WACHUSETT REGIONAL SCHOOL DISTRICT HEALTH PLAN RATES - JULY 1, 2023 THROUGH JUNE 30, 2024			
BLUE CROSS BLUE SHIELD OF MASSACHUSETTS			
HEALTH PLAN			
HMO BLUE NEW ENGLAND OPTIONS		INDIVIDUAL	FAMILY
FULL COST - MONTHLY (12 months)	100%	971.66	2,574.90
DISTRICT COST - MONTHLY (12 months)	78%	757.89	2,008.42
26 - Pay Periods	1070	101100	2,000112
Employee Cost - Monthly (12 Months)	22%	213.77	566.48
Employee Cost Per Pay	/0		
(7/7/23 - 6/28/24)		98.66	261.45
21 - Pay Periods			
Employee Cost - Monthly (10 Months)	22%	256.52	679.77
Employee Cost Per Pay			
(5/12/23 - 4/26/24)		122.15	323.70
HMO BLUE NEW ENGLAND ENHANCED VA		INDIVIDUAL	FAMILY
FULL COST - MONTHLY (12 months)		1,054.10	2,793.28
DISTRICT COST - MONTHLY (12 months)		757.89	2,008.42
26 - Pay Periods			·
Employee Cost - Monthly (12 months)	**	296.21	784.86
Employee Cost Per Pay			
(7/7/23 - 6/28/24)		136.71	362.24
21 - Pay Periods			
Employee Cost - Monthly (10 Months)	**	355.45	941.83
Employee Cost Per Pay			
(5/12/23 - 4/26/24)		169.26	448.49
** Cost difference between HMO Blue NE Options and H		IMO Blue NE Enhand	ced Value
ACCESS BLUE NE SAVER \$2,000 ***		INDIVIDUAL	FAMILY
FULL COST - MONTHLY (12 months)	100%	976.64	
DISTRICT COST - MONTHLY (12 months)		876.64	2,323.02
	78%	683.78	2,323.02
26 - Pay Periods			
· · · · · · · · · · · · · · · · · · ·			
26 - Pay Periods	78%	683.78	1,811.96
26 - Pay Periods Employee Cost - Monthly (12 Months)	78%	683.78	1,811.96
26 - Pay Periods Employee Cost - Monthly (12 Months) Employee Cost Per Pay	78%	683.78 192.86	1,811.96 511.06
26 - Pay Periods Employee Cost - Monthly (12 Months) Employee Cost Per Pay (7/7/23 - 6/28/24)	78%	683.78 192.86	1,811.96 511.06
26 - Pay Periods Employee Cost - Monthly (12 Months) Employee Cost Per Pay (7/7/23 - 6/28/24) 21 - Pay Periods	78% 22% 22%	683.78 192.86 89.01	1,811.96 511.06 235.88
26 - Pay Periods Employee Cost - Monthly (12 Months) Employee Cost Per Pay (7/7/23 - 6/28/24) 21 - Pay Periods Employee Cost - Monthly (10 months)	78% 22% 22%	683.78 192.86 89.01	1,811.96 511.06 235.88
26 - Pay Periods Employee Cost - Monthly (12 Months) Employee Cost Per Pay (7/7/23 - 6/28/24) 21 - Pay Periods Employee Cost - Monthly (10 months) Employee Cost Per Pay	78% 22% 22%	683.78 192.86 89.01 231.43 110.21	1,811.96 511.06 235.88 613.28 292.04
26 - Pay Periods Employee Cost - Monthly (12 Months) Employee Cost Per Pay (7/7/23 - 6/28/24) 21 - Pay Periods Employee Cost - Monthly (10 months) Employee Cost Per Pay (5/12/23 - 4/26/24)	78% 22% 22%	683.78 192.86 89.01 231.43 110.21	1,811.96 511.06 235.88 613.28 292.04
26 - Pay Periods Employee Cost - Monthly (12 Months) Employee Cost Per Pay (7/7/23 - 6/28/24) 21 - Pay Periods Employee Cost - Monthly (10 months) Employee Cost Per Pay (5/12/23 - 4/26/24) *** You may enroll in the Health Savings Account	78% 22% 22% - HSA	683.78 192.86 89.01 231.43 110.21 <i>if you enroll in thi</i>	1,811.96 511.06 235.88 613.28 292.04 s plan
26 - Pay Periods Employee Cost - Monthly (12 Months) Employee Cost Per Pay (7/7/23 - 6/28/24) 21 - Pay Periods Employee Cost - Monthly (10 months) Employee Cost Per Pay (5/12/23 - 4/26/24) *** You may enroll in the Health Savings Account BLUE CARE ELECT PPO FULL COST - MONTHLY (12 months) DISTRICT COST - MONTHLY (12 months)	78% 22% 22% - HSA	683.78 192.86 89.01 231.43 110.21 <i>if you enroll in thi</i> INDIVIDUAL	1,811.96 511.06 235.88 613.28 292.04 s plan FAMILY
26 - Pay Periods Employee Cost - Monthly (12 Months) Employee Cost Per Pay (7/7/23 - 6/28/24) 21 - Pay Periods Employee Cost - Monthly (10 months) Employee Cost Per Pay (5/12/23 - 4/26/24) *** You may enroll in the Health Savings Account BLUE CARE ELECT PPO FULL COST - MONTHLY (12 months)	78% 22% 22% - <i>HSA</i> 100%	683.78 192.86 89.01 231.43 110.21 <i>if you enroll in this</i> INDIVIDUAL 1,098.27	1,811.96 511.06 235.88 613.28 292.04 s plan FAMILY 2,910.42
