

**WACHUSETT REGIONAL SCHOOL DISTRICT**

1745 MAIN STREET, JEFFERSON, MA 01522

**HEALTH PLAN RATES - JULY 1, 2017 THROUGH JUNE 30, 2018**

**BLUE CROSS BLUE SHIELD OF MASSACHUSETTS**

HEALTH PLAN		INDIVIDUAL	FAMILY
<b>HMO BLUE NEW ENGLAND OPTIONS</b>			
FULL COST - MONTHLY	100%	699.58	1,853.89
DISTRICT COST - MONTHLY	78%	545.67	1,446.03
<b>EMPLOYEE COST - MONTHLY</b>	<b>22%</b>	<b>153.91</b>	<b>407.86</b>
<b>26 - Pay Periods</b>			
26 Pay Periods (7/14/17 - 6/29/18)		71.03	188.24
<b>21 - Pay Periods</b>			
3 Pay Periods (5/19, 6/2, 6/16/17)		102.61	271.90
18 Pay Periods (9/8/17 - 5/4/18)		85.50	226.59
<b>HMO BLUE NEW ENGLAND ENHANCED VALUE</b>		<b>INDIVIDUAL</b>	<b>FAMILY</b>
FULL COST - MONTHLY	100%	758.93	2,011.12
DISTRICT COST - MONTHLY		545.67	1,446.03
<b>EMPLOYEE COST - MONTHLY</b>	<b>**</b>	<b>213.26</b>	<b>565.09</b>
<b>26 - Pay Periods</b>			
26 Pay Periods (7/14/17 - 6/29/18)		98.43	260.81
<b>21 - Pay Periods</b>			
3 Pay Periods (5/19, 6/2, 6/16/17)		142.17	376.72
18 Pay Periods (9/8/17 - 5/4/18)		118.48	313.94
<b>** Cost difference between HMO Blue NE Options and HMO Blue NE Enhanced Value</b>			
<b>BLUE CARE ELECT PPO</b>		<b>INDIVIDUAL</b>	<b>FAMILY</b>
FULL COST - MONTHLY	100%	790.74	2,095.47
DISTRICT COST - MONTHLY	50%	395.37	1,047.74
<b>EMPLOYEE COST - MONTHLY</b>	<b>50%</b>	<b>395.37</b>	<b>1,047.74</b>
<b>26 - Pay Periods</b>			
26 Pay Periods (7/14/17 - 6/29/18)		182.48	483.57
<b>21 - Pay Periods</b>			
3 Pay Periods (5/19, 6/2, 6/16/17)		263.58	698.49
18 Pay Periods (9/8/17 - 5/4/18)		219.65	582.08

2 Months (July & August premium) divided evenly over 3 pay periods = 5/19/17, 6/2/17 and 6/16/17)

10 Months (September - June premium) divided evenly over 18 pay periods = 9/8/17 through 5/4/18 pay periods.

**21 Pays - New 7/1/18 rates will be deducted beginning with the 5/18/18 pay period**