

Shawnee Mission USD # 512
January 1, 2024 Medical Rates - BlueKC

ELIG_RULES_ID = AC		District Benefit = \$766.00					
Blue Care HMO		Total Cost	District Benefit	Employee Cost		PLAN (Monthly)	PLAN (BW)
Employee Only	\$909.63	\$766.00	\$143.63			BCREBTEO	BCBWBTEO
Employee + Spouse	\$1,909.38	\$766.00	\$1,143.38			BCREBTES	BCBWBTES
Employee + Child(ren)	\$1,728.31	\$766.00	\$962.31			BCREBTEC	BCBWBTEC
Employee + Family	\$2,773.01	\$766.00	\$2,007.01			BCREBTEF	BCBWBTEF
Preferred Care Blue PPO		Total Cost	District Benefit	Employee Cost			
Employee Only	\$897.08	\$766.00	\$131.08			PCBPBTEO	PBBWBTEO
Employee + Spouse	\$1,882.93	\$766.00	\$1,116.93			PCBPBTES	PBBWBTES
Employee + Child(ren)	\$1,704.46	\$766.00	\$938.46			PCBPBTEC	PBBWBTEC
Employee + Family	\$2,734.85	\$766.00	\$1,968.85			PCBPBTEF	PBBWBTEF
Blue Saver PPO QHDHP		Total Cost	District Benefit	Employee Cost	District H.S.A. Contribution		
Employee Only	\$649.83	\$742.00	\$0.00	\$116.17		BSVRBTEO	BVBWBTEO
Employee + Spouse	\$1,362.08	\$766.00	\$596.08			BSVRBTES	BVBWBTES
Employee + Child(ren)	\$1,234.67	\$766.00	\$468.67			BSVRBTEC	BVBWBTEC
Employee + Family	\$1,983.19	\$766.00	\$1,217.19			BSVRBTEF	BVBWBTEF
Blue Select Plus PPO		Total Cost	District Benefit	Employee Cost			
Employee Only	\$816.00	\$766.00	\$50.00			BSPOBTEO	BPBWBTEO
Employee + Spouse	\$1,680.93	\$766.00	\$914.93			BSPOBTES	BPBWBTES
Employee + Child(ren)	\$1,522.26	\$766.00	\$756.26			BSPOBTEC	BPBWBTEC
Employee + Family	\$2,443.32	\$766.00	\$1,677.32			BSPOBTEF	BPBWBTEF
Blue Select Plus EPO		Total Cost	District Benefit	Employee Cost			
Employee Only	\$816.00	\$766.00	\$50.00			BSPEBTEO	BEBWBTEO
Employee + Spouse	\$1,704.19	\$766.00	\$938.19			BSPEBTES	BEBWBTES
Employee + Child(ren)	\$1,543.24	\$766.00	\$777.24			BSPEBTEC	BEBWBTEC
Employee + Family	\$2,476.90	\$766.00	\$1,710.90			BSPEBTEF	BEBWBTEF
Blue Select Plus QHDHP		Total Cost	District Benefit	Employee Cost	District H.S.A. Contribution		
Employee Only	\$583.60	\$583.60	\$0.00	\$182.40		BSHSBTEO	BHBWBTEO
Employee + Spouse	\$1,222.58	\$766.00	\$456.58			BSHSBTES	BHBWBTES
Employee + Child(ren)	\$1,108.85	\$766.00	\$342.85			BSHSBTEC	BHBWBTEC
Employee + Family	\$1,781.87	\$766.00	\$1,015.87			BSHSBTEF	BHBWBTEF

ELIG_RULES_ID = **ER**

District Benefit = **\$766.00**

Blue Care HMO	Total Cost	District Benefit	Employee Cost		PLAN (MO)	PLAN (BW)
Employee Only	\$909.63	\$766.00	\$143.63		BCREBTEO	BCBWBTEO
Employee + Spouse	\$1,909.38	\$766.00	\$1,143.38		BCREBTES	BCBWBTES
Employee + Child(ren)	\$1,728.31	\$766.00	\$962.31		BCREBTEC	BCBWBTEC
Employee + Family	\$2,773.01	\$766.00	\$2,007.01		BCREBTEF	BCBWBTEF

