

**WACHUSETT REGIONAL SCHOOL DISTRICT
1745 MAIN STREET
JEFFERSON, MA 01522**

**DENTAL RATES
JULY 1, 2019 - JUNE 30, 2020
BLUE CROSS BLUE SHIELD OF MASSACHUSETTS**

DENTAL BLUE PROGRAM 1 (low option)		INDIVIDUAL	FAMILY
Employee Cost Per Month	100%	41.84	101.27
26 Pay Periods (7/12/19 - 6/26/20)		19.31	46.74
21 Pay Periods			
3 Pay Periods (5/17, 5/31, 6/14/19)		27.89	67.51
18 Pay Periods (9/6/19 - 5/1/20)		23.24	56.26
DENTAL BLUE PROGRAM 2 (high option)		INDIVIDUAL	FAMILY
Employee Cost Per Month	100%	59.78	144.66
26 Pay Periods (7/12/19 - 6/26/20)		27.59	66.77
21 Pay Periods			
3 Pay Periods (5/17, 5/31, 6/14/19)		39.85	96.44
18 Pay Periods (9/6/19 - 5/1/20)		33.21	80.37

2 Months (July & August 2019 premium) divided evenly over 3 pay periods = 5/17/19, 5/31/19, 6/14/19

10 Months (September - June 2020 premium) divided evenly over 18 pay periods = 9/6/19 through 5/1/20 pay period

21 Pays - New July 1, 2020 rates will be deducted beginning with the 5/15/20 pay period

**Jeff Carlson, Director of Human Resources
(508) 829-1670 Extension 224**