



Beaumont Independent School District
3955 Harrison Ave.
Beaumont, TX 77706
409-617-5000 or 409-617-5032

Employee Benefits Department

Approved June 25, 2024

Blue Cross Blue Shield
Monthly/Bimonthly Health Insurance Premiums
Effective September 1, 2024
thru August 31, 2025

	Employee Paid Monthly	Employee Paid Per Paycheck	District Paid* Monthly	Total Monthly Premium
BCBS PPO Plan				
Employee Only	\$30.63	\$15.32	\$460.00	\$490.63
Employee/Child(ren)	\$458.00	\$229.00	\$460.00	\$918.00
Employee/Spouse	\$882.75	\$441.38	\$460.00	\$1,342.75
Employee/Family	\$1,293.97	\$646.99	\$460.00	\$1,753.97
BCBS HMO Plan**				
Employee Only	\$0.00	\$0.00	\$446.03	\$446.03
Employee/Child(ren)	\$374.54	\$187.27	\$460.00	\$834.54
Employee/Spouse	\$760.68	\$380.34	\$460.00	\$1,220.68
Employee/Family	\$1,134.52	\$567.26	\$460.00	\$1,594.52
BCBS HD Plan				
Employee Only	\$35.59	\$17.80	\$460.00	\$495.59
Employee/Child(ren)	\$467.27	\$233.64	\$460.00	\$927.27
Employee/Spouse	\$896.31	\$448.16	\$460.00	\$1,356.31
Employee/Family	\$1,311.69	\$655.85	\$460.00	\$1,771.69

*District paid amount only for the 2024-2025 school year.

The district pays \$1.34 per month per eligible employee for \$10,000 of basic life insurance, and \$1.11 per month per eligible employee for EAP.

The total benefits package is \$462.45 per month or \$5,549.40 annually.

**Primary Care Physician required - In network coverage only.