Preferred Care Blue PPO	Total Cost	District Benefit	Employee Cost			
Employee Only	\$897.08	\$766.00	\$131.08		PCBPBTEO	PBBWBTEO
Employee + Spouse	\$1,882.93	\$766.00	\$1,116.93		PCBPBTES	PBBWBTES
Employee + Child(ren)	\$1,704.46	\$766.00	\$938.46		PCBPBTEC	PBBWBTEC
Employee + Family	\$2,734.85	\$766.00	\$1,968.85		PCBPBTEF	PBBWBTEF

Blue Saver PPO QHDHP	Total Cost	District Benefit	Employee Cost	District H.S.A. Contribution		
Employee Only	\$649.83	\$649.83	\$0.00	\$116.17	BSVRBTEO	BVBWBTEO
Employee + Spouse	\$1,362.08	\$766.00	\$596.08		BSVRBTES	BVBWBTES
Employee + Child(ren)	\$1,234.67	\$766.00	\$468.67		BSVRBTEC	BVBWBTEC
Employee + Family	\$1,983.19	\$766.00	\$1,217.19		BSVRBTEF	BVBWBTEF

Blue Select Plus PPO	Total Cost	District Benefit	Employee Cost			
Employee Only	\$816.00	\$766.00	\$50.00		BSPOBTEO	BPBWBTEO
Employee + Spouse	\$1,680.93	\$766.00	\$914.93		BSPOBTES	BPBWBTES
Employee + Child(ren)	\$1,522.26	\$766.00	\$756.26		BSPOBTEC	BPBWBTEC
Employee + Family	\$2,443.32	\$766.00	\$1,677.32		BSPOBTEF	BPBWBTEF

Blue Select Plus EPO	Total Cost	District Benefit	Employee Cost			
Employee Only	\$816.00	\$766.00	\$50.00		BSPEBTEO	BEBWBTEO
Employee + Spouse	\$1,704.19	\$766.00	\$938.19		BSPEBTES	BEBWBTES
Employee + Child(ren)	\$1,543.24	\$766.00	\$777.24		BSPEBTEC	BEBWBTEC
Employee + Family	\$2,476.90	\$766.00	\$1,710.90		BSPEBTEF	BEBWBTEF

Blue Select Plus QHDHP	Total Cost	District Benefit	Employee Cost	District H.S.A. Contribution		
Employee Only	\$583.60	\$583.60	\$0.00	\$182.40	BSHSBTEO	BHBWBTEO
Employee + Spouse	\$1,222.58	\$766.00	\$456.58		BSHSBTES	BHBWBTES
Employee + Child(ren)	\$1,108.85	\$766.00	\$342.85		BSHSBTEC	BHBWBTEC
Employee + Family	\$1,781.87	\$766.00	\$1,015.87		BSHSBTEF	BHBWBTEF

ELIG_RULES_ID = **ERPS**District Benefit = **\$766.00**

Blue Care HMO	Total Cost	District Benefit	+D47:D81loyee Cost	PLAN (MO)	PLAN (BW)
Employee Only	\$909.63	\$766.00	\$143.63	BCREBTEO	BCBWBTEO
Employee + Spouse	\$1,909.38	\$766.00	\$1,143.38	BCREBTES	BCBWBTES
Employee + Child(ren)	\$1,728.31	\$766.00	\$962.31	BCREBTEC	BCBWBTEC
Employee + Family	\$2,773.01	\$766.00	\$2,007.01	BCREBTEF	BCBWBTEF

Preferred Care Blue PPO	Total Cost	District Benefit	Employee Cost		
Employee Only	\$897.08	\$766.00	\$131.08	PCBPBTEO	PBBWBTEO
Employee + Spouse	\$1,882.93	\$766.00	\$1,116.93	PCBPBTES	PBBWBTES
Employee + Child(ren)	\$1,704.46	\$766.00	\$938.46	PCBPBTEC	PBBWBTEC
Employee + Family	\$2,734.85	\$766.00	\$1,968.85	PCBPBTEF	PBBWBTEF

Blue Saver PPO QHDHP	Total Cost	District Benefit	Employee Cost	District H.S.A. Contribution		
Employee Only	\$649.83	\$649.83	\$0.00	\$116.17	BSVRBTEO	BVBWBTEO
Employee + Spouse	\$1,362.08	\$766.00	\$596.08		BSVRBTES	BVBWBTES
Employee + Child(ren)	\$1,234.67	\$766.00	\$468.67		BSVRBTEC	BVBWBTEC
Employee + Family	\$1,983.19	\$766.00	\$1,217.19		BSVRBTEF	BVBWBTEF

