

**DENNIS-YARMOUTH REGIONAL SCHOOL DISTRICT
SCHOOL YEAR RATE FY2025**

21 Payrolls

	Employee Biweekly (10 mos)	Employee Monthly (10 mos)	District Biweekly (10 mos)	District Monthly (10 mos)	Premium Total Per Month
<u>HARVARD PILGRIM (HMO)</u>					
INDIVIDUAL	\$229.71	\$459.43	\$344.57	\$689.14	1,005.00
Parent with Child	\$459.66	\$919.31	\$689.49	\$1,378.97	2,011.00
FAMILY	\$614.86	\$1,229.71	\$922.29	\$1,844.57	2,690.00
<u>HARVARD PILGRIM (PPO)</u>					
INDIVIDUAL	\$252.34	\$504.68	\$378.51	\$757.03	1,104.00
Parent with Child	\$504.23	\$1,008.45	\$756.34	\$1,512.69	2,206.00
FAMILY	\$667.20	\$1,334.39	\$1,000.80	\$2,001.60	2,919.00
<u>BCBS NETWORK BLUE</u>					
INDIVIDUAL	\$233.83	\$467.67	\$350.74	\$701.49	1,023.00
Parent with Child	\$471.31	\$942.64	\$706.97	\$1,413.94	2,062.00
FAMILY	\$627.20	\$1,254.39	\$940.80	\$1,881.60	2,744.00
<u>BCBS BLUE CARE ELECT</u>					
INDIVIDUAL	\$305.60	\$611.19	\$458.40	\$916.80	1,337.00
Parent with Child	\$612.11	\$1,224.22	\$918.17	\$1,836.34	2,678.00
FAMILY	\$764.80	\$1,529.59	\$1,147.20	\$2,294.40	3,346.00
<u>DELTA DENTAL</u>					
INDIVIDUAL	\$9.15	\$18.30	\$13.71	\$27.43	40.00
Parent with Child	\$18.07	\$36.12	\$27.09	\$54.17	79.00
FAMILY	\$23.55	\$47.10	\$35.31	\$70.63	103.00
<u>EyeMED VISION PLAN</u>					
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	\$0.52	\$1.04	\$0.77	\$1.54	2.25

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