

Ipswich Public Schools
Human Resources Department
1 Lord Square, Ipswich, MA 01938
978-356-2935 ext. 1111

July 1, 2025-June 30, 2026

HEALTH, DENTAL, and VISION INSURANCE



Ipswich Public Schools

Human Resources Department

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FY26 Health Insurance Rate Sheet

The Ipswich Public Schools offers the following health plans to employees, and contributes 67% of the total cost. Therefore, the **employee is responsible for the remaining 33%**.

Below is a breakdown of the **employee monthly premiums** for **FY 26 (July 1, 2025-June 30, 2026)**. Please note that depending on your pay frequency, the below rates will vary from what you see on your paycheck, and will be calculated into your deductions per pay period.

	Blue Care Elect (PPO) \$250/\$750 plan-year deductible 33% Employee Cost	Network Blue NE (HMO) \$250/\$750 plan-year deductible 33% Employee Cost	Network Blue Select (HMO) \$250/\$750 plan-year deductible 33% Employee Cost
Individual	\$548.56	\$411.11	\$357.66
Family	\$1,407.05	\$1,096.74	\$954.17

PLAN INFORMATION

Blue Care Elect (PPO)	Summary of Benefits and Coverage	Summary of Benefits
Network Blue NE	Summary of Benefits and Coverage	Summary of Benefits
Network Blue Select	Summary of Benefits and Coverage	Summary of Benefits

PLAN DIFFERENTIATION

The choice between HMO and PPO depends on your preferences, healthcare needs, and budget. The primary differences between BCBS HMO and PPO plans are related to network structure, cost-sharing, and flexibility. HMO plans often have lower premiums and more restrictions on provider choices, while PPO plans provide a broader network and greater flexibility, but they come with higher costs.

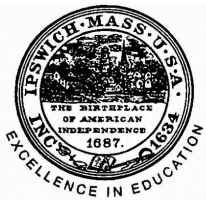
The HMO Blue Select health plan has a limited provider network. Under this plan, members have access to network benefits from only the providers in the HMO Blue Select network.

Be sure to carefully review the details of the specific BCBS plan you are considering to understand the exact terms and benefits it offers. Please note that all plans have a \$250/\$750 plan-year deductible.

Additional information can be found [HERE](#). Helpful resources and additional programs offered to Blue Cross Blue Shield Subscribers can be found [HERE](#).

ENROLLMENT

To join or make changes, please complete the [HEALTH ENROLLMENT FORM](#) and return to HR@ipsk12.net.



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FY26 Dental Insurance Rate Sheet

The Ipswich Public Schools offers the following dental plans to employees. The employee is responsible for paying **100%** of the dental premiums, as Ipswich Public Schools does not contribute to this benefit.

Below is a breakdown of the *employee monthly premiums* for **FY 26 (July 1, 2025-June 30, 2026)**.

TIER LEVEL	LOW OPTION	HIGH OPTION
Individual	\$46.05	\$55.39
Family	\$96.28	\$124.99

PLAN INFORMATION

Low Option	Summary of Benefits
High Option	Summary of Benefits

PLAN DIFFERENTIATION

Low Plan

- Annual maximum is \$750.00 per member per calendar year
- Does not cover surgical placement or endosteal implants and abutment, crowns, bridges, and partial and complete dentures

High Plan

- Annual maximum is \$1,000 per member per calendar year
- Pays 50% for surgical placement or endosteal implants and abutment, crowns, bridges, and partial and complete dentures

Additional information on dental plan benefits can be found here:

- [Maximum Carry Over Information](#)
- [Pre-Treatment Estimates](#)

ENROLLMENT

To join or make changes, please complete the [DENTAL ENROLLMENT FORM](#) and return to HR@ipsk12.net.



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FY26 Vision Insurance Rate Sheet

The Ipswich Public Schools offers the following vision plan to employees. The employee is responsible for paying **100%** of the vision premiums, as Ipswich Public Schools does not contribute to this benefit.

Below is a breakdown of the *employee monthly premiums* for **FY 26 (July 1, 2025-June 30, 2026)**.

TIER LEVEL	MONTHLY PREMIUM
Individual	\$6.50
Individual +Spouse	\$13.00
Individual +Child(ren)	\$13.65
Family	\$18.85

PLAN INFORMATION

Altus Vision- 150 Plus	Summary of Benefits
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PLAN DIFFERENTIATION

The Individual +Child(ren) rate stays the same regardless of the number of children covered. If a spouse is added, the plan would change to the family level.

Additional information on vision plan benefits can be found here:

- [VSP Vision Care Benefit Enhancements](#)

ENROLLMENT

To join or make changes, please complete the [VISION ENROLLMENT FORM](#) and return to HR@ipsk12.net.