

Shawnee Mission USD # 512

January 1, 2022 Medical Rates - BCBS

ELIG_RULES_ID = AC		District Benefit = \$742.00				
Blue Care HMO						
	Total Cost	District Benefit	Employee Cost		PLAN (Monthly)	PLAN (BW)
Employee Only	\$899.82	\$742.00	\$157.82		BCREBTEO	BCBWBTEO
Employee + Spouse	\$1,888.74	\$742.00	\$1,146.74		BCREBTES	BCBWBTES
Employee + Child(ren)	\$1,709.66	\$742.00	\$967.66		BCREBTEC	BCBWBTEC
Employee + Family	\$2,743.22	\$742.00	\$2,001.22		BCREBTEF	BCBWBTEF
Preferred Care Blue PPO						
	Total Cost	District Benefit	Employee Cost			
Employee Only	\$887.41	\$742.00	\$145.41		PCBPBTEO	PBBWBTEO
Employee + Spouse	\$1,862.60	\$742.00	\$1,120.60		PCBPBTES	PBBWBTES
Employee + Child(ren)	\$1,686.08	\$742.00	\$944.08		PCBPBTEC	PBBWBTEC
Employee + Family	\$2,705.49	\$742.00	\$1,963.49		PCBPBTEF	PBBWBTEF
District H.S.A.						
Blue Saver PPO QHDHP						
	Total Cost	District Benefit	Employee Cost	Contribution		
Employee Only	\$642.99	\$742.00	\$0.00	\$99.01	BSVRBTEO	BVBWBTEO
Employee + Spouse	\$1,347.72	\$742.00	\$605.72		BSVRBTES	BVBWBTES
Employee + Child(ren)	\$1,221.68	\$742.00	\$479.68		BSVRBTEC	BVBWBTEC
Employee + Family	\$1,962.45	\$742.00	\$1,220.45		BSVRBTEF	BVBWBTEF
Blue Select Plus PPO						
	Total Cost	District Benefit	Employee Cost			
Employee Only	\$792.00	\$742.00	\$50.00		BSPOBTEO	BPBWBTEO
Employee + Spouse	\$1,662.91	\$742.00	\$920.91		BSPOBTES	BPBWBTES
Employee + Child(ren)	\$1,505.97	\$742.00	\$763.97		BSPOBTEC	BPBWBTEC
Employee + Family	\$2,417.31	\$742.00	\$1,675.31		BSPOBTEF	BPBWBTEF
Blue Select Plus EPO						
	Total Cost	District Benefit	Employee Cost			
Employee Only	\$803.53	\$742.00	\$61.53		BSPEBTEO	BEBWBTEO
Employee + Spouse	\$1,685.91	\$742.00	\$943.91		BSPEBTES	BEBWBTES
Employee + Child(ren)	\$1,526.72	\$742.00	\$784.72		BSPEBTEC	BEBWBTEC
Employee + Family	\$2,450.51	\$742.00	\$1,708.51		BSPEBTEF	BEBWBTEF
District H.S.A.						
Blue Select Plus QHDHP						
	Total Cost	District Benefit	Employee Cost	Contribution		
Employee Only	\$577.53	\$742.00	\$0.00	\$164.47	BSHSBTEO	BHBWBTEO
Employee + Spouse	\$1,209.82	\$742.00	\$467.82		BSHSBTES	BHBWBTES
Employee + Child(ren)	\$1,097.30	\$742.00	\$355.30		BSHSBTEC	BHBWBTEC
Employee + Family	\$1,763.44	\$742.00	\$1,021.44		BSHSBTEF	BHBWBTEF

ELIG_RULES_ID = **ER**District Benefit = **\$742.00**

Blue Care HMO	Total Cost	District Benefit	Employee Cost		PLAN (MO)	PLAN (BW)
Employee Only	\$899.82	\$742.00	\$157.82		BCREBTEO	BCBWBTEO
Employee + Spouse	\$1,888.74	\$742.00	\$1,146.74		BCREBTES	BCBWBTES
Employee + Child(ren)	\$1,709.66	\$742.00	\$967.66		BCREBTEC	BCBWBTEC
Employee + Family	\$2,743.22	\$742.00	\$2,001.22		BCREBTEF	BCBWBTEF