Blue Select Plus PPO	Total Cost	District Benefit	Employee Cost		
Employee Only	\$816.00	\$766.00	\$50.00	BSPOBTEO	BPBWBTEO
Employee + Spouse	\$1,680.93	\$766.00	\$914.93	BSPOBTES	BPBWBTES
Employee + Child(ren)	\$1,522.26	\$766.00	\$756.26	BSPOBTEC	BPBWBTEC
Employee + Family	\$2,443.32	\$766.00	\$1,677.32	BSPOBTEF	BPBWBTEF

Blue Select Plus EPO	Total Cost	District Benefit	Employee Cost		
Employee Only	\$816.00	\$766.00	\$50.00	BSPEBTEO	BEBWBTEO
Employee + Spouse	\$1,704.19	\$766.00	\$938.19	BSPEBTES	BEBWBTES
Employee + Child(ren)	\$1,543.24	\$766.00	\$777.24	BSPEBTEC	BEBWBTEC
Employee + Family	\$2,476.90	\$766.00	\$1,710.90	BSPEBTEF	BEBWBTEF

Blue Select Plus QHDHP	Total Cost	District Benefit	Employee Cost	District H.S.A. Contribution		
Employee Only	\$583.60	\$583.60	\$0.00	\$182.40	BSHSBTEO	BHBWBTEO
Employee + Spouse	\$1,222.58	\$766.00	\$456.58		BSHSBTES	BHBWBTES
Employee + Child(ren)	\$1,108.85	\$766.00	\$342.85		BSHSBTEC	BHBWBTEC
Employee + Family	\$1,781.87	\$766.00	\$1,015.87		BSHSBTEF	BHBWBTEF

ELIG_RULES_ID = **ER50**District Benefit = **\$383.00**

Blue Care HMO	Total Cost	District Benefit	Employee Cost		PLAN (MO)	PLAN (BW)
Employee Only	\$909.63	\$383.00	\$526.63		BCREBTEO	BCBWBTEO
Employee + Spouse	\$1,909.38	\$383.00	\$1,526.38		BCREBTES	BCBWBTES
Employee + Child(ren)	\$1,728.31	\$383.00	\$1,345.31		BCREBTEC	BCBWBTEC
Employee + Family	\$2,773.01	\$383.00	\$2,390.01		BCREBTEF	BCBWBTEF

Preferred Care Blue PPO	Total Cost	District Benefit	Employee Cost			
Employee Only	\$897.08	\$383.00	\$514.08		PCBPBTEO	PBBWBTEO
Employee + Spouse	\$1,882.93	\$383.00	\$1,499.93		PCBPBTES	PBBWBTES
Employee + Child(ren)	\$1,704.46	\$383.00	\$1,321.46		PCBPBTEC	PBBWBTEC
Employee + Family	\$2,734.85	\$383.00	\$2,351.85		PCBPBTEF	PBBWBTEF

Blue Saver PPO QHDHP	Total Cost	District Benefit	Employee Cost	District H.S.A. Contribution		
Employee Only	\$649.83	\$324.92	\$324.92	\$58.09	BSVRBTEO	BVBWBTEO
Employee + Spouse	\$1,362.08	\$383.00	\$979.08		BSVRBTES	BVBWBTES
Employee + Child(ren)	\$1,234.67	\$383.00	\$851.67		BSVRBTEC	BVBWBTEC
Employee + Family	\$1,983.19	\$383.00	\$1,600.19		BSVRBTEF	BVBWBTEF

Blue Select Plus PPO	Total Cost	District Benefit	Employee Cost			
Employee Only	\$816.00	\$383.00	\$433.00		BSPOBTEO	BPBWBTEO
Employee + Spouse	\$1,680.93	\$383.00	\$1,297.93		BSPOBTES	BPBWBTES
Employee + Child(ren)	\$1,522.26	\$383.00	\$1,139.26		BSPOBTEC	BPBWBTEC
Employee + Family	\$2,443.32	\$383.00	\$2,060.32		BSPOBTEF	BPBWBTEF

