DENNIS-YARMOUTH REGIONAL SCHOOL DISTRICT SCHOOL YEAR RATE FY2024

21 Payrolls

	Employee	Employee	District	District	Premium
	Biweekly	Monthly	Monthly	Biweekly	Total Per
	(10 mos)	(10 mos)	(12 mos)	(12 mos)	Month
HARVARD PILGRIM					
<u>(HMO)</u>					
INDIVIDUAL	\$212.80	\$425.60	\$558.60	\$279.30	931.00
Parent with Child	\$425.60	\$851.20	\$1,117.20	\$558.60	1,862.00
FAMILY	\$569.37	\$1,138.74	\$1,494.60	\$747.30	2,491.00
HARVARD PILGRIM					
<u>(PPO)</u>					
INDIVIDUAL	\$233.60	\$467.19	\$613.20	\$306.60	1,022.00
Parent with Child	\$466.97	\$933.93	\$1,225.80	\$612.90	2,043.00
FAMILY	\$617.83	\$1,235.65	\$1,621.80	\$810.90	2,703.00
BCBS NETWORK					
BLUE					
INDIVIDUAL	\$216.46	\$432.92	\$568.20	\$284.10	947.00
Parent with Child	\$436.34	\$872.70	\$1,145.40	\$572.70	1,909.00
FAMILY	\$580.80	\$1,161.59	\$1,524.60	\$762.30	2,541.00
BCBS BLUE CARE					
ELECT INDIVIDUAL	\$282.97	\$565.93	\$742.80	\$371.40	1,238.00
Parent with Child	\$566.86	\$1,133.70	\$1,488.00	\$744.00	2,480.00
FAMILY	\$708.11	\$1,416.22	\$1,858.80	\$929.40	3,098.00
DELTA DENTAL					
INDIVIDUAL	\$9.15	\$18.30	\$24.00	\$12.00	40.00
Parent with Child	\$18.07	\$36.12	\$47.40	\$23.70	79.00
FAMILY	\$23.55	\$47.10	\$61.80	\$30.90	103.00
EyeMED VISION PLAN					
INDIVIDUAL	\$4.31	\$8.62	0	0	7.53
2- Person	\$8.18	\$16.36	0	0	14.31
FAMILY	\$12.01	\$24.03	0	0	21.02
<u>LIFE</u>					
\$5,000	\$0.44	\$0.88	\$1.14	\$0.57	1.90

Hourly Employees who work the school year September thru June pay an accelerated rate to cover through the summer