Preferred Care Blue PPO	Total Cost	District Benefit	Employee Cost			
Employee Only	\$887.41	\$742.00	\$145.41		PCBPBTEO	PBBWBTEO
Employee + Spouse	\$1,862.60	\$742.00	\$1,120.60		PCBPBTES	PBBWBTES
Employee + Child(ren)	\$1,686.08	\$742.00	\$944.08		PCBPBTEC	PBBWBTEC
Employee + Family	\$2,705.49	\$742.00	\$1,963.49		PCBPBTEF	PBBWBTEF

Blue Saver PPO QHDHP	Total Cost	District Benefit	Employee Cost	District H.S.A. Contribution		
Employee Only	\$642.99	\$742.00	\$0.00	\$99.01	BSVRBTEO	BVBWBTEO
Employee + Spouse	\$1,347.72	\$742.00	\$605.72		BSVRBTES	BVBWBTES
Employee + Child(ren)	\$1,221.68	\$742.00	\$479.68		BSVRBTEC	BVBWBTEC
Employee + Family	\$1,962.45	\$742.00	\$1,220.45		BSVRBTEF	BVBWBTEF

Blue Select Plus PPO	Total Cost	District Benefit	Employee Cost			
Employee Only	\$792.00	\$742.00	\$50.00		BSPOBTEO	BPBWBTEO
Employee + Spouse	\$1,662.91	\$742.00	\$920.91		BSPOBTES	BPBWBTES
Employee + Child(ren)	\$1,505.97	\$742.00	\$763.97		BSPOBTEC	BPBWBTEC
Employee + Family	\$2,417.31	\$742.00	\$1,675.31		BSPOBTEF	BPBWBTEF

Blue Select Plus EPO	Total Cost	District Benefit	Employee Cost			
Employee Only	\$803.53	\$742.00	\$61.53		BSPEBTEO	BEBWBTEO
Employee + Spouse	\$1,685.91	\$742.00	\$943.91		BSPEBTES	BEBWBTES
Employee + Child(ren)	\$1,526.72	\$742.00	\$784.72		BSPEBTEC	BEBWBTEC
Employee + Family	\$2,450.51	\$742.00	\$1,708.51		BSPEBTEF	BEBWBTEF

Blue Select Plus QHDHP	Total Cost	District Benefit	Employee Cost	District H.S.A. Contribution		
Employee Only	\$577.53	\$742.00	\$0.00	\$164.47	BSHSBTEO	BHBWBTEO
Employee + Spouse	\$1,209.82	\$742.00	\$467.82		BSHSBTES	BHBWBTES
Employee + Child(ren)	\$1,097.30	\$742.00	\$355.30		BSHSBTEC	BHBWBTEC
Employee + Family	\$1,763.44	\$742.00	\$1,021.44		BSHSBTEF	BHBWBTEF