Blue Select Plus EPO	Total Cost	District Benefit	Employee Cost			
Employee Only	\$816.00	\$383.00	\$433.00		BSPEBTEO	BEBWBTEO
Employee + Spouse	\$1,704.19	\$383.00	\$1,321.19		BSPEBTES	BEBWBTES
Employee + Child(ren)	\$1,543.24	\$383.00	\$1,160.24		BSPEBTEC	BEBWBTEC
Employee + Family	\$2,476.90	\$383.00	\$2,093.90		BSPEBTEF	BEBWBTEF

Blue Select Plus QHDHP	Total Cost	District Benefit	Employee Cost	District H.S.A. Contribution		
Employee Only	\$583.60	\$291.80	\$291.80	\$91.20	BSHSBTEO	BHBWBTEO
Employee + Spouse	\$1,222.58	\$383.00	\$839.58		BSHSBTES	BHBWBTES
Employee + Child(ren)	\$1,108.85	\$383.00	\$725.85		BSHSBTEC	BHBWBTEC
Employee + Family	\$1,781.87	\$383.00	\$1,398.87		BSHSBTEF	BHBWBTEF

ELIG_RULES_ID = **ER60**

District Benefit = **\$459.60**

Blue Care HMO	Total Cost	District Benefit	Employee Cost		PLAN (MO)	PLAN (BW)
Employee Only	\$909.63	\$459.60	\$450.03		BCREBTEO	BCBWBTEO
Employee + Spouse	\$1,909.38	\$459.60	\$1,449.78		BCREBTES	BCBWBTES
Employee + Child(ren)	\$1,728.31	\$459.60	\$1,268.71		BCREBTEC	BCBWBTEC
Employee + Family	\$2,773.01	\$459.60	\$2,313.41		BCREBTEF	BCBWBTEF

Preferred Care Blue PPO	Total Cost	District Benefit	Employee Cost			
Employee Only	\$897.08	\$459.60	\$437.48		PCBPBTEO	PBBWBTEO
Employee + Spouse	\$1,882.93	\$459.60	\$1,423.33		PCBPBTES	PBBWBTES
Employee + Child(ren)	\$1,704.46	\$459.60	\$1,244.86		PCBPBTEC	PBBWBTEC
Employee + Family	\$2,734.85	\$459.60	\$2,275.25		PCBPBTEF	PBBWBTEF

Blue Saver PPO QHDHP	Total Cost	District Benefit	Employee Cost	District H.S.A. Contribution		
Employee Only	\$649.83	\$389.90	\$259.93	\$69.70	BSVRBTEO	BVBWBTEO
Employee + Spouse	\$1,362.08	\$459.60	\$902.48		BSVRBTES	BVBWBTES
Employee + Child(ren)	\$1,234.67	\$459.60	\$775.07		BSVRBTEC	BVBWBTEC
Employee + Family	\$1,983.19	\$459.60	\$1,523.59		BSVRBTEF	BVBWBTEF

Blue Select Plus PPO	Total Cost	District Benefit	Employee Cost			
Employee Only	\$816.00	\$459.60	\$356.40		BSPOBTEO	BPBWBTEO
Employee + Spouse	\$1,680.93	\$459.60	\$1,221.33		BSPOBTES	BPBWBTES
Employee + Child(ren)	\$1,522.26	\$459.60	\$1,062.66		BSPOBTEC	BPBWBTEC
Employee + Family	\$2,443.32	\$459.60	\$1,983.72		BSPOBTEF	BPBWBTEF

Blue Select Plus EPO	Total Cost	District Benefit	Employee Cost			
Employee Only	\$816.00	\$459.60	\$356.40		BSPEBTEO	BEBWBTEO
Employee + Spouse	\$1,704.19	\$459.60	\$1,244.59		BSPEBTES	BEBWBTES
Employee + Child(ren)	\$1,543.24	\$459.60	\$1,083.64		BSPEBTEC	BEBWBTEC
Employee + Family	\$2,476.90	\$459.60	\$2,017.30		BSPEBTEF	BEBWBTEF

Blue Select Plus QHDHP	Total Cost	District Benefit	Employee Cost	District H.S.A. Contribution		
Employee Only	\$583.60	\$350.16	\$233.44	\$109.44	BSHSBTEO	BHBWBTEO
Employee + Spouse	\$1,222.58	\$459.60	\$762.98		BSHSBTES	BHBWBTES
Employee + Child(ren)	\$1,108.85	\$459.60	\$649.25		BSHSBTEC	BHBWBTEC
Employee + Family	\$1,781.87	\$459.60	\$1,322.27		BSHSBTEF	BHBWBTEF

