

Belton School District
Insurance Rates Effective 07/01/22 through 06/30/23
THESE PREMIUMS ARE PER MONTH

PPO-\$500 DEDUCTIBLE

<u>Preferred Care Blue II</u>	<u>Total Premium</u>	<u>Board Pays</u>	<u>Employee Payroll Deduction</u>
Employee	\$1,165.72	\$693.08	\$472.64
Employee + Spouse	\$2,557.14	\$693.08	\$1,864.06
Employee + Child(ren)	\$2,169.90	\$693.08	\$1,476.82
Family	\$3,316.78	\$693.08	\$2,623.70

PPO-\$3,000 DEDUCTIBLE BLUE SELECT PLUS

<u>Blue Select Plus OHDHP</u>	<u>Total Premium</u>	<u>Board Pays</u>	<u>Employee Payroll Deduction</u>
Employee	\$693.08	\$693.08	\$0.00
Employee + Spouse	\$1,520.56	\$693.08	\$827.48
Employee + Child(ren)	\$1,282.64	\$693.08	\$589.56
Family	\$1,975.80	\$693.08	\$1,282.72

PPO-\$2,800 DEDUCTIBLE PREFERRED CARE BLUE

<u>Preferred Care Blue OHDHP</u>	<u>Total Premium</u>	<u>Board Pays</u>	<u>Employee Payroll Deduction</u>
Employee	\$790.70	\$693.08	\$97.62
Employee + Spouse	\$1,734.68	\$693.08	\$1,041.60
Employee + Child(ren)	\$1,463.26	\$693.08	\$770.18
Family	\$2,254.02	\$693.08	\$1,560.94

HMO-PURPLE PLAN

<u>Blue Care I</u>	<u>Total Premium</u>	<u>Board Pays</u>	<u>Employee Payroll Deduction</u>
Employee	\$874.40	\$693.08	\$181.32
Employee + Spouse	\$1,921.80	\$693.08	\$1,228.72
Employee + Child(ren)	\$1,473.96	\$693.08	\$780.88
Family	\$2,486.08	\$693.08	\$1,793.00

HMO-GOLD PLAN

<u>Blue Care II</u>	<u>Total Premium</u>	<u>Board Pays</u>	<u>Employee Payroll Deduction</u>
Employee	\$1,004.58	\$693.08	\$311.50
Employee + Spouse	\$2,207.82	\$693.08	\$1,514.74
Employee + Child(ren)	\$1,693.34	\$693.08	\$1,000.26
Family	\$2,856.14	\$693.08	\$2,163.06

DENTAL

<u>Delta</u>	<u>Total Premium</u>	<u>Board Pays</u>	<u>Employee Payroll Deduction</u>
Employee	\$37.48	\$37.48	\$0.00
Employee + One (this can be a spouse or one child)	\$78.70	\$37.48	\$41.22
Family	\$139.86	\$37.48	\$102.38

VOLUNTARY VISION - STANDARD PLAN

<u>VSP</u>	<u>Employee Payroll Deduction</u>
Employee	\$8.33
Employee + Spouse	\$15.43
Employee + Child(ren)	\$15.74
Family	\$24.57

VOLUNTARY VISION - PREMIER PLAN

<u>VSP</u>	<u>Employee Payroll Deduction</u>
Employee	\$14.10
Employee + Spouse	\$24.67
Employee + Child(ren)	\$25.18
Family	\$39.79

Please remember, you will need to remain in the plans you elect for July 1, 2022 until the next open enrollment effective July 1, 2023 unless you have a qualifying life event. During open enrollment, you will be able to switch between plans, and add or terminate dependents. Coverage may not be terminated except if you leave employment, have a qualifying life event, or at open enrollment each year. Any mid-year changes must be requested within 30 days of the qualifying event.

LIFE INSURANCE: The district pays for life insurance through Standard equal to 100% of your annual salary in life insurance (rounded to the next higher multiple of \$1,000)

LONG-TERM DISABILITY: The district pays for 100% of your long-term disability policy through Cigna with monthly benefits of 60% of monthly earnings after an elimination period of 90 days.