Shawnee Mission USD # 512

January 1, 2022 Medical Rates - BCBS

ELIG_RULES_ID = ERPS		District Benefit =		\$742.00		
Blue Care HMO						
	Total Cost	District Benefit	Employee Cost		PLAN (MO)	PLAN (BW)
Employee Only	\$899.82	\$742.00	\$157.82		BCREBTEO	BCBWBTEO
Employee + Spouse	\$1,888.74	\$742.00	\$1,146.74		BCREBTES	BCBWBTES
Employee + Child(ren)	\$1,709.66	\$742.00	\$967.66		BCREBTEC	BCBWBTEC
Employee + Family	\$2,743.22	\$742.00	\$2,001.22		BCREBTEF	BCBWBTEF
Preferred Care Blue PPO						
	Total Cost	District Benefit	Employee Cost			
Employee Only	\$887.41	\$742.00	\$145.41		PCBPBTEO	PBBWBTEO
Employee + Spouse	\$1,862.60	\$742.00	\$1,120.60		PCBPBTES	PBBWBTES
Employee + Child(ren)	\$1,686.08	\$742.00	\$944.08		PCBPBTEC	PBBWBTEC
Employee + Family	\$2,705.49	\$742.00	\$1,963.49		PCBPBTEF	PBBWBTEF
District H.S.A.						
Blue Saver PPO QHDHP						
	Total Cost	District Benefit	Employee Cost	Contribution		
Employee Only	\$642.99	\$742.00	\$0.00	\$99.01	BSVRBTEO	BVBWBTEO
Employee + Spouse	\$1,347.72	\$742.00	\$605.72		BSVRBTES	BVBWBTES
Employee + Child(ren)	\$1,221.68	\$742.00	\$479.68		BSVRBTEC	BVBWBTEC
Employee + Family	\$1,962.45	\$742.00	\$1,220.45		BSVRBTEF	BVBWBTEF
Blue Select Plus PPO						
	Total Cost	District Benefit	Employee Cost			
Employee Only	\$792.00	\$742.00	\$50.00		BSPOBTEO	BPBWBTEO
Employee + Spouse	\$1,662.91	\$742.00	\$920.91		BSPOBTES	BPBWBTES
Employee + Child(ren)	\$1,505.97	\$742.00	\$763.97		BSPOBTEC	BPBWBTEC
Employee + Family	\$2,417.31	\$742.00	\$1,675.31		BSPOBTEF	BPBWBTEF
Blue Select Plus EPO						
	Total Cost	District Benefit	Employee Cost			
Employee Only	\$803.53	\$742.00	\$61.53		BSPEBTEO	BEBWBTEO
Employee + Spouse	\$1,685.91	\$742.00	\$943.91		BSPEBTES	BEBWBTES
Employee + Child(ren)	\$1,526.72	\$742.00	\$784.72		BSPEBTEC	BEBWBTEC
Employee + Family	\$2,450.51	\$742.00	\$1,708.51		BSPEBTEF	BEBWBTEF
District H.S.A.						
Blue Select Plus QHDHP						
	Total Cost	District Benefit	Employee Cost	Contribution		
Employee Only	\$577.53	\$742.00	\$0.00	\$164.47	BSHSBTEO	BHBWBTEO
Employee + Spouse	\$1,209.82	\$742.00	\$467.82		BSHSBTES	BHBWBTES
Employee + Child(ren)	\$1,097.30	\$742.00	\$355.30		BSHSBTEC	BHBWBTEC
Employee + Family	\$1,763.44	\$742.00	\$1,021.44		BSHSBTEF	BHBWBTEF

ELIG_RULES_ID = **ER50**

District Benefit = **\$371.00**

Blue Care HMO	Total Cost	District Benefit	Employee Cost		PLAN (MO)	PLAN (BW)
Employee Only	\$899.82	\$371.00	\$528.82		BCREBTEO	BCBWBTEO
Employee + Spouse	\$1,888.74	\$371.00	\$1,517.74		BCREBTES	BCBWBTES
Employee + Child(ren)	\$1,709.66	\$371.00	\$1,338.66		BCREBTEC	BCBWBTEC
Employee + Family	\$2,743.22	\$371.00	\$2,372.22		BCREBTEF	BCBWBTEF

Preferred Care Blue PPO	Total Cost	District Benefit	Employee Cost			
Employee Only	\$887.41	\$371.00	\$516.41		PCBPBTEO	PBBWBTEO
Employee + Spouse	\$1,862.60	\$371.00	\$1,491.60		PCBPBTES	PBBWBTES
Employee + Child(ren)	\$1,686.08	\$371.00	\$1,315.08		PCBPBTEC	PBBWBTEC
Employee + Family	\$2,705.49	\$371.00	\$2,334.49		PCBPBTEF	PBBWBTEF

Blue Saver PPO QHDHP	Total Cost	District Benefit	Employee Cost	District H.S.A. Contribution		
Employee Only	\$642.99	\$321.49	\$321.50	\$49.41	BSVRBTEO	BVBWBTEO
Employee + Spouse	\$1,347.72	\$371.00	\$976.72		BSVRBTES	BVBWBTES
Employee + Child(ren)	\$1,221.68	\$371.00	\$850.68		BSVRBTEC	BVBWBTEC
Employee + Family	\$1,962.45	\$371.00	\$1,591.45		BSVRBTEF	BVBWBTEF

Blue Select Plus PPO	Total Cost	District Benefit	Employee Cost			
Employee Only	\$792.00	\$371.00	\$421.00		BSPOBTEO	BPBWBTEO
Employee + Spouse	\$1,662.91	\$371.00	\$1,291.91		BSPOBTES	BPBWBTES
Employee + Child(ren)	\$1,505.97	\$371.00	\$1,134.97		BSPOBTEC	BPBWBTEC
Employee + Family	\$2,417.31	\$371.00	\$2,046.31		BSPOBTEF	BPBWBTEF

Blue Select Plus EPO	Total Cost	District Benefit	Employee Cost			
Employee Only	\$803.53	\$371.00	\$432.53		BSPEBTEO	BEBWBTEO
Employee + Spouse	\$1,685.91	\$371.00	\$1,314.91		BSPEBTES	BEBWBTES
Employee + Child(ren)	\$1,526.72	\$371.00	\$1,155.72		BSPEBTEC	BEBWBTEC
Employee + Family	\$2,450.51	\$371.00	\$2,079.51		BSPEBTEF	BEBWBTEF