ELIG_RULES_ID = **ER70**District Benefit = **\$536.20**

Blue Care HMO	Total Cost	District Benefit	Employee Cost		PLAN (MO)	PLAN (BW)
Employee Only	\$909.63	\$536.20	\$373.43		BCREBTEO	BCBWBTEO
Employee + Spouse	\$1,909.38	\$536.20	\$1,373.18		BCREBTES	BCBWBTES
Employee + Child(ren)	\$1,728.31	\$536.20	\$1,192.11		BCREBTEC	BCBWBTEC
Employee + Family	\$2,773.01	\$536.20	\$2,236.81		BCREBTEF	BCBWBTEF

Preferred Care Blue PPO	Total Cost	District Benefit	Employee Cost			
Employee Only	\$897.08	\$536.20	\$360.88		PCBPBTEO	PBBWBTEO
Employee + Spouse	\$1,882.93	\$536.20	\$1,346.73		PCBPBTES	PBBWBTES
Employee + Child(ren)	\$1,704.46	\$536.20	\$1,168.26		PCBPBTEC	PBBWBTEC
Employee + Family	\$2,734.85	\$536.20	\$2,198.65		PCBPBTEF	PBBWBTEF

Blue Saver PPO QHDHP	Total Cost	District Benefit	Employee Cost	District H.S.A. Contribution		
Employee Only	\$649.83	\$454.88	\$194.95	\$81.32	BSVRBTEO	BVBWBTEO
Employee + Spouse	\$1,362.08	\$536.20	\$825.88		BSVRBTES	BVBWBTES
Employee + Child(ren)	\$1,234.67	\$536.20	\$698.47		BSVRBTEC	BVBWBTEC
Employee + Family	\$1,983.19	\$536.20	\$1,446.99		BSVRBTEF	BVBWBTEF

Blue Select Plus PPO	Total Cost	District Benefit	Employee Cost			
Employee Only	\$816.00	\$536.20	\$279.80		BSPOBTEO	BPBWBTEO
Employee + Spouse	\$1,680.93	\$536.20	\$1,144.73		BSPOBTES	BPBWBTES
Employee + Child(ren)	\$1,522.26	\$536.20	\$986.06		BSPOBTEC	BPBWBTEC
Employee + Family	\$2,443.32	\$536.20	\$1,907.12		BSPOBTEF	BPBWBTEF

Blue Select Plus EPO	Total Cost	District Benefit	Employee Cost			
Employee Only	\$816.00	\$536.20	\$279.80		BSPEBTEO	BEBWBTEO
Employee + Spouse	\$1,704.19	\$536.20	\$1,167.99		BSPEBTES	BEBWBTES
Employee + Child(ren)	\$1,543.24	\$536.20	\$1,007.04		BSPEBTEC	BEBWBTEC
Employee + Family	\$2,476.90	\$536.20	\$1,940.70		BSPEBTEF	BEBWBTEF

Blue Select Plus QHDHP	Total Cost	District Benefit	Employee Cost	District H.S.A. Contribution		
Employee Only	\$583.60	\$408.52	\$175.08	\$127.68	BSHSBTEO	BHBWBTEO
Employee + Spouse	\$1,222.58	\$536.20	\$686.38		BSHSBTES	BHBWBTES
Employee + Child(ren)	\$1,108.85	\$536.20	\$572.65		BSHSBTEC	BHBWBTEC
Employee + Family	\$1,781.87	\$536.20	\$1,245.67		BSHSBTEF	BHBWBTEF

ELIG_RULES_ID = **ER75**

District Benefit = **\$574.50**

Blue Care HMO	Total Cost	District Benefit	Employee Cost		PLAN (MO)	PLAN (BW)
Employee Only	\$909.63	\$574.50	\$335.13		BCREBTEO	BCBWBTEO
Employee + Spouse	\$1,909.38	\$574.50	\$1,334.88		BCREBTES	BCBWBTES
Employee + Child(ren)	\$1,728.31	\$574.50	\$1,153.81		BCREBTEC	BCBWBTEC
Employee + Family	\$2,773.01	\$574.50	\$2,198.51		BCREBTEF	BCBWBTEF

