

CLASSIFIED STAFF BI-WEEKLY PREMIUM RATE SHEET

Hired before July 1, 2016
Effective January 1, 2024

MEDICAL

PREFERRED PPO PLAN		STANDARD PPO PLAN	
Employees working 6 ½ hours or less per day (BOE 75%)			
Single	\$108.27	Single	\$70.46
2-Party	\$212.28	2-Party	\$138.15
Family	\$254.18	Family	\$165.41
Employees working 7 hours per day (BOE 80%)			
Single	\$86.62	Single	\$56.37
2-Party	\$169.82	2-Party	\$110.52
Family	\$203.34	Family	\$132.33
Employees working 7 ½ to 8 hours per day (BOE 85%)			
Single	\$64.96	Single	\$42.28
2-Party	\$127.37	2-Party	\$82.89
Family	\$152.51	Family	\$99.25
DENTAL		<u>VISION</u>	
Single	\$21.72	Single	\$3.89
2-Party	\$43.64	2-Party	\$6.37
Family	\$65.64	Family	\$12.08