Blue Select Plus QHDHP	Total Cost	District Benefit	Employee Cost	District H.S.A. Contribution		
Employee Only	\$577.53	\$288.76	\$288.77	\$82.23	BSHSBTEO	BHBWBTEO
Employee + Spouse	\$1,209.82	\$371.00	\$838.82		BSHSBTES	BHBWBTES
Employee + Child(ren)	\$1,097.30	\$371.00	\$726.30		BSHSBTEC	BHBWBTEC
Employee + Family	\$1,763.44	\$371.00	\$1,392.44		BSHSBTEF	BHBWBTEF

Shawnee Mission USD # 512

January 1, 2022 Medical Rates - BCBS

ELIG_RULES_ID = ER60		District Benefit = \$445.20				
Blue Care HMO						
	Total Cost	District Benefit	Employee Cost		PLAN (MO)	PLAN (BW)
Employee Only	\$899.82	\$445.20	\$454.62		BCREBTEO	BCBWBTEO
Employee + Spouse	\$1,888.74	\$445.20	\$1,443.54		BCREBTES	BCBWBTES
Employee + Child(ren)	\$1,709.66	\$445.20	\$1,264.46		BCREBTEC	BCBWBTEC
Employee + Family	\$2,743.22	\$445.20	\$2,298.02		BCREBTEF	BCBWBTEF
Preferred Care Blue PPO						
	Total Cost	District Benefit	Employee Cost			
Employee Only	\$887.41	\$445.20	\$442.21		PCBPBTEO	PBBWBTEO
Employee + Spouse	\$1,862.60	\$445.20	\$1,417.40		PCBPBTES	PBBWBTES
Employee + Child(ren)	\$1,686.08	\$445.20	\$1,240.88		PCBPBTEC	PBBWBTEC
Employee + Family	\$2,705.49	\$445.20	\$2,260.29		PCBPBTEF	PBBWBTEF
District H.S.A.						
Blue Saver PPO QHDHP						
	Total Cost	District Benefit	Employee Cost	Contribution		
Employee Only	\$642.99	\$385.79	\$257.20	\$59.41	BSVRBTEO	BVBWBTEO
Employee + Spouse	\$1,347.72	\$445.20	\$902.52		BSVRBTES	BVBWBTES
Employee + Child(ren)	\$1,221.68	\$445.20	\$776.48		BSVRBTEC	BVBWBTEC
Employee + Family	\$1,962.45	\$445.20	\$1,517.25		BSVRBTEF	BVBWBTEF
Blue Select Plus PPO						
	Total Cost	District Benefit	Employee Cost			
Employee Only	\$792.00	\$445.20	\$346.80		BSPOBTEO	BPBWBTEO
Employee + Spouse	\$1,662.91	\$445.20	\$1,217.71		BSPOBTES	BPBWBTES
Employee + Child(ren)	\$1,505.97	\$445.20	\$1,060.77		BSPOBTEC	BPBWBTEC
Employee + Family	\$2,417.31	\$445.20	\$1,972.11		BSPOBTEF	BPBWBTEF
Blue Select Plus EPO						
	Total Cost	District Benefit	Employee Cost			
Employee Only	\$803.53	\$445.20	\$358.33		BSPEBTEO	BEBWBTEO
Employee + Spouse	\$1,685.91	\$445.20	\$1,240.71		BSPEBTES	BEBWBTES
Employee + Child(ren)	\$1,526.72	\$445.20	\$1,081.52		BSPEBTEC	BEBWBTEC
Employee + Family	\$2,450.51	\$445.20	\$2,005.31		BSPEBTEF	BEBWBTEF
District H.S.A.						
Blue Select Plus QHDHP						
	Total Cost	District Benefit	Employee Cost	Contribution		
Employee Only	\$577.53	\$346.52	\$231.01	\$98.68	BSHSBTEO	BHBWBTEO
Employee + Spouse	\$1,209.82	\$445.20	\$764.62		BSHSBTES	BHBWBTES
Employee + Child(ren)	\$1,097.30	\$445.20	\$652.10		BSHSBTEC	BHBWBTEC
Employee + Family	\$1,763.44	\$445.20	\$1,318.24		BSHSBTEF	BHBWBTEF

