

**STAFF**  
**2019/20 INSURANCE PREMIUM COSTS**  
**BCBS MEDICAL AND DENTAL**

<b>PPO-1</b>	<b>TOTAL</b>		<b>DISTRICT</b>			<b>EMPLOYEE</b>	
<b>Employee Only</b>	Monthly		Monthly	Per Check		Monthly	Per Check
Medical	\$ 712.28	84%	600.54	300.27	16%	111.74	55.87
Dental	41.68	72%	29.82	14.91	28%	11.86	5.93
Combined	<u>\$ 753.96</u>		<u>630.36</u>	<u>315.18</u>		<u>123.60</u>	<u>61.80</u>
<b>Employee &amp; Spouse</b>	Monthly		Monthly	Per Check		Monthly	Per Check
Medical	\$ 1,495.79	68%	1,024.38	512.19	32%	471.42	235.71
Dental	69.41	67%	46.18	23.09	33%	23.24	11.62
Combined	<u>\$ 1,565.20</u>		<u>1,070.56</u>	<u>535.28</u>		<u>494.66</u>	<u>247.33</u>
<b>Employee &amp; Child</b>	Monthly		Monthly	Per Check		Monthly	Per Check
Medical	\$ 1,353.35	67%	907.82	453.91	33%	445.54	222.77
Dental	105.04	79%	83.06	41.53	21%	21.98	10.99
Combined	<u>\$ 1,458.39</u>		<u>990.88</u>	<u>495.44</u>		<u>467.52</u>	<u>233.76</u>
<b>Family</b>	Monthly		Monthly	Per Check		Monthly	Per Check
Medical	\$ 2,065.65	71%	1,465.38	732.69	29%	600.28	300.14
Dental	147.56	64%	94.44	47.22	36%	53.12	26.56
Combined	<u>\$ 2,213.21</u>		<u>1,559.82</u>	<u>779.91</u>		<u>653.40</u>	<u>326.70</u>

<b>PPO-2</b>	<b>TOTAL</b>		<b>DISTRICT</b>			<b>EMPLOYEE</b>	
<b>Employee Only</b>	Monthly		Monthly	Per Check		Monthly	Per Check
Medical	\$ 678.37	84%	572.84	286.42	16%	105.54	52.77
Dental	41.68	72%	29.82	14.91	28%	11.86	5.93
Combined	<u>\$ 720.05</u>		<u>602.66</u>	<u>301.33</u>		<u>117.40</u>	<u>58.70</u>
<b>Employee &amp; Spouse</b>	Monthly		Monthly	Per Check		Monthly	Per Check
Medical	\$ 1,424.57	70%	1,000.42	500.21	30%	424.16	212.08
Dental	69.41	67%	46.18	23.09	33%	23.24	11.62
Combined	<u>\$ 1,493.98</u>		<u>1,046.60</u>	<u>523.30</u>		<u>447.40</u>	<u>223.70</u>
<b>Employee &amp; Child</b>	Monthly		Monthly	Per Check		Monthly	Per Check
Medical	\$ 1,288.91	69%	887.12	443.56	31%	401.80	200.90
Dental	105.04	79%	83.06	41.53	21%	21.98	10.99
Combined	<u>\$ 1,393.95</u>		<u>970.18</u>	<u>485.09</u>		<u>423.78</u>	<u>211.89</u>
<b>Family</b>	Monthly		Monthly	Per Check		Monthly	Per Check
Medical	\$ 1,967.27	71%	1,399.82	699.91	29%	567.46	283.73
Dental	147.56	64%	94.44	47.22	36%	53.12	26.56
Combined	<u>\$ 2,114.83</u>		<u>1,494.26</u>	<u>747.13</u>		<u>620.58</u>	<u>310.29</u>

*OPEN ENROLLMENT - MAY 1 - 31, 2019*  
*PLAN YEAR - JULY 1, 2019 - JUNE 30, 2020*