></b>	<b><u>Low Plan</u></b>			
	\$ 1,240.80	Family	\$47.72	\$59.09
	\$ 536.88	Single	\$20.65	\$25.57
	<b><u>High Plan</u></b>			
	\$ 1,718.28	Family	\$66.09	\$81.83
	\$ 753.12	Single	\$28.97	\$35.87
<b><u>Blue 20/20 Vision</u></b>	\$ 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
<b><u>Boston Mutual Basic Life</u></b>	\$ 12.72		\$0.49	\$0.61

**Cafeteria Plan Advisors FlexChoice**

		<u>Admin Fee</u>
<b>Flexible Spending Acct</b>	\$2,850.00 Annual limit	Town will Pay
<b>Dependent Care Acct</b>	\$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.