ELIG_RULES_ID = **ER70**

District Benefit = **\$519.40**

Blue Care HMO	Total Cost	District Benefit	Employee Cost		PLAN (MO)	PLAN (BW)
Employee Only	\$899.82	\$519.40	\$380.42		BCREBTEO	BCBWBTEO
Employee + Spouse	\$1,888.74	\$519.40	\$1,369.34		BCREBTES	BCBWBTES
Employee + Child(ren)	\$1,709.66	\$519.40	\$1,190.26		BCREBTEC	BCBWBTEC
Employee + Family	\$2,743.22	\$519.40	\$2,223.82		BCREBTEF	BCBWBTEF

Preferred Care Blue PPO	Total Cost	District Benefit	Employee Cost			
Employee Only	\$887.41	\$519.40	\$368.01		PCBPBTEO	PBBWBTEO
Employee + Spouse	\$1,862.60	\$519.40	\$1,343.20		PCBPBTES	PBBWBTES
Employee + Child(ren)	\$1,686.08	\$519.40	\$1,166.68		PCBPBTEC	PBBWBTEC
Employee + Family	\$2,705.49	\$519.40	\$2,186.09		PCBPBTEF	PBBWBTEF

Blue Saver PPO QHDHP	Total Cost	District Benefit	Employee Cost	District H.S.A. Contribution		
Employee Only	\$642.99	\$450.09	\$192.90	\$69.31	BSVRBTEO	BVBWBTEO
Employee + Spouse	\$1,347.72	\$519.40	\$828.32		BSVRBTES	BVBWBTES
Employee + Child(ren)	\$1,221.68	\$519.40	\$702.28		BSVRBTEC	BVBWBTEC
Employee + Family	\$1,962.45	\$519.40	\$1,443.05		BSVRBTEF	BVBWBTEF

Blue Select Plus PPO	Total Cost	District Benefit	Employee Cost			
Employee Only	\$792.00	\$519.40	\$272.60		BSPOBTEO	BPBWBTEO
Employee + Spouse	\$1,662.91	\$519.40	\$1,143.51		BSPOBTES	BPBWBTES
Employee + Child(ren)	\$1,505.97	\$519.40	\$986.57		BSPOBTEC	BPBWBTEC
Employee + Family	\$2,417.31	\$519.40	\$1,897.91		BSPOBTEF	BPBWBTEF

Blue Select Plus EPO	Total Cost	District Benefit	Employee Cost			
Employee Only	\$803.53	\$519.40	\$284.13		BSPEBTEO	BEBWBTEO
Employee + Spouse	\$1,685.91	\$519.40	\$1,166.51		BSPEBTES	BEBWBTES
Employee + Child(ren)	\$1,526.72	\$519.40	\$1,007.32		BSPEBTEC	BEBWBTEC
Employee + Family	\$2,450.51	\$519.40	\$1,931.11		BSPEBTEF	BEBWBTEF

Blue Select Plus QHDHP	Total Cost	District Benefit	Employee Cost	District H.S.A. Contribution		
Employee Only	\$577.53	\$404.27	\$173.26	\$115.13	BSHSBTEO	BHBWBTEO
Employee + Spouse	\$1,209.82	\$519.40	\$690.42		BSHSBTES	BHBWBTES
Employee + Child(ren)	\$1,097.30	\$519.40	\$577.90		BSHSBTEC	BHBWBTEC
Employee + Family	\$1,763.44	\$519.40	\$1,244.04		BSHSBTEF	BHBWBTEF

