

FY25 Medical Insurance Costs

Single Coverage

Cert/Lic HMO= \$40.00 **PPO1= \$70.00** PPO2= \$150.00

ESP HMO= \$10.00 **PPO1= \$25.00** PPO2= \$80.00

Employee pays contribution rate + Over 6% split Cost

Dependent Coverage

HMO - Employee pays 50% of dependent costs

((family premium - single premium * 50%) + Over 6% split) + single monthly Employee Cost

PPO1 - Employee pays 60% of dependent costs

((family premium - single premium * 60%) + Over 6% split) + single monthly Employee Cost

PPO2 - Employee pays 65% of dependent costs

((family premium - single premium * 65%) + Over 6% split) + single monthly Employee Cost

Employee Contributions:

Certified / License Employees

	Monthly Dependent Cost @ 50%	Single Contribution	Over 6% split Cost **	Monthly Employee Cost	per pay
BCBS HMO					
Single	n/a	\$40.00	\$6.72	\$46.72	\$23.36
Family	\$774.62	\$46.72	\$19.66	\$841.00	\$420.50
BCBS PPO1	Monthly Dependent Cost @ 60%	Single Contribution	Over 6% split Cost **	Monthly Employee Cost	per pay
Single	n/a	\$70.00	\$10.79	\$80.79	\$40.40
Family	\$975.25	\$80.79	\$28.05	\$1,084.09	\$542.05
BCBS PPO2	Monthly Dependent Cost @ 65%	Single Contribution	Over 6% split Cost **	Monthly Employee Cost	per pay
Single	n/a	\$150.00	\$11.96	\$161.96	\$80.98
Family	\$1,171.32	\$161.96	\$31.09	\$1,364.37	\$682.19

ESP / 24 Pays

	Monthly Dependent Cost @ 50%	Single Contribution	Over 6% split Cost **	Monthly Employee Cost	per pay
BCBS HMO					
Single	n/a	\$10.00	\$6.72	\$16.72	\$8.36
Family	\$774.62	\$16.72	\$19.66	\$811.00	\$405.50
BCBS PPO1	Monthly Dependent Cost @ 60%	Single Contribution	Over 6% split Cost **	Monthly Employee Cost	per pay
Single	n/a	\$25.00	\$10.79	\$35.79	\$17.90
Family	\$975.25	\$35.79	\$28.05	\$1,039.09	\$519.55
BCBS PPO2	Monthly Dependent Cost @ 65%	Single Contribution	Over 6% split Cost **	Monthly Employee Cost	per pay
Single	n/a	\$80.00	\$11.96	\$91.96	\$45.98
Family	\$1,171.32	\$91.96	\$31.09	\$1,294.37	\$647.19

(19 Pay employees contact Kim Cowles for rates)

**In accordance with the NSSEO-NSSEA Collective Bargaining Agreement (CBA), the Board and the Employee equally split any premium increase exceeding 6%.

NSSEO
2024-2025 Health Insurance Deductions
Effective July 1, 2024

FY25 Dental Insurance Costs

Single Coverage

Employee pays contribution rate

FY25 Rates = (Licensed HMO=\$10, PPO=\$15) (ESP =\$5.00)

Dependent Coverage

Employee pays 100% of the dependent cost plus their single contribution

(Family premium-single premium + single contribution)

Employee Contributions:

Certified / License Employees

Guardian-HMO	Monthly Dependent Cost	Single Contribution	Total Monthly Employee Cost	per pay
Single		\$10.00	\$10.00	\$5.00
Family	\$45.71	\$10.00	\$55.71	\$27.85
Grp Admin-PPO				
Single		\$15.00	\$15.00	\$7.50
Family	\$102.72	\$15.00	\$117.72	\$58.86

ESP / 24 Pays

Guardian-HMO	Monthly Dependent Cost	Single Contribution	Total Monthly Employee Cost	per pay
Single		\$5.00	\$5.00	\$2.50
Family	\$45.71	\$5.00	\$50.71	\$25.35
Grp Admin-PPO				
Single		\$5.00	\$5.00	\$2.50
Family	\$102.72	\$5.00	\$107.72	\$53.86

(19 Pay employees contact Kim Cowles for rates)