Preferred Care Blue PPO	Total Cost	District Benefit	Employee Cost			
Employee Only	\$897.08	\$574.50	\$322.58		PCBPBTEO	PBBWBTEO
Employee + Spouse	\$1,882.93	\$574.50	\$1,308.43		PCBPBTES	PBBWBTES
Employee + Child(ren)	\$1,704.46	\$574.50	\$1,129.96		PCBPBTEC	PBBWBTEC
Employee + Family	\$2,734.85	\$574.50	\$2,160.35		PCBPBTEF	PBBWBTEF

Blue Saver PPO QHDHP	Total Cost	District Benefit	Employee Cost	District H.S.A. Contribution		
Employee Only	\$649.83	\$487.37	\$162.46	\$87.13	BSVRBTEO	BVBWBTEO
Employee + Spouse	\$1,362.08	\$574.50	\$787.58		BSVRBTES	BVBWBTES
Employee + Child(ren)	\$1,234.67	\$574.50	\$660.17		BSVRBTEC	BVBWBTEC
Employee + Family	\$1,983.19	\$574.50	\$1,408.69		BSVRBTEF	BVBWBTEF

Blue Select Plus PPO	Total Cost	District Benefit	Employee Cost			
Employee Only	\$816.00	\$574.50	\$241.50		BSPOBTEO	BPBWBTEO
Employee + Spouse	\$1,680.93	\$574.50	\$1,106.43		BSPOBTES	BPBWBTES
Employee + Child(ren)	\$1,522.26	\$574.50	\$947.76		BSPOBTEC	BPBWBTEC
Employee + Family	\$2,443.32	\$574.50	\$1,868.82		BSPOBTEF	BPBWBTEF

Blue Select Plus EPO	Total Cost	District Benefit	Employee Cost			
Employee Only	\$816.00	\$574.50	\$241.50		BSPEBTEO	BEBWBTEO
Employee + Spouse	\$1,704.19	\$574.50	\$1,129.69		BSPEBTES	BEBWBTES
Employee + Child(ren)	\$1,543.24	\$574.50	\$968.74		BSPEBTEC	BEBWBTEC
Employee + Family	\$2,476.90	\$574.50	\$1,902.40		BSPEBTEF	BEBWBTEF

Blue Select Plus QHDHP	Total Cost	District Benefit	Employee Cost	District H.S.A. Contribution		
Employee Only	\$583.60	\$437.70	\$145.90	\$136.80	BSHSBTEO	BHBWBTEO
Employee + Spouse	\$1,222.58	\$574.50	\$648.08		BSHSBTES	BHBWBTES
Employee + Child(ren)	\$1,108.85	\$574.50	\$534.35		BSHSBTEC	BHBWBTEC
Employee + Family	\$1,781.87	\$574.50	\$1,207.37		BSHSBTEF	BHBWBTEF

ELIG_RULES_ID = **ER80**

District Benefit = **\$612.80**

Blue Care HMO	Total Cost	District Benefit	Employee Cost		PLAN (MO)	PLAN (BW)
Employee Only	\$909.63	\$612.80	\$296.83		BCREBTEO	BCBWBTEO
Employee + Spouse	\$1,909.38	\$612.80	\$1,296.58		BCREBTES	BCBWBTES
Employee + Child(ren)	\$1,728.31	\$612.80	\$1,115.51		BCREBTEC	BCBWBTEC
Employee + Family	\$2,773.01	\$612.80	\$2,160.21		BCREBTEF	BCBWBTEF

Preferred Care Blue PPO	Total Cost	District Benefit	Employee Cost			
Employee Only	\$897.08	\$612.80	\$284.28		PCBPBTEO	PBBWBTEO
Employee + Spouse	\$1,882.93	\$612.80	\$1,270.13		PCBPBTES	PBBWBTES
Employee + Child(ren)	\$1,704.46	\$612.80	\$1,091.66		PCBPBTEC	PBBWBTEC
Employee + Family	\$2,734.85	\$612.80	\$2,122.05		PCBPBTEF	PBBWBTEF

Blue Saver PPO QHDHP	Total Cost	District Benefit	Employee Cost	District H.S.A. Contribution		
Employee Only	\$649.83	\$519.86	\$129.97	\$92.94	BSVRBTEO	BVBWBTEO
Employee + Spouse	\$1,362.08	\$612.80	\$749.28		BSVRBTES	BVBWBTES
Employee + Child(ren)	\$1,234.67	\$612.80	\$621.87		BSVRBTEC	BVBWBTEC
Employee + Family	\$1,983.19	\$612.80	\$1,370.39		BSVRBTEF	BVBWBTEF