Shawnee Mission USD # 512

January 1, 2022 Medical Rates - BCBS

ELIG_RULES_ID = ER75		District Benefit = \$556.50				
Blue Care HMO						
	Total Cost	District Benefit	Employee Cost		PLAN (MO)	PLAN (BW)
Employee Only	\$899.82	\$556.50	\$343.32		BCREBTEO	BCBWBTEO
Employee + Spouse	\$1,888.74	\$556.50	\$1,332.24		BCREBTES	BCBWBTES
Employee + Child(ren)	\$1,709.66	\$556.50	\$1,153.16		BCREBTEC	BCBWBTEC
Employee + Family	\$2,743.22	\$556.50	\$2,186.72		BCREBTEF	BCBWBTEF
Preferred Care Blue PPO						
	Total Cost	District Benefit	Employee Cost			
Employee Only	\$887.41	\$556.50	\$330.91		PCBPBTEO	PBBWBTEO
Employee + Spouse	\$1,862.60	\$556.50	\$1,306.10		PCBPBTES	PBBWBTES
Employee + Child(ren)	\$1,686.08	\$556.50	\$1,129.58		PCBPBTEC	PBBWBTEC
Employee + Family	\$2,705.49	\$556.50	\$2,148.99		PCBPBTEF	PBBWBTEF
District H.S.A.						
Blue Saver PPO QHDHP						
	Total Cost	District Benefit	Employee Cost	Contribution		
Employee Only	\$642.99	\$482.24	\$160.75	\$74.26	BSVRBTEO	BVBWBTEO
Employee + Spouse	\$1,347.72	\$556.50	\$791.22		BSVRBTES	BVBWBTES
Employee + Child(ren)	\$1,221.68	\$556.50	\$665.18		BSVRBTEC	BVBWBTEC
Employee + Family	\$1,962.45	\$556.50	\$1,405.95		BSVRBTEF	BVBWBTEF
Blue Select Plus PPO						
	Total Cost	District Benefit	Employee Cost			
Employee Only	\$792.00	\$556.50	\$235.50		BSPOBTEO	BPBWBTEO
Employee + Spouse	\$1,662.91	\$556.50	\$1,106.41		BSPOBTES	BPBWBTES
Employee + Child(ren)	\$1,505.97	\$556.50	\$949.47		BSPOBTEC	BPBWBTEC
Employee + Family	\$2,417.31	\$556.50	\$1,860.81		BSPOBTEF	BPBWBTEF
Blue Select Plus EPO						
	Total Cost	District Benefit	Employee Cost			
Employee Only	\$803.53	\$556.50	\$247.03		BSPEBTEO	BEBWBTEO
Employee + Spouse	\$1,685.91	\$556.50	\$1,129.41		BSPEBTES	BEBWBTES
Employee + Child(ren)	\$1,526.72	\$556.50	\$970.22		BSPEBTEC	BEBWBTEC
Employee + Family	\$2,450.51	\$556.50	\$1,894.01		BSPEBTEF	BEBWBTEF
District H.S.A.						
Blue Select Plus QHDHP						
	Total Cost	District Benefit	Employee Cost	Contribution		
Employee Only	\$577.53	\$433.14	\$144.39	\$123.36	BSHSBTEO	BHBWBTEO
Employee + Spouse	\$1,209.82	\$556.50	\$653.32		BSHSBTES	BHBWBTES
Employee + Child(ren)	\$1,097.30	\$556.50	\$540.80		BSHSBTEC	BHBWBTEC
Employee + Family	\$1,763.44	\$556.50	\$1,206.94		BSHSBTEF	BHBWBTEF

ELIG_RULES_ID = **ER80**

District Benefit = **\$593.60**

Blue Care HMO	Total Cost	District Benefit	Employee Cost		PLAN (MO)	PLAN (BW)
Employee Only	\$899.82	\$593.60	\$306.22		BCREBTEO	BCBWBTEO
Employee + Spouse	\$1,888.74	\$593.60	\$1,295.14		BCREBTES	BCBWBTES
Employee + Child(ren)	\$1,709.66	\$593.60	\$1,116.06		BCREBTEC	BCBWBTEC
Employee + Family	\$2,743.22	\$593.60	\$2,149.62		BCREBTEF	BCBWBTEF

Preferred Care Blue PPO	Total Cost	District Benefit	Employee Cost			
Employee Only	\$887.41	\$593.60	\$293.81		PCBPBTEO	PBBWBTEO
Employee + Spouse	\$1,862.60	\$593.60	\$1,269.00		PCBPBTES	PBBWBTES
Employee + Child(ren)	\$1,686.08	\$593.60	\$1,092.48		PCBPBTEC	PBBWBTEC
Employee + Family	\$2,705.49	\$593.60	\$2,111.89		PCBPBTEF	PBBWBTEF

Blue Saver PPO QHDHP	Total Cost	District Benefit	Employee Cost	District H.S.A. Contribution		
Employee Only	\$642.99	\$514.39	\$128.60	\$79.20	BSVRBTEO	BVBWBTEO
Employee + Spouse	\$1,347.72	\$593.60	\$754.12		BSVRBTES	BVBWBTES
Employee + Child(ren)	\$1,221.68	\$593.60	\$628.08		BSVRBTEC	BVBWBTEC
Employee + Family	\$1,962.45	\$593.60	\$1,368.85		BSVRBTEF	BVBWBTEF

