

**WACHUSETT REGIONAL SCHOOL DISTRICT**

1745 MAIN STREET, JEFFERSON, MA 01522

**HEALTH PLAN RATES - JULY 1, 2020 THROUGH JUNE 30, 2021**

**BLUE CROSS BLUE SHIELD OF MASSACHUSETTS**

HEALTH PLAN		INDIVIDUAL	FAMILY
<b>HMO BLUE NEW ENGLAND OPTIONS</b>			
FULL COST - MONTHLY	100%	748.55	1,983.66
DISTRICT COST - MONTHLY	78%	583.87	1,547.25
<b>EMPLOYEE COST - MONTHLY</b>	<b>22%</b>	<b>164.68</b>	<b>436.41</b>
<b>26 - Pay Periods</b> 26 Pay Periods (7/10/20 - 6/25/21)		76.01	201.42
<b>21 - Pay Periods</b> 3 Pay Periods (5/15, 5/29, 6/12/20)		109.79	290.94
18 Pay Periods (9/4/20 - 4/30/21)		91.49	242.45
<b>HMO BLUE NEW ENGLAND ENHANCED VALUE</b>		<b>INDIVIDUAL</b>	<b>FAMILY</b>
FULL COST - MONTHLY	100%	812.06	2,151.90
DISTRICT COST - MONTHLY		583.87	1,547.25
<b>EMPLOYEE COST - MONTHLY</b>	<b>**</b>	<b>228.19</b>	<b>604.65</b>
<b>26 - Pay Periods</b> 26 Pay Periods (7/10/20 - 6/25/21)		105.32	279.07
<b>21 - Pay Periods</b> 3 Pay Periods (5/15, 5/29, 6/12/20)		152.13	403.10
18 Pay Periods (9/4/20 - 4/30/21)		126.77	335.91
<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%	846.09	2,242.15
DISTRICT COST - MONTHLY	50%	423.05	1,121.08
<b>EMPLOYEE COST - MONTHLY</b>	<b>50%</b>	<b>423.05</b>	<b>1,121.08</b>
<b>26 - Pay Periods</b> 26 Pay Periods (7/10/20 - 6/25/21)		195.25	517.42
<b>21 - Pay Periods</b> 3 Pay Periods (5/15, 5/29, 6/12/20)		282.03	747.38
18 Pay Periods (9/4/20 - 4/30/21)		235.03	622.82

2 Months (July & August 2020 premium) divided evenly over 3 pay periods = 5/15/20, 5/29/20, 6/12/20

10 Months (September - June 2021 premium) divided evenly over 18 pay periods = 9/4/20 through 4/30/21 pay periods

21 Pays - New July 1, 2021 rates will be deducted beginning with the 5/14/21 pay period