Blue Select Plus PPO	Total Cost	District Benefit	Employee Cost			
Employee Only	\$816.00	\$612.80	\$203.20		BSPOBTEO	BPBWBTEO
Employee + Spouse	\$1,680.93	\$612.80	\$1,068.13		BSPOBTES	BPBWBTES
Employee + Child(ren)	\$1,522.26	\$612.80	\$909.46		BSPOBTEC	BPBWBTEC
Employee + Family	\$2,443.32	\$612.80	\$1,830.52		BSPOBTEF	BPBWBTEF

Blue Select Plus EPO	Total Cost	District Benefit	Employee Cost			
Employee Only	\$816.00	\$612.80	\$203.20		BSPEBTEO	BEBWBTEO
Employee + Spouse	\$1,704.19	\$612.80	\$1,091.39		BSPEBTES	BEBWBTES
Employee + Child(ren)	\$1,543.24	\$612.80	\$930.44		BSPEBTEC	BEBWBTEC
Employee + Family	\$2,476.90	\$612.80	\$1,864.10		BSPEBTEF	BEBWBTEF

Blue Select Plus QHDHP	Total Cost	District Benefit	Employee Cost	District H.S.A. Contribution		
Employee Only	\$583.60	\$466.88	\$116.72	\$145.92	BSHSBTEO	BHBWBTEO
Employee + Spouse	\$1,222.58	\$612.80	\$609.78		BSHSBTES	BHBWBTES
Employee + Child(ren)	\$1,108.85	\$612.80	\$496.05		BSHSBTEC	BHBWBTEC
Employee + Family	\$1,781.87	\$612.80	\$1,169.07		BSHSBTEF	BHBWBTEF

ELIG_RULES_ID = **ER90**

District Benefit = **\$689.40**

Blue Care HMO	Total Cost	District Benefit	Employee Cost		PLAN (MO)	PLAN (BW)
Employee Only	\$909.63	\$689.40	\$220.23		BCREBTEO	BCBWBTEO
Employee + Spouse	\$1,909.38	\$689.40	\$1,219.98		BCREBTES	BCBWBTES
Employee + Child(ren)	\$1,728.31	\$689.40	\$1,038.91		BCREBTEC	BCBWBTEC
Employee + Family	\$2,773.01	\$689.40	\$2,083.61		BCREBTEF	BCBWBTEF

Preferred Care Blue PPO	Total Cost	District Benefit	Employee Cost			
Employee Only	\$897.08	\$689.40	\$207.68		PCBPBTEO	PBBWBTEO
Employee + Spouse	\$1,882.93	\$689.40	\$1,193.53		PCBPBTES	PBBWBTES
Employee + Child(ren)	\$1,704.46	\$689.40	\$1,015.06		PCBPBTEC	PBBWBTEC
Employee + Family	\$2,734.85	\$689.40	\$2,045.45		PCBPBTEF	PBBWBTEF

Blue Saver PPO QHDHP	Total Cost	District Benefit	Employee Cost	District H.S.A. Contribution		
Employee Only	\$649.83	\$584.85	\$64.99	\$104.55	BSVRBTEO	BVBWBTEO
Employee + Spouse	\$1,362.08	\$689.40	\$672.68		BSVRBTES	BVBWBTES
Employee + Child(ren)	\$1,234.67	\$689.40	\$545.27		BSVRBTEC	BVBWBTEC
Employee + Family	\$1,983.19	\$689.40	\$1,293.79		BSVRBTEF	BVBWBTEF

Blue Select Plus PPO	Total Cost	District Benefit	Employee Cost			
Employee Only	\$816.00	\$689.40	\$126.60		BSPOBTEO	BPBWBTEO
Employee + Spouse	\$1,680.93	\$689.40	\$991.53		BSPOBTES	BPBWBTES
Employee + Child(ren)	\$1,522.26	\$689.40	\$832.86		BSPOBTEC	BPBWBTEC
Employee + Family	\$2,443.32	\$689.40	\$1,753.92		BSPOBTEF	BPBWBTEF