26 - Pay Periods Employee Cost - Monthly (12 Months) Employee Cost Per Pay (7/7/23 - 6/28/24) 21 - Pay Periods Employee Cost - Monthly (10 months) Employee Cost Per Pay (5/12/23 - 4/26/24) *** You may enroll in the Health Savings Account BLUE CARE ELECT PPO FULL COST - MONTHLY (12 months) DISTRICT COST - MONTHLY (12 months) 26 - Pay Periods Employee Cost - Monthly (12 Months)	78% 22% 22% - <i>HSA</i> 100%	683.78 192.86 89.01 231.43 110.21 <i>if you enroll in this</i> INDIVIDUAL 1,098.27	1,811.96 511.06 235.88 613.28 292.04 s plan FAMILY 2,910.42
26 - Pay Periods Employee Cost - Monthly (12 Months) Employee Cost Per Pay (7/7/23 - 6/28/24) 21 - Pay Periods Employee Cost - Monthly (10 months) Employee Cost - Monthly (10 months) Employee Cost Per Pay (5/12/23 - 4/26/24) **** You may enroll in the Health Savings Account BLUE CARE ELECT PPO FULL COST - MONTHLY (12 months) DISTRICT COST - MONTHLY (12 months) 26 - Pay Periods Employee Cost Per Pay Employee Cost Per Pay Cost - Monthly (12 Months)	78% 22% 22% - <i>HSA</i> 100% 50%	683.78 192.86 89.01 231.43 110.21 <i>if you enroll in thi</i> INDIVIDUAL 1,098.27 549.14 549.14	1,811.96 511.06 235.88 613.28 292.04 s plan FAMILY 2,910.42 1,455.21 1,455.21
26 - Pay Periods Employee Cost - Monthly (12 Months) Employee Cost Per Pay (7/7/23 - 6/28/24) 21 - Pay Periods Employee Cost - Monthly (10 months) Employee Cost Per Pay (5/12/23 - 4/26/24) *** You may enroll in the Health Savings Account BLUE CARE ELECT PPO FULL COST - MONTHLY (12 months) DISTRICT COST - MONTHLY (12 months) 26 - Pay Periods Employee Cost Per Pay (7/7/23 - 6/28/24)	78% 22% 22% - <i>HSA</i> 100% 50%	683.78 192.86 89.01 231.43 110.21 <i>if you enroll in this</i> INDIVIDUAL 1,098.27 549.14	1,811.96 511.06 235.88 613.28 292.04 s plan FAMILY 2,910.42 1,455.21
26 - Pay Periods Employee Cost - Monthly (12 Months) Employee Cost Per Pay (7/7/23 - 6/28/24) 21 - Pay Periods Employee Cost - Monthly (10 months) Employee Cost Per Pay (5/12/23 - 4/26/24) *** You may enroll in the Health Savings Account BLUE CARE ELECT PPO FULL COST - MONTHLY (12 months) DISTRICT COST - MONTHLY (12 months) 26 - Pay Periods Employee Cost Per Pay (7/7/23 - 6/28/24) 21 - Pay Periods	78% 22% 22% - <i>HSA</i> 100% 50%	683.78 192.86 89.01 231.43 110.21 <i>if you enroll in thi</i> INDIVIDUAL 1,098.27 549.14 549.14 549.14	1,811.96 511.06 235.88 613.28 292.04 s plan FAMILY 2,910.42 1,455.21 1,455.21 1,455.21 671.64
26 - Pay Periods Employee Cost - Monthly (12 Months) Employee Cost Per Pay (7/7/23 - 6/28/24) 21 - Pay Periods Employee Cost - Monthly (10 months) Employee Cost - Monthly (10 months) Employee Cost - Monthly (10 months) Employee Cost Per Pay (5/12/23 - 4/26/24) **** You may enroll in the Health Savings Account BLUE CARE ELECT PPO FULL COST - MONTHLY (12 months) DISTRICT COST - MONTHLY (12 months) 26 - Pay Periods Employee Cost - Monthly (12 Months) Employee Cost - Monthly (12 Months) Employee Cost - Monthly (10 Months) Employee Cost - Monthly (10 Months)	78% 22% 22% - <i>HSA</i> 100% 50% 50%	683.78 192.86 89.01 231.43 110.21 <i>if you enroll in thi</i> INDIVIDUAL 1,098.27 549.14 549.14	1,811.96 511.06 235.88 613.28 292.04 s plan FAMILY 2,910.42 1,455.21 1,455.21
26 - Pay Periods Employee Cost - Monthly (12 Months) Employee Cost Per Pay (7/7/23 - 6/28/24) 21 - Pay Periods Employee Cost - Monthly (10 months) Employee Cost Per Pay (5/12/23 - 4/26/24) *** You may enroll in the Health Savings Account BLUE CARE ELECT PPO FULL COST - MONTHLY (12 months) DISTRICT COST - MONTHLY (12 months) 26 - Pay Periods Employee Cost Per Pay (7/7/23 - 6/28/24) 21 - Pay Periods	78% 22% 22% - <i>HSA</i> 100% 50% 50%	683.78 192.86 89.01 231.43 110.21 <i>if you enroll in thi</i> INDIVIDUAL 1,098.27 549.14 549.14 549.14	1,811.96 511.06 235.88 613.28 292.04 s plan FAMILY 2,910.42 1,455.21 1,455.21 1,455.21 671.64