

St. Mary's County Public Schools Department of Fiscal Services

23160 Moakley Street, Suite 107 Leonardtown, Maryland 20650

Ms. Tammy McCourt Assistant Superintendent

Phone: 301-475-5511 ext. 32247; Fax: 301-475-4228

To: All EASMC and SMASA Retirees Participating in the SMCPS Health Insurance Programs

From: Heather Huff, Insurance Specialist

Re: Health Insurance Rates Effective July 1, 2023

St. Mary's County Public Schools (SMCPS) offers health insurance to qualified retirees and subsidizes the plan cost based on the number of years of service with SMCPS. Effective July 1, 2012, retirees who elect to terminate coverage through SMCPS are eligible to return to the plan within 3 years of their retirement date.

If you have questions about your options, please contact Heather Huff at 301-475-5511, ext. 32182. You can ask questions or request a video meeting by emailing insurance@smcps.org.

Years of Service	HMO I – with deductible	<u>HMO II</u>	Triple Option I – with deductible	Triple Option II
with SMCPS	(SMCPS %)	(SMCPS %)	(SMCPS %)	(SMCPS %)
10 – 19 years	75% Premium Rate	70% Premium Rate	65% Premium Rate	60% Premium Rate
20 – 29 years	80% Premium Rate	75% Premium Rate	70% Premium Rate	65% Premium Rate
30 + years	85% Premium Rate	80% Premium Rate	75% Premium Rate	70% Premium Rate

Type of Coverage		Retiree's Share		
BlueChoice HMO I – with deductible	Full Premium	10-19	20-29	30+
Individual	\$ 766.20	\$191.55	\$153.24	\$114.93
Parent/Child	\$1,365.38	\$341.35	\$273.08	\$204.81
Subscriber/Spouse	\$1,750.14	\$437.54	\$350.03	\$262.52
Family	\$2,280.06	\$570.02	\$456.01	\$342.01
Medicare Wrap - 65 and Over- BlueChoice HMO I	\$ 796.82	\$199.21	\$159.36	\$119.52
BlueChoice HMO II	Full Premium	10-19	20-29	30+
Individual	\$ 790.93	\$237.28	\$197.73	\$158.19
Parent/Child	\$1,410.14	\$423.04	\$352.54	\$282.03
Subscriber/Spouse	\$1,807.32	\$542.20	\$451.83	\$361.46
Family	\$2,354.51	\$706.35	\$588.63	\$470.90
Medicare Wrap - 65 and Over- BlueChoice HMO II	\$ 799.59	\$239.88	\$199.90	\$159.92
BlueChoice Triple Option I - with deductible	Full Premium	10-19	20-29	30+
Individual	\$ 931.73	\$326.11	\$279.52	\$232.93
Parent/Child	\$1,542.92	\$540.02	\$462.88	\$385.73

PLEASE SEE REVERSE SIDE

St. Mary's County Public School System does not discriminate on the basis of race, color, gender, age, national origin, marital status, sexual orientation, religion, or disability in matters affecting employment or providing access to programs.

Subscriber/Spouse	\$1,945.26	\$680.84	\$583.58	\$486.32
Family	\$2,601.60	\$910.56	\$780.48	\$650.40
Medicare Wrap 65 and Over – Triple Option I	\$ 931.73	\$326.11	\$279.52	\$232.93
BlueChoice Triple Option II	Full Premium	10-19	20-29	30+
Individual	\$ 995.19	\$ 398.08	\$348.32	\$298.56
Parent/Child	\$1,644.04	\$ 657.62	\$575.41	\$493.21
Subscriber/Spouse	\$2,074.76	\$ 829.90	\$726.17	\$622.43
Family	\$2,774.54	\$1,109.82	\$971.09	\$832.36
Medicare Wrap - 65 and Over – Triple Option II	\$ 995.19	\$ 398.08	\$348.32	\$298.56