Blue Select Plus EPO	Total Cost	District Benefit	Employee Cost			
Employee Only	\$816.00	\$689.40	\$126.60		BSPEBTEO	BEBWBTEO
Employee + Spouse	\$1,704.19	\$689.40	\$1,014.79		BSPEBTES	BEBWBTES
Employee + Child(ren)	\$1,543.24	\$689.40	\$853.84		BSPEBTEC	BEBWBTEC
Employee + Family	\$2,476.90	\$689.40	\$1,787.50		BSPEBTEF	BEBWBTEF

Blue Select Plus QHDHP	Total Cost	District Benefit	Employee Cost	District H.S.A. Contribution		
Employee Only	\$583.60	\$525.24	\$64.99	\$164.16	BSHSBTEO	BHBWBTEO
Employee + Spouse	\$1,222.58	\$689.40	\$533.18		BSHSBTES	BHBWBTES
Employee + Child(ren)	\$1,108.85	\$689.40	\$419.45		BSHSBTEC	BHBWBTEC
Employee + Family	\$1,781.87	\$689.40	\$1,092.47		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	\$909.63	\$0.00	\$909.63		BCREBTEO	BCBWBTEO
Employee + Spouse	\$1,909.38	\$0.00	\$1,909.38		BCREBTES	BCBWBTES
Employee + Child(ren)	\$1,728.31	\$0.00	\$1,399.00		BCREBTEC	BCBWBTEC
Employee + Family	\$2,773.01	\$0.00	\$2,773.01		BCREBTEF	BCBWBTEF
Preferred Care Blue PPO						
	Total Cost	District Benefit	Employee Cost			
Employee Only	\$897.08	\$0.00	\$897.08		PCBPBTEO	PBBWBTEO
Employee + Spouse	\$1,882.93	\$0.00	\$1,882.93		PCBPBTES	PBBWBTES
Employee + Child(ren)	\$1,704.46	\$0.00	\$1,399.00		PCBPBTEC	PBBWBTEC
Employee + Family	\$2,734.85	\$0.00	\$2,734.85		PCBPBTEF	PBBWBTEF
Blue Saver PPO QHDHP						
	Total Cost	District Benefit	Employee Cost	District H.S.A. Contribution		
Employee Only	\$649.83	\$0.00	\$649.83	\$0.00	BSVRBTEO	BVBWBTEO
Employee + Spouse	\$1,362.08	\$0.00	\$1,362.08	\$0.00	BSVRBTES	BVBWBTES
Employee + Child(ren)	\$1,234.67	\$0.00	\$1,028.89	\$0.00	BSVRBTEC	BVBWBTEC
Employee + Family	\$1,983.19	\$0.00	\$1,983.19	\$0.00	BSVRBTEF	BVBWBTEF
Blue Select Plus PPO						
	Total Cost	District Benefit	Employee Cost			
Employee Only	\$816.00	\$0.00	\$816.00		BSPOBTEO	BPBWBTEO
Employee + Spouse	\$1,680.93	\$0.00	\$1,680.93		BSPOBTES	BPBWBTES
Employee + Child(ren)	\$1,522.26	\$0.00	\$1,255.46		BSPOBTEC	BPBWBTEC
Employee + Family	\$2,443.32	\$0.00	\$2,443.32		BSPOBTEF	BPBWBTEF
Blue Select Plus EPO						
	Total Cost	District Benefit	Employee Cost			
Employee Only	\$816.00	\$0.00	\$816.00		BSPEBTEO	BEBWBTEO
Employee + Spouse	\$1,704.19	\$0.00	\$1,704.19		BSPEBTES	BEBWBTES
Employee + Child(ren)	\$1,543.24	\$0.00	\$1,255.46		BSPEBTEC	BEBWBTEC
Employee + Family	\$2,476.90	\$0.00	\$2,476.90		BSPEBTEF	BEBWBTEF
Blue Select Plus QHDHP						
	Total Cost	District Benefit	Employee Cost	District H.S.A. Contribution		
Employee Only	\$583.60	\$0.00	\$583.60	\$0.00	BSHSBTEO	BHBWBTEO
Employee + Spouse	\$1,222.58	\$0.00	\$1,222.58	\$0.00	BSHSBTES	BHBWBTES
Employee + Child(ren)	\$1,108.85	\$0.00	\$929.77	\$0.00	BSHSBTEC	BHBWBTEC
Employee + Family	1781.87	\$0.00	\$1,781.87	\$0.00	BSHSBTEF	BHBWBTEF