Blue Select Plus PPO	Total Cost	District Benefit	Employee Cost			
Employee Only	\$792.00	\$593.60	\$198.40		BSPOBTEO	BPBWBTEO
Employee + Spouse	\$1,662.91	\$593.60	\$1,069.31		BSPOBTES	BPBWBTES
Employee + Child(ren)	\$1,505.97	\$593.60	\$912.37		BSPOBTEC	BPBWBTEC
Employee + Family	\$2,417.31	\$593.60	\$1,823.71		BSPOBTEF	BPBWBTEF

Blue Select Plus EPO	Total Cost	District Benefit	Employee Cost			
Employee Only	\$803.53	\$593.60	\$209.93		BSPEBTEO	BEBWBTEO
Employee + Spouse	\$1,685.91	\$593.60	\$1,092.31		BSPEBTES	BEBWBTES
Employee + Child(ren)	\$1,526.72	\$593.60	\$933.12		BSPEBTEC	BEBWBTEC
Employee + Family	\$2,450.51	\$593.60	\$1,856.91		BSPEBTEF	BEBWBTEF

Blue Select Plus QHDHP	Total Cost	District Benefit	Employee Cost	District H.S.A. Contribution		
Employee Only	\$577.53	\$462.02	\$0.00	\$131.58	BSHSBTEO	BHBWBTEO
Employee + Spouse	\$1,209.82	\$593.60	\$616.22		BSHSBTES	BHBWBTES
Employee + Child(ren)	\$1,097.30	\$593.60	\$503.70		BSHSBTEC	BHBWBTEC
Employee + Family	\$1,763.44	\$593.60	\$1,169.84		BSHSBTEF	BHBWBTEF

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ELIG_RULES_ID = ER90		District Benefit = \$667.80				
Blue Care HMO						
	Total Cost	District Benefit	Employee Cost		PLAN (MO)	PLAN (BW)
Employee Only	\$899.82	\$667.80	\$232.02		BCREBTEO	BCBWBTEO
Employee + Spouse	\$1,888.74	\$667.80	\$1,220.94		BCREBTES	BCBWBTES
Employee + Child(ren)	\$1,709.66	\$667.80	\$1,041.86		BCREBTEC	BCBWBTEC
Employee + Family	\$2,743.22	\$667.80	\$2,075.42		BCREBTEF	BCBWBTEF
Preferred Care Blue PPO						
	Total Cost	District Benefit	Employee Cost			
Employee Only	\$887.41	\$667.80	\$219.61		PCBPBTEO	PBBWBTEO
Employee + Spouse	\$1,862.60	\$667.80	\$1,194.80		PCBPBTES	PBBWBTES
Employee + Child(ren)	\$1,686.08	\$667.80	\$1,018.28		PCBPBTEC	PBBWBTEC
Employee + Family	\$2,705.49	\$667.80	\$2,037.69		PCBPBTEF	PBBWBTEF
District H.S.A.						
Blue Saver PPO QHDHP						
	Total Cost	District Benefit	Employee Cost	Contribution		
Employee Only	\$642.99	\$578.69	\$0.00	\$89.11	BSVRBTEO	BVBWBTEO
Employee + Spouse	\$1,347.72	\$667.80	\$679.92		BSVRBTES	BVBWBTES
Employee + Child(ren)	\$1,221.68	\$667.80	\$553.88		BSVRBTEC	BVBWBTEC
Employee + Family	\$1,962.45	\$667.80	\$1,294.65		BSVRBTEF	BVBWBTEF
Blue Select Plus PPO						
	Total Cost	District Benefit	Employee Cost			
Employee Only	\$792.00	\$667.80	\$124.20		BSPOBTEO	BPBWBTEO
Employee + Spouse	\$1,662.91	\$667.80	\$995.11		BSPOBTES	BPBWBTES
Employee + Child(ren)	\$1,505.97	\$667.80	\$838.17		BSPOBTEC	BPBWBTEC
Employee + Family	\$2,417.31	\$667.80	\$1,749.51		BSPOBTEF	BPBWBTEF
Blue Select Plus EPO						
	Total Cost	District Benefit	Employee Cost			
Employee Only	\$803.53	\$667.80	\$135.73		BSPEBTEO	BEBWBTEO
Employee + Spouse	\$1,685.91	\$667.80	\$1,018.11		BSPEBTES	BEBWBTES
Employee + Child(ren)	\$1,526.72	\$667.80	\$858.92		BSPEBTEC	BEBWBTEC
Employee + Family	\$2,450.51	\$667.80	\$1,782.71		BSPEBTEF	BEBWBTEF
District H.S.A.						
Blue Select Plus QHDHP						
	Total Cost	District Benefit	Employee Cost	Contribution		
Employee Only	\$577.53	\$519.77	\$57.76	\$90.27	BSHSBTEO	BHBWBTEO
Employee + Spouse	\$1,209.82	\$667.80	\$542.02		BSHSBTES	BHBWBTES
Employee + Child(ren)	\$1,097.30	\$667.80	\$429.50		BSHSBTEC	BHBWBTEC
Employee + Family	\$1,763.44	\$667.80	\$1,095.64		BSHSBTEF	BHBWBTEF

