

Monthly Insurance Rates For Teacher Aides Effective January 1, 2024- June 30, 2024 Hired After 5/1/08

HEALTH Blue Point 2 Select (BS)	BOCES	<u>EMPLOYEE</u>	<u>TOTAL</u>	HSA AMOUNT
Blue Point 2 Select (BS)	\$815.26	\$297.44	\$1,112.70	
Single	•	•		
Employee & Spouse/Domestic	\$1,956.65	\$713.85	\$2,670.50	
Single Parent w/ Dependent(s)		\$684.06	\$2,559.20	
Family	\$2,160.64	\$789.46	\$2,950.10	
Blue Point 2 Value (BY)				
Single	\$815.26	\$105.94	\$921.20	
Employee & Spouse/Domestic	-	\$254.25	\$2,210.90	
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Single Parent w/ Dependent(s)		\$243.66	\$2,118.80	
Family	\$2,160.64	\$280.76	\$2,441.40	
SB High Deductible Plan				
Single	\$643.21	\$19.89	\$663.10	\$75.00
Employee & Spouse/Domestic	\$1.543.66	\$47.74	\$1,591.40	\$150.00
Single Parent w/ Dependent(s)		\$45.75	\$1,525.10	\$150.00
Family	\$1,704.97	\$52.73	\$1,757.70	\$150.00
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DENTAL				
Single	\$23.36	\$5.84	\$29.20	
Family	\$65.76	\$16.44	\$82.20	
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VISION				
	\$2.46	\$0.62	\$3.08	
Single	•	•	•	
Two person	\$4.68	\$1.17	\$5.85	
Family	\$6.89	\$1.72	\$8.61	

Dental deductions are taken from the first pay of the month Health and vision deductions are taken from the second pay of the month