		BEN	EFIT RATE SHE	ET		
Technology Profes	sionals in the Bar	gaining Unit			First Deduction =	= July 5, 2024
Full Time	SY 2024-2025				Based on 26 bi-weekly deductions	
HEALTH INSURANCE	Monthly Premium	Annual Premium	Annual Premium	District Share	Employee Share	Employee
		SY 24/25	SY 23/24	93%	7%	Deduction*
Anthem ChoicePlus						
Single	928.27	11,139.24	10,351.32	10,359.49	779.75	29.99
Adult w Child(ren)	1,642.84	19,714.08	18,319.56	18,334.09	1,379.99	53.08
2 Adults	2,092.16	25,105.92	23,329.92	21,696.83	3,409.09	131.12
Family	2,546.44	30,557.28	28,395.60	26,407.91	4,149.37	159.59
Anthem Standard						
Single	1002.42	12,029.04	11,178.00	10,359.49	1,669.55	64.21
Adult w Child(ren)	1774.26	21,291.12	19,785.00	18,334.09	2,957.03	113.73
2 Adults	2259.52	27,114.24	25,196.28	21,696.83	5,417.41	208.36
Family	2750.16	33,001.92	30,667.32	26,407.91	6,594.01	253.62
MSMA DENTAL INSUR						
Plan A (with orthodonti		100.10		100.10	0.00	0.00
Single	40.29	483.48		483.48	0.00	0.00
2 Person	85.17	1,022.04		483.48	538.56	20.71
Family	136.44	1,637.28		483.48	1,153.80	44.38
Plan B (without orthod	ontia)					
Single	40.29	483.48		483.48	0.00	0.00
2 Person	83.30	999.60		483.48	516.12	19.85
Family	127.86	1,534.32		483.48	1,050.84	40.42
Part Time Employees re	ossive preveted bene	fits based on the ne	roont of time they	are employed		
Fait Time Employees fo	eceive prorated bene	ins based on the pe	acent of time they a	are employed		
Deductions are based on the premiums for Choice+ applying the following f			formulas:	Domestic Partners		
Single - District pays 95% of the current premium				pays 100% of mon		
Adult with Children - District pays 95% of the current premium 2 Adults - District Pays 95% of the prior years premium				pays 100% of mon	thly premium	
<u>Family</u> - District Pays 95%	or the phor years premiu					
Standard coverge - Employ		<u>'</u>	<u>'</u>		+ and Standard premium	ıs
The school district will pay	100% of the District Shar	e under the Choice+ of	otion, the employee pa	ys the difference		