

Monthly Insurance Rates For Operations & Maintenance Effective January 1, 2025- June 30, 2025 Hired prior to 7/1/11

	BOCES	EMPLOYEE	TOTAL	HSA AMOUNT
Blue Point 2 Select (BS)				
Single	\$906.35	\$366.55	\$1,272.90	
Employee & Spouse/Domestic Partner	\$2,175.28	\$879.72	\$3,055.00	
Single Parent w/ Dependent(s)	\$2,084.64	\$843.06	\$2,927.70	
Family	\$2,401.98	\$972.92	\$3,374.90	
Blue Point 2 Value (BY)				
Single	\$906.35	\$147.55	\$1,053.90	
Employee & Spouse/Domestic Partner	\$2,175.28	\$354.12	\$2,529.40	
Single Parent w/ Dependent(s)	\$2,084.64	\$339.36	\$2,424.00	
Family	\$2,401.98	\$391.02	\$2,793.00	
SB High Deductible Plan				
Single	\$720.67	\$37.93	\$758.60	\$60.00
Employee & Spouse/Domestic Partner	\$1,729.57	\$91.03	\$1,820.60	\$120.00
Single Parent w/ Dependent(s)	\$1,657.56	\$87.24	\$1,744.80	\$120.00
Family	\$1,910.26	\$100.54	\$2,010.80	\$120.00
DENTAL				
Single	\$25.81	\$4.56	\$30.37	
Family	\$72.67	\$12.82	\$85.49	
VISION				
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