ELIG_RULES_ID = **CASH**

District Benefit = **\$0.00**

Blue Care HMO		Total Cost	District Benefit	Employee Cost		PLAN (MO)	PLAN (BW)
Employee Only	\$899.82	\$0.00	\$899.82			BCREBTEO	BCBWBTEO
Employee + Spouse	\$1,888.74	\$0.00	\$1,888.74			BCREBTES	BCBWBTES
Employee + Child(ren)	\$1,709.66	\$0.00	\$1,399.00			BCREBTEC	BCBWBTEC
Employee + Family	\$2,743.22	\$0.00	\$2,743.22			BCREBTEF	BCBWBTEF
Preferred Care Blue PPO		Total Cost	District Benefit	Employee Cost			
Employee Only	\$887.41	\$0.00	\$887.41			PCBPBTEO	PBBWBTEO
Employee + Spouse	\$1,862.60	\$0.00	\$1,862.60			PCBPBTES	PBBWBTES
Employee + Child(ren)	\$1,686.08	\$0.00	\$1,399.00			PCBPBTEC	PBBWBTEC
Employee + Family	\$2,705.49	\$0.00	\$2,705.49			PCBPBTEF	PBBWBTEF
Blue Saver PPO QHDHP		Total Cost	District Benefit	Employee Cost	District H.S.A. Contribution		
Employee Only	\$642.99	\$0.00	\$642.99	\$0.00		BSVRBTEO	BVBWBTEO
Employee + Spouse	\$1,347.72	\$0.00	\$1,347.72	\$0.00		BSVRBTES	BVBWBTES
Employee + Child(ren)	\$1,221.68	\$0.00	\$1,028.89	\$0.00		BSVRBTEC	BVBWBTEC
Employee + Family	\$1,962.45	\$0.00	\$1,962.45	\$0.00		BSVRBTEF	BVBWBTEF
Blue Select Plus PPO		Total Cost	District Benefit	Employee Cost			
Employee Only	\$792.00	\$0.00	\$792.00			BSPOBTEO	BPBWBTEO
Employee + Spouse	\$1,662.91	\$0.00	\$1,662.91			BSPOBTES	BPBWBTES
Employee + Child(ren)	\$1,505.97	\$0.00	\$1,255.46			BSPOBTEC	BPBWBTEC
Employee + Family	\$2,417.31	\$0.00	\$2,417.31			BSPOBTEF	BPBWBTEF
Blue Select Plus EPO		Total Cost	District Benefit	Employee Cost			
Employee Only	\$803.53	\$0.00	\$803.53			BSPEBTEO	BEBWBTEO
Employee + Spouse	\$1,685.91	\$0.00	\$1,685.91			BSPEBTES	BEBWBTES
Employee + Child(ren)	\$1,526.72	\$0.00	\$1,255.46			BSPEBTEC	BEBWBTEC
Employee + Family	\$2,450.51	\$0.00	\$2,450.51			BSPEBTEF	BEBWBTEF
Blue Select Plus QHDHP		Total Cost	District Benefit	Employee Cost	District H.S.A. Contribution		
Employee Only	\$577.53	\$0.00	\$577.53	\$0.00		BSHSBTEO	BHBWBTEO
Employee + Spouse	\$1,209.82	\$0.00	\$1,209.82	\$0.00		BSHSBTES	BHBWBTES
Employee + Child(ren)	\$1,097.30	\$0.00	\$929.77	\$0.00		BSHSBTEC	BHBWBTEC
Employee + Family	1763.44	\$0.00	\$1,763.44	\$0.00		BSHSBTEF	BHBWBTEF