RETIREE PAYROLL DEDUCTIONS--FY 2024

	Plan Cost Per Month (100%)	**EE Cost Per Month (32%)**	ER Cost per Month (68%)	EE Cost per Year (Monthly Cost x 12)	ER Cost per Year (Monthly Cost x 12)
BCBSBCE PPO TRADITIONAL					
Individual	$ 1,488.00	**$ 476.16**	$ 1,011.84	$ 5,713.92	$ 12,142.08
Family	$ 3,527.00	**$ 1,128.64**	$ 2,398.36	$ 13,543.68	$ 28,780.32
BCBS BCE PPO RATE SAVER					
Individual	$ 1,376.00	**$ 440.32**	$ 935.68	$ 5,283.84	$ 11,228.16
Family	$ 3,261.00	**$ 1,043.52**	$ 2,217.48	$ 12,522.24	$ 26,609.76
BCBS BCE PPO BENCHMARK					
Individual	$ 1,235.00	**$ 395.20**	$ 839.80	$ 4,742.40	$ 10,077.60
Family	$ 2,931.00	**$ 937.92**	$ 1,993.08	$ 11,255.04	$ 23,916.96
BCBS NWB NE HMO TRADITIONAL					
Individual	$ 1,050.00	**$ 336.00**	$ 714.00	$ 4,032.00	$ 8,568.00
Family	$ 2,796.00	**$ 894.72**	$ 1,901.28	$ 10,736.64	$ 22,815.36
BCBS NWB NE HMO RATE SAVER					
Individual	$ 946.00	**$ 302.72**	$ 643.28	$ 3,632.64	$ 7,719.36
Family	$ 2,521.00	**$ 806.72**	$ 1,714.28	$ 9,680.64	$ 20,571.36
BCBS NWB NE HMO BENCHMARK					
Individual	$ 873.00	**$ 279.36**	$ 593.64	$ 3,352.32	$ 7,123.68
Family	$ 2,323.00	**$ 743.36**	$ 1,579.64	$ 8,920.32	$ 18,955.68
HARVARD PILGRIM HMO TRADITIONAL					
Individual	$ 1,136.00	**$ 363.52**	$ 772.48	$ 4,362.24	$ 9,269.76
Family	$ 3,025.00	**$ 968.00**	$ 2,057.00	$ 11,616.00	$ 24,684.00
HARVARD PILGRIM HMO RATE SAVER					
Individual	$ 1,025.00	**$ 328.00**	$ 697.00	$ 3,936.00	$ 8,364.00
Family	$ 2,726.00	**$ 872.32**	$ 1,853.68	$ 10,467.84	$ 22,244.16
HARVARD PILGRIM HMO BENCHMARK					
Individual	$ 966.00	**$ 309.12**	$ 656.88	$ 3,709.44	$ 7,882.56
Family	$ 2,570.00	**$ 822.40**	$ 1,747.60	$ 9,868.80	$ 20,971.20

	Plan Cost Per Month (100%)	**EE Cost Per Month (32%)**	ER Cost per Month (68%)	EE Cost per Year (Monthly Cost x 12)	ER Cost per Year (Monthly Cost x 12)
DENTAL* RETIREE					
Individual	$ 37.77	**$ 37.77**		$ 453.24	
Two Person	$ 73.16	**$ 73.16**		$ 877.92	
Family	$ 129.82	**$ 129.82**		$ 1,557.84	

F:Insurance: FY2024 Payroll Health Deductions(032723)