



Monthly Insurance Rates For Operations & Maintenance

Effective January 1, 2024- June 30, 2024

Hired prior to 7/1/11

	<u>BOCES</u>	<u>EMPLOYEE</u>	<u>TOTAL</u>	<u>HSA AMOUNT</u>
Blue Point 2 Select (BS)				
Single	\$792.23	\$320.47	\$1,112.70	
Employee & Spouse/Domestic Partner	\$1,901.37	\$769.13	\$2,670.50	
Single Parent w/ Dependent(s)	\$1,822.17	\$737.03	\$2,559.20	
Family	\$2,099.60	\$850.50	\$2,950.10	
Blue Point 2 Value (BY)				
Single	\$792.23	\$128.97	\$921.20	
Employee & Spouse/Domestic Partner	\$1,901.37	\$309.53	\$2,210.90	
Single Parent w/ Dependent(s)	\$1,822.17	\$296.63	\$2,118.80	
Family	\$2,099.60	\$341.80	\$2,441.40	
SB High Deductible Plan				
Single	\$629.95	\$33.15	\$663.10	\$60.00
Employee & Spouse/Domestic Partner	\$1,511.83	\$79.57	\$1,591.40	\$120.00
Single Parent w/ Dependent(s)	\$1,448.85	\$76.25	\$1,525.10	\$120.00
Family	\$1,669.82	\$87.88	\$1,757.70	\$120.00
<u>DENTAL</u>				
Single	\$24.82	\$4.38	\$29.20	
Family	\$69.87	\$12.33	\$82.20	
<u>VISION</u>				
Single	\$2.62	\$0.46	\$3.08	
Two person	\$4.97	\$0.88	\$5.85	
Family	\$7.32